

# Expanded Home Health Value-Based Purchasing (HHVBP) Model

QUARTERLY NEWSLETTER - MARCH 2024

This newsletter contains information for home health agencies (HHAs) related to the expanded Home Health Value-Based Purchasing (HHVBP) Model, including Model highlights, training updates, new insights, reminders, resources, and contact information. The Centers for Medicare & Medicaid Services (CMS) and the PAC Training Team will release these newsletters on a quarterly basis.

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**Click here for instructions on how to access IPRs.**

Instructions for Accessing HHVBP Model Reports in iQIES



## HHVBP Model Highlights

### The Interim Performance Report

The first quarterly Preliminary Interim Performance Report (IPR) in Calendar Year (CY) 2024 became available on February 8, 2024. The quarterly IPRs provide HHAs with their cohort assignment, performance year measure data for the 12 most recent months, and an interim Total Performance Score (TPS). The IPR allows an HHA to review feedback and performance within the respective cohort for the expanded Model performance year. An HHA will receive 2024 quarterly IPRs if the HHA:

- Was Medicare-certified prior to January 1, 2022, and
- Meets the minimum threshold of data for at least one quality measure in the quarterly reporting period for the performance year.

Requirements for the upcoming April 2024 IPR are shown in **Table 1**.

Report

CCN

HHA Name

HHA Address

Your HHA's Cohort

October 2023 Interim Performance Report

123456

ABC Home Health Care

123 Boulevard, 12345, MD

Larger-volume

Return to TOC

Go to Model Resource

Measure Scorecard

Measure	Your HHA's Care Points	Maximum Possible Points	Measure Weight [a]	Your HHA's Weighted Measure Points [b]
OASIS-based Measures				
Discharged to Community	4,772	10,000	5.833	2,784
Improvement in Dyspnea	10,000	10,000	5.833	5,833
Improvement in Management of Oral Medications	9,296	10,000	5.833	5,423
Total Normalized Composite (TNC) Change in Mobility	10,000	10,000	8.750	8,750
Total Normalized Composite (TNC) Change in Self-Care	10,000	10,000	8.750	8,750
Sum of OASIS-based Measures	44,068	50,000	35,000	31,540
Claims-based Measures				
Acute Care Hospitalizations	0.000	10,000	26.250	0.000
Emergency Department Use Without Hospitalization	3,876	10,000	8.750	3,392
Sum of Claims-based Measures	3,876	20,000	35,000	3,392
HHCAHPS Survey-based Measures				
Care of Patients	8,444	10,000	6.000	5,066
Communications Between Providers and Patients	3,012	10,000	6.000	1,807
Specific Care Issues	5,475	10,000	6.000	3,285
Overall Rating of Home Health Care	8,115	10,000	6.000	4,869
Willingness to Recommend the Agency	7,488	10,000	6.000	4,493
Sum of HHCAHPS Survey-based Measures	32,534	50,000	30,000	19,530
Sum of All Measures	80,478	120,000	100,000	54,452
Total Performance Score (TPS)				
Number of Measures Included	12			
Your HHA's Summed Care Points	80,478			
Your HHA's Interim TPS	54,452			
Percentile Ranking within Your HHA's Cohort [c]	>75			
TPS Statistics for Your HHA's Cohort				
Number of HHAs in Your HHA's Cohort	6,792			
25th Percentile	14,548			
50th Percentile	23,362			
75th Percentile	34,061			
99th Percentile	68,395			

**Table 1. April 2024 IPR Time Periods and Thresholds**

Measure Category	Time Period	Minimum Threshold
OASIS-Based	1/1/2023 – 12/31/2023	20 home health quality episodes
Claims-Based	10/1/2022 – 9/30/2023	20 home health stays
HHCAHPS Survey-Based	10/1/2022 – 9/30/2023	40 completed surveys

IPRs are available via Internet Quality Improvement Evaluation System (iQIES) in the "HHA Provider Preview Reports" folder organized by the CMS Certification Number (CCN) assigned to each HHA. If your organization has more than one CCN, then a report will be available for each CCN. Only iQIES users authorized to view their HHA's reports can access expanded HHVBP Model reports.



## Introduction to the PAC Training Team

Beginning in 2024, training for the HHVBP Model will be provided by the Post-Acute Care (PAC) Training Team. The PAC Training Team delivers training to providers in home health agencies (HHAs), inpatient rehabilitation facilities (IRFs), long-term care hospitals (LTCHs), skilled nursing facilities (SNFs), and hospices to assist with the collection and coding of standardized patient assessment data elements. The PAC Training Team has produced a diverse group of training products to assist PAC providers in understanding and succeeding with the Quality Reporting Programs. In addition to this quarterly newsletter, the PAC Training Team will be releasing training resources specific to HHVBP later this year.

