Publicly Reported Hospice Characteristics based on Public Use File Data Fact Sheet

As part of broader efforts to ensure the safety and quality of hospice care, the CMS Hospice Quality Reporting Program (HQRP) expanded the portfolio of data used to publicly report hospice-specific information for consumers. Since 2019, the HQRP publicly reports characteristics describing Medicare hospice organizations and their patients using Post-Acute Care and Hospice Utilization and Payment Public Use File (PUF) data. In 2020, CMS updated the display of these characteristics and in 2021 began reporting two additional characteristics based on the PUF. This Fact Sheet provides information about the PUF-based characteristics publicly reported by the HQRP.

Summary

CMS publicly reports data from the Post-Acute Care and Hospice PUF to complement quality and patient experience measures. The data describe the characteristics of Medicare-certified hospice organizations and their patients in a user-friendly format. The characteristics include:

- The number of patients cared for by a hospice on average each day (average daily census);
- Levels of hospice care provided;
- Conditions treated;¹
- Locations where care was provided;² and
- The type of Medicare patient served (Medicare Advantage and patients with both Medicaid and Medicare coverage).

These characteristics capture information that many consumers seek during the hospice selection process and can therefore help them make informed decisions using publicly available information. Following the initial release in May 2019, CMS implemented several ways to enhance the utility of the PUF information for consumers in April 2020 and began publicly reporting two additional characteristics based on the PUF in May 2021. Stakeholders can find these publicly reported PUF-based characteristics on the <u>Care Compare</u> website.

Background on the Public Use File data

CMS publishes the PUF annually on its website. It contains 100% of Medicare enrollment and fee-for-service final claims data. The Post-Acute Care PUF begins with Calendar Year 2017, and replaces the legacy Hospice PUF, which includes data for the calendar years 2014, 2015, and 2016. Post-Acute Care and Hospice PUF files, methodology, and frequently asked questions are

¹ A patient will only be counted in one of the six diagnostic categories, depending on which primary diagnosis the beneficiary received for the most hospice care days.

² Location of service is based on where the patients received the most hospice care days.

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available at: <u>https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/PAC_Hospice</u>. As stated in the PAC and Hospice PUF <u>Methodology</u>, caution should be used when comparing metrics reported in the stand-alone PUFs with the current iteration of the Post-Acute Care PUF, as metric names and definitions may have changed slightly to allow for consistent calculations across settings.

CMS observed that these files were extensively downloaded, often for research; however, they were not in a user-friendly format, and did not support provider selection by consumers. As part of CMS's ongoing efforts to make publicly reported data more informative for beneficiaries, caregivers, loved ones, and their families, CMS finalized a proposal in the FY 2019 Hospice Wage Index Final Rule (83 FR 38622, August 8, 2018) to publicly report information from CMS public files, like the PUF, in a user-friendly format.

Updates to PUF data in 2020-2021

CMS continues to refine and expand the information based on the PUF available to consumers. Following the initial release, CMS implemented several ways to enhance the utility of the PUF information for consumers. Specifically, since April 2020, the HQRP no longer reports national averages for the conditions treated or location of care characteristics. This change allows users to focus on the characteristics of specific hospices. In addition, the location of care characteristic displays the percentages of a hospice's patients who were cared for in each setting. The percentages replace check marks that documented whether the hospice cared for any patients in each setting. This change increases the detail on locations of care that the data communicate to consumers.

Beginning in May 2021, CMS began publicly reporting additional data elements from the PUF file. In addition to viewing the PUF-based characteristics already reported, consumers can now see whether a hospice served any Medicare Advantage patients or served any patients with both Medicaid and Medicare coverage.

For more information, please visit:

- <u>https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Provider-Charge-Data/PAC_Hospice</u>
- <u>https://www.medicare.gov/care-compare/?providerType=Hospice&redirect=true</u>