

The Centers for Medicare & Medicaid Services' (CMS) Home Health, Hospice, and DME (Durable Medical Equipment) Open Door Forum on January 26 left some questions about the Hospice Quality Reporting Program (HQRP) unanswered, so NAHC followed-up with CMS HQRP experts and received important clarifications. Read on for the full details.

1. HIS-Discharge Record

A question was asked about the possible elimination of the HIS-Discharge record. Specifically, the listener asked if it was possible for hospices to stop submitting the HIS-Discharge now that Section O has been removed since the only other data coming from the HIS-Discharge is the date of discharge and the discharge disposition which can also be gathered from the claim.

RESPONSE: The requirements for the HQRP remain unchanged. According to the HIS Manual hospices shall continue to submit two HIS records (HIS-Admission record and HIS-Discharge record) for each patient admission occurring on or after July 1, 2014. Hospices no longer need to submit Section O (Service Utilization) as of January 1, 2021. The HIS-Discharge form contained in the draft HIS Manual V3.00 is replacing the older version. To prevent hospice providers from encountering any fatal errors or rejected records whether submitting HIS records with or without section O, CMS implemented V3.00 of the HIS data submission specifications as of January 1, 2021. Both V2.00 and V3.00 HIS-Discharge records can be accepted by the ASAP system.

2. HIS Measures

CMS was asked if the Hospice Care Index (HCI) will replace the HIS measures. The HCI was a measure under consideration (MUC) with the National Quality Forum's (NQF) Measures Application Partnership (MAP). The MAP recommended conditional support for rulemaking and hospices are expecting to see the HCI as part of the hospice proposed rule this spring. See more information on the HCI [here](#).

RESPONSE: The HCI, like any other new measure would complement the current hospice quality measures (QM's) that are already in place. HCI would not replace any existing measures or any of the HQRP requirements. Like any new measure, the HCI must go through future rulemaking and be finalized before it can become a part of the HQRP.

3. Hospice Visits in Last Days of Life (HVLDL) Measure Calculation

Hospices had questions about when CMS would begin using the HVLDL measure in the HQRP and for public reporting as well as questions about how the last three days of life are calculated and whether a visit conducted by a RN and a MSW on the same day would be counted towards the measure calculation. Hospices are expecting that the

HVLDL measure will be used for public reporting for CY2021 beginning with data from January 2021 claims.

RESPONSE: As of January 1, 2021 hospices no longer need to submit Section O (Service Utilization). CMS will rely solely on existing administrative data (claims) for the calculation of this measure, removing the need for data collection through clinician assessment. As required by statute, CMS will publicly report all Hospice Visits When Death Is Imminent (HVWDII) data and begin publicly reporting HVLDL thereafter. The data reported for these measures will not overlap and will be discussed in future rulemaking. The HVWDII measure was active in the HQRP through December 31, 2020. The measure was replaced by the HVLDL measure, and the HVLDL measure is effective with discharges on January 1, 2021 and later. Based on this response hospices are expecting to see further information in the hospice proposed rule due for public display at the end of April.

What is the HVLDL?

As described in the report, [Hospice Visits When Death is Imminent: Measure Validity Testing Summary and Re-Specifications](#) (posted in September, 2020) Hospice Visits in the Last Days of Life (HVLDL) is a re-specified, claims-based version of the Hospice Visits when Death is Imminent (HVWDII) measure pair. Per the measure specifications, HVLDL indicates the hospice provider's proportion of patients who have received visits from a registered nurse or medical social worker (non-telephonically) on at least two out of the final three days of the patient's life.

How are the last three days of life calculated in the HVLDL?

The calculation of the last three days remains unchanged from the last three days documented in Section O. Currently, information defining the last three days can be found on page 2O-3 in HIS Manual V2.01. Specifically these three days are "indicated by the day of death, the day prior to death, and two days prior to death."

- The day of death is the same as the date provided in A0270, Discharge Date. (or the day of death)
- One day prior to death is calculated as A0270 minus 1.
- Two days prior to death is calculated as A0270 minus 2.

Therefore, the day of death is considered as one of the last three days of life in this calculation as it was with the HVWDII measure.

How are the visits calculated in the HVLDL?

HVLDL indicates the hospice provider's proportion of patients who have received visits from a registered nurse or medical social worker (non-telephonically) on at least two out

of the final three days of the patient's life. While all patient visits are meaningful, only patients with visits on two different days during the last three days of life will count towards the numerator for this measure. These visits can be made by the nurse, the social worker, or both. So a visit from a nurse and a social worker on the same does not satisfy the HVLDL criteria.