

Centers for Medicare & Medicaid Services
Home Health, Hospice and DME Open Door Forum
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Webinar recording:

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Jill Darling: Hello, everyone. Welcome to our Home Health Hospice and DME Open Door Forum. We're going to give a few more moments until more folks come in. We appreciate your patience. Thank you.

All right, everyone. Mike, will you please hit record.

Great. Thank you so much. Hi, everyone. Welcome, good morning, and good afternoon. My name is Jill Darling, and I am in the CMS Office of Communications. Welcome to today's Home Health, Hospice and DME Open Door Forum. We appreciate your patience. It allows us to give some time in to get folks in and make sure we have everyone. So, again, thank you for your patience. Before we begin, I have a few announcements. This webinar is being recorded, as you saw the recorded message or heard it. The recording and transcript will be available on the CMS Open Door Forum podcast and transcript web page. Excuse me. Give us about two weeks or so to get it up. That link is on the agenda. If you're a member of the press, you may listen in but please refrain from asking questions during the webinar. If you do have any questions, please email press@cms.hhs.gov.

All participants are muted. For those who need closed captioning, a link was provided from our Zoom moderator in the chat function of the webinar. We will be taking questions at the end of the agenda today. For today's webinar, there are no slides except for the agenda slide you see on your screen. You may use the raised hand feature at the bottom of your screen, and we will call on you to ask your question and one follow-up question, and we'll do our best to get to all of the questions today within our time frame. So, we will jump right into our agenda. So first up, we have Jermama Keys.

Jermama Keys: Thanks, Jill, and good afternoon, everyone. I am going to be updating you guys for the Hospice Quality Reporting Program, or HQRP, and thanks again for joining us for this Open Door Forum. First, I would like to discuss a new HQRP resource page. CMS responds to many requests to update the demographics for hospices based on what they see in Care Compare. This could include telephone numbers, addresses, and profit status. In order to assist hospices with these updates, we have designed a new page for the HQRP website so that this process is easier to find. The new page outlines the steps necessary to change or correct the demographic data that appears on the website. We hope you will inform your hospice providers of the availability of this new resource. Keep in mind that any changes or corrections to demographic information do not happen in real time and can take up to six months to appear on Care Compare.

Next, I would like to discuss public reporting. The next Care Compare refresh will take place this November 2023. The Provider Preview Reports for November were issued in August, and

providers had about 30 days to review their quality, measure results in CASPER, prior to the November refresh. The November refresh is when this data will be publicly displayed, and although the actual preview period is 30 days, the reports will continue to be available for another 30, for a total of 60 days, and CMS encourages providers to download and save their Hospice Provider Preview Reports for future reference as they will no longer be available in CASPER after that 60-day period.

Finally, we have a public engagement announcement to share. The hospice outreach email is available as of September the 18th, 2023. And this quarterly update contains updates for the hospice community. The next HQRP forum is scheduled for November the 14th of 2023. Registration information will be available in late October or early November, and we would like for you to keep an eye on the HQRP website for further details. And with that, I will move on to home health, or the Home Health QRP updates. Home health—we would first like to share an OASIS update. CMS will be posting an updated version of the OASIS-E Guidance Manual and static QAs later this fall. The plan update will incorporate guidance from the July 2022 through October 2023 CMS quarterly OASIS Q&As into the manual and the CMS OASIS Q&As. No revisions to the OASIS-E instrument are being made at this time, but please monitor the spotlight and announcement page for notifications of the posting of the updated resource.

Next, we have a public reporting update. The next Care Compare refresh for Home Health QRP will take place this October 2023. The Preview Reports related to the October 2023 refresh were available July 17 through August 16 of 2023. The October refresh will add a new claim-based measure for public reporting, the Potentially Preventable Hospitalizations, or PPH, and it will remove an OASIS measure from the public reporting—Drug Education on All Medications Provided to Patient and Caregiver. CMS has also created a new Health Equity Confidential Feedback Report for home health. These reports are scheduled to be released this October, and we would like you to also keep an eye out on the HHQRP website for additional information. Finally, we would like to discuss some updated resources for the HHQRP. The October 2023 quarterly OASIS QAs will be posted on the QTSO website a little later this month. So please look out for the spotlight and announcement for further information about those Q&As. And there's also a new BIMS (Brief Interview for Mental Status) tutorial and video on understanding coding for the N0415, which is now available on the Home Health QRP training web page. And that will end my updates for Home Health and Hospice QRPs. I will now pass it back to Jill just to make sure that we have —

Jill Darling: Yes. Now we have Beth signing up. Hi, Beth, are you there?

