

Home Health Quality of Patient Care Star Ratings Update

January 19, 2017





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Acronyms in this Presentation

- ACH: Acute Care Hospitalization
- ED: Emergency Department
- HHA: Home Health Agency
- HHC: Home Health Compare
- HHCAHPS: Home Health Consumer Assessment of Healthcare Providers and Systems
- OASIS: Outcome and Assessment Information Set
- QoPC: Quality of Patient Care

Agenda

- Introduction & Purpose
- Overview of current Quality of Patient Care (QoPC) Star Rating methodology
- Changes under consideration and supporting analyses
- Next steps and timelines
- Questions and comments

Introduction & Purpose

- A few words from CMS
- Considering two changes to QoPC Star Ratings based on stakeholder and Technical Expert Panel (TEP) feedback
 - Remove measure: Influenza Immunization Received for Current Flu Season (based on assessment data from the Outcome and Assessment Information Set [OASIS])
 - Add measure: Emergency Department (ED) Use without Hospitalization (claims-based)

Some Background: The Home Health Setting

- Over 12,000 home health agencies (HHAs)
 - 23 quality measures on Home Health Compare.
 - 7 OASIS-based process measures
 - 7 OASIS-based outcome measures
 - 4 Claims-based utilization measures
 - 5 HHCAHPS-based measures
- Separate star ratings for Quality of Patient Care and Patient Experience (based on survey data from Home Health Consumer Assessment of Healthcare Providers and Systems [HHCAHPS])
- Methodologies differ for existing star ratings programs: Nursing Home Compare, Physician Compare, Dialysis Facility Compare and Hospital Compare

Measure Criteria Used for QoPC Star Rating

- Original development included selecting a subset of the non-survey measures reported on Home Health Compare (HHC) in late 2014
- Criteria for selecting measures:
 - The measure applies to substantial proportion of home health patients, and has sufficient data to report for a majority of agencies
 - The measure shows reasonable amount of variation among agencies, and it is possible for agencies to show improvement
 - The measure has high face validity and clinical relevance
 - The measure is stable with respect to random variation over time

Measures Selected for QoPC Star Rating

- 10 measures initially selected; after stakeholder feedback 9 measures used in the final star ratings
- HHAs must be able to report 5 of the 9 measures to have a Star Rating computed

Measure Type	9 Total Measures
Process (not risk adjusted)	1. Timely Initiation of Care
	2. Drug Education on all Medications Provided to Patient/Caregiver
	3. Influenza Immunization Received for Current Flu Season
Outcome (risk adjusted)	4. Improvement in Ambulation
	5. Improvement in Bed Transferring
	6. Improvement in Bathing
	7. Improvement in Pain Interfering With Activity
	8. Improvement in Dyspnea
	9. Acute care hospitalization (claims-based)



Review of Methodology

- 1. For each of the 9 measures, rank all agencies based on score and assign into 10 equally sized groups (deciles).
- Adjust (or not adjust) the HHA's initial individual measure to help distinguish scores that are different from the national median using a statistical test
- 3. For each agency, average the adjusted ratings across all measures (at least five needed) and round to the nearest 0.5
- 4. Assign ratings from 1 to 5 in half star increments
- 5. Refer to methodology document for more detail: httml



QoPC Star Rating Data Availability Timeline

- Preview reports first provided to HHAs on April 2015 and results first displayed on HHC in July 2015
 - HHC displays data that are 6 months lagged for OASIS and 9 months for claims
 - Preview reports available to HHAs are one quarter in advance of ratings display (i.e., 3 months lagged for OASIS and 6 months lagged for claims)
- January 2017 HHC refresh:
 - OASIS data from July 1, 2015 to June 30, 2016
 - Claims data from April 1, 2015 to March 31, 2016
- 8 quarters of QoPC Star Rating data currently completed

Stakeholder Input and Monitoring

Prior to April 2015 roll-out:

- CCSQ held a conference call for major stakeholders before public announcement
- Methodology presented at Special Open Door Forums on 12/17/14 and 2/2/2015; updated based on feedback

• Since April 2015 roll-out:

- Ongoing quarterly monitoring: stability, national median values, reportability by HHAs
- Two-day in-person TEP on May 2-3, 2016; follow-up webinar on September 20, 2016:
 - Representatives from providers, consumers and researchers
 - Summaries publically available: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-instruments/HomeHealthQualityInits/HHQIHomeHealthStarRatings.html
- E-mail boxes for questions:
 - HomeHealthQualityQuestions@cms.hhs.gov



