

DATE: August 19, 2024
TO: ALL SNF WQIP PARTICIPANTS
SUBJECT: SNF WQIP MDS Measures for PY3 (2025)

PURPOSE:

This Policy Letter (PL) outlines the Minimum Data Set (MDS) clinical measures for the Skilled Nursing Facility (SNF) Workforce & Quality Incentive Program (WQIP) for PY 3 (2025).

BACKGROUND:

For the MDS clinical measurement area, Health Services Advisory Group (HSAG) calculates three long-stay MDS clinical metrics.

For PY 2 (2024), the Department of Health Care Services (DHCS) used:

- *Percent of Residents Who Lose Too Much Weight, Long Stay*
- *Percent of Residents Experiencing One or More Falls with Major Injury, Long Stay*
- *Percent of Residents Who Received an Antipsychotic Medication, Long Stay (APM)*

POLICY

The MDS clinical measures that are being used in PY 3 are listed in the table below. DHCS will provide PY 3 benchmarks in December 2024 for the MDS measures listed. DHCS is providing these measures now as the measurement period, as in all prior PYs, is six months offset in advance from the calendar year. For PY 3, the MDS measurement period is July 1, 2024 to June 30, 2025.

PY3 (2025) Measurement Information

- MDS Clinical Metrics and Consensus-Based Entity (CBE) ID (if applicable):
 - Percent of Residents Who Lose Too Much Weight, Long Stay (CBE ID 0689)
 - Percent of Residents Experiencing One or More Falls with Major Injury, Long Stay (CBE ID 0674)
 - Percent of Residents Who Received an Antipsychotic Medication, Long Stay
- Measure Steward/Developer:
 - Centers for Medicare & Medicaid Services (CMS)



WQIP PL 24-004

Page 2

- Data Source:
 - MDS

A copy of this Policy Letter is posted on the SNF WQIP website at <https://www.dhcs.ca.gov/services/Pages/SNF-WQIP.aspx>. If you have any questions regarding this policy letter, please contact SNFWQIP@DHCS.ca.gov.

ORIGINAL SIGNED BY JEFFREY NORRIS, MD

Value-Based Payment Branch Chief
Quality and Population Health Management (QPHM)
Department of Healthcare Services