NQF

National Voluntary Consensus Standards for Home Health Care
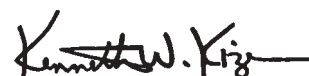
A
CONSENSUS
REPORT

Foreword

The old saying that "there is no place like home" is increasingly relevant in healthcare today. More than 4 million patients currently receive home health services, and the number is steadily increasing. Despite the growing popularity of home care, information to assist patients and their families in assessing the quality of home care providers is scant.

This report details 15 standardized performance measures that will facilitate the comparison of the quality of home health care providers. These measures have been carefully reviewed and endorsed by a diverse group of stakeholders pursuant to the National Quality Forum's (NQF's) formal Consensus Development Process, giving them the special status of voluntary consensus standards.

The primary purpose of these NQF-endorsed™ voluntary consensus standards is to help consumers select high-quality home health care providers. The Centers for Medicare and Medicaid Services will report data from these measures for all Medicare-certified home health agencies on its web site, Home Health Compare (www.medicare.gov/ HHCompare). The consensus standards also may be used by home health care providers for internal quality improvement efforts and by purchasers, policymakers, researchers, and regulators for their various purposes.

We thank the Home Health Care Performance Measures Steering Committee and its Technical Advisory Panel, as well as the NQF Member organizations, for their assistance with this project and for their collective dedication to improving the quality of home health care.

Kenneth W. Kizer, MD, MPH
President and Chief Executive Officer

NATIONAL QUALITY FORUM

National Voluntary Consensus Standards for Home Health Care

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NATIONAL QUALITY FORUM

National Voluntary Consensus Standards for Home Health Care

Executive Summary

The quality of home health care—defined as any healthcare services provided to clients in their homes, including but not limited to skilled nursing services, home health aide services, palliative and end-of-life care (e.g., in-home hospice services), therapies (i.e., physical, speech-language, and occupational), homemaker services/personal care, social services, infusion and pharmacy services, medical supplies and equipment, and in-home physician services—is a subject of growing national concern. Although more than 4 million patients receive care from approximately 20,000 home health agencies, of which nearly 7,000 are Medicare certified, limited information is available to support quality-based decisions by patients and their families.

Publicly reported measures of performance that allow comparisons among providers have been reported by the Centers for Medicare and Medicaid Services (CMS) for home health care since 2003, when the federal government launched its Home Health Quality Initiative (www.medicare.gov/HHCompare). However, information to be gleaned from this initiative was limited, and consensus among consumers, providers, purchasers, researchers, and quality improvement organizations on these measures had not been achieved. To ensure that those stakeholders had the opportunity to provide their input, CMS asked the National Quality Forum (NQF) to identify a set of voluntary consensus standards for home health care. Based on its review of available measures, NQF has endorsed a set of 15 performance measures, 8 research recommendations, and 8 additional recommendations.

The primary purpose of these home health care voluntary consensus standards is to provide information to help consumers select home health care providers. The standards are intended to emphasize care provided by the range of personnel providing home health care services, as well as the variety of provider organizations delivering home-based care. However, given the paucity of measures in certain areas, these consensus standards are an initial set that collectively only begins to address the quality of home health care services in the United States. Today, CMS is collecting and publicly reporting information on the quality of home health care providers as part of the Home Health Quality Initiative, which is based on the NQF-endorsed™ consensus standards.

National Voluntary Consensus Standards for Home Health Care

- Improvement in ambulation/locomotion
- Improvement in bathing
- Improvement in transferring
- Improvement in management of oral medications
- Improvement in pain interfering with activity
- Improvement in status of surgical wounds
- Improvement in dyspnea
- Improvement in urinary incontinence
- Increase in number of pressure ulcers
- Emergent care for wound infections, deteriorating wound status
- Emergent care for improper medication administration, medication side effects
- Emergent care for hypo/hyperglycemia
- Acute care hospitalization
- Discharge to community
- Emergent care

NATIONAL QUALITY FORUM

Specifications of the National Voluntary Consensus Standards for Home Health Care

The following table summarizes the detailed specifications for each of the National Quality Forum (NQF)-endorsed™ home health care performance measures. All information presented has been derived directly from measure sources/developers without modification or alteration (except when the measure developer agreed to such modification during the NQF Consensus Development Process) and is current as of September 1, 2005.

All NQF-endorsed voluntary consensus standards are open source, meaning they are fully accessible and disclosed. References to related risk-adjustment methodologies and definitions are provided to assure openness and transparency.

Issues regarding any NQF-endorsed consensus standard (e.g., modifications to specifications, emerging evidence) may be submitted to NQF for review and consideration via the "Implementation Feedback Form" found at www.qualityforum.org/implementation_feedback.htm. NQF will transmit this information to the measure developers and/or compile it for consideration in updating the measure set.

