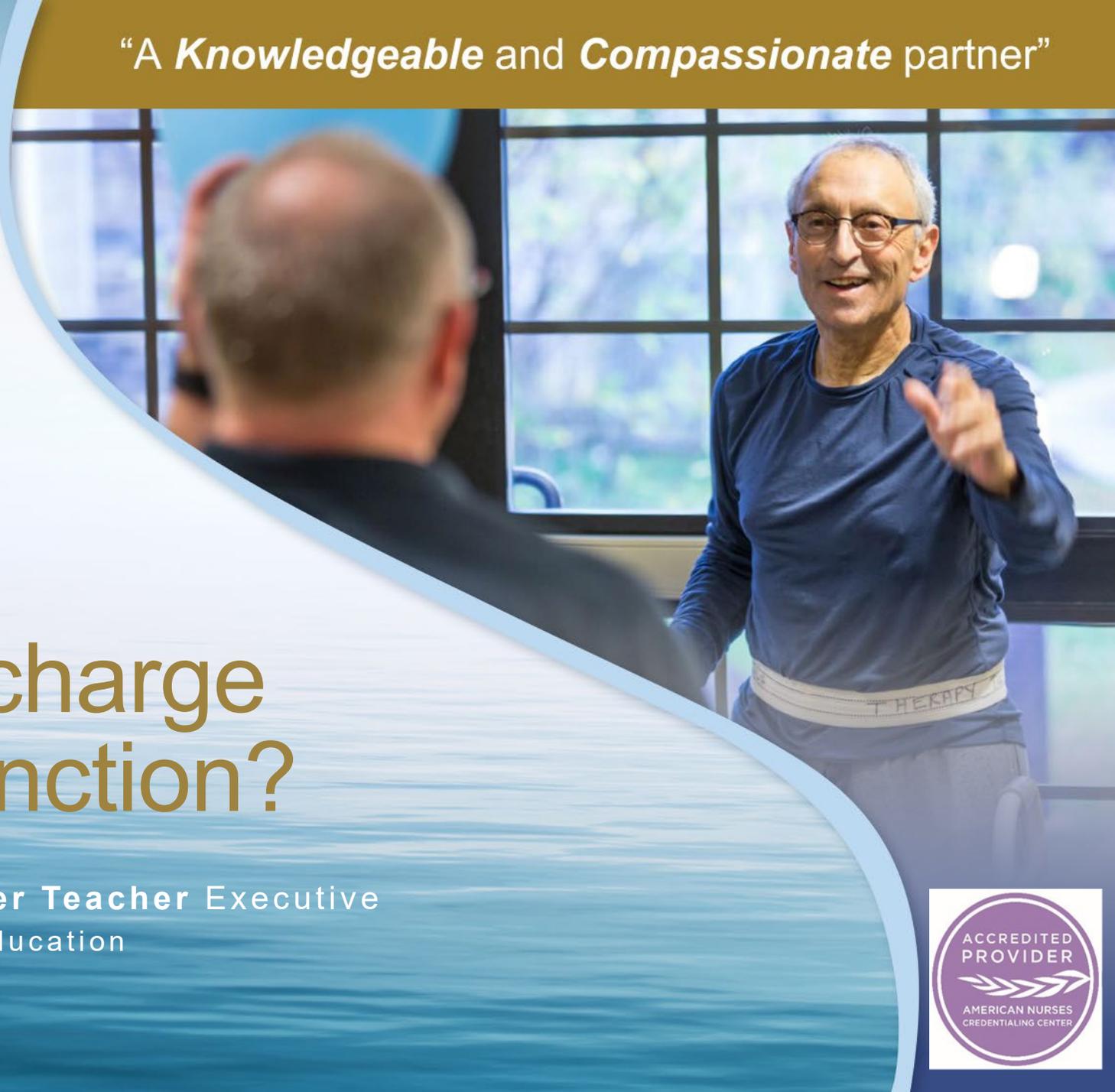


“A Knowledgeable and Compassionate partner”



How Does the Discharge Function Score Function?

Joel VanEaton, BSN, RN, RAC-CTA, Master Teacher Executive
Vice President of PAC Regulatory Affairs and Education



APPROVAL STATEMENT DISCLOSURE

- This nursing continuing professional development activity was approved by Broad River Rehab, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.
- This course has been approved for 1.5 contact hours.

