

April 27, 2017 1:30 – 3:00 p.m. ET







Charles Padgett, RN Division of Chronic and Post-Acute Care, CMS



Objectives

- Upon completion of the training, participants will be able to:
 - Explain the hospice information that will be publicly reported in 2017.
 - Describe the Hospice Quality Reporting Program (HQRP) Preview reports and the information they contain.
 - Explain how to locate the new Hospice Preview reports.



Objectives

- Explain what to do if they identify an error in their report.
- Identify resources to help providers navigate the Hospice Provider Preview reports and public reporting.



HQRP Requirements

- Currently, there are two requirements for the HQRP:
 - Hospice Item Set (HIS).
 - Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey.
- All Medicare-certified hospice providers must comply with these two reporting requirements.



Requirements to Make Hospice Quality Data Publicly Available

- The Affordable Care Act requires that:
 - The Secretary (and by proxy CMS) is to report Quality Measures (QMs) that relate to hospice care provided by hospice programs on a CMS website.
- The Hospice Compare website will include:
 - HIS QM results.
 - Results of the CAHPS Hospice Survey*.
- CMS anticipates that public reporting will begin in summer of 2017 with the launch of the new Hospice Compare site.

^{*}CAHPS Hospice Survey data will not be displayed on Hospice Compare initially, but will display during a subsequent Hospice Compare refresh, following the inaugural release in summer 2017. Please see the FY 2018 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Requirements proposed rule for additional information.



Public Reporting of Hospice Quality Data

- A CMS Hospice Compare website, which will provide valuable information regarding the quality delivered by Medicare-certified hospice agencies throughout the Nation, is currently in development.
- Consumers will be able to search for:
 - All Medicare-certified hospice providers based on provider name and/or service area
 - Provider quality information:
 - HIS QM results.
 - CAHPS Hospice Survey results.



Public Reporting of HIS Quality Data

- Individual scores for each of the seven assessmentbased QMs will be publicly available.
- Hospices with a QM denominator size of fewer than 20 patient stays (based on 12 rolling months of data) will not have the QM score publicly displayed, since a score on the basis of small denominator size may not be reliable.
- CMS will continue to monitor QM performance and reportability and will adjust public reporting methodology in the future, if needed.



Public Reporting of HIS Quality Data

The seven HIS QMs to be publicly reported on Hospice Compare as of summer 2017:

- 1. Treatment Preferences (NQF #1641)
- 2. Beliefs/Values Addressed (If Desired by the Patient) (modified NQF #1647)
- 3. Pain Screening (NQF #1634)
- 4. Pain Assessment (NQF #1637)
- 5. Dyspnea Screening (NQF #1639)
- 6. Dyspnea Treatment (NQF #1638)
- 7. Patient Treated with an Opioid who are Given a Bowel Regimen (NQF #1617)

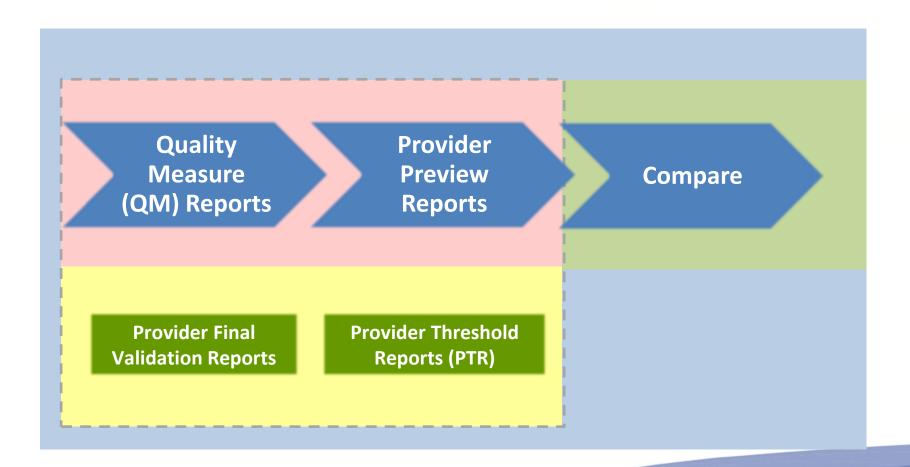


Requirements to Make Hospice Quality Data Publicly Available

- The Affordable Care Act requires that:
 - The Secretary to ensure that a hospice provider has the opportunity to preview quality data that is to be made public prior to such data being made public.
 - In order to meet the above requirement, CMS has developed Hospice Provider Preview reports, which display quality data for each hospice provider, as it will appear on the Hospice Compare site.