Appendix A – Specifications of the National Voluntary Consensus Standards for Home Health Care

Framework Category	Measure	Source of Measure	Numerator	Denominator	Exclusions
Functional activities of daily living (ADLs)	1. Improvement in ambulation/ locomotion[1]	Outcome and Assessment Information Set (OASIS)/Outcome-Based Quality Improvement (OBQI)[2,3,4]	Patients for whom the value of OASIS item M0700 Ambulation/Locomotion (a scale ranging from 0 to 5) at discharge from home health care is lower numerically (indicating less impairment) than the value of the same item at the start of or resumption of care	Patients for whom the value of the OASIS item M0700 Ambulation/Locomotion at the start of or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age
	2. Improvement in bathing[1]	OASIS/OBQI[2,3,4]	Patients for whom the value of OASIS item M0670 Bathing (a scale ranging from 0 to 5) at discharge from home health care is lower numerically (indicating less impairment) than the value of the same item at the start of or resumption of care	Patients for whom the value of the OASIS item M0670 Bathing at the start of or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age

[1] Risk adjusted with the logistic regression model described in Shaughnessy PW, Hittle DF, *Overview of Risk Adjustment and Outcome Measures for Home Health Agency OBQI Reports: Highlights of Current Approaches and Outline of Planned Enhancements*, Baltimore, MD: Centers for Medicare and Medicaid Services (CMS); September 2002. Available at www.cms.hhs.gov/oasis/RiskAdj1.pdf. Last accessed August 3, 2004.

[2] All Outcome-Based Quality Improvement (OBQI) and Outcome-Based Quality Monitoring (OBQM) measures are derived from the OASIS datasets. Available at: www.cms.hhs.gov/oasis/oasisdat.asp. Last accessed August 2, 2004.

[3] For all OBQI and OBQM measures, transformation documentation is provided in appendix A, table 1.

[4] Measures derived from OASIS (i.e., OBQIs and OBQMs) apply to "adult patients receiving home health skilled services" (see www.cms.hhs.gov/oasis/hhregs.asp) as a subset of the broader definition of home health care adopted for these national voluntary consensus standards.

Appendix A – Specifications of the National Voluntary Consensus Standards for Home Health Care (continued)

Framework Category	Measure	Source of Measure	Numerator	Denominator	Exclusions
Functional activities of daily living (ADLs) *continued*	3. Improvement in transferring[1]	OASIS/OBQI[2,3,4]	Patients for whom the value of OASIS item M0690 Transferring (a scale ranging from 0 to 5) at discharge from home health care is lower numerically (indicating less impairment) than the value of the same item at the start of or resumption of care	Patients for whom the value of the OASIS item M0690 Transferring at the start or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age
Functional instrumental activities of daily living (IADLs)	4. Improvement in manage-ment of oral medications[1]	OASIS/OBQI[2,3,4]	Patients for whom the value of OASIS item M0780 Management of Oral Medications (a scale ranging from 0 to 2) at discharge from home health care is lower numerically (indicating less impairment) than the value of the same item at the start of or resumption of care	Patients for whom the value of the OASIS item M0780 Management of Oral Medications at the start of or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age
Physiologic	5. Improvement in pain interfering with activity[5]	OASIS/OBQI[2,3,4]	Patients for whom the value of OASIS item M0420 Frequency of Pain (a scale ranging from 0 to 3) at discharge from home health care is lower numerically (indicating less impairment) than the value of the same item at the start of or resumption of care	Patients for whom the value of the OASIS item M0420 Frequency of Pain at the start of or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age

Appendix A – Specifications of the National Voluntary Consensus Standards for Home Health Care (continued)

Framework Category	Measure	Source of Measure	Numerator	Denominator	Exclusions
Physiologic *continued*	6. Improvement in status of surgical wounds	OASIS/OBQI[2,3,4]	Patients for whom: ■ the value of OASIS item M0488 Status of Most Problematic (Observable) Surgical Wound (a scale ranging from 1 to 3) at discharge from home health care is lower numerically (indicating more healing) than the value of the same item at the start of or resumption of care **OR** ■ the value of OASIS item M0482 Surgical Wound or M0440 Skin Lesion or Open Wound (0–1 indicators) at discharge from home health care is 0, and the value of M0482 Surgical Wound at the start of or resumption of care is 1	Patients for whom: ■ the value of the OASIS item M0482 Surgical Wound at the start of or resumption of care is >0 (i.e., it is possible for improvement to occur) **AND** ■ the value of OASIS item M0488 Status of Most Problematic (Observable) Surgical Wound is not equal to "NA – No Observable Surgical Wound"	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age
	7. Improvement in dyspnea[1]	OASIS/OBQI[2,3,4]	Patients for whom the value of OASIS item M0490 Short of Breath (a scale ranging from 0 to 4) at discharge from home health care is lower numerically (indicating less impairment) than the value of the same item at the start of or resumption of care	Patients for whom the value of the OASIS item M0490 Short of Breath at the start of or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age

