

## Eli's Hospice Insider

### Hospice News: Mind Your Transitions, Care Levels In Anticipation Of New Quality Measures

**Keep an eye on this development from the 2018 rule.**

Just because CMS didn't officially propose two new HIS measures yet, doesn't mean you should disregard them.

Medicare is thinking about proposing measures on potentially avoidable hospice care transitions and access to levels of hospice care, a **Centers for Medicare & Medicaid Services** staffer pointed out in the agency's May 3 Open Door Forum for hospice and home care providers.

Hospice transitions at end of life "are burdensome to patients, families, and the health care system at large, because they are associated with adverse health outcomes, lower patient and family satisfaction, higher health care costs, and fragmentation of care delivery," CMS notes in the proposed rule for 2018 hospice payment published in the May 3 Federal Register.

The levels of care measure "has the potential to improve access to various levels of care for patients and caregivers," CMS adds in the rule.

"Appropriate use of CHC and GIP increases the likelihood of a hospice patient dying in his or her location of choice, decreases health resource utilization resulting in potential cost savings, and increases patient and caregiver satisfaction."

**Stay tuned:** "These two measure concepts are under development, and details regarding measure definitions, specifications and timeline for implementation will be communicated in future rulemaking," CMS says. "We are soliciting comments regarding high priority concept areas for future measure development."

Instructions for submitting comments by the June 26 deadline are in the rule at [www.gpo.gov/fdsys/pkg/FR-2017-05-03/pdf/2017-08563.pdf](http://www.gpo.gov/fdsys/pkg/FR-2017-05-03/pdf/2017-08563.pdf).