Hospice QRP Reports





- Contain hospice-level quality measure data.
- These are automatically generated and saved into your provider's shared folder in the CASPER application.
- Provider Preview Reports are available approximately 8 months after the end of each data collection period (based on 12 rolling months of data).



- Once the Preview Reports are generated, data are frozen for the upcoming Hospice Compare refresh. Hospices can still submit HIS modification and inactivation records up to 36 months after the target date. The data will be reflected in future Preview reports and Hospice Compare refreshes.
- CMS will announce when Preview reports are available for viewing by providers in their shared folder in the CASPER application.
- Provider Preview Reports will be available approximately 8 months after the end of each data collection period (based on 12 rolling months of data). For example, the HIS data selection period to be publicly reported this summer will include data for patient stays discharged during Quarter 4- 2015 to Quarter 3-2016. The last month in Quarter 3-2016 is September. Therefore, Preview reports will be available June 1, 2017 -8 months after September 2016.



- Providers will have 30 days to review their Hospice Provider Preview reports.
- The preview period will begin the day the reports are issued to providers via their CASPER system folders.



Hospice Report Specifications:

- Report Run Date: 06/01/17
- Reporting Period for Hospice Item Set (HIS) quality measures: Patient Stays Discharged October 1, 2015 through September 30, 2016



Hospice Provider Information:

- CMS Certification Number: 999999
- Hospice Facility ID #: THR01
- Facility Name: Sample Hospice Agency
- Street Address Line 1: 1111 West Pine Avenue
- Street Address Line 2: Suite 101
- City: Waltham
- State: MA
- ZIP Code: 02452
- County Name: Middlesex
- Telephone Number: (781) 555-555
- Type of Ownership: Non-profit
- Date of Medicare Certification: 01/01/2000



HIS Quality Measures Included in Preview report that will be released on 6/1/17:

- NQF #1641 Treatment Preferences
- NQF #1647 Beliefs/Values
- NQF #1634 Pain Screening
- NQF #1637 Pain Assessment
- NQF #1639 Dyspnea Screening
- NQF #1638 Dyspnea Treatment
- NQF #1617 Bowel Regimen



Quality Measure Information:

- Header identifies data source as assessment-based quality measure (HIS).
- CMS Measure ID
- Quality Measure Name
- Number of Eligible Patient Stays in the Denominator
- Your Hospice's Observed Percent
- National Rate



Report Run Date: 06/01/2017

Hospice Provider Preview Report

Reporting Period for HIS Quality Measures: Patient Stays Discharged October 1, 2015 through September 30, 2016

CMS Certification Number: 999999 Hospice Facility ID: THR01

Hospice Name: Hospice of Ohio Street Address Line 1: 1111 West Pine Avenue

Street Address Line 2: Suite 101

City:

State:

02452 ZIP Code:

County Name: Middlesex Telephone Number: (781) 555-5555

Type of Ownership: Non-profit Medicare Certification Date: 99/99/9999

HIS QUALITY MEASURES

CMS Measure ID: H001.01

Treatment Preferences (NQF #1641) Hospice Quality Measure:

- Number of Eligible Patient Stays in the Denominator: - Your Hospice's Observed Percent: 50.2%

- National Rate: 75.2%

Waltham

MA

CMS Measure ID: H002.01

Hospice Quality Measure: Beliefs/Values (NQF #1647)

- Number of Eligible Patient Stays in the Denominator:

- Your Hospice's Observed Percent: 25.3%

- National Rate: 50.2%

FOOTNOTE LEGEND

- a. The number of patient stays is too small to report (less than 20 patient stays).
- b. Data not available for this reporting period.
- c. Data suppressed by CMS upon request from the agency.
- d. Data not submitted for this reporting period.
- e. Results are based on a shorter time period than required.

IMPORTANT NOTES

- Please review the data about your agency. If you request CMS review of your data, please follow the procedures that can be found at
- https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-Quality-Public-Reporting.html The order of the measure(s) may not represent the order displayed on Hospice Compare.
- The titles of the measure(s) are not the consumer language titles that appear on the Hospice Compare website.
- The numbering of the footnotes on this preview report is different from the footnotes displayed on the Hospice Compare website.