The PAC Training Team will be releasing training resources specific to HHVBP throughout the year.



## HHVBP Interim Performance Reports

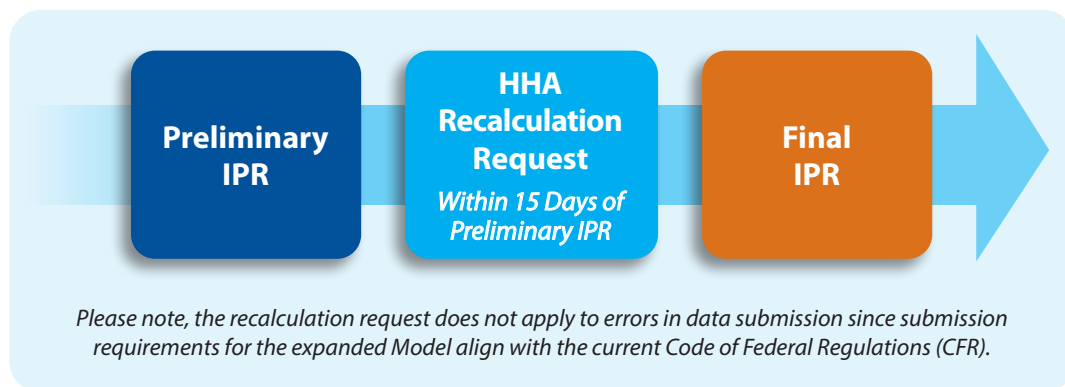
**Two versions of the quarterly IPRs include:** Preliminary IPR and Final IPR. The Preliminary IPR provides an HHA with an opportunity to submit a recalculation request for applicable measures and interim performance scores if the agency believes there is evidence of a discrepancy in the calculation. If an HHA disagrees with the calculation of the performance scores in the **Preliminary IPR**, the agency may submit a recalculation request within 15 calendar days after publication of the **Preliminary IPR**. The recalculation request period for the January 2024 IPR closed on February 23, 2024. The Final IPR will reflect any changes resulting from an approved recalculation request. All HHAs will receive a **Final IPR** even if the HHA did not submit a recalculation request. The **Final January 2024 IPR** is expected to be released on or after **March 21, 2024**.

For more information, please visit [Instructions for Submitting a Recalculation Request](#).



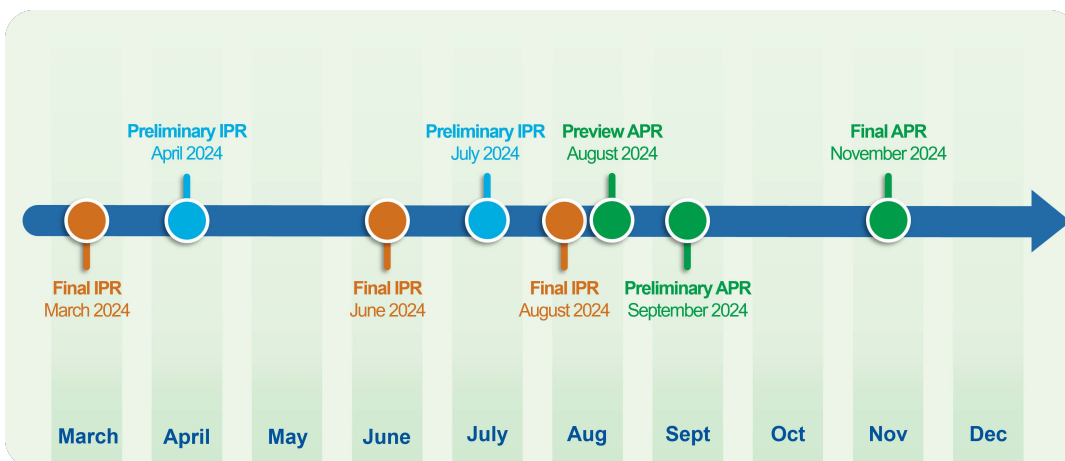
### REMINDER:

The **Final January 2024 IPR** is expected to be released on or after **March 21, 2024**.



## Looking Ahead in 2024

Home health agencies should mark their calendars for 2024. In addition to the quarterly IPRs, CMS will be releasing the Annual Performance Report (APR) and public reporting is planned to begin.