CONFLICT OF INTEREST DISCLOSURE

- Broad River Rehab is not charging for this educational offering and has no financial or other conflicts of interest regarding this program.

SUCCESSFUL COMPLETION REQUIREMENTS

- **Live, in-person**
 - In order to obtain nursing contact hours, you must attend the entire activity, participate in case study analysis, and complete the evaluation.
- **Live, virtual**
 - In order to obtain nursing contact hours, you must participate in the entire program, participate in audience polling and/or Q&A and complete the evaluation.
- **Web-Based/On-Demand**
 - In order to obtain nursing contact hours, you must view the entire program, and complete the evaluation.

DISCLOSURE OF THE EXPIRATION DATE FOR AWARDING CONTACT HOURS FOR ENDURING PROGRAMS

- Contact hours for this program will not be awarded after 30 days



Learning Objectives

How does the Discharge Function Score Function

- Identify the differences between GG based discharge function score and the G based improvement in function score.
- Understand the technical specifications of this measure
- Become familiar with the expected discharge function score
- Interpret how this measure impacts SNF quality measurement programs.
- Apply the results to facility level quality improvement efforts

Resources

- [SNF QRP](#)
- [QSO-25-01-NH](#)



G to GG QM Changes Compare Table

Current Measure: Percent of Residents Who Made Improvements in Function (SS) (CMS ID: N037.03)	GG Equivalent Measure: Discharge Function Score (CMS ID: S042.02)
<p>Measure Description: This measure reports the percentage of short-stay residents who were discharged from the nursing home that gained more independence in transfer, locomotion, and walking during their episodes of care.</p>	<p>Measure Description: This measure estimates the percentage of Medicare Part A SNF stays that meet or exceed an expected discharge function score.</p>
<p>Numerator Short-stay residents who:</p> <ol style="list-style-type: none"> 1. Have a change in performance score that is negative ([valid discharge assessment] - [valid preceding PPS 5-Day assessment or OBRA Admission assessment] < [0]). <p>Performance is calculated as the sum of G0110B1 (transfer: self-performance), G0110E1 (locomotion on unit: self-performance), and G0110D1 (walk in corridor: self-performance), with 7's (activity occurred only once or twice) and 8's (activity did not occur) recoded to 4's (total dependence).</p> <p>Denominator Short-stay residents who: Meet all of the following conditions, except those with exclusions:</p> <ol style="list-style-type: none"> 1. Have a valid discharge assessment (A0310F = [10]), and Have a valid preceding PPS 5-Day assessment (A0310B = [01]) or OBRA Admission assessment (A0310A = [01]). 	<p>Numerator The total number of Medicare Part A SNF stays (Type 1 SNF Stays only) in the denominator, except those that meet the exclusion criteria, with an observed discharge function score that is equal to or greater than the calculated expected discharge function score.</p> <p>Denominator The total number of Medicare Part A SNF stays (Type 1 SNF Stays only), except those that meet the exclusion criteria.</p> <p>GG Function items used for discharge function score calculations:</p> <ul style="list-style-type: none"> • GG0130A3. Eating • GG0130B3. Oral hygiene • GG0130C3. Toileting hygiene • GG0170A3. Roll left and right • GG0170C3. Lying to sitting on side of bed • GG0170D3. Sit to stand • GG0170E3. Chair/bed-to-chair transfer • GG0170F3. Toilet transfer • GG0170I3: Walk 10 Feet* • GG0170J3: Walk 50 Feet with 2 Turns* • GG0170R3. Wheel 50 feet with 2 Turns*
<p>Exclusions Residents satisfying any of the following conditions:</p> <ol style="list-style-type: none"> 1.1. <u>Comatose</u> (B0100 = [1]) on the PPS 5-Day assessment or OBRA Admission assessment, whichever was used in the QM. 1.2 <u>Life expectancy of less than 6 months</u> (J1400 = [1]) on the PPS 5-Day assessment or OBRA Admission assessment, whichever was used in the QM. 1.3 <u>Hospice</u> (O0100K2 = [1]) on the PPS 5-Day assessment or OBRA Admission assessment, whichever was used in the QM. 	<p>Exclusions Medicare Part A SNF stays are excluded if:</p> <ol style="list-style-type: none"> 1. <u>The Medicare Part A SNF stay is an incomplete stay:</u> Unplanned discharge - Discharge to acute hospital, psychiatric hospital, long-term care hospital indicated - SNF PPS Part A stay less than 3 days - The resident died during the SNF stay 2. The resident has any of the following medical conditions at the time of admission (i.e., on the 5-Day PPS assessment): Coma, persistent vegetative state, complete tetraplegia, severe brain