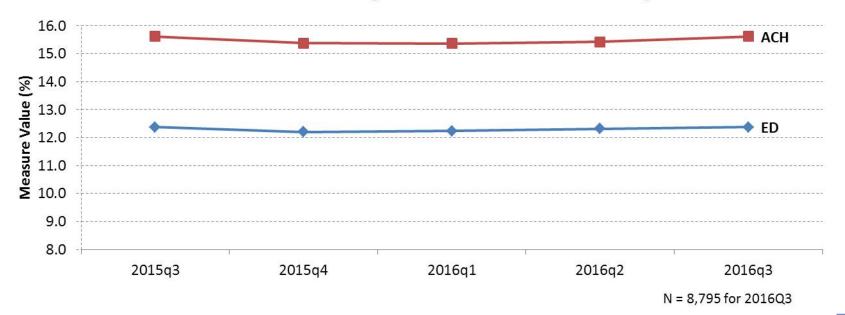
Rationale for Measure Changes under Consideration

- Remove Influenza Immunization Received for Current Flu Season (OASIS-based measure)
 - Influenced by factors outside the HHA's control that may vary by state
 - Will continue to report on HHC to continue to encourage vaccination
- Add ED Use without Hospitalization (claims-based measure)
 - Rewards agencies that are successful in lowering ED use among their patients.
 - QoPC Star Rating would better reflect quality with this measure included

Emergency Department Use without Hospitalization

- Numerator: # home health stays where patient had an outpatient ED and no hospitalization in the 60 days following the start of the stay
- Denominator: # home health stays in the 12-month observation period
 - Computed using Medicare FFS claims and is risk-adjusted

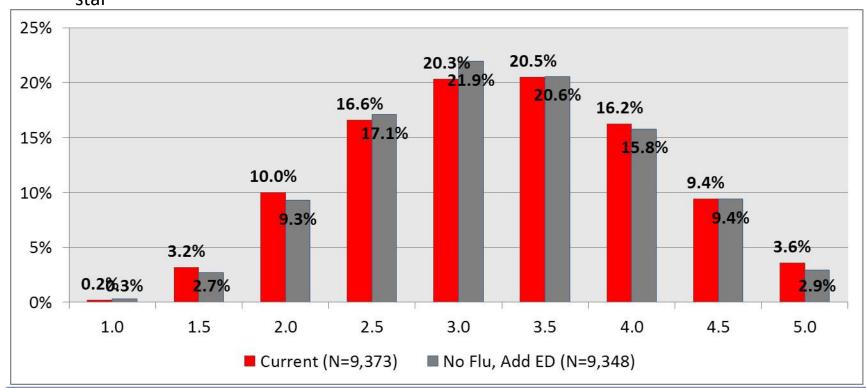
HHA National Averages for HHAs with QoPC Star Rating



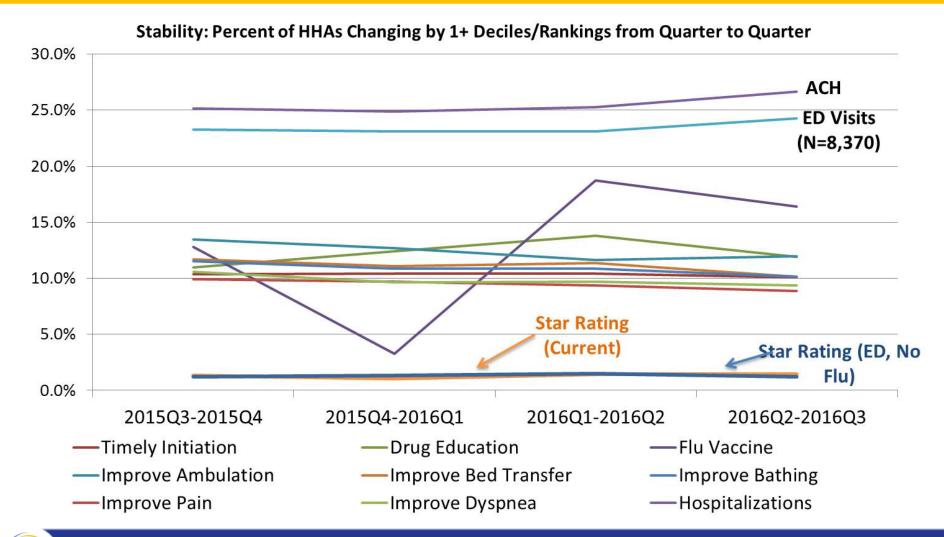


QoPC Star Rating Simulation: Add ED Measure, Remove Flu Vaccine Measure

- Decreases number of HHAs with available QoPC Star Ratings by 25 HHAs
- Average QoPC Star Rating stays the same (~3.24 stars)
 - 67% of HHAs have the same rating; 17.5% increase by half a star; 15.8% decrease by half a star