Appendix A – Specifications of the National Voluntary Consensus Standards for Home Health Care (continued)

Framework Category	Measure	Source of Measure	Numerator	Denominator	Exclusions
Physiologic *continued*	8. Improvement in urinary incontinence[1]	OASIS/OBQI[2,3,4]	Patients for whom: ■ the value of OASIS item M0520 Urinary Incontinence or Urinary Catheter Presence at discharge from home health care indicates no incontinence when incontinence was indicated at start or resumption of care **OR** ■ the value of OASIS item M0520 Urinary Incontinence or Urinary Catheter Presence at discharge indicates no catheter when catheter was indicated as present at start or resumption of care **OR** ■ the value of OASIS item M0530 Urinary Incontinence (a scale of 0 to 2) at discharge from home health care is lower numerically (indicating less frequent incontinence) than the value of the same item at the start of or resumption of care when urinary incontinence occurs	Patients for whom the value of the OASIS items M0520 Urinary Incontinence or Urinary Catheter Presence or M0530 Urinary Incontinence at start or resumption of care is >0 (i.e., it is possible for improvement to occur)	■ Non-responsive at start or resumption of care ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age
	9. Increase in number of pressure ulcers	OASIS/OBQM[2,3,4]	Patients for whom on OASIS item M0450 there are more pressure ulcers (all stages 1–4) at the end of care than there were at the beginning time point (summed across all 4 stages at each time point)	Patients for whom on OASIS item M0450 it is possible to have more pressure ulcers at the end time point than at the beginning time point (If there is no wound or pressure ulcer at one or both time points, then a count of 0 is assigned for the time point in question)	■ Number of pressure ulcers is 16 at the beginning time point ■ Episodes of home health care ending with admission to an inpatient facility or death ■ Maternity patients ■ <18 years of age

Appendix A — Specifications of the National Voluntary Consensus Standards for Home Health Care (continued)

Framework Category	Measure	Source of Measure	Numerator	Denominator	Exclusions
Safety	10. Emergent care for wound infections, deteriorating wound status	OASIS/OBQM[2,3,4]	Patients for whom this event happens (emergent care reason is wound infection or deteriorating wound status) on transfer to inpatient facility or discharge from agency	All emergent care reasons (except "unknown" on M0840) and patients for whom no emergent utilization occurred	▪ Episodes of home care ending with death ▪ Maternity patients ▪ <18 years of age
	11. Emergent care for improper medication administration, medication side effects	OASIS/OBQM[2,3,4]	Patients for whom this event happens (emergent care reason is improper medication administration or medication side effects) on transfer to inpatient facility or discharge from agency	All emergent care reasons (except "unknown" on M0840) and patients for whom no emergent utilization occurred	▪ Episodes of home care ending with death ▪ Maternity patients ▪ <18 years of age
	12. Emergent care for hypo/hyperglycemia	OASIS/OBQM[2,3,4]	Patients for whom this event happens (emergent care reason is hypo/hyperglycemia) on transfer to inpatient facility or discharge from agency	All emergent care reason unknown on M0840) and patients for whom no emergent utilization occurred	▪ Episodes of home care ending with death ▪ Maternity patients ▪ <18 years of age
Utilization	13. Acute care hospitalization[1]	OASIS/OBQI[2,3,4]	Patients for whom the response on OASIS item M0855 Inpatient Facility Admission is 1-Hospital	All patients	▪ Non-responsive at start or resumption of care ▪ Episodes of home health care ending with death ▪ Maternity patients ▪ <18 years of age
	14. Discharge to community[1]	OASIS/OBQI[2,3,4]	Patients for whom the value of M0100 Reason for Assessment for the episode of care end point assessment is equal to 9-Discharge from Agency, and the response to M0870 Discharge Disposition is 1-Patient remained in the community	All patients	▪ Response to M0870 Discharge Disposition is "unknown" ▪ Non-responsive at start or resumption of care ▪ Episodes of home health care ending with death ▪ Maternity patients ▪ <18 years of age

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Appendix A — Specifications of the National Voluntary Consensus Standards for Home Health Care (continued)