G to GG QM Changes Compare Table

<p>1.4 Information on Transfer: self-performance, walk in corridor: self-performance, or locomotion on unit: self-performance is <u>missing on any of the assessments used to calculate the QM</u> (G0110B1, G0110D1, or G0110E1 = [-]) (i.e., valid discharge assessment, and PPS 5-Day assessment or OBRA Admission assessment, whichever was used in the QM).</p> <p>1.5 <u>Residents with no impairment</u> (sum of G0110B1, G0110D1 and G0110E1 = [0]) on the PPS 5-Day assessment or OBRA Admission assessment, whichever was used in the QM.</p> <p>1.6. <u>Residents with an unplanned discharge</u> on any assessment during the care episode (A0310G = [2])</p>	<p>damage, locked-in syndrome, or severe anoxic brain damage, cerebral edema or compression of brain.</p> <p>3. The resident is younger than age 18:</p> <p>4. The resident is discharged to hospice or received hospice while a resident:</p>
<p><u>Covariates</u></p> <p>1. Age on the PPS 5-Day assessment</p> <p>2. Gender</p> <p>3. Severe cognitive impairment</p> <p>4. Long Form ADL (LFADL) Scale (G0110A1 + G0110B1 + G0110E1 + G0110G1 + G0110H1 + G0110I1 + G0110J1). If any (G0110A1, G0110B1, G0110E1, G0110G1, G0110H1, G0110I1, G0110J1) = [7, 8], recode the item to equal [4].</p>	<p><u>Covariates</u></p> <p>1. Age group</p> <p>2. Admission function – continuous form</p> <p>3. Admission function – squared form</p> <p>4. Primary medical condition category</p> <p>5. Interaction between admission function and primary medical condition category</p> <p>6. Prior surgery</p> <p>7. Prior functioning: self-care</p> <p>8. Prior functioning: indoor mobility (ambulation)</p> <p>9. Prior functioning: stairs</p> <p>10. Prior functioning: functional cognition</p> <p>11. Prior mobility device use</p> <p>12. Stage 2 pressure ulcer/injury</p> <p>13. Stage 3, 4, or unstageable pressure ulcer/injury</p> <p>14. Cognitive abilities</p> <p>15. Communication impairment</p> <p>16. Urinary Continence</p> <p>17. Bowel Continence</p> <p>18. History of falls</p> <p>19. Nutritional approaches</p> <p>20. High BMI</p> <p>21. Low BMI</p> <p>22. Comorbidities</p> <p>23. No physical or occupational therapy at the time of admission</p>

Technical Specifications

Discharge Function Score

- **Measure Description:** This measure estimates the percentage of Medicare Part A SNF stays that meet or exceed an expected discharge function score.
 - If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.
- **Function items and Rating scale:** The function assessment items used for discharge function score calculations are:
 - GG0130A3. Eating
 - GG0130B3. Oral hygiene
 - GG0130C3. Toileting hygiene
 - GG0170A3. Roll left and right
 - GG0170C3. Lying to sitting on side of bed
 - GG0170D3. Sit to stand
 - GG0170E3. Chair/bed-to-chair transfer
 - GG0170F3. Toilet transfer
 - GG0170I3. Walk 10 feet*
 - GG0170J3. Walk 50 feet with 2 turns*
 - GG0170R3. Wheel 50 feet with 2 turns*

Discharge Function Score

- **Measure Description:** This measure estimates the percentage of Medicare Part A SNF stays that meet or exceed an expected discharge function score.
 - If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.

