

Eli's Hospice Insider

Quality: Hospices' Quality Reporting Future Starts To Take Shape

You might want to work on your pain management strategies first.

Required quality reporting for hospices begins in the fourth quarter this year, but the **Centers for Medicare & Medicaid Services** already is making plans for the next steps in the process.

Background: More than 900 hospices submitted voluntary quality data on their QAPI programs for the fourth quarter of 2011, noted CMS's **Robin Dowell** in the May 23 Open Door Forum for home health and hospice providers. Hospices reported whether they had a QAPI program that included three or more quality indicators related to patient care, and then listed those indicators.

Now CMS's hospice quality data contractor **RTI** has analyzed all that submitted data in a new report. Hospices submitted more than 6,700 indicators that RTI grouped under 35 topics.

"The topic Pain Assessment or Management had the largest number of QAPI indicators reported (1,225)," which was 86 percent of the total indicators reported, RTI says in the report. The vast majority of the pain indicators (797) "were related to control or improvement of pain," according to the report. Other top-ranking indicators were infection tracking, prevention and other procedures at 46 percent; communication with patient/family (including the hospice's responsiveness after hours and on weekends) at 35 percent; and family satisfaction with care at 31 percent.

The popularity of these submitted topics might give hospices a clue about which topics CMS will take up for mandatory reporting later in the program, experts offer.

For the next round: RTI has some suggestions for making the upcoming reporting less burdensome for hospices. "We recommend a simplified web-based data collection that eliminates free text entry," the report says. "Instead, we recommend that hospices be provided with a data entry system that allows them to choose and 'check off' patient care related domains and topic areas within those domains for which they have an indicator in their QAPI programs during the look-back period."

NQF Focuses On Clinical Items First

Meanwhile, the **National Quality Forum** has issued a detailed report to go along with the 14 hospice and palliative care measures it endorsed earlier this year. CMS has indicated it is considering the NQF-endorsed measures for inclusion in future hospice quality data reporting (see Eli's HCW, Vol. XXI, No. 14, p. 106).

NQF's Measures Application Partnership group "suggests a phased approach that emphasizes clinically-focused measures at first, but quickly expands to more measures that follow the patient and their full set of experiences rather than the setting or fragments of a patient's care," the report says. Important measures to capture include access and availability of care; patient-centered care; and care coordination.

Many of the measures that should be used are not even being collected at this point, the MAP group points out. "Significant measure gaps will need to be addressed to provide a comprehensive picture of quality for hospice and palliative care," it says.

Note: A link to RTI's report is online at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Spotlight.html> -- scroll down to the "Downloads" section. A link to NQF's report is at www.qualityforum.org/map -- scroll down to the "Recent MAP Reports" section.