Framework Category	Measure	Source of Measure	Numerator	Denominator	Exclusions
Utilization *continued*	15. Emergent care[1]	OASIS/OBQI[2,3,4]	Patients for whom the response on OASIS item M0830 Emergent Care is 1-Hospital emergency room, 2-Doctor's office emergency visit/house call, or 3-Outpatient department/clinic emergency	All patients	▪ Value of the OASIS item M0830 Emergent Care at discharge or transfer is "unknown" ▪ Non-responsive at start or resumption of care ▪ Episodes of home health care ending with death ▪ Maternity patients ▪ <18 years of age

Table 1 – Outcome Measure Transformation Documentation*

MEASURE	TRANSFORMATION DOCUMENTATION
Improvement in ambulation/ locomotion	**IF** M0700_CUR_AMBULATION NOT = 00, 01, 02, 03, 04, 05 OR M0700_CUR_AMBULATION[2] NOT = 00, 01, 02, 03, 04, 05
	THEN IMP_AMBULATION = MISSING '[**SHOULD NEVER OCCUR**]
	ELSE IF (M0700_CUR_AMBULATION = 01 AND M0700_CUR_AMBULATION[2] = 00) OR (M0700_CUR_AMBULATION = 02 AND M0700_CUR_AMBULATION[2] = 00, 01) OR (M0700_CUR_AMBULATION = 03 AND M0700_CUR_AMBULATION[2] = 00, 01, 02) OR (M0700_CUR_AMBULATION = 04 AND M0700_CUR_AMBULATION[2] = 00, 01, 02, 03) OR (M0700_CUR_AMBULATION = 05 AND M0700_CUR_AMBULATION[2] = 00, 01, 02, 03, 04)
	THEN IMP_AMBULATION = 1
	ELSE IF (M0700_CUR_AMBULATION = 01 AND M0700_CUR_AMBULATION[2] = 01, 02, 03, 04, 05) OR (M0700_CUR_AMBULATION = 02 AND M0700_CUR_AMBULATION[2] = 02, 03, 04, 05) OR (M0700_CUR_AMBULATION = 03 AND M0700_CUR_AMBULATION[2] = 03, 04, 05) OR (M0700_CUR_AMBULATION = 04 AND M0700_CUR_AMBULATION[2] = 04, 05) OR (M0700_CUR_AMBULATION = 05 AND M0700_CUR_AMBULATION[2] = 05)
	THEN IMP_AMBULATION = 0 ELSE IF M0700_CUR_AMBULATION = 00
	THEN IMP_AMBULATION = MISSING
Improvement in bathing	**IF** M0670_CUR_BATHING NOT = 00, 01, 02, 03, 04, 05 OR M0670_CUR_BATHING[2] NOT = 00, 01, 02, 03, 04, 05
	THEN IMP_BATHING = MISSING STAB_BATHING = MISSING '[**SHOULD NEVER OCCUR**]
	ELSE IF (M0670_CUR_BATHING = 01 AND M0670_CUR_BATHING[2] = 00) OR (M0670_CUR_BATHING = 02 AND M0670_CUR_BATHING[2] = 00, 01) OR (M0670_CUR_BATHING = 03 AND M0670_CUR_BATHING[2] = 00, 01, 02) OR (M0670_CUR_BATHING = 04 AND M0670_CUR_BATHING[2] = 00, 01, 02, 03) OR (M0670_CUR_BATHING = 05 AND M0670_CUR_BATHING[2] = 00, 01, 02, 03, 04)
	THEN IMP_BATHING = 1
	ELSE IF (M0670_CUR_BATHING = 01 AND M0670_CUR_BATHING[2] = 01, 02, 03, 04, 05) OR (M0670_CUR_BATHING = 02 AND M0670_CUR_BATHING[2] = 02, 03, 04, 05) OR (M0670_CUR_BATHING = 03 AND M0670_CUR_BATHING[2] = 03, 04, 05) OR (M0670_CUR_BATHING = 04 AND M0670_CUR_BATHING[2] = 04, 05) OR (M0670_CUR_BATHING = 05 AND M0670_CUR_BATHING[2] = 05)
	THEN IMP_BATHING = 0
	ELSE IF M0670_CUR_BATHING = 00
	THEN IMP_BATHING = MISSING

* Transformation documentation is the formula or logical expression indicating how the measure is calculated from specific OASIS data fields.