The function assessment items used for discharge function score calculations are:

GG0130A3. Eating
 GG0130B3. Oral hygiene
 GG0130C3. Toileting hygiene
 GG0170A3. Roll left and right
 GG0170C3. Lying to sitting on side of bed
 GG0170D3. Sit to stand
 GG0170E3. Chair/bed-to-chair transfer
 GG0170F3. Toilet transfer
 GG0170I3. Walk 10 feet*
 GG0170J3. Walk 50 feet with 2 turns*
 GG0170R3. Wheel 50 feet with 2 turns*

Valid codes and their definitions for the discharge function items are:

06 – Independent
 05 – Setup or clean-up assistance
 04 – Supervision or touching assistance
 03 – Partial/moderate assistance
 02 – Substantial/maximal assistance
 01 – Dependent
 07 – Resident refused
 09 – Not applicable
 10 – Not attempted due to environmental limitations
 88 – Not attempted due to medical condition or safety concerns
 ^ – Skip pattern
 - – Not assessed/no information

Technical Specifications

Technical Specifications

Discharge Function Score

- To obtain the discharge function score, use the following procedure:
 - If code is between 01 and 06, use the code as the value.
 - If code is 07, 09, 10, 88, dashed (-), then use statistical imputation to estimate the item value for that item and use this code as the value.
 - If the item is skipped (^), dashed (-), or missing, then use statistical imputation to estimate the item value for that item and use this code as the value.
- Sum the values of the discharge function items to calculate the observed discharge function score for each Medicare Part A SNF stay. Scores can range from 10 to 60, with a higher score indicating greater independence.

Technical Specifications

Discharge Function Score

- Count Wheel 50 feet with 2 turns (GG0170R) value twice to calculate the total observed discharge function score for stays where
 - Walk 10 feet (GG0170I) has an activity not attempted (ANA) code at both admission and discharge **and**
 - either Wheel 50 feet with 2 turns (GG0170R) or Wheel 150 feet (GG0170S) has a code between 01 and 06 at either at admission or at discharge.
 - The remaining stays use Walk 10 feet (GG0170I) + Walk 50 feet with 2 turns (GG0170J) to calculate the total observed discharge function score.
- In either case, 10 items are used to calculate a resident's total observed discharge score and scores range from 10 – 60.

Technical Specifications

Discharge Function Score

- **Numerator**
 - The total number of Medicare Part A SNF stays (**Type 1 SNF Stays only**) in the denominator, except those that meet the exclusion criteria, with an observed discharge function score that is equal to or greater than the calculated expected discharge function score.
- **Denominator**
 - The total number of Medicare Part A SNF stays (**Type 1 SNF Stays only**), except those that meet the exclusion criteria.
- **Type 1 SNF Stay**: A Type 1 SNF stay has a matched pair of PPS 5-Day Assessment (A0310B = [01]) and PPS Discharge Assessment (A0310H = [1]) and no Death in Facility Tracking Record (A0310F = [12]) within the SNF stay.

Calculation Example

- GG Scores for Admission and Discharge

Section GG Items	Admission Score	Discharge Score
•GG0130A3. Eating	3	6
•GG0130B3. Oral hygiene	3	6
•GG0130C3. Toileting hygiene	2	5
•GG0170A3. Roll left and right	2	5
•GG0170C3. Lying to sitting on side of bed	2	5
•GG0170D3. Sit to stand	2	5
•GG0170E3. Chair/bed-to-chair transfer	2	5
•GG0170F3. Toilet transfer	2	5
•GG0170I3. Walk 10 feet*	2	5
•GG0170J3. Walk 50 feet with 2 turns*	2	5
•GG0170R3. Wheel 50 feet with 2 turns*	9	9
	Continuous	Observed D/C Score
	22	52
	Squared	
	484	

Calculation Example

- Additional Document is necessary: [Risk Adjustment Appendix File 10/1/2024](#)