## Discharge Function Score Measure

Assessing the functional status of home health patients provides insight into the quality of care offered by agencies, while also highlighting the potential positive impact of home health care on functional outcomes. The Discharge (DC) Function Score measure evaluates each agency's success in achieving or surpassing expected levels of patient functional ability upon discharge, tailored to individual agency expectations based on patient characteristics. For more information, review the [Discharge Function Score for Home Health \(HH\) Technical Report and Risk Adjustment Technical Steps and Risk Factor Specifications](#).



Visit the  
**Expanded Home Health  
Value-Based Purchasing  
(HHVBP) Model  
Calendar Year (CY) 2025  
Measures & Reports  
At a Glance (cms.gov)  
for more information.**

## Quality Measures Impacting HHVBP

The 2024 HHVBP Final Rule identified updates to the measure weights for larger-volume and smaller-volume cohorts starting with the Model's third performance year, CY 2025. HHA performance for the CY 2025 applicable measure set will determine payment adjustments that will apply to CY 2027 Medicare fee-for-service (FFS) claims. The Model baseline year for the CY 2025 performance year is CY 2023 for all measures except Discharge to Community-Post Acute Care (DTC-PAC). For the DTC-PAC measure, the Model baseline year is CY 2022 and CY 2023. The changes in quality measures that impact HHVBP are identified in **Table 2** below.

Table 2. Current Measure Category Weights by Quality Measure in the Expanded HHVBP Model				
	Current Measures (CY 2024)		New Measures (CY 2025)	
Measure	Larger-Volume Cohort	Smaller-Volume Cohort	Larger-Volume Cohort	Smaller-Volume Cohort
<b>OASIS-Based Measures</b>				
Discharged to Community (OASIS-Based)	✓	✓	—	—
Improvement in Dyspnea	✓	✓	✓	✓
Improvement in Management of Oral Medications	✓	✓	✓	✓
Total Normalized Composite (TNC) Change in Mobility	✓	✓	—	—
Total Normalized Composite (TNC) Change in Self-Care	✓	✓	—	—
DC Function	—	—	✓	✓
<b>Sum of OASIS-Based Measures</b>	<b>35.000</b>	<b>50.000</b>	<b>35.000</b>	<b>50.000</b>
<b>Claims-Based Measures</b>				
Acute Care Hospitalizations	✓	✓	—	—
Emergency Department Use Without Hospitalization	✓	✓	—	—
Potentially Preventable Hospitalization	—	—	✓	✓
Discharged to Community (Claims-Based)	—	—	✓	✓
<b>Sum of Claims-Based Measures</b>	<b>35.000</b>	<b>50.000</b>	<b>35.000</b>	<b>50.000</b>
<b>HHCAHPS Survey-Based Measures</b>				
Care of Patients	✓	—	✓	—
Communications Between Providers and Patients	✓	—	✓	—
Specific Care Issues	✓	—	✓	—
Overall Rating of Home Health Care	✓	—	✓	—
Willingness to Recommend Agency	✓	—	✓	—
<b>Sum of HHCAHPS Survey-Based Measures</b>	<b>30.000</b>	<b>—</b>	<b>30.000</b>	<b>—</b>

Note: If an HHA is missing all measures from one measure category, the weights for the remaining two measure categories are redistributed so that the proportional contribution remains consistent with the original weights. These redistributed measure categories sum to 100% of the HHA's TPS. An HHA receives a TPS if the HHA had sufficient data to calculate baseline and performance year data for at least five quality measures.

## Contact Us

### HHVBP Model Help Desk

HHVBPquestions@cms.hhs.gov  
Contact for information, updates, and questions about the expanded HHVBP Model.

### PAC Training Help Desk

PACTraining@Econometricainc.com  
Contact for questions about accessing resources or feedback regarding training.

### Home Health Quality Reporting Program (HH QRP) Help Desk

homehealthqualityquestions@cms.hhs.gov  
Contact for questions about the following: Home Health Quality, including Care Compare (excluding HHCAHPS), OASIS coding and documentation, quality reporting requirements and deadlines, data reported in quality reports, measure calculations, Quality of Patient Care Star Rating (excluding suppression requests), public reporting, risk adjustment, and Quality Assessment Only (QAO)/Pay for Reporting (P4P).

### QIES/iQIES Service Center

iqies@cms.hhs.gov, (800) 339-9313  
Contact for support with registration for the Internet Quality Improvement Evaluation System (iQIES). Alternatively, refer to the iQIES Onboarding Guide on QTSO at <https://qtso.cms.gov/software/iqies/reference-manuals> for registration support.

### CCSQ Support Central

[https://cmsqualitysupport.servicenow.com/ccsq\\_support\\_central](https://cmsqualitysupport.servicenow.com/ccsq_support_central)  
Use this link to create a ticket or to track an existing ticket through the Center for Clinical Standards and Quality (CCSQ).

