

# **Appendix D**

## **MDS QI/QM REPORTS VS. NURSING HOME COMPARE**

## **MDS QI/QM Reports vs. Nursing Home Compare April 2005**

### **Why Are My Statistics on the MDS QI/QM Reports Different from Nursing Home Compare?**

All of the quality measures (QMs) that are on Nursing Home Compare (NHC) are on the Casper MDS QI/QM Reports and identical logic is used on both systems to determine whether each assessment triggers each QM. Nevertheless, if you compare the statistics for your facility on NHC with the statistics on the MDS QI/QM Reports, you may find that the results are somewhat different. There are a number of reasons why the statistics may be different:

1. **Timing.** NHC is run once a quarter while the statistics that are reported on the MDS QI/QM System are updated weekly. It is therefore likely that the assessment database has changed between the time the NHC statistics were computed and the time the MDS QI/QM statistics were computed. The MDS QI/QM statistics will reflect any assessments, corrections, and inactivations that were submitted since the NHC statistics were computed.
2. **Selection Periods.** Every QM is based upon the selection of a target assessment. For NHC, the target assessment must have a reference date within the most recent 3 months for chronic care (CC) measures and the most recent 6 months for post-acute (PAC) measures. On the MDS QI/QM Reports, you are allowed to customize the length of the selection period (by adjusting the beginning and ending date of the report). The default period is 6 months for these reports. If the selection periods you select are different from those used for NHC, the results may not match up.
3. **Risk Adjustment.** Some of the QMs use risk adjustment. These measures have entries in the "adjusted percent" columns on the MDS QI/QM *Facility Quality Measure/Indicator Report*. These adjusted percentages may not match the percentages reported on NHC because of the way the risk adjustment calculations are performed. One of the factors that is used in the risk adjustment calculations is the national average for the QM at the time of calculation. Since the calculations are usually performed at different times for the two systems (see #1 above), the national means may differ and the percentages may be different on the two sets of reports.
4. **Minimum Sample Size.** NHC does not report a measure for a facility if the denominator for that measure is less than 30 for chronic care measures or less than 20 for post-acute care measures. The MDS QI/QM Reports have no such criteria – statistics are reported regardless of the size of the denominators.