



# **2024 CARE-2**

## **Falls: Screening for Future Fall Risk**

# Falls: Screening for Future Fall Risk (CARE-2)

## Falls and Older Adults



One out of four older adults will fall each year in the United States, making falls a public health concern, particularly among the aging population.



About 36 million falls are reported among older adults each year—resulting in more than 32,000 deaths.



Every second of every day, an older adult (age 65+) suffers a fall in the U.S.—making falls the leading cause of injury and injury death in this age group.



Falls, with or without injury, also carry a heavy quality of life impact. A growing number of older adults fear falling and, as a result, limit their activities and social engagements. Assessing Fall Risk is critical to a patient's overall care.

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## Measure Description

Percentage of patients 65 years of age and older, at the start of the measurement period, and were screened for future fall risk at least once during the current performance period.

**Screening for Future Fall Risk:** Assessment of whether an individual has experienced a fall or problems with gait or balance. A specific screening tool is not required for this measure, however potential screening tools include the Morse Fall Scale, STEDI, and the timed Get-Up-And-Go test.



Patients 65 years and older



Screened for potential fall risk during the current performance period

**Measure Steward:** CMS Web Interface

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## Required Exclusions

- **Hospice or palliative care services** anytime during the current performance period
- Patients who **passed away** anytime during the current performance period



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## Best Practices and Documentation



- A clinician with appropriate skills and experience may perform the screening
- Setting of screening is not restricted to an office setting
- Documentation of 'no falls' is sufficient
- Medical records must include documentation of screening performed
- Any history of falls screening during the measurement period is acceptable as meeting the intent of the measure
- A gait or balance assessment meets the intent of the measure
- Screening for future fall risk may be completed during a telehealth encounter

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## Other Quality Measures Tied to CARE-2

### CAHPS: Care Coordination

#### Care Coordination (CC):

Did you personal doctor:

- Have your medical records or other information about your care?
- Follow up to give you test results as soon as you needed them?
- Talk with you about all the prescription medications you were taking?
- Manage your care among different providers and services?
- Seem informed and up-to-date about the care you received from specialists?

### CAHPS: Access to Care

#### Getting Needed Care (GNC):

- How easy was it to get care, tests or treatment you needed?
- How easy was it to get appointments with specialists?
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#### Getting Appointments and Care Quickly (GCQ):

- How often were you able to get care as soon as you needed?
- How often were you able to get appointments for routine care at a doctor's office as soon as you needed?
- How often were you able to see the person you came to see within 15 minutes of your appointment time?





## QUESTIONS?

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