Hospice Preview Reports

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- The order of the measure(s) may not represent the order displayed on Hospice Compare.
- The titles of the measure(s) are not the consumer language titles that appear on the Hospice Compare website.
- The numbering of the footnotes on this preview report is different from the footnotes displayed on the Hospice Compare website.



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- CMS encourages hospices to review their data as provided in the Preview reports.
- If a hospice disagrees with performance data (denominator, or quality metric) contained within their Preview report, they will have an opportunity to request review of that data by CMS.
- Providers will not have the opportunity to correct underlying data in the Preview Report because the data has been frozen for the upcoming Hospice Compare refresh (See slide 12 for additional detail).



- All requests for CMS review of data must be made during the 30-day preview period.
- Hospices are required to submit their request to CMS via email with the subject line: "[Provider/Facility Name] Hospice Public Reporting Request for Review of Data," and include the Hospice CMS Certification Number (CCN) (e.g., Saint Mary's Hospice Public Reporting Request for Review of Data, XXXXXXX). The request must be sent to the following email address: HospicePRquestions@cms.hhs.gov

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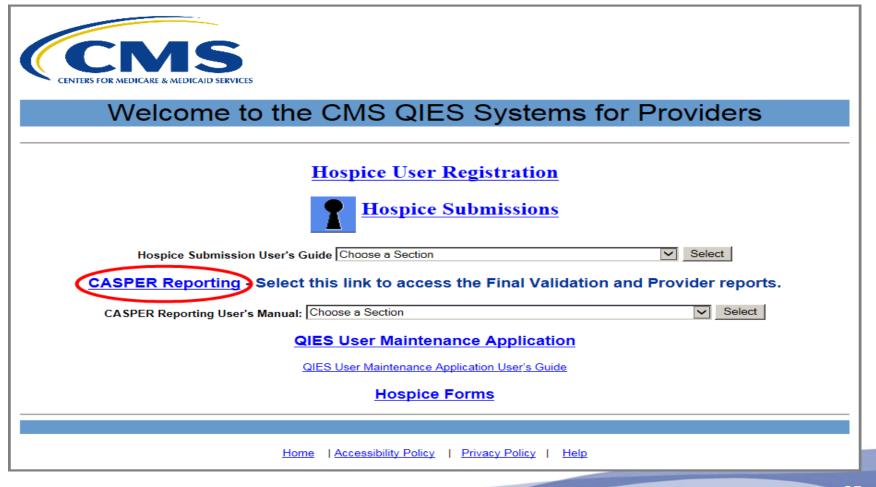
The email request must include the following information. Submitted requests missing any of the following information will delay CMS's review of data:

- CMS Certification Number (CCN).
- Hospice Business Name.
- Hospice Business Address.
- CEO or CEO-designated representative contact information including: name, email address, telephone number, and physical mailing address.
- Information supporting the provider's belief that the data contained within the Hospice's Preview Report is erroneous including, but not limited to, the following:
 - Quality measures affected, and aspects of quality measures affected (denominator, quality metric).



- CMS will review all requests and provide a response with a decision via email.
- Data that CMS agrees is incorrect will be suppressed for one quarter, and corrected data will be reflected in the subsequent quarterly release of quality data on Hospice Compare.
- CMS will not review any email requests for review of data that include protected health information (PHI)
- When the preview reports are ready for providers to access CMS will post the policies and procedures for providers to submit requests for reviewing of their data by CMS on the CMS HQRP website:
 https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-Quality-Public-Reporting.html