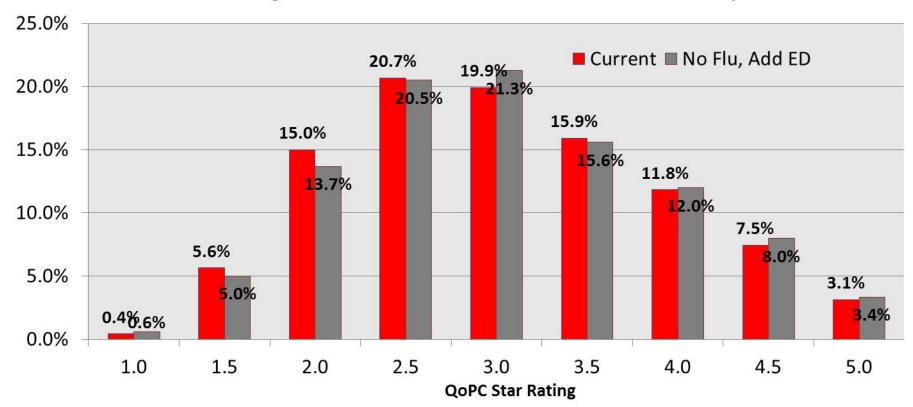
Simulated QoPC Star Ratings are Stable Over Time





Higher QoPC Star Ratings for "Small" HHAs Compared to Current

QoPC Star Rating Distribution for HHAs with Fewer Than 250 Episodes

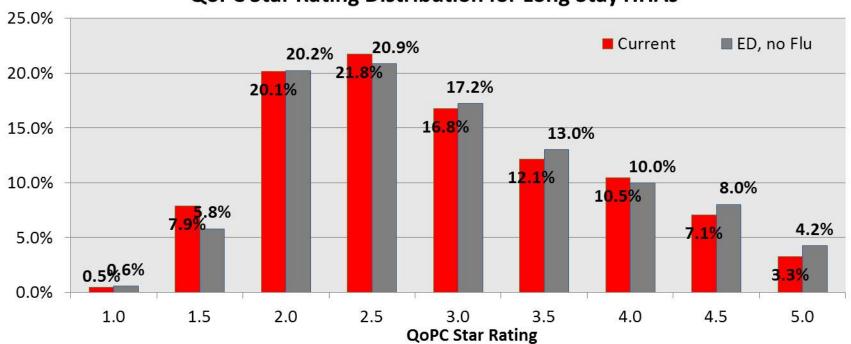


4,388 HHAs with fewer than 250 episodes per year; average QoPC Star Rating: 3.06 (with ED) versus 3.03 (current)



Higher QoPC Star Ratings for "Long Stay" HHAs Compared to Current

QoPC Star Rating Distribution for Long Stay HHAs



- Long stay HHAs are defined as those with greater than 40 percent (75th percentile) of episodes longer than 90 days
- 2,071 long stay HHAs; average QoPC Star Rating: 2.97 (with ED) versus 2.90 (current)



Next Steps

- Accepting comments from 1/20 2/20/2017;
 - Comments to: <u>HH_QM_Comment@abtassoc.com</u>
- Open Door Forum: March 17, 2017
- If these changes are made:
 - Finalize methodology and post on Home Health Star Ratings web page
 - April 2017 preview reports could contain updated QoPC Star Ratings
- Ongoing monitoring

Questions and Comments

- Further reading and FAQs:
- http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/HHQIHomeHealthStarRatings.html
- Questions about HHC QoPC Star Ratings send email to:
 <u>HomeHealthQualityQuestions@cms.hhs.gov</u> Comments on proposed changes send email to:

 <u>HH QM Comment@abtassoc.com</u>
- Home Health Compare: http://www.medicare.gov/homehealthcompare

Question & Answer Session



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