

Eli's Hospice Insider

Assessment: CMS Steps Back On HEART Testing

Medicare will regroup to address pilot testing concerns before next phase.

It seems as though Medicare officials are following through on their promise to take assessment tool testing slow and steady.

Reminder: In the 2018 final rule for hospice payment, the **Centers for Medicare & Medicaid Services** said it was moving forward with testing of the Hospice Evaluation and Assessment Reporting Tool (HEART).

But now, CMS has announced that it's pumping the brakes on HEART testing. To address concerns raised during the first phase of HEART testing (Pilot A), further phases of testing are delayed, a CMS official said in Medicare's July 11 Open Door Forum for home care and hospice providers. "CMS is working diligently to retool the HEART following the lessons learned from Pilot A," the staffer said.

The delay comes after CMS had promised to take its time with the assessment tool in last year's rule. "Only after completion of a thorough development process over the next several years would CMS consider proposing HEART through rulemaking for implementation in the HQRP," the rule said.

"We believe our tentative development process to be aligned with commenters' recommendations for a thorough and iterative testing approach, allowing ample opportunity for the refinement of HEART prior to implementation."

CMS held a Technical Expert Panel about HEART last November and conducted Pilot A testing in January and February. It had expected to conduct Pilot B testing from June to September 2018, before scheduling a nationwide pilot test (see Eli's Hospice Insider, Vol. 10, No. 12).

Now, CMS is aiming for "significant interaction between CMS and stakeholders, as we want the hospice assessment tool to meet stakeholder needs and be supported by users," it says on the HEART web page. "Our goal is to have a hospice assessment tool that enables providers to use it as part of the plan of care and CMS to calculate quality measures based on the data."

CMS plans to solicit comments from the public by holding Special Open Door Forums. The first is scheduled for September and a second for December. Keep an eye on the HQRP spotlight web page at www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Spotlight.html for more forum details as they approach, the CMS source said in the July 11 forum.

But don't mistake the delay as a signal that CMS is going to give up on the project.

"Hospice is currently the only PAC setting without a CMS-mandated assessment instrument," CMS says on its newly created HEART web page. "While it must be recognized that hospice care differs from other post-acute care (PAC) settings, there is a need to create a comprehensive assessment instrument for hospice care to align with other [PAC] settings, where feasible and practical."

Hospice experts predict that the HEART tool will eventually lead to a case mix payment system for hospice patients, and even Value-Based Purchasing eventually.

You may get some hints about what HEART will ultimately look like from the TEP report about the November meeting.

For example: CMS originally thought to require a HEART reassessment "at short, pre-specified intervals (e.g., every 15 days)," the TEP report indicates. "Both the Clinical Committee and the TEP strongly disagreed" with that idea. "We will

therefore not be pilot testing an interim assessment at a short, pre-specified interval,” CMS concluded in the report.

Other issues raised in the report were minimizing the reporting burden for imminently dying patients, potential data discrepancies between skilled nursing facility and hospice assessments for nursing home residents, and who should complete HEART - an admission nurse, case management nurse, and/or social worker.

Resources: More information, including a link to the TEP report, is at www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/HEART.html.