

Home Health QRP Spotlight and Announcements

April 27, 2022

CORRECTION to Quality of Patient Care Star Rating Preview Reports for the July 2022 Refresh

There are incorrect date ranges included for the Acute Care Hospitalization measure on the Quality of Patient Care Star Rating Preview Report, however, all included provider measure scores are accurate. The report should note that the Acute Care Hospitalization claims-based measure reports data from **July 1, 2020 to June 30, 2021**. Though the date range represents a calendar year, the reporting period for most home health agencies will be approximately three-quarters of a year because of CMS-approved data exemptions for home health episodes that begin or end in the two COVID-19 exempted quarters of Q1 and Q2 2020. Due to the COVID-19 reporting exceptions, the claims-based measures have been calculated excluding Q1 and Q2 2020 data from measure calculations.

Note: If you have proof that there are errors in calculating your Quality of Patient Care Star Rating, you may request a review of your rating by submitting that proof. Requests must be submitted by **May 20, 2022**, to HHC_Star_Ratings_Review_Request@cms.hhs.gov with a final decision on your request sent by **May 27, 2022**. An example of the Quality of Patient Care Star Rating Preview Report with corrected dates can be found in the downloads section at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/HHQIHomeHealthStarRatings>

For additional information, please see the HH QRP COVID-19 Public Reporting Tip Sheet in the downloads section of the [HH