### Home Health CAHPS® Help Desk

HHCAHPS@rti.org  
Contact for questions related to the HHCAHPS Survey or Patient Survey Star Ratings.

### HHVBP Model Expansion Listserv

Subscribe to the HHVBP Model Expansion Listserv to receive email updates related to the expanded HHVBP Model.

Not sure which help desk to use?

Check out the [Guide to Home Health Help Desks!](#)



## HHVBP Training Updates

On November 9, 2023, CMS hosted a webinar on the *Expanded HHVBP Model: Preparing for Calendar Year (CY) 2024 and CY 2025*. A [recording](#), PDF of the [presentation slides](#), and written resources for CY 2024 and CY 2025 Measures and Reports at a Glance are available on the [Expanded HHVBP Model webpage](#) under "Model Overview."

Additional trainings and resources will be released later this year. If you would like to receive email notifications related to future training resources or events, please register to be added to the [Notification List](#).

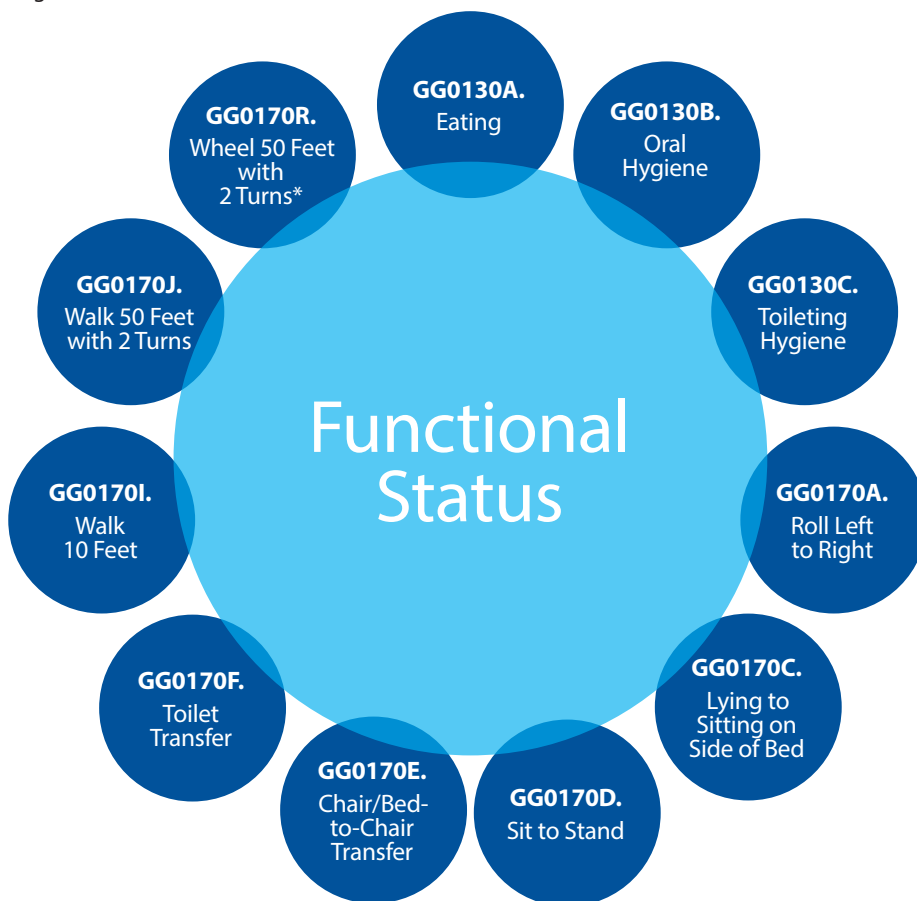
## Advancing Agency Achievement

### Spotlight on New Measures

Beginning in CY 2025, the HHVBP measure set will replace the TNC measures with the Discharge (DC) Function measure. The OASIS items included in the DC Function Score include:

- Self-Care GG0130 (3 items)
- Mobility GG0170 (8 items)

To prepare agencies for this change, tips for accurate GG coding will be highlighted in upcoming newsletters!



\* The Discharge Function Score measure is calculated using 10 items. GG0170R. Wheel 50 Feet with 2 Turns is only used to calculate the total observed discharge function score for stays where (i) GG0170I. Walk 10 Feet has an activity not attempted code or is dashed, skipped or missing at both admission and discharge, and (ii) either GG0170R. Wheel 50 Feet with 2 Turns or GG0170S. Wheel 150 Feet has a code between 1 and 6 at either admission or discharge.