Beth Simon: Hi. Yes. Thank you.

Jill Darling: Beth, you are providing the Home Health CAHPS (Consumer Assessment of Healthcare Providers and Systems) update?

Beth Simon: I am. Thank you.

Jill Darling: Okay. You may begin your update.

Beth Simon: Thank you. This is Beth Simon, and I'm presenting on behalf of Lori Gloria today. We posted the October 2023 issue of the HHCAHPS (Home Health CAHPS) Survey Coordination Team Quarterly Review Newsletter on the HHCAHPS website on October 2. The October 2023 newsletter includes tips to reduce survey burden and how to increase response rates, how HHAs (Home Health Agencies) can provide quality patient data files to their HHCAHPS survey vendors, and a spotlight on the care of patients composite. This is one of the three publicly reported HHCAHPS composite measures. The HHCAHPS newsletters from previous quarters are also available on the website. All vendors are required to sign up for annual vendor training that will be in January 2024. Stay tuned for information on registration for the intro and update training sessions beginning November 1, 2023. The next date of submission deadline for HHCAHPS survey data is next week on October 19 for the April 2023 through June 2023 sample month. HHAs should routinely check their vendor data submission reports under the four HHAs tab on the HHCAHPS website. If you are an HHA not yet participating in the HHCAHPS survey, now is the time to sign up.

Please contact the HHCAHPS Survey Coordination Team for assistance. As always, if you have any technical assistance questions, including how to start participating in the HHCAHPS survey, or if you need help switching to a different HHCAHPS survey vendor, please email the HHCAHPS coordination team at HHCAHPS@RTI.org or call toll-free at 866-354-0985. We encourage you to contact the HHCAHPS coordination team with any questions about the survey. Thank you.

Jill Darling: Great. Thank you, Beth. And next we have Emily Richmond.

Emily Richmond: Good afternoon. Can you hear me okay?

Jill Darling: Yes. We can.

Emily Richmond: Hi, my name is Emily Richmond, and I work on the Review Choice Demonstration (RCD) for Home Health Services in the Division of Payment Methods and Strategies within the Center for Program Integrity. Today, I'm going to be talking to you about our plan expansion on the Review Choice Demonstration for Home Health Services into the state of Oklahoma. The Review Choice Demonstration for Home Health Services will expand into Oklahoma starting on December 1, 2023, in addition to the existing demonstration states of Illinois, Ohio, Texas, North Carolina, and Florida. The choice selection period for Oklahoma will begin on October 16, 2023, and will remain open until November 15, 2023. Home health providers in Oklahoma can select from pre-claim review, post payment review, or a minimal post payment review with a 25% payment reduction, which means 100% of those claims have a 25% payment reduction. December 21, 2023, is the date the Oklahoma providers will begin submitting their pre-claim review requests and all home health episodes of care beginning on or after December 1 will be subject to the requirements of the review choice selected. For additional information on the choice selection process, frequently asked questions, or to review our operational guide, please visit our website at go.cms.gov/homehealthRCD. And if you have specific questions for the home health team, or would like to request additional information, please contact us via email at homehealthRCD@cms.hhs.gov. Thank you for attending today, and I will send it back to you Jill.

Jill Darling: Great. Thank you, Emily. And last, we have Marcie O'Reilly.

