

Eli's Hospice Insider

Regulations: Keep An Eye On Medicare Carve-In Developments

Plus: Stay on top of your HIS submission rate, or risk your pay rate update.

If you're nervous about Medicare's upcoming Value-Based Insurance Design model and its potential hospice inclusion, a recent study may validate those worries.

The **Centers for Medicare & Medicaid Services** will hold a webinar going over the VBID model, which will include hospice and related services, in the next few weeks, said a CMS staffer in the Jan. 8 Open Door Forum for home health and hospice providers (see more details about the model, p. 11).

Including hospice in MA plan coverage is the "next step," the CMS source said, noting that the "main goal" is a "seamless continuum of care." Medicare has "received significant interest" in the model, she added.

But hospice stakeholders worry that hospice care under MA plans might turn out similar to home care - lower quality, at least according to a recent. JAMA Network Open study of more than 4 million home health agency admissions. The study found that "Medicare Advantage beneficiaries were significantly less likely than traditional Medicare beneficiaries to receive treatment from high-quality home health agencies." Relative to traditional Medicare beneficiaries, the rate of receiving high-quality HHA care was 4.9 percentage points lower for those enrolled in "low-quality Medicare Advantage plans" and 2.8 percentage points lower for those in high-quality MA plans, said the study published last September.

Study author **Margot Schwartz**, a researcher at **Brown University** in Providence, Rhode Island, told Reuters that more MA members may end up with low-quality HHAs because of "limited networks" of available agencies.

Some higher-quality agencies may opt not to participate in MA plans because of low reimbursement rates, said study author **Momotazur Rahman**, also at Brown. "Payment rates by Medicare Advantage plans to home health agencies are much lower compared to traditional Medicare payment rates," Rahman told the news service.

The study findings are concerning, especially considering MA's increasing market share. The proportion of Medicare beneficiaries enrolled in Medicare Advantage increased from 13 percent in 2004 to 33 percent in 2017, according to the study at https://jamanetwork.com/journals/jamanet workopen/fullarticle/2749236.

Live Up To 90% HIS Benchmark

The forum also addressed quality data requirements. Don't forget that in 2020, you must submit at least 90 percent of your Hospice Item Set records on time (within 30 days of the patient's admission or discharge date) to receive a full payment update in 2022, a CMS staffer reminded forum attendees.

And you need to submit CAHPS survey data on a monthly basis, via your vendor, to receive a full update. A vendor must submit your data for you, unless you file and qualify for a size-based exemption.