

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
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FACT SHEET

FOR IMMEDIATE RELEASE

Date of Release

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Long-Term Care Hospital (LTCH) Compare Website

This fact sheet contains information about the Long-Term Care Hospital (LTCH) Compare website that was launched on December 14, 2016.

I. Background

Why is this information being released?

Section 3004(a) of the Affordable Care Act established the LTCH Quality Reporting Program (QRP) and requires the Secretary of Health and Human Services to establish procedures for making quality data submitted by LTCHs available to the public. This Compare release contains data from approximately 97 percent of all LTCHs.

What data is being displayed on LTCH Compare?

There are two quality measures that are being displayed on LTCH Compare:

1. Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short Stay) (NQF #0678)
2. All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Long-Term Care Hospitals (NQF #2512)

What is the source of this publicly reported data?

Data for the measure Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short Stay) was collected and submitted to CMS via the Long-Term Care Hospital Continuity Assessment Record & Evaluation (LTCH CARE) Data Set, which is an assessment-based data collection instrument created by CMS. Data for the measure All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Long-Term Care Hospitals is based on Medicare Fee for Service Claims submitted by LTCH and other hospital providers.

How is the data on the LTCH Compare site relevant to consumers? How will they use the site?

Under the Affordable Care Act, LTCHs are required to report quality data to CMS on a number of quality measures and health outcomes. These new tools take this data and put it into a format

that can be used more readily by the public to get a snapshot of the quality of care each hospital provides. For instance, these tools will help families compare some key quality metrics, such as what percentage of an LTCH's patients have new or worsened pressure ulcers, and what percentage of an LTCH's patients are readmitted to an acute care hospital after discharge from that LTCH. Comparing how LTCHs perform on certain quality metrics allows consumers to make better informed decisions about their healthcare.

II. Summary of Findings

| LTCH Measure Name and Description | National Rate of Quality Measure Performance |
|--|--|
| Rate of pressure ulcers that are new or worsened <i>Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short Stay) (NQF #0678)</i> | 1.8% |
| Rate of hospital readmission after discharge from LTCH <i>All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Long-Term Care Hospitals (NQF #2512)</i> | 24.61% |

The performance data shows the national “Rate of pressure ulcers that are new or worsened” is 1.8 percent. For this quality measure, this means LTCHs across the country reported that, on average, 1.8 percent of patients developed a new pressure ulcer(s) and/or a worsened pressure ulcer(s) during their LTCH stay.

The performance data shows the national “Rate of hospital readmission after discharge from LTCH” is 24.61 percent. For this quality measure this means, 24.61 percent of patients cared for in an LTCH were readmitted to an acute care hospital for any unplanned reason within 30 days of discharge from the LTCH. The patient may have been discharged home or to a lower level of care (for example, a skilled nursing facility, or nursing home).

Due to the CDC's recent efforts to implement a new national baseline for healthcare-acquired Infections (HAIs) that are reported to the Center for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN), CMS has made the decision to wait until the spring 2017 refresh to publish healthcare-acquired infection (HAI) data on LTCH Compare.

III. Resources Available to Providers

Where can I find more information about the LTCH Compare?

- Providers should visit the [LTCH Quality Public Reporting](#) webpage for more information on LTCH Compare.
- Providers should visit the [LTCH Quality Reporting Data Submission Deadlines](#) webpage for more information on submitting LTCH data to CMS.

Help Desks

- For questions about the LTCH QRP payment reduction for failure to report required quality data, [contact](#) the CMS Reconsiderations and Exception and Extension helpdesk at LTCHQRPreconsiderations@cms.hhs.gov

- For general questions about data submission, including questions about the LTCH CARE Data Set, email LTCHQualityQuestions@cms.hhs.gov
- For questions about LTCH quality data submitted to CMS via CDC's NHSN, or NHSN Registration, email NHSN@cdc.gov
- For questions about LTCH Public Reporting, email LTCH Public Reporting helpdesk: LTCHPRquestions@cms.hhs.gov
- [Subscribe](#) to the Post-Acute Care Quality Reporting Program (PAC QRP) listserv for the latest LTCH Quality Reporting Program and IMPACT Act information including but not limited to training, stakeholder engagement opportunities, and general updates about reporting requirements, quality measures, and reporting deadlines.

IV. Additional Compare Sites

- [Hospital Compare](#)
- [Physician Compare](#)
- [Nursing Home Compare](#)
- [Dialysis Compare](#)
- [Home Health Compare](#)
- [Long-Term Care Hospital \(LTCH\) Compare](#)