|  |  |  |  |
| --- | --- | --- | --- |
| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hc19 | Current medication profile received/sent to patient within 1 day prior to or 7 days after the most recent home visit by nurse or clinician | **Includes all cases except:**   * The patient is not on at least one medication in the time specified timeframe * those whose most recent visit by a nurse, NP, CNS, PA or physician occurred within 7 days prior to the study end date | **Of cases included in the denominator, the case will pass if:**   * The date of the most recent HBPC face to face visit with a nurse, NP, CNS, PA or physician is a valid date * There is documentation that a written current medication list was sent to or received by the patient 1 day prior to or within 7 days after the most recent home visit by a nurse, NP, CNS, PA or physician |
| hc26 | Enrolled < 90 days with positive assessment for cognitive impairment and follow up within 30 days of admission | **Includes all cases except:**   * Those enrolled in HBPC >=90 days * Patients with a known diagnosis of aphasia, Alzheimer’s disease or other dementia, delirium, comatose state or TBI * Patients receiving hospice care * Absence of behavioral triggers is documented * Presence of behavioral triggers is documented and the patient refused assessment of cognitive function * An assessment of cognitive function was done within 30 days of admission and the outcome indicated no cognitive impairment | **Of cases included in the denominator, the case will pass if:**   * Presence of behavioral triggers is documented and * Cognitive function was assessed within 30 days of admission and the outcome was documented and * There is clinician documentation of a plan for follow up for the positive cognitive impairment assessment within 30 days of the assessment and prior to the study end date |
| hc27 | Enrolled at least 120 days with positive assessment for cognitive impairment and follow up annually | **Includes all cases except:**   * Those enrolled in HBPC <120 days * Patients with a known diagnosis of aphasia, Alzheimer’s disease or other dementia, delirium, comatose state, or TBI * Patients receiving hospice care * Absence of behavioral triggers is documented * Presence of behavioral triggers is documented and the patient refused assessment of cognitive function * An assessment of cognitive function was done within the past year and the outcome indicated no cognitive impairment | **Of cases included in the denominator, the case will pass if:**   * Presence of behavioral triggers is documented and * Cognitive function was assessed within the past year and the outcome was documented and * There is clinician documentation of a plan for follow up for the positive cognitive impairment assessment within 30 days after the assessment and prior to the study end date |

|  |  |  |  |
| --- | --- | --- | --- |
| **Mnemonic** | **Description** | **Denominator** | **Numerator** |
| hc25 | Patients with caregiver strain assessment using Zarit Burden scale | **Includes all cases except:**   * Patient lives in a Community Residential Care Facility, Assisted Living Facility, or nursing home * The patient’s place of residence is unable to be determined * the veteran does not have a caregiver and does not serve as a caregiver to another * The caregiver refused screening for caregiver strain within the past year | **Of cases included in the denominator, the case will pass if:**   * The caregiver was screened within the past year using the Zarit Burden Interview Screening Scale |
| hc22 | Caregiver with Zarit Burden score of 8 or greater and received appropriate intervention | **Includes all cases except:**   * Patient lives in a Community Residential Care Facility, Assisted Living Facility, or nursing home * the veteran does not have a caregiver and does not serve as a caregiver to another * The caregiver was not screened for caregiver strain in the past year * The Zarit Burden score was <=7 or no score was documented | **Of cases included in the denominator, the case will pass if:**   * There is documentation of follow-up of the positive caregiver strain screen on the day of or within 14 days after the screen (carefolo=1)   (Caregiver refusal to be screened fails the measure) |
| hc28 | Caregiver offered individualized therapy | **Includes all cases except:**   * Patient lives in a Community Residential Care Facility, Assisted Living Facility, or nursing home * The patient’s place of residence is unable to be determined * the veteran does not have a caregiver or does not serve as a caregiver to another * the caregiver was not screened for strain using the Zarit Burden Interview * the caregiver refused screening for strain using the Zarit Burden Interview * The Zarit Burden score was <=7 or no score was documented * The caregiver refused short term individualized therapy | **Of cases included in the denominator, the case will pass if:**   * Short term individualized therapy was offered to the caregiver on the day of or within 14 days following the positive caregiver strain screen (indther=1) |

|  |  |  |  |
| --- | --- | --- | --- |
| **Mnemonic** | **Description** | **Denominator** | **Numerator** |
| hc29 | Nutrition/hydration assessment by registered dietician within 30 days | **Includes all cases except:**   * Patients admitted to HBPC greater than one year | **Of cases included in the denominator, the case will pass if:**   * The record documents an assessment of the patient’s nutritional and hydration needs by a registered dietician during a face to face encounter within 30 days of the HBPC admission date |
| hc30 | Nutrition/hydration care plan/interventions documented by registered dietician | **Includes all cases except:**   * Patients admitted to HBPC greater than one year * An assessment of the patient’s nutritional and hydration needs by a registered dietician during a face to face encounter within 30 days of the HBPC admission date was not done * A nutritional/hydration assessment was done and the record documents an intervention is not required | **Of cases included in the denominator, the case will pass if:**   * The record documents a care plan/intervention to address the patient’s nutritional and/or hydration needs |
| hc31 | Environmental/safety risk assessment by rehab therapist within 30 days | **Includes all cases except:**   * Patients admitted to HBPC greater than one year | **Of cases included in the denominator, the case will pass if:**   * A home environmental safety/risk assessment was completed by a rehabilitation therapist during a face to face encounter within 30 days of the HBPC admission date   AND   * If the patient is home oxygen dependent, a home oxygen safety risk assessment was completed by an HBPC team member during a face to face encounter within 30 days of the HBPC admission date |
| hc32 | Environmental/safety risk assessment care plan/interventions documented by rehab therapist | **Includes all cases except:**   * Patients admitted to HBPC greater than one year * A home environmental safety/risk assessment was not completed by a rehabilitation therapist during a face to face encounter within 30 days of the HBPC admission date * A home environmental safety/risk assessment was done and the record documents an intervention is not required | **Of cases included in the denominator, the case will pass if:**   * The record documents a plan of care or intervention to address the home environmental safety/risk assessment findings |

|  |  |  |  |
| --- | --- | --- | --- |
| **Mnemonic** | **Description** | **Denominator** | **Numerator** |
| hc33 | Medication management plan review by pharmacist quarterly | **Includes all cases except:**   * Patients admitted to HBPC <=120 days prior to the study begin date * Patients who were not on at least one medication during the timeframe stdybeg- 110 days to stdybeg- 90days * The medication management plan was not reviewed and the patient was hospitalized during the time the medication management plan was to be reviewed | **Of cases included in the denominator, the case will pass if:**   * A pharmacist reviewed the patient’s medication management plan during the timeframe from stdybeg-110 days to stdyend and one of the following   + The pharmacist did not make any recommendations for change in the patients medication regimen OR   + The pharmacist did make recommendations for change in the patients medication regimen AND the pharmacist communicated the change to the HBPC or primary care provider |
| hc34 | Medication management plan review by pharmacist within 30 days | **Includes all cases except:**   * Patients admitted to HBPC greater than one year * Patients admitted to HBPC <= 30 days or > 90 days * Patients who were not on at least one medication at the time of HBPC admission * The medication management plan was not reviewed and the patient was hospitalized during the time the medication management plan was to be reviewed | **Of cases included in the denominator, the case will pass if:**   * A pharmacist reviewed the patient’s medication management plan within 30 days of HBPC admission and one of the following   + The pharmacist did not make any recommendations for change in the patients medication regimen OR * The pharmacist did make recommendations for change in the patients medication regimen AND the pharmacist communicated the change to the HBPC or primary care provider |