Table RA-8. Intercept and Coefficient Values for the Discharge Function Score Measure		
Covariate	Update ID 1	Update ID 2
Model Intercept	26.6465	30.0118
≤54 Years	-0.0200	-0.0210
55–64 Years	0.0540	0.0743
65–74 Years (Reference Category)	Reference	Reference
75–84 Years	-0.4532	-0.3451
85–90 Years	-1.0141	-0.8555
>90 Years	-1.7983	-1.6377
Admission Function – Continuous Form	1.2403	1.0425
Admission Function – Squared Form	-0.0118	-0.0091
Primary Medical Condition Category: Hip and Knee Replacements (Reference Category)	Reference	Reference
Primary Medical Condition Category: Stroke	-9.2667	-9.4030
Primary Medical Condition Category: Non-Traumatic Brain Dysfunction and Traumatic Brain Dysfunction	-7.4418	-7.6338
Primary Medical Condition Category: Non-Traumatic Spinal Cord Dysfunction	-7.0570	-7.5056
Primary Medical Condition Category: Traumatic Spinal Cord Dysfunction	-15.1702	-14.2713
Primary Medical Condition Category: Progressive Neurological Conditions	-7.8139	-8.5182
Primary Medical Condition Category: Other Neurological Conditions	-6.7519	-6.8022
Primary Medical Condition Category: Fractures and Other Multiple Trauma	-2.7556	-2.9722
Primary Medical Condition Category: Amputation	-7.5950	-8.3109
Primary Medical Condition Category: Other Orthopedic Conditions	-4.8644	-5.1916
Primary Medical Condition Category: Debility, Cardiorespiratory Conditions	-7.6541	-8.0956
Primary Medical Condition Category: Medically Complex Conditions	-7.8059	-8.0534
Interaction of Admission Function Score and Primary Medical Condition Category: Hip and Knee Replacements (Reference Category)	Reference	Reference
Interaction of Admission Function Score and Primary Medical Condition Category: Stroke	0.2170	0.2150

Calculation Example

- Covariate Effect

	Coefficients	Covariate Effect
Model Intercept	30.0118	
85–90 Years	-0.8555	-0.8555
Admission Function Continuous	1.0425	22.935
Admission Function Squared	-0.0091	-4.4044
Primary Medical Condition Category: I0020 Stroke	-9.4030	-9.403
Interaction of Admission Function Score and Primary Medical Condition Category: Stroke	0.2150	4.73
Prior Functioning, Self-Care: Some Help	-2.2614	-2.2614
Prior Functioning, Indoor Mobility (Ambulation): Some Help	-1.0775	-1.0775
Prior Functioning, Stairs: Some Help	0.3431	0.3431
Prior Mobility Device Use: Walker	0.0425	0.0425
Stage 2 Pressure Ulcer – Admission	-0.9505	-0.9505
Cognitive Function, BIMS Score: Moderately Impaired – Admission	-0.9505	-0.9505
History of Falls – Admission	0.4549	0.4549
Nutritional Approaches: Mechanically Altered Diet – Admission	-0.7066	-0.7066
Low BMI	-0.3545	-0.3545
Diabetes: Diabetes With Chronic Complications (HCC18) or Diabetes Without Complications (HCC19)	-0.1949	-0.1949
		Expected D/C Score
		37.3585

Calculation Example

Observed

vs.

Expected

Observed D/C Score

Expected D/C Score

52

\geq

37.3585

Does this example trigger the QM?

Yes!

Who Triggered?

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop C2-21-16
Baltimore, Maryland 21244-1850



Center for Clinical Standards and Quality/Quality, Safety & Oversight Group

Ref: **QSO-25-01-NH**

DATE: October 4, 2024

TO: State Survey Agency Directors

FROM: Director, Quality, Safety & Oversight Group (QSOG)

SUBJECT: **REVISED:** Updates to Nursing Home Care Compare Staffing and Quality Measures

Starting in April 2024, CMS will freeze (hold constant) these four measures on Nursing Home Care Compare. ~~In October 2024, CMS will replace the short-stay functionality QM with the new cross-setting functionality QM, which is used in the SNF Quality Reporting Program (QRP). The remaining three~~ **These** measures will continue to be frozen until January 2025 while the data for the equivalent measures are collected.

Who Triggered?

✓ iQIES Report

MDS 3.0 Facility-Level Quality Measure (QM) Report



Report Period: 10/01/2024 - 10/31/2024
Comparison Group: 03/01/2024 - 08/31/2024

Report Run Date: 11/14/2024
Data Calculation Date: 11/11/2024
Report Version Number: 3.05

Legend

Note: Dashes represent a value that could not be computed
Note: S = short stay, L = long stay
Note: C = complete; data available for all days selected, I = incomplete; data not available for all days selected
Note: * is an indicator used to identify that the measure is flagged

Facility ID: Facility Name: CCN: City/State:

SNF Measures

Measure Description	CMS ID	Numerator	Denominator	Facility Observed Percent	Facility Adjusted Percent	National Average
Pressure Ulcer/Injury ¹	S038.02	1	172	0.6%	0.7%	2.7%

¹ The Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (S038.02) measure is calculated using the SNF QRP measure specifications and is based on 12 months of data (01/01/2024 - 12/31/2024).

