



CMS HOSPICE FORUM

Hospice IDR and SFP Updates

November 14, 2023



DISCLAIMER

This presentation was current at the time it was published or uploaded on to the web (November 2023). Medicare policy is subject to change, so links to the program web pages have been provided as supplemental resources for your reference.

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AGENDA

- Calendar Year (CY) 2024 Home Health Prospective Payment System Final Rule
- Hospice Informal Dispute Resolution updates
- Hospice Special Focus Program updates
- Resources
- Q&A



ACRONYMS IN THIS PRESENTATION

- **CAHPS®** – Consumer Assessment of Healthcare Providers and Systems
- **CLD** – Condition Level Deficiency
- **CMS** – Centers for Medicare & Medicaid Services
- **CoPs** – Conditions of Participation
- **HCI** – Hospice Care Index
- **HQRP** – Hospice Quality Reporting Program
- **IDR** – Informal Dispute Resolution
- **IJ** – Immediate Jeopardy
- **SFP** – Special Focus Program



CY 2024 HOME HEALTH PROSPECTIVE PAYMENT SYSTEM (HH PPS) FINAL RULE



CY 2024 HOME HEALTH FINAL RULE: PUBLICATION

- The CY 2024 Home Health Prospective Payment System (HH PPS) Changes and Rate Update and Home Health Quality Program-Related Requirements Final Rule was displayed in the Federal Register on November 1, 2023.
- The final rule can be accessed on the Federal Register's webpage at: <https://www.federalregister.gov/public-inspection/2023-24455/medicare-program-calendar-year-2024-home-health-prospective-payment-system-rate-update-quality>.
- The final rule is also available on CMS' Hospice Regulations and Notices webpage.

The screenshot shows the CMS.gov website with the following elements:

- Header: CMS.gov Centers for Medicare & Medicaid Services. Navigation links: About CMS, Newsroom, Data & Research.
- Secondary Navigation: Medicare, Medicaid/CHIP, Marketplace & Private Insurance, Priorities, Training & Education.
- Breadcrumb: Medicare > Payment > Prospective Payment Systems > Hospice > Hospice Regulations and Notices.
- Section: Hospice Regulations and Notices. Description: This list includes proposed and final regulations and notices about Medicare Hospice Payment.
- Controls: Show Entries (10 per page), Filter On.
- Table: Showing 1 - 10 of 46 entries. Columns: Regulation No., Title, Display Date, Publication Date.



RULE OVERVIEW: HOSPICE UPDATES

- Finalized hospice Informal Dispute Resolution (IDR).
- Finalized the Hospice Special Focus Program (SFP), including:
 - Selection into the SFP,
 - Survey and enforcement,
 - SFP completion,
 - Termination, and
 - Public reporting of SFP status.



HOSPICE INFORMAL DISPUTE RESOLUTION




IDR OVERVIEW

- IDR provides the opportunity to settle disagreements before a formal hearing or appeals process.
- Hospices may dispute condition-level findings.
 - Does not apply to standard-level findings.




IDR PROCESS

Hospices that receive Condition Level Deficiencies (CLDs) are notified in writing that they have the right to request an IDR.



Hospices must submit a request for IDR within the 10 calendar days allowed for submitting a plan of correction.



If the state or CMS removes/revises any of the findings, they will update Form CMS-2567 and revise related enforcement actions, as necessary.

HOSPICE SPECIAL FOCUS PROGRAM (SFP)

