CBE ID

3235

Title

Hospice and Palliative Care Composite Process Measure—Comprehensive Assessment at Admission

Endorsement Status

Endorsed

Is Under Review

No

Next Maintenance Cycle

Fall 2026

Previous Endorsement Cycle

Fall 2020

Initial Endorsement

Thu, 07/13/2017 - 14:02

Steward

Centers for Medicare & Medicaid Services

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Composite Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

The Hospice Comprehensive Assessment Measure assesses the percentage of hospice stays in which patients who received a comprehensive patient assessment at hospice admission. The measure focuses on hospice patients age 18 years and older. A total of seven individual NQF endorsed component quality will provide the source data for this comprehensive assessment measure, including NQF #1634, NQF #1637, NQF #1639, NQF #1638, NQF #1617, NQF #1641, and NQF #1647. These seven measures are currently implemented in the CMS HQRP. These seven measures focus on care processes around hospice admission that are clinically recommended or required in the hospice Conditions of Participation, including patient preferences regarding life-sustaining treatments, care for spiritual and existential concerns, and management of pain, dyspnea, and bowels.

1.8 Level of Analysis

Facility

1.9 Care Setting

Other

1.14 Numerator

The numerator of this measure is the number of patient stays in the denominator where the patient received all 7 care processes which are applicable to the patient at admission, as captured by the current HQRP quality measures. To be included in the comprehensive assessment measure numerator, a patient must meet the numerator criteria for each of the individual component quality measure (QM) that is applicable to the patient. The numerator of this measure accounts for the three conditional measures in the current HQRP (NQF #1637 Pain Assessment, NQF #1638 Dyspnea Treatment, and NQF #1617 Bowel Regimen) as described below.

1.15 Denominator

The denominator for the measure includes all hospice patient stays enrolled in hospice except those with exclusions.

1.20 Types of Data Sources

Other

6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization)

6.1.3 Current Use(s)

Public Reporting

Exclusions

Patient stays are excluded from the measure if they are under 18 years of age, or are a Type 2 (discharged stays missing the admission record) or Type 3 patient stay (active stays).

Planned Use

Quality Improvement (Internal to the specific organization)

Risk Adjustment

No risk adjustment or risk stratification

Steward Organization

Centers for Medicare & Medicaid Services

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