Measure Description	CMS ID	Numerator	Denominator	Facility Observed Percent	National Average
Discharge Function Score ²	S042.02	93	122	76.23%	52.25%

² The Discharge Function Score (S042.01) measure is calculated using the SNF QRP measure specifications and is based on 12 months of data (01/01/2024 - 12/31/2024).

Who Triggered?

iQIES Report



SNF QRP Facility-Level Quality Measure (QM) Report

Requested Report End Date: 12/31/2024

Report Run Date: 11/14/2024

Report Version Number: 2.6

Facility ID:

Facility Name:

CCN:

City/State:

Source: Minimum Data Set 3.0 (MDS 3.0)

Measure Name	Report Period	CMS ID	CMS ID Discharge Dates	Average Observed Discharge Score	Average Expected Discharge Score	Numerator	Denominator	Facility Percent	National Average
Discharge Function Score	01/01/2024 - 12/31/2024	S042.01; S042.02	01/01/2024 - 09/30/2024; 10/01/2024 - 12/31/2024	51.91	48.53	93	122	76.23%	52.25%

Who Triggered?



SNF QRP Resident-Level Quality Measure (QM) Report

Requested Report End Date: 09/30/2024
Report Run Date: 11/14/2024
Data Calculation Date: 11/01/2024
Report Version Number: 2.5

QM #	Measure Name	Measure Interpretation	Report Period	CMS ID	CMS ID Discharge Dates
1	Pressure Ulcer/Injury	Undesirable Outcomes	10/01/2023 - 09/30/2024	S038.02	10/01/2023 - 09/30/2024
2	Application of Falls	Undesirable Outcomes	10/01/2023 - 09/30/2024	S013.02	10/01/2023 - 09/30/2024
3	Functional Status Outcome: Discharge Self-Care Score	Desirable Outcomes or Processes Performed	10/01/2023 - 09/30/2024	S024.05	10/01/2023 - 09/30/2024
4	Functional Status Outcome: Discharge Mobility Score	Desirable Outcomes or Processes Performed	10/01/2023 - 09/30/2024	S025.05	10/01/2023 - 09/30/2024
5	Discharge Function Score	Desirable Outcomes or Processes Performed	10/01/2023 - 09/30/2024	S042.01	10/01/2023 - 09/30/2024
6	DRR	Desirable Outcomes or Processes Performed	10/01/2023 - 09/30/2024	S007.02	10/01/2023 - 09/30/2024
7	TOH - Provider	Desirable Outcomes or Processes Performed	10/01/2023 - 09/30/2024	S043.01	10/01/2023 - 09/30/2024
8	TOH - Patient	Desirable Outcomes or Processes Performed	10/01/2023 - 09/30/2024	S044.01	10/01/2023 - 09/30/2024

Table Legend

Dash (-): Data not available or not applicable
X: Triggered (Bold indicates an undesirable outcome)
NT: Not Triggered (Bold indicates a desirable outcome did not occur or process was not performed)
E: Excluded from analysis based on quality measure exclusion criteria

Who Triggered?

SNF QRP Resident-Level Quality Measure (QM) Report

iQIES Report

Facility ID:

Facility Name:

CCN:

City/State:

Reference page 1 of this report to locate the Table Legend

				Undesirable Outcomes		Desirable Outcomes or Processes Performed					
Resident Name	Resident ID	Admission Date	Discharge Date	QM 1	QM 2	QM 3	QM 4	QM 5	QM 6	QM 7	QM 8
				NT	NT	E	E	E	X	X	E
				NT	NT	X	X	X	X	X	E
				NT	NT	X	X	X	X	X	E
				NT	NT	NT	NT	NT	X	X	E
				E	E	E	E	E	E	E	E
				NT	NT	NT	NT	X	X	X	E
				NT	NT	NT	NT	NT	X	E	E
				NT	NT	E	E	E	X	X	E