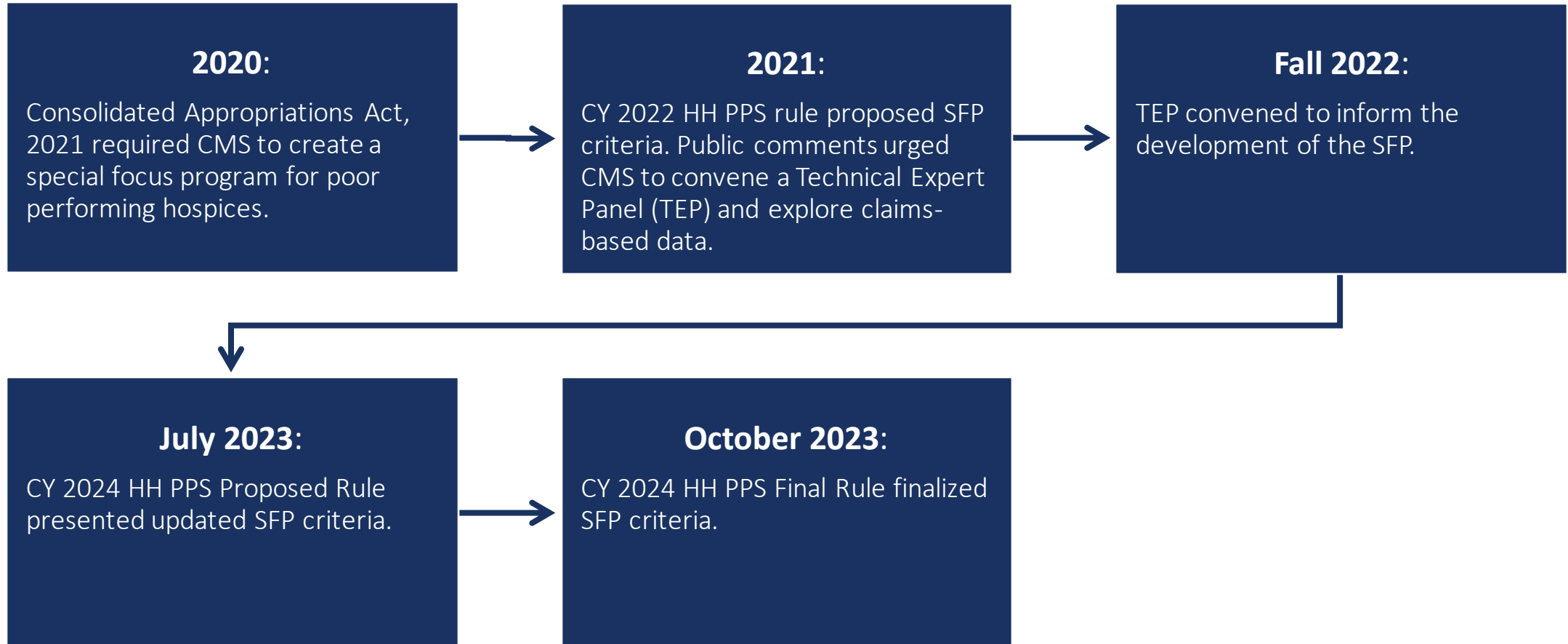


SFP OVERVIEW

- The SFP was created to address poor-performing hospices through increased regulatory oversight.
- Hospices are identified as potential SFP candidates via an algorithm that uses elements of Hospice Quality Reporting Program (HQRP) and survey data.
- Once hospices are selected for the program, they are surveyed more frequently until they complete the program.
- Hospices that do not improve are considered for termination from Medicare.



SFP BACKGROUND



SFP ELIGIBILITY

Hospices are eligible for potential SFP selection if they fit the following requirements:

1. Are listed as an active provider, and
2. Have a score based on data from:
 - CLDs for a standard survey,
 - Substantiated complaints,
 - Hospice Care Index (HCI), or
 - Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey.



SFP ALGORITHM DATA SOURCES

An algorithm that combines multiple data points determines hospice participation in the SFP:

- Standard surveys,
- Substantiated complaints,
- HCI score, and
- Selected elements of CAHPS[®] Hospice Survey.



SFP ALGORITHM DATA SOURCES: STANDARD SURVEYS WITH CLDS

- Represents findings from in-person hospice surveys.
- Uses three previous years of surveys.
- The algorithm uses the 11 Conditions of Participation (CoPs) identified as directly related to quality of care, as reflected in the [State Operations Manual Appendix M](#).
 - See slide #17 for the 11 CoPs.



11 QUALITY OF CARE CLDS (ALGORITHM INDICATORS)

Tag	Condition of Participation
§418.52	Condition of participation: Patient's rights.
§418.54	Condition of participation: Initial and comprehensive assessment of the patient.
§418.56	Condition of participation: Interdisciplinary group, care planning, and coordination of services.
§418.58	Condition of participation: Quality assessment and performance improvement.
§418.60	Condition of participation: Infection control.
§418.64	Condition of participation: Core services.
§418.76	Condition of participation: Hospice aide and homemaker services.
§418.102	Condition of participation: Medical director.
§418.108	Condition of participation: Short-term inpatient care.
§418.110	Condition of participation: Hospices that provide inpatient care directly.
§418.112	Condition of participation: Hospices that provide hospice care to residents of a SNF/NF or ICF/IID.



SFP ALGORITHM DATA SOURCES: SUBSTANTIATED COMPLAINTS

- The total number of substantiated complaints for each hospice.
- Uses three previous years of complaint and follow-up surveys.



SFP ALGORITHM DATA SOURCES: HOSPICE CARE INDEX (HCI)

- Represents care throughout the hospice stay.
- Based on Medicare claims data.
- The algorithm uses the HCI score which represents all 10 HCI indicators.



SFP ALGORITHM DATA SOURCES: CAHPS[®] HOSPICE SURVEY

- Represents the family and caregiver experience.
- The algorithm uses four CAHPS[®] hospice survey measures most relevant to hospice quality:
 1. Help for Pain and Symptoms,
 2. Getting Timely Help,
 3. Willing to Recommend the Hospice, and
 4. Overall Rating of the Hospice.