Table 1 – Outcome Measure Transformation Documentation* (continued)

MEASURE	TRANSFORMATION DOCUMENTATION
Improvement in transferring	**IF** M0690_CUR_TRANSFERRING NOT = 00, 01, 02, 03, 04, 05 OR M0690_CUR_TRANSFERRING[2] NOT = 00, 01, 02, 03, 04, 05 **THEN** IMP_TRANSFERRING = MISSING STAB_TRANSFERRING = MISSING '[**SHOULD NEVER OCCUR**] **ELSE IF** (M0690_CUR_TRANSFERRING = 01 AND M0690_CUR_TRANSFERRING[2] = 00) OR (M0690_CUR_TRANSFERRING = 02 AND M0690_CUR_TRANSFERRING[2] = 00, 01) OR (M0690_CUR_TRANSFERRING = 03 AND M0690_CUR_TRANSFERRING[2] = 00, 01, 02) OR (M0690_CUR_TRANSFERRING = 04 AND M0690_CUR_TRANSFERRING[2] = 00,01,02,03) OR (M0690_CUR_TRANSFERRING = 05 AND M0690_CUR_TRANSFERRING[2] = 00,01,02,03,04) **THEN** IMP_TRANSFERRING = 1 **ELSE IF** (M0690_CUR_TRANSFERRING = 01 AND M0690_CUR_TRANSFERRING[2] = 01, 02, 03, 04, 05) OR (M0690_CUR_TRANSFERRING = 02 AND M0690_CUR_TRANSFERRING[2] = 02,03,04,05) OR (M0690_CUR_TRANSFERRING = 03 AND M0690_CUR_TRANSFERRING[2] = 03, 04, 05) OR (M0690_CUR_TRANSFERRING = 04 AND M0690_CUR_TRANSFERRING[2] = 04, 05) OR (M0690_CUR_TRANSFERRING = 05 AND M0690_CUR_TRANSFERRING[2] = 05) **THEN** IMP_TRANSFERRING = 0 **ELSE IF** M0690_CUR_TRANSFERRING = 00 **THEN** IMP_TRANSFERRING = MISSING
Improvement in management of oral medications	**IF** M0780_CUR_ORAL_MEDS NOT = 00, 01, 02, NA OR M0780_CUR_ORAL_MEDS[2] NOT = 00, 01, 02, NA **THEN** IMP_ORALMEDS = MISSING STAB_ORALMEDS = MISSING '[**SHOULD NEVER OCCUR**] **ELSE IF** (M0780_CUR_ORAL_MEDS = 01 AND M0780_CUR_ORAL_MEDS[2] = 00) OR (M0780_CUR_ORAL_MEDS = 02 AND M0780_CUR_ORAL_MEDS[2] = 00, 01) **THEN** IMP_ORALMEDS = 1 **ELSE IF** (M0780_CUR_ORAL_MEDS = 01 AND M0780_CUR_ORAL_MEDS[2] = 01, 02) OR (M0780_CUR_ORAL_MEDS = 02 AND M0780_CUR_ORAL_MEDS[2] = 02) **THEN** IMP_ORALMEDS = 0 **ELSE IF** M0780_CUR_ORAL_MEDS = 00, NA OR M0780_CUR_ORAL_MEDS[2] = NA **THEN** IMP_ORALMEDS = MISSING
Improvement in pain interfering with activity	**IF** M0420_FREQ_PAIN NOT = 00, 01, 02, 03 OR M0420_FREQ_PAIN[2] NOT = 00, 01, 02, 03 **THEN** IMP_PAIN = MISSING '[**SHOULD NEVER OCCUR**] **ELSE IF** (M0420_FREQ_PAIN = 01 AND M0420_FREQ_PAIN[2] = 00) OR (M0420_FREQ_PAIN = 02 AND M0420_FREQ_PAIN[2] = 00, 01) OR (M0420_FREQ_PAIN = 03 AND M0420_FREQ_PAIN[2] = 00, 01, 02) **THEN** IMP_PAIN = 1 **ELSE IF** (M0420_FREQ_PAIN = 01 AND M0420_FREQ_PAIN[2] = 01, 02, 03) OR (M0420_FREQ_PAIN = 02 AND M0420_FREQ_PAIN[2] = 02, 03) OR (M0420_FREQ_PAIN = 03 AND M0420_FREQ_PAIN[2] = 03) **THEN** IMP_PAIN = 0 ELSE IF M0420_FREQ_PAIN = 00 **THEN** IMP_PAIN = MISSING

* Transformation documentation is the formula or logical expression indicating how the measure is calculated from specific OASIS data fields.