SNF QRP Updates

Current SNF QRP Measures:

TABLE 28: Quality Measures Currently Adopted for the SNF QRP

Short Name	Measure Name & Data Source
Resident Assessment Instrument Minimum Data Set (Assessment-Based)	
Pressure Ulcer/Injury	Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury
Application of Falls	Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)
Discharge Mobility Score	Application of IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients
Discharge Self-Care Score	Application of IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients
DRR	Drug Regimen Review Conducted With Follow-Up for Identified Issues–Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)
TOH-Provider	Transfer of Health (TOH) Information to the Provider Post-Acute Care (PAC)
TOH-Patient	Transfer of Health (TOH) Information to the Patient Post-Acute Care (PAC)
DC Function	Discharge Function Score
Patient/Resident COVID-19 Vaccine	COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date
Claims-Based	
MSPB SNF	Medicare Spending Per Beneficiary (MSPB)–Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)
DTC	Discharge to Community (DTC)–Post Acute Care (PAC) Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)
PPR	Potentially Preventable 30-Day Post-Discharge Readmission Measure for Skilled Nursing Facility (SNF) Quality Reporting Program (QRP)
SNF HAI	SNF Healthcare-Associated Infections (HAI) Requiring Hospitalization
National Healthcare Safety Network	
HCP COVID-19 Vaccine	COVID-19 Vaccination Coverage among Healthcare Personnel (HCP)
HCP Influenza Vaccine	Influenza Vaccination Coverage among Healthcare Personnel (HCP)

Current SNF VBP Measures

TABLE 30: SNF VBP Program Measures and Timeline for Inclusion in the Program

Measure	FY 2025 Program Year	FY 2026 Program Year	FY 2027 Program Year	FY 2028 Program Year
Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM)	Included	Included	Included	
Skilled Nursing Facility Healthcare Associated Infections Requiring Hospitalization (SNF HAI) measure		Included	Included	Included
Total Nursing Hours per Resident Day (Total Nurse Staffing) measure		Included	Included	Included
Total Nursing Staff Turnover (Nursing Staff Turnover) measure		Included	Included	Included
Discharge to Community – Post-Acute Care Measure for Skilled Nursing Facilities (DTC PAC SNF measure)			Included	Included
Percent of Residents Experiencing One or More Falls with Major Injury (Long-Stay) (Falls with Major Injury (Long-Stay)) measure			Included	Included
Discharge Function Score for SNFs (DC Function Measure)			Included	Included
Number of Hospitalizations per 1,000 Long Stay Resident Days (Long Stay Hospitalization) measure			Included	Included
Skilled Nursing Facility Within-Stay Potentially Preventable Readmissions (SNF WS PPR) measure				Included

Skilled Nursing Facility Value-Based Purchasing (SNF VBP) Program

- **Value Based Purchasing Measures**
- Discharge Function Score measure (VBP, QRP, 5-Star)
 - This measure assesses functional status by assessing the percentage of SNF residents who meet or exceed an expected discharge function score and use mobility and self-care items already collected on the MDS.
 - 1 year **baseline period**: FY 2023 (October 1, 2022 through September 30, 2023)
 - 1 year performance period: FY 2025 (October 1, 2024 through September 30, 2025)
 - **Achievement Threshold**: 0.40000, **Benchmark**: 0.0.78800
 - **Program Year Impact**: FY 2027
 - **Case Minimum**: minimum of 20 eligible stays during the 1-year performance period in order to be eligible to receive a score on the measure for the applicable fiscal program year.

What's Next?

- The discharge function score is the standard now for discharge outcomes in Skilled Care.
- All three programs, 5-Star, SNF QRP, and SNF VBP, are or will be all affected.
- Mastering section GG on admission and discharge is a must! All IDT hands on deck. Who is recording section GG data? Is it accurate?
- Use all available reports to monitor your performance.
- Evaluate individual residents who did not trigger. Ask, “Why did they not trigger”?
- Check the Covariate List and MDS coding accuracy, including the ICD-10 map.
- Work together as an IDT to determine why a resident does not trigger for this measure and implement solutions for better outcomes.

QUESTIONS?

