

#### HOME HEALTH QUALITY REPORTING PROGRAM (HH QRP)



# COVID-19 Public Reporting Tip Sheet

## This third edition of the HH QRP Public Reporting (PR) Tip Sheet:

Provides an update for reporting of the claims-based quality measures (QMs) and defines the quarters of claims data that will be displayed on Care Compare and the Provider Data Catalog (PDC) until the normal annual refresh using the specified eight consecutive quarters of data occurs.

To understand the background of the HH QRP in relation to the COVID-19 Public Health Emergency (PHE), please refer to the Second Edition HH COVID-19 PR Tip Sheet published in February 2022. This previous tip sheet provided information about CMS' plan to adjust public reporting due to the Calendar Year (CY) 2020 COVID-19 excepted data.

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#### QUALITY REPORTS

The temporary exceptions to the HH data submission requirements, which ended on June 30, 2020, were a result of the COVID-19 PHE. The resumption of public reporting on Care Compare for the Outcome Assessment Information Set (OASIS) Assessment-Based QMs with the January 2022 refresh cycle was explained. In addition, the plan for the resumption of public reporting for claims-based QMs during the July 2022 refresh was outlined. For information on all of the current HH measures, please refer to the HH Quality Measures web page.

## Public Reporting and Care Compare

#### CMS' Approach to Excepted Data

The CY 2020 COVID-19 excepted data is still impacting what is displayed on Care Compare. CMS resumed public reporting on Care Compare and the PDC beginning with the January 2022 refresh. This refresh included the OASIS assessment-based QMs only.

For claims-based measures, CMS made the decision to delay public reporting by 6 months to allow more time to analyze the calculation of these measures and the effect of the excepted data on certain aspects of measure calculation, such as look-back periods and risk adjustment. CMS resumed the public reporting of claims-based QMs with fewer quarters of data in the July 2022 refresh. Because of this recent refresh,

### **Document Terms**

CY 2020 COVID-19 Exempted Data: Refers to exempted quarters of data (Q1 and Q2 2020) due to the COVID-19 PHE.

Normal Refresh: Refers to updates on Care Compare using the standard number of consecutive quarters of data.

CMS will not perform the normal annual update in October 2022, as the data will not change enough to be meaningful. CMS will next update these data during the October 2023 refresh, after which CMS will resume the normal cadence of annual updates.



#### When did or will refreshes return to their expected ("normal") quarters of data?

- April 2022 refresh:
  - OASIS assessment-based QMs normalized using four consecutive quarters of data.
- July 2022 refresh:
  - Normal refresh of OASIS assessment-based and HH Consumer Assessment of Healthcare Providers and Systems (CAHPS<sup>®</sup>) QMs.
  - Reporting of claims-based QMs resumes using fewer quarters of data:
    - Acute Care Hospitalization During the First 60 days of Home Health (ACH) and Emergency Department (ED) Use Without Hospitalization During the First 60 Days of Home Health: Using three quarters of data.
    - Discharge to Community (DTC), Potentially Preventable 30-Day Post-Discharge Readmission (PPR), Medicare Spending per Beneficiary (MSPB): Using six quarters of data.
- October 2022 refresh:
  - Normal refresh of both OASIS assessment-based and HH CAHPS® QMs.
    - No update of claims-based data due to recent refresh in July 2022.
- October 2023 refresh:
  - Normal refresh of OASIS assessment-based and HH CAHPS® QMs.
  - Some claims-based QMs will still be using fewer quarters of data:
    - ACH, ED Use: Will normalize, using four consecutive quarters of data.
    - DTC, PPR, MSPB: Will still be using six quarters of data.
- October 2024 refresh:
  - Normal display of OASIS assessment-based and HH CAHPS® QMs.
  - All claims-based QMs will normalize, using eight consecutive quarters of data.

**Table 1** below provides a summary of data refreshes for OASIS assessment-based, claims-based, and HHCAHPS® QMs.

#### **Table 1. Summary of Data Refreshes**

Quarter Refresh	OASIS Assessment- Based Measures	Claims-Based Measure ACH, ED Use, DTC, MSPB, PPR	HH CAHPS <sup>®</sup> Measures
July 2022	Normal refresh	Reporting resumes, all QMs using fewer quarters of data	Normal refresh
October 2022	Normal refresh	No update of claims-based data	Normal refresh
October 2023	Normal refresh	Annual update, with some QMs using fewer quarters of data	Normal refresh
October 2024	Normal refresh	Normal reporting resumes for all claims-based data using eight consecutive quarters of data	Normal refresh

## **Provider Reports**

- Provider Preview Report (PPR): The purpose of the PPR is to give providers the opportunity to preview their OASIS and claims-based QMs, and their HH CAHPS<sup>®</sup> survey results prior to public display on Care Compare and the PDC.
  - What data and public reporting release does the July 13, 2022 PPR reflect?

The PPR of July 13, 2022, contained provider performance scores for QMs that will be published on Care Compare and the PDC in the October 2022 release. These scores were calculated using OASIS assessment-based quality data submitted by HH Agencies for the standard number of quarters.

Claims-based measures data will not be refreshed for this release. The HH QRP claims-based measures will next be refreshed for the October 2023 public reporting refresh of Care Compare and the PDC.

- Review and Correct (R&C) Report: The purpose of the R&C report is for providers to have access to QM data prior to the data correction deadline for public reporting. It includes data from the most current quarter and data from the previous three quarters. The report notes which quarters of data are "open" for correction and which are "closed," no longer allowing correction.
- **HH QM Reports:** These reports give providers confidential feedback on the agency's performance and include both OASIS assessment-based and claims-based measures. The agency-level reports include OASIS and claims-based QMs and have two reporting periods—current and prior—to allow comparison of agency performance between the two periods. Patient-level reports only include OASIS QM data. Agencies can run these reports for any reporting period of their choice, and they can include a full year of data if requested.

## Resources

- First Edition HH QRP COVID-19 PR Tip Sheet.
- <u>Second Edition HH QRP PR Tip Sheet</u>.
- FY 2022 Hospice and HH Final Rule (CMS-1745-F) Fact Sheet.
- FY 2022 Hospice and HH Final Rule.
- CMS Medicare Learning Network Memo released March 27, 2020.
- Program Guidance and Information about the CMS response to COVID-19.
- HH QRP Spotlight & Announcements Webpage for Program Guidance, Updates, and Announcements.
- Information about the HH QRP.
- <u>HH QRP Data Submission Deadlines</u>.

### Home Health Quality Help Desk:

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