Table 1 – Outcome Measure Transformation Documentation* (continued)

MEASURE	TRANSFORMATION DOCUMENTATION
Improvement in status of surgical wounds	**IF** M0440_LESION_WND = 0 OR M0482_SURG_WOUND = 0
	THEN STAT_INT1 = 00
	ELSE IF M0482_SURG_WOUND = 1
	THEN STAT_INT1 = M0488_STAT_PRB_SURGWND
	IF M0440_LESION_WND[2] = 0 OR M0482_SURG_WOUND[2] = 0
	THEN STAT_INT2 = 00
	ELSE IF M0482_SURG_WOUND[2] = 1
	THEN STAT_INT2 = M0488_STAT_PRB_SURGWND[2]
	IF ((M0440_LESION_OPEN_WND = 1 OR M0482_SURG_WOUND = 1) AND STAT_INT1 NOT = 00, 01, 02, 03, NA) OR((M0440_LESION_OPEN_WND[2] = 1 OR M0482_SURG_WOUND[2] = 1) AND STAT_INT2 NOT = 00, 01, 02, 03, NA)
	THEN IMP_STATUSWOUNDS = MISSING '[**SHOULD NEVER OCCUR**]
	ELSE IF (STAT_INT1 = 01 AND STAT_INT2 = 00) OR (STAT_INT1 = 02 AND STAT_INT2 = 00, 01) OR (STAT_INT1 = 03 AND STAT_INT2 = 00, 01, 02)
	THEN IMP_STATUSWOUNDS = 1
	ELSE IF (STAT_INT1 = 01 AND STAT_INT2 = 01, 02, 03) OR (STAT_INT1 = 02 AND STAT_INT2 = 02, 03) OR (STAT_INT1 = 03 AND STAT_INT2 = 03)
	THEN IMP_STATUSWOUNDS = 0
	ELSE IF (STAT_INT1 = 00, NA) OR (STAT_INT2 = NA)
	THEN IMP_STATUSWOUNDS = MISSING
Improvement in dyspnea	**IF** M0490_WHEN_DYSPNEIC NOT = 00, 01, 02, 03, 04 OR M0490_WHEN_DYSPNEIC[2] NOT = 00, 01, 02, 03, 04
	THEN IMP_DYSPNEA = MISSING '[**SHOULD NEVER OCCUR**]
	ELSE IF (M0490_WHEN_DYSPNEIC = 01 AND M0490_WHEN_DYSPNEIC[2] = 00) OR (M0490_WHEN_DYSPNEIC = 02 AND M0490_WHEN_DYSPNEIC[2] = 00, 01) OR (M0490_WHEN_DYSPNEIC = 03 AND M0490_WHEN_DYSPNEIC[2] = 00, 01, 02) OR (M0490_WHEN_DYSPNEIC = 04 AND M0490_WHEN_DYSPNEIC[2] = 00, 01, 02, 03)
	THEN IMP_DYSPNEA = 1
	ELSE IF (M0490_WHEN_DYSPNEIC = 01 AND M0490_WHEN_DYSPNEIC[2] = 01, 02, 03, 04) OR (M0490_WHEN_DYSPNEIC = 02 AND M0490_WHEN_DYSPNEIC[2] = 02, 03, 04) OR (M0490_WHEN_DYSPNEIC = 03 AND M0490_WHEN_DYSPNEIC[2] = 03, 04) OR (M0490_WHEN_DYSPNEIC = 04 AND M0490_WHEN_DYSPNEIC[2] = 04)
	THEN IMP_DYSPNEA = 0
	ELSE IF M0490_WHEN_DYSPNEIC = 00
	THEN IMP_DYSPNEA = MISSING

* Transformation documentation is the formula or logical expression indicating how the measure is calculated from specific OASIS data fields.

Table 1 – Outcome Measure Transformation Documentation* (continued)