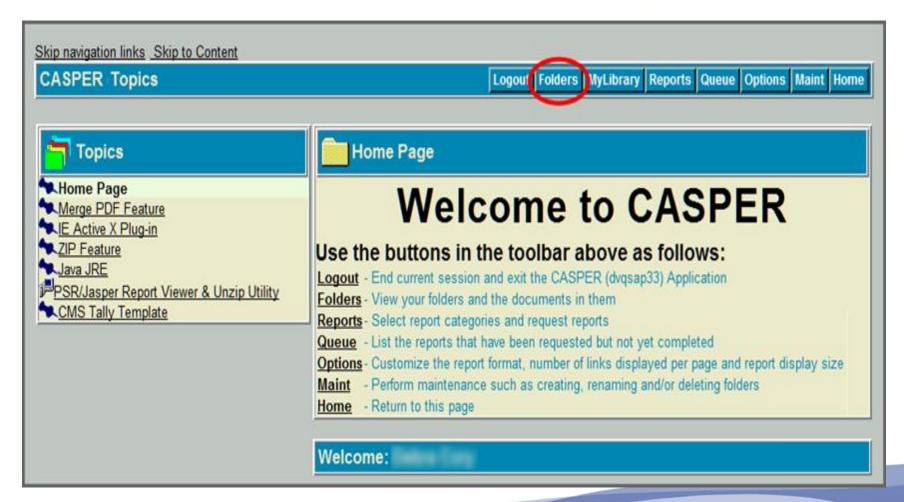




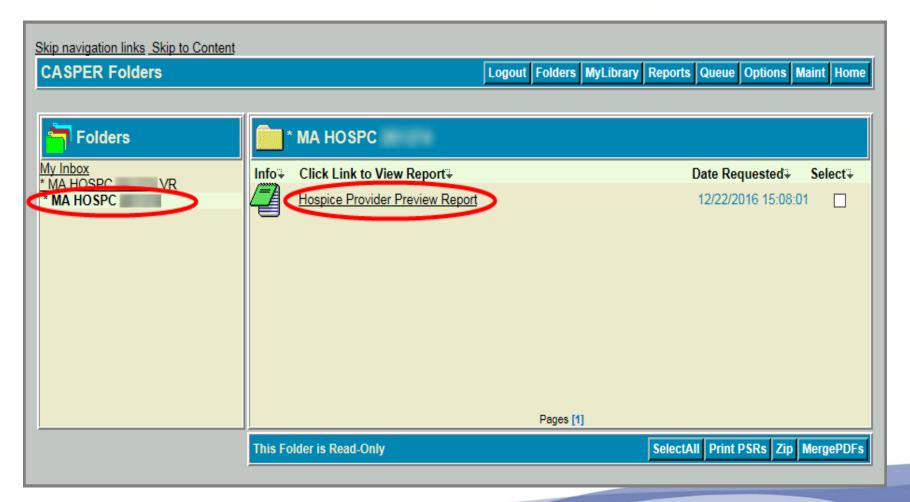


Welcome to CASPER Reporting	
Please enter your User ID and Password	
User ID:	
Password: Login	
Unable to login?	
Go to the QIES User Maintenance application to reset your User ID/Password.	
to reset your oser ib/rassword.	











- CASPER Reporting Hospice Provider User's Guide: provides information and instructions pertaining to the Quality Improvement and Evaluation System (QIES) hospice systems to users who submit and/or manage hospice patient data records. It is primarily a reference and learning tool for the QIES Assessment Submission And Processing (ASAP) Hospice Item Set (HIS) submission system.
 - https://www.qtso.com/hospicetrain.html
- QIES Technical Support Office (QTSO) Help Desk: Used for questions related to the HART tool, QIES ASAP, or other technical assistance information, including error messages or record rejections.
 - help@qtso.com
 - 1-877-201-4721



- HIS Technical Information portion of the CMS HQRP website:
 This HIS Technical Information web page provides updates and resources related to HIS data submission specifications and other technical information.
 - https://www.cms.gov/medicare/quality-initiatives-patientassessment-instruments/hospice-quality-reporting/his-technicalinformation.html
- Quality Help Desk: Providers can email the Quality Help Desk if they have general questions about the Hospice Quality Reporting Program (HQRP) including, but not limited to: which hospices are required to report, general questions about reporting requirements, questions about quality measures, and reporting deadlines.
 - HospiceQualityQuestions@cms.hhs.gov



- Getting Started With Hospice CASPER Quality Measure Reports: contains information about the two new CASPER Quality Measure (QM) reports available to hospice providers beginning December 18, 2016. Additionally, this fact sheet includes one potential model hospices could employ to use the QM reports for quality improvement.
 - https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Downloads/Fact-Sheet_CASPER-QM-Reports.pdf
- Hospice (QRP) Quick Reference Guide: contains tips, frequently asked questions, and helpful links.
 - https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Downloads/Hospice-QRP-Quick-Reference-Guide-February-2017.pdf



- CMS Hospice Public Reporting Helpdesk:
 Providers can email this helpdesk if they have general questions about the Hospice public reporting including, but not limited to: Hospice Compare, Hospice preview reports (access and interpretation), quality measure calculations, public reporting refresh schedules.
 - HospicePRquestions@cms.hhs.gov
- CMS PAC QRP Listserv: Subscribe for program information including but not limited to training, stakeholder engagement opportunities, general updates about reporting requirements, quality measures, and reporting deadlines.
 - http://tinyurl.com/PACQuality



Questions?

cmsqualityteam@ketchum.com