Marcie O'Reilly: Hey, Good day. I'm Marcie O'Reilly, the Coordinator for the Expanded Home Health Value-Based Purchasing (HHVBP) Model, joining you today to provide some reminders and updates related to the model. The second Interim Performance Report, or IPR, which will be published in iQIES later this month. As a reminder, the IPRs use the most current 12 months of data, thus the OASIS data for the October IPR is from July 1, 2022, through June 30 of 2023, and the claims and HHCAHPS data are from April 1, 2022, through March 31, 2023. We encourage the many HHAs that did not access their July IPR to do so, and all HHAs to access each quarterly report including the upcoming October IPR. To help HHAs better understand this report, we hosted a webinar on July 27 providing an overview of the data and information available in the IPR. Please note—only CCNs (CMS Certification Numbers) with a Medicare certification date prior to January 1st of 2022 received a July 2023 IPR. If you missed the webinar, you may access the slides, recording, and the questions and answers on the model's web page. Additionally, an e-blast went out yesterday announcing our next HHVBP specific webinar entitled “Expanded HHVBP Model Preparing for Calendar Year 2024 and Calendar Year 2025.” This is scheduled for 2:00 p.m. to 3:00 p.m. Eastern Time on November 9. I will be adding the registration link to the chat here shortly. Also, please look out for the October newsletter that will be published on October 27, and this will include descriptions and links to new and/or updated resources for the model. And if you're not receiving emails from CMS about the expanded HHVBP Model, please go to our web page and join our listserv. The link is near the bottom of the web page. Also, for your convenience, I will be adding as soon as I'm done talking—to the chat—the links to the model's web page and email addresses for the model's helpdesk as well as the iQIES helpdesk. These links are also included within today's agenda that was included in the appointment. Thank you and have a great rest of your day, and I'll now hand it back to Jill.

Jill Darling: Thank you, Marcy. And thank you to all of our speakers. We will now go into the Q&A. Reminder, to ask a question, please use the raised hand feature at the bottom and have your question and one follow-up question. When you are able to ask your question, please unmute from your end. The Zoom moderator will unmute from his end and then please do so on your end. So, we'll give it one moment. Thank you.

Tyler Shrive: Hello. Can you hear me?

Jill Darling: Yes, we can. Go ahead.

Tyler Shrive: Thanks. My name is Tyler Shrive. I'm with Enhabit Home Health and Hospice. I have a question related to the Review Choice Demonstration in Oklahoma. My question is, has there been any outreach to referral sources, such as physician offices, since this is a fairly new demonstration in the state of Oklahoma?

Jessica Czulewicz: Hi, Tyler. This is Jessica with the Home Health Review Choice Demonstration. And we are currently working with OPOLE (Office of Program Operations and Local Engagement) as well as our MAC (Medicare Administrative Contractor), Palmetto, to

make sure we get outreach to the Home Health and Home Care Associations—make sure that the word is getting out. Does that answer your question?

Tyler Shrive: A little bit. But specifically, I'm asking about physician offices—our referral sources, the ones that will have to go—our agencies and other agencies in Oklahoma will have to go back and forth with to get documentation and a face-to-face visit.

Jessica Czulewicz: At this moment, I am not 100% sure about your question. So, I would like to take that back and I can connect with you over email if that would be fine?

Tyler Shrive: Yeah. That works. I'll send an email to the RCD.

Jessica Czulewicz: Yes, please. That would be great.

Tyler Shrive: Thanks, Jessica.

Jessica Czulewicz: Thank you so much, Tyler.

Andrew Degraaf: Hi, can you hear me?

Jill Darling: Yes, go ahead.

Andrew Degraaf: Andrew Degraaf, Quality Assurance Specialist with Covenant Visiting Nurse Association. Could somebody please post the link to the demographic update for the Hospice QRP information?

Jermama Keys: Sure. I'll send it. You'll be able to see it in the chat.

Andrew Degraaf: Thank you.

Jill Darling: Ernest Roy, you may ask your question.

Ernest Roy: Yes. Ernest Roy, Quality Director at Pemi-Baker Hospice and Home Health. Are there any updates for the HOPE project pertaining to hospice that we should expect to see in the next few weeks?