MEASURE	TRANSFORMATION DOCUMENTATION
Improvement in urinary incontinence	**IF** M0520_UR_INCONT NOT = 00, 01, 02 OR (M0520_UR_INCONT = 01 AND M0530_UR_INCONT_OCCURS NOT = 00, 01, 02) OR (M0520_UR_INCONT = 00, 02 AND M0530_UR_INCONT_OCCURS = 00, 01, 02) OR M0520_UR_INCONT[2] NOT = 00, 01, 02 OR (M0520_UR_INCONT[2] = 01 AND M0530_UR_INCONT_OCCURS[2] NOT = 00, 01, 02) OR M0520_UR_INCONT[2] = 00, 02 AND M0530_UR_INCONT_OCCURS[2] = 00, 01, 02)
	THEN OUT_INTERIM1 = MISSING OUT_INTERIM2 = MISSING '[**SHOULD NEVER OCCUR**]
	ELSE IF M0520_UR_INCONT = 00
	THEN OUT_INTERIM1 = 0
	ELSE IF M0530_UR_INCONT_OCCURS = 00
	THEN OUT_INTERIM1 = 1
	ELSE IF M0530_UR_INCONT_OCCURS = 01
	THEN OUT_INTERIM1 = 2
	ELSE IF M0530_UR_INCONT_OCCURS = 02
	THEN OUT_INTERIM1 = 3
	ELSE IF M0520_UR_INCONT_OCCURS = 02
	THEN OUT_INTERIM1 = 4
	IF M0520_UR_INCONT[2] = 00
	THEN OUT_INTERIM2 = 0
	ELSE IF M0530_UR_INCONT_OCCURS[2] = 00
	THEN OUT_INTERIM2 = 1
	ELSE IF M0530_UR_INCONT_OCCURS[2] = 01
	THEN OUT_INTERIM2 = 2
	ELSE IF M0530_UR_INCONT_OCCURS[2] = 02
	THEN OUT_INTERIM2 = 3
	ELSE IF M0520_UR_INCONT[2] = 02
	THEN OUT_INTERIM2 = 4
	IF OUT_INTERIM1 = NOT = 0, 1, 2, 3, 4, OR OUT_INTERIM2 NOT = 0, 1, 2, 3, 4
	THEN IMP_INCONT = MISSING '[**SHOULD NEVER OCCUR**]
	ELSE IF (OUT_INTERIM1 = 1 AND OUT_INTERIM2 = 0) OR (OUT_INTERIM1 = 2 AND OUT_INTERIM2 = 0, 1) OR (OUT_INTERIM1 = 3 AND OUT_INTERIM2 = 0, 1, 2) OR (OUT_INTERIM1 = 4 AND OUT_INTERIM2 = 0, 1, 2, 3)
	THEN IMP_INCONT = 1
	ELSE IF (OUT_INTERIM1 = 1 AND OUT_INTERIM2 = 1, 2, 3, 4) OR (OUT_INTERIM1 = 2 AND OUT_INTERIM2 = 2, 3, 4) OR (OUT_INTERIM1 = 3 AND OUT_INTERIM2 = 3, 4) OR (OUT_INTERIM1 = 4 AND OUT_INTERIM2 = 4)
	THEN IMP_INCONT = 0
	ELSE IF OUT_INTERIM1 = 0
	THEN IMP_INCONT = MISSING

* Transformation documentation is the formula or logical expression indicating how the measure is calculated from specific OASIS data fields.

Table 1 – Outcome Measure Transformation Documentation* (continued)

MEASURE	TRANSFORMATION DOCUMENTATION

Increase in number of pressure ulcers	1 if PRESSURE1 < 16 and PRESSURE2 > PRESSURE1;
	
	0 if M0100_ASSMT_REASON[2] = 09 and PRESSURE1 < 16, and PRESSURE2 <= PRESSURE1; MISSING Otherwise.
	
	This measure requires the computation of two interim measures. PRESSURE1 represents the number of stageable pressure ulcers at SOC/ROC while PRESSURE2 represents the number of stageable pressure ulcers at DC.
	
	PRESSURE1
	M0450_NBR_PRSULC_STG1 + M0450_NBR_PRSULC_STG2 + M0450_NBR_PRSULC_STG3 + M0450_NBR_PRSULC_STG4
	if M0100_ASSMT_REASON[2] = 09 and M0440_LESION_OPEN_WND = 1 and M0445_PRESS_ULCER = 1;
	0 if M0100_ASSMT_REASON[2] = 09 and (M0440_LESION_OPEN_WND = 0 or M0445_PRESS_ULCER = 0); MISSING otherwise.
	
	PRESSURE2
	M0450_NBR_PRSULC_STG1[2] + M0450_NBR_PRSULC_STG2[2] + M0450_NBR_PRSULC_STG3[2] + M0450_NBR_PRSULC_STG4[2]
	if M0100_ASSMT_REASON[2] = 09 and M0440_LESION_OPEN_WND[2] = 1 and M0445_PRESS_ULCER[2] = 1;
	0 if M0100_ASSMT_REASON[2] = 09 and (M0440_LESION_OPEN_WND[2] = 0 or M0445_PRESS_ULCER[2] = 0); MISSING otherwise.

