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| 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
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| 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
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| **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)
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| **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
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| 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
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| **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
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