Jermama Keys: Hi, Ernest. Nothing that you would expect to see in the upcoming weeks. But if there is going to be any tentative update or new updates, just look for that information on the spotlight and announcements pages for the QRP.

Jill Darling: Hey, Jennifer, go ahead.

Jennifer Thiessen: Good afternoon. This is Jennifer. I am with Avera@Home in Quality, and my question is regarding Home Health Value-Based Purchasing. I'm wondering how and when agencies can expect to be communicated with on our final total performance score and ranking

and the percent of rate adjustment. When can we expect that information, and what do you anticipate the platform for communication will be?

Marcie O'Reilly: Hi, Jennifer. The annual report, which will include that information, is scheduled for August of 2024. At that time, you'll have an opportunity to review the data and ask questions, request a recalculation if need be. And then the final report will come out so that we meet the regulatory guideline that we tell you what your final percentage adjustment is 30 days before the performance year of 2025. Again, just to—as a reminder, if there are recalculation requests and we find that something does need to be recalculated, it could potentially affect everybody's scores, and that's why you don't see the absolute final until after the whole appeals process goes through. But your first glimpse of it will be in August of 2024.

Jennifer Thiessen: Very good. Thank you so much.

Jill Darling: Go ahead, Frantz.

Frantz Excellent: Good afternoon. My name is Frantz T. Excellent, and I am the Director of Operations for Partners in Care at Home in Havertown, Pennsylvania. This is my first time here on the CMS webinar, and I have a question that unfortunately is sort of unrelated to all the topics that we covered, but it's important. We are in the process of our CHAPS (*CAHPS*) certification, and we're going through the necessary procedures and so forth in order for us to make sure that we're certified. But I just wanted to be able to get an idea as to what are the procedures that CMS required? Uh, from the beginning of the process to the end, towards the certification. If I could get a better understanding of what CMS requires, also as what CHAPS (*CAHPS*) also require. Can I get somebody to either email me or contact me and let me know? Please?

Jermama Keys: Is this for Home Health CAHPS?

Frantz Excellent: Yes.

Jermama Keys: Okay. If you could provide what you're requesting in an email either to the CAHPS email or to the ODF email, that would help us immensely. That way we can get someone to kind of open that correspondence up to you.

Frantz Excellent: Okay. You said the CAHPS or ODS email.

Jermama Keys: The CAHPS email or ODF email.

Frantz Excellent: ODF. Okay. All right. Thank you.

Jill Darling: Go ahead, Paul.

Paul O'Donnell: Hello. Paul O'Donnell here. I was curious about the states that are currently in the Review Choice Demonstration and the end date of May 31 of 2024. I was curious if there's a timeline for knowing when and if the program would be extended past that date.

Jessica Czulewicz: Hi, Paul. Thank you so much for your question. At this time, we have the demonstration set to end in May of 2024, but CMS is currently working internally to determine if the demonstration will be extended past that May expiration date, and we will definitely provide ample notice. But at this point, that's about the best answer I can give.

Paul O'Donnell: Thank you.

Jessica Czulewicz: Of course.

Jill Darling: Go ahead, Patricia. Please unmute yourself, Patricia. Okay. We will come back. Mike, can you get the next question, please? Chris, you may ask your question.

Chris Lasley: I'm with the Quality and Compliance team in Kaiser, Washington, and I believe in the time frame of about two to three years ago, it was announced that for hospice HIS (Hospice Item Set) submissions, it would be moving from the QIES system to the iQIES system. And then there's been no communication since. So, I'm just curious if there's any updates about timeline, if that's still in the works and being planned, and if so, when might that happen?

Jermama Keys: Chris, that transition is still scheduled to happen. I unfortunately do not know the specific time frame at this time. But if you stay tuned in to the QRP pages, updates and information will be coming to let providers know when that shift will be happening.

Chris Lasley: Thank you.

Jill Darling: Sheila, you may ask your question.

Sheila Clark: Yes, thank you. I have a question—excuse me. Are there any updates for hospices regarding—excuse me—adding MFTs (marriage and family therapists) or MHCs (mental health counselors) for Calendar Year 2024?

Sheila Clark: Can you hear me?

