

Eli's Hospice Insider

Quality: Final Rule Features Multiple Quality Provisions

HOPE tool continues testing.

Buckle in for the serious quality repercussions in the short term and reimbursement ones in the long term related to the forthcoming HOPE tool.

The Hospice Outcomes and Patient Evaluation draft "has undergone cognitive, pilot, and alpha testing, and is undergoing national beta field testing to establish reliability, validity, and feasibility of the assessment instrument," the Centers for Medicare & Medicaid Services reports in the 2023 final hospice payment rule released on July 27.

Recap: "HOPE would contribute to the patient's plan of care through patient assessments ongoing throughout the hospice stay," CMS explains in the final rule published in the July 29 Federal Register. "HOPE is intended to support the hospice conditions of participation (CoPs), including hospices' quality assessment and performance improvement (QAPI) programs and provide quality data to calculate outcome and other types of quality measures. Our primary objectives for HOPE are to provide quality data for the HQRP requirements through standardized data collection; support survey and certification processes; and provide additional clinical data that could inform future payment refinements," CMS says.



"We will use field test results to create a final version of HOPE to propose in future rulemaking for national implementation," says CMS, although it fails to include a timeline for that proposal. "We will continue to engage all stakeholders throughout this process that includes a variety of sub-regulatory channels and regular HQRP communication strategies," the rule pledges.

CMS acknowledges comments on the proposed rule expressing concern about the regulatory burden associated with the

HOPE tool. "We are committed to developing and implementing HOPE with a minimum burden to stakeholders," CMS promises.

Other quality-related provisions in the rule include:

- **Future quality measures.** HOPE data could serve as the sole or partial basis for new QMs, CMS indicates.
- **CAHPS survey modes.** CMS is testing web-based and shorter versions of the CAHPS survey and is continuing to analyze the results, it says.
- **CAHPS star ratings.** The star ratings are still on track to debut in the August refresh of Care Compare, the rule reports. That's occurring despite a range of concerns lodged by commenters, including that low response rates for surveys would prevent some hospices from receiving the ratings.
- **4% reduction.** Starting in FY 2024, CMS "will reduce the market basket update by 4 percentage points for any hospice that does not comply with the quality data submission requirements for that fiscal year," the rule reminds. That will be based on quality data submitted in 2022. "Most hospices that fail to meet HQRP requirements do so because they miss the 90 percent threshold" for HIS record submission, CMS offers.
- **Health equity and SDOH.** Unintended consequences and lack of resources were some concerns raised by commenters regarding collection of social determinants of health data for equity purposes, according to the rule. "We will continue to take all comments and suggestions into account as we work to develop policies on this important topic," CMS says.