

Eli's Hospice Insider

Quality: Watch For Your Stats On 'Visits When Death Imminent' Measure

Plus: Tune in for a HEART update.

Medicare appears to be on track for a May public debut of a controversial new quality measure.

Medicare will be "rolling out" information about the new Hospice Visits when Death is Imminent quality measure "in coming weeks," a **Centers for Medicare & Medicaid Services** official said in the agency's Feb. 13 Open Door Forum for home care and hospice providers.

In the January forum, CMS said the two-part measure would be in hospices' Hospice Compare preview reports in March, with the measure going on display on the website in May.

You can get the specs for the measure in the updated version of the Hospice Quality Reporting Program Quality Measure User's Manual, which CMS posted Jan. 14. "The measure specifications for Hospice Visits when Death is Imminent Measure 1 and Measure 2 are included in this new version."

A link to download the manual is in the "Downloads" box at the bottom of www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Current-Measures.html.

Other hospice topics addressed in the forum include:

HEART. If you're wondering what's going on with the long-in-progress hospice assessment tool, you'll soon get a chance to find out. CMS is holding a March 13 special Open Door Forum on the Hospice Evaluation and Assessment Reporting Tool, a CMS official said in the forum.

Reminder: In a forum last September, the agency said that "HEART might consider future payment refinements as a secondary goal, but this is not planned at this time." CMS indicated it would have quarterly forums on HEART ongoing.

HQRP. Are you living up to the current 90-percent standard for compliance with Hospice Item Set implementation? If not, it will affect your 2021 payment rates, a CMS representative said in the forum. Hospices are currently in the first quarter of data reporting for 2019.

Review: Back in its 2016 final payment rule for hospices, CMS set HIS threshold levels. In calendar year 2016, hospices had to submit 70 percent of their HIS records on time to achieve a full Annual Payment Update for fiscal year 2018. That climbed to 80 percent in CY 2017 for FY 2019, and 90 percent in CY 2018 for FY 2020. Hospices that failed to achieve those thresholds - determined at submission rates 30 days after admission or discharge - got docked 2 percent in their APU.

January 2019 starts the cycle over again, this time influencing FY 2021 rates. Don't forget there are no exemptions for size, a CMS official reminded forum attendees.

CAHPS. Hospices also must comply with the Consumer Assessment of Healthcare Providers and Systems portion of the Hospice Quality Reporting Program requirement to qualify for a full percentage update in 2021, a CMS staffer reminded attendees. Hospices' approved vendors must submit CAHPS satisfaction survey data to the CAHPS Hospice Survey Data Warehouse on a continuous monthly basis to be in compliance.

The size exemption form for CAHPS 2019 data collection is now posted at www.hospicecahpsurvey.org. "Don't wait, get it done," a CMS source urged in the agency's January forum. And hold onto the confirmation email you receive in response, she advised.