Jill Darling: Yes.

Mary Rossi-Coajou: Yes, this is Mary Rossi-Coajou. The final rule for this will be out in early November. So, just watch for the Physician's Fee Schedule final rule, which will be published around November 1, or at least displayed around November 1.

Sheila Clark: Okay, and that will give the hospices the direction, because we know by reading the FAQ that the MFTs and MHCs will have to enroll in the system, but at the same time, the rule if it becomes effective January 1, what's the time frame for hospices to have this discipline in either an employee or a contract employee? Will that final rule address that?

Mary Rossi-Coajou: The final rule will address the effective date of January 1, yes.

Sheila Clark: Okay. So as these MFTs and MHCs enroll with CMS Medicare, then hospices will find out who the host of folks that are enrolled and contract or employ them, correct?

Mary Rossi-Coajou: Yeah. Again, the final rule will describe more of that, but you can always—once November 1 comes around, and we'll be glad to assist you in any way.

Sheila Clark: Fantastic. Thank you.

Mary Rossi-Coajou: Sure.

Jill Darling: Chris, go ahead.

Chris Lasley: Sorry. I didn't get my hand lowered. My question is already answered. Thank you.

Jill Darling: Thank you. Vicky? Vicky, please unmute yourself.

Vicky Saleeby: Can you hear me?

Jill Darling: Yes. Go ahead.

Vicky Saleeby: Can you hear me?

Jill Darling: Yes. Go ahead. We'll come back to Vicky. Or Vicky, you can get back in the queue. Go ahead, Cheryl. Please unmute yourself.

Cheryl Moya: I'm sorry. I didn't know I had my hand up. I apologize.

Jill Darling: Okay. No problem. We'll take our next—Farida.

Farida Chettfour: Hi, good morning. My name is Farida, and I'm calling from NorthBay Healthcare in California and my question is regarding the Value-Based Insurance Design, and how often is that list updated so that we can check if any payor in our community enroll? Thank you.

Marcie O'Reilly: Farida, are you asking about the Value-Based Purchasing Model or the VBID Model?

Farida Chettfour: VBID.

Marcie O'Reilly: I don't think anybody has—

Brian Slater: Yeah. I don't think we have anyone on this call. If you could send that in to the ODF mailbox, we can triage that accordingly.

Farida Chettfour: Thank you.

Brian Slater: Thank you.

Jill Darling: Carolyn?

Carolyn Dean: Yes. Good afternoon. Can you hear me?

Jill Darling: Yes, we can.

Carolyn Dean: Perfect. So, I'm Carolyn Dean from Matrix Care Home Health and Hospice, and my question is in regard to the hospice provision in the hospice Fiscal Year 2024 rule that would require certifying physicians to be enrolled in Medicare or validly opted out. There was mention that CMS would be posting a transmittal with implementation instructions specifically with the technical details for updating the ORDF, which is the database for notifying providers and vendors of those hospice physicians that are enrolled. And I'm wondering if CMS has an idea as to when that transmittal will be made available?

Brian Slater: Yeah. Unfortunately, we don't have anyone from that area. This is a CPI proposal that was in the rule. If you want to do what I instructed the last person to do, just email the ODF mailbox. We can send it over to the CPI folks in charge of the enrollment.

Carolyn Dean: Okay. Perfect. Thank you.

Brian Slater: Uh-huh.

Jill Darling: All right. At this time, I don't see any more hands raised. But we'll give it a couple more seconds if anyone has any questions. All right. Well, as always, we appreciate you all joining us. A reminder—so along with the transcript, we do provide the Q&A document. So, all questions asked on Open Door Forum calls, we get those posted. If there were unanswered questions, which there were on this call, we will get those answers for you, and it will be posted in the Q&A document along with the transcript. So, like I mentioned, give us about two weeks or so to get it posted and it will be on the CMS podcast and transcript web page. Again, thank you for joining us. If you do have any more questions, please feel free to email the ODF email and I'm going to send it in the chat for you all. And we will talk with you next time. So, thanks everyone. This concludes today's call.