

Eli's Hospice Insider

Assessment: There's No Rush On HEART, CMS Pledges In Rule

Extensive pilot testing is on the agenda, Medicare says.

If implementing a new, expanded assessment tool sounds like a whole lot of extra work to you, you aren't alone. Many commenters on the 2018 proposed rule for hospice payment told CMS the same thing.

In the final rule, the **Centers for Medicare & Medicaid Services** is "engaging the public" in the development process to minimize the burden of HEART, it says.

For example, HEART contractor **RTI International** just closed a Technical Expert Panel nomination period on Aug. 9. "The purpose of this standing TEP is to explore implementation and content-related topics prior to and concurrent with the pilot testing of this instrument, mindful of the necessary items for potential future quality measures and payment refinements after additional reliability, validity, and national testing has been completed," CMS says on its TEP website. The TEP will focus on the feasibility and usability of the HEART instrument, potential barriers to implementation, and refinement of specific patient assessment domains and items based on pilot testing. After piloting, the TEP will explore future quality measures based on HEART patient assessment items, CMS adds.

And CMS isn't taking the pilot testing lightly, it promises in the rule. The HEART development process will include "conducting small-scale pilot tests ... [and] conducting a larger, national test to establish reliability and validity of items and determine appropriate use of each item, providing ongoing opportunities for input and engagement from the hospice community."

CMS will keep hospices updated on its HEART progress. "Once we move past the preliminary phases of development and conceptualization, we will communicate a timeline for the HEART development, testing, and proposed implementation in future rulemaking cycles," the rule indicates.

The **National Hospice & Palliative Care Organization** is "pleased to see more detail on stakeholder involvement in the development of the Hospice Evaluation and Assessment Reporting Tool," says NHPCO's **Judi Lund Person**.

CMS also vows that "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. 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."

Benefit: When it comes time to put HEART into play, "a longer or phased implementation approach could help facilitate a smooth transition to HEART and minimize burden, allowing ample time for upgrading IT and EMR systems, with minimal disruption of provider workflow and increased quality of data submitted," CMS also says in response to comments.

What's ahead: HEART will support CMS's effort to objectively measure quality of care and services both within hospice and across settings, points out **Kim Skehan** with **Simione Healthcare Consultants** in Hamden, Connecticut. That will lead to more and enhanced quality measures, with the end result likely value-based purchasing in the future, she tells **Eli**.

IMPACT Act Still Matters To Hospices

Don't think you'll duck cross-setting measures just because hospice isn't included in the IMPACT Act that requires them. "HEART is an opportunity to coordinate and harmonize with measure and data elements from other care settings, where applicable," CMS says in the rule. "Although hospice was not a care setting included in the IMPACT Act, we are coordinating within CMS to ensure HEART promotes continuity of care across the post-acute care continuum where



feasible and appropriate."

But: "We assure commenters that we recognize the unique nature of hospice care," CMS pledges. "We will work diligently with the provider community to gather information on current assessment practices in hospice and to ensure that a hospice assessment tool would capture the goals of hospice care and be complementary to current clinical practice."

Stay tuned: CMS will propose the HEART development and timeline specifics in future rulemaking.

Note: More info on the TEP is at

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/TechnicalExpertPanels.html#765 4321.