Emergent care for wound infections, deteriorating wound status	1 if M0100_ASSMT_REASON[2] = 06,07,09 and M0840_ECR_WOUND[2] = 1; 0 if M0100_ASSMT_REASON[2] = 06,07,09 and M0830_EC_UNKNOWN[2] = 0 and (M0830_EC_NONE[2] = 1 or M0840_ECR_UNKNOWN[2] = 0); MISSING Otherwise.
Emergent care for improper medication administration, medication side effects	1 if M0100_ASSMT_REASON[2] = 06,07,09 and M0840_ECR_MEDICATION[2] = 1; 0 if M0100_ASSMT_REASON[2] = 06,07,09 and M0830_EC_UNKNOWN[2] = 0 and (M0830_EC_NONE[2] = 1 or M0840_ECR_UNKNOWN[2] = 0); MISSING Otherwise.
Emergent care for hypo/hyperglycemia	1 if M0100_ASSMT_REASON[2] = 06,07,09 and M0840_ECR_HYPOGLYC[2] = 1; 0 if M0100_ASSMT_REASON[2] = 06,07,09 and M0830_EC_UNKNOWN[2] = 0 and (M0830_EC_NONE[2] = 1 or M0840_ECR_UNKNOWN[2] = 0); MISSING Otherwise.
Acute care hospitalization	**IF** (M0100_ASSMT_REASON[2] = 06, 07 AND M0855_INPAT_FACILITY[2] NOT = 01, 02, 03, 04) OR (M0100_ASSMT_REASON[2] = 09 AND M0855_INPAT_FACILITY[2] NOT = NA) OR (M0855_INPAT_FACILITY[2] = 01 AND M0890_HOSP_RSN[2] NOT = 01, 02, 03, UK) **THEN** UTIL_HOSPDC = MISSING '[**SHOULD NEVER OCCUR**] **ELSE IF** (M0100_ASSMT_REASON[2] = 06, 07 AND M0855_INPAT_FACILITY [2]= 01) **THEN** UTIL_HOSPDC = 1 ELSE UTIL_HOSPDC = 0

* Transformation documentation is the formula or logical expression indicating how the measure is calculated from specific OASIS data fields.

Table 1 – Outcome Measure Transformation Documentation*(continued)

MEASURE	TRANSFORMATION DOCUMENTATION
Discharge to community	**IF** M0100_ASSMT_REASON[2] = 09 AND M0870_DSCHG_DISP[2] NOT = 01, 02, 03, UK **THEN** UTIL_DCCOMM = MISSING '[**SHOULD NEVER OCCUR**] **ELSE IF** M0100_ASSMT_REASON[2] = 09 AND M0870_DSCHG_DISP[2] = 01 **THEN** UTIL_DCCOMM = 1 **ELSE IF** (M0100_ASSMT_REASON[2] = 09 AND M0870_DSCHG_DISP[2] = 02, 03) OR M0100_ASSMT_REASON[2] = 06, 07 **THEN** UTIL_DCCOMM = 0 **ELSE IF** M0870_DSCHG_DISP[2] = UK **THEN** UTIL_DCCOMM = MISSING
Emergent care	**IF** M0830_EC_NONE[2] NOT = 0, 1 OR M0830_EC_EMER_ROOM[2] NOT = 0, 1 OR M0830_EC_MD_OFF[2] NOT = 0, 1 OR M0830_EC_OUTPAT[2] NOT = 0, 1 OR M0830_EC_UNKNOWN[2] NOT = 0, 1 OR ((M0830_EC_UNKNOWN[2] = 1 OR M0830_EC_NONE[2] = 1) AND (M0830_EC_EMER_ROOM[2] = 1 OR M0830_EC_MD_OFF[2] = 1 OR M0830_EC_OUTPAT[2] = 1)) OR (M0830_EC_NONE[2] = 0 AND M0830_EC_EMER_ROOM[2] = 0 AND M0830_EC_MD_OFF[2] = 0 AND M0830_EC_OUTPAT[2] = 0 AND M0830_EC_UNKNOWN[2] = 0) OR (M0830_EC_UNKNOWN[2] = 1 AND M0830_EC_NONE[2] = 1) **THEN** UTIL_EMERGENT = MISSING '[**SHOULD NEVER OCCUR**] **ELSE IF** M0830_UNKNOWN[2] = 1 **THEN** UTIL_EMERGENT = MISSING **ELSE IF** M0830_EC_NONE[2] = 0 **THEN** UTIL_EMERGENT = 1 **ELSE IF** M0830_EC_NONE[2] = 1 **THEN** UTIL_EMERGENT = 0

* Transformation documentation is the formula or logical expression indicating how the measure is calculated from specific OASIS data fields.

Sources:

U.S. Department of Health and Human Services (DHHS). *Outcome-Based Quality Improvement Reports: Technical Documentation of Measures.* Baltimore, MD: Centers for Medicare and Medicaid Services (CMS); September 2003. Available at www.cms.hhs.gov/oasis/riskadjappb.pdf. Last accessed August 17, 2004.

U.S. DHHS. *Outcome-Based Quality Monitoring Reports: Technical Documentation of Measures.* Baltimore, MD: CMS. March 2002; Revised (Corrections Made) October 2003.

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*When voting under the NQF Consensus Development Process occurred for this report.

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