# **Consensus Based Endorsement (CBE) History**

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| Month/Year | Version of the measure | Final Recommendation |
| November 2016 | 2877 Hybrid hospital 30-day, all cause, risk-standardized mortality rate (RSMR) following acute ischemic stroke with risk adjustment for stroke severity (With NIHSS) | Endorsed  (Endorsement was withdrawn in 2020 because CMS decided not to implement this version of the measure.) |
| September 2021 | 3596 Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Acute Ischemic Stroke Hospitalization With Claims-Based Risk Adjustment for Stroke Severity (With NIHSS) | Not endorsed. Although the measure now had validity testing with NIHSS data via ICD-10 codes, the committee did not reach consensus on whether in-hospital stroke mortality is an appropriate measure of quality and if there was sufficient evidence that one or more clinical actions could be performed to change stroke mortality. |

## **Rulemaking History**

* The Stroke Mortality measure (without NIHSS) was submitted to the MUC list in 2015 and underwent the Measures Application Process (MAP) – please see detailed information within the “Previous Measures” section in the 2024 Stroke Mortality (with NIHSS) MERIT submission.
* The Stroke Mortality measure (without NIHSS) was first proposed and finalized for adoption into the Hospital IQR program in the FY 2014 IPPS Rule.
* The Stroke Mortality measure (with NIHSS) was proposed and finalized for adoption into the Hospital IQR program in the FY 2018 IPPS Rule and replaced the prior version without NIHSS in Hospital IQR in FY 2022.