SFP ALGORITHM: STANDARDIZATION

- Inputs from each data source must be standardized to make measures with different scales comparable.
 - CLDs and substantiated complaints do not have a maximum score, while HCI and CAHPS hospice survey have set maximum scores (e.g., 10 for HCI).
 - Leaving these inputs unstandardized would allow CLDs and substantiated complaints to have a disproportionately large impact on the final score.
- The most common standardization method is applied:

$$\frac{\textit{observed value} - \textit{average value}}{\textit{standard deviation}}$$



SFP ALGORITHM: APPROACH TO HCI AND SURVEY MISSINGNESS

- A robust majority of hospices have HCI scores.
- Hospices that are small, new, or have fewer than 20 claims over eight quarters are excluded from the public reporting of HCI.
- Hospices that are missing HCI or survey data are assigned a value of zero for the missing indicator after standardization.
 - This means they are assigned the average value of all hospices for that indicator.



SFP ALGORITHM: APPROACH TO CAHPS HOSPICE SURVEY MISSINGNESS

- Roughly half of hospices are exempt from publicly reporting CAHPS Hospice Survey data because they are new or are too small. To account for this, there are two versions of the algorithm:
 1. Hospices that do not have CAHPS hospice survey scores are evaluated only on CLDs, substantiated complaints and HCI.
 2. Hospices that do report CAHPS hospice survey are evaluated on the remaining data sources.
- Each version of the algorithm divides the score by the total number of inputs so that scores are comparable across all hospices.
- This approach avoids making assumptions about the values of CAHPS hospice survey data for hospices that do not report it.



SFP ALGORITHM: WEIGHTING

- Data sources are weighted according to their relative importance for hospice quality.
- CAHPS hospice survey is weighted twice as heavily as the other data sources to acknowledge the special importance of patient and caregiver experience and feedback.
- Once weights are applied, each hospice is given a final score.



SFP ALGORITHM

For hospices that DO report CAHPS hospice survey:

$$CLDs\ input + Complaints\ input - HCI + 2(CAHPS\ index) = \frac{Score}{5}$$

For hospices that DO NOT report CAHPS hospice survey:

$$CLDs\ input + Complaints\ input - HCI = \frac{Score}{3}$$



SFP SELECTION

- CMS will select hospices for the SFP from hospices with the highest algorithm scores.
 - The higher scores represent hospices with poorer care quality.
- The number of hospices in the SFP will be determined in the first quarter of each calendar year.
- Hospices with deemed status that are placed in the SFP are placed under CMS or SA oversight for the duration of their time in the SFP.



SFP PUBLIC REPORTING

- Hospices selected for SFP will be publicly reported at least on an annual basis on the SFP website.
- The website will include:
 - Information on the SFP,
 - Program guidance,
 - Hospices with the highest algorithm scores (poorest performers),
 - SFP selection list, and
 - Updates on SFP status after selection (in progress, completed successfully, or terminated from the Medicare program).



SFP SURVEY AND ENFORCEMENT

- SFP hospices will be surveyed at least every six months.
- SFP hospices are subject to established, progressive enforcement remedies as appropriate.
- CMS will use its discretion to determine what remedies are most appropriate based on survey results.



SFP COMPLETION CRITERIA

- To complete the SFP, hospices must:
 - Have no uncorrected CLDs or unresolved Immediate Jeopardies (IJ) (returned to substantial compliance) for any two SFP surveys or complaints while in the program, and
 - The official completion date is when a hospice receives its letter from CMS.
- Hospices will receive a survey one year following SFP completion, which starts a new standard, 36-month survey cycle.



TERMINATION FROM MEDICARE

- SFP hospices unable to meet the completion criteria are placed on the termination track.
- Providers are considered for termination if they fail any one SFP or complaint survey by having uncorrected CLDs (not returning to substantial compliance) while in the program.



NEXT STEPS



NEXT STEPS

- SFP selection is expected to begin in late CY 2024.
- IDR is active as of January 1, 2024.
- CMS will continue to monitor the SFP and make changes, as necessary, through future rulemaking.



RESOURCES

- Hospice Special Focus Program webpage:
<https://www.cms.gov/medicare/health-safety-standards/certification-compliance/hospice-special-focus-program>.
- Hospice QRP Announcements & Spotlight webpage:
<https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/hospice-quality-reporting/spotlight>.
- Provider & Stakeholder Engagement webpage:
<https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/hospice-quality-reporting/hospice-qrp-provider-engagement-opportunities>.
- Inquiries about the SFP can be sent to CMS_HospiceSFP@cms.hhs.gov.



Q&A SESSION

- To ask a question, please submit your question through the Q&A box.
- Audio questions will not be accepted during this webinar. All questions must be submitted through the Q&A box.
- CMS will address as many questions as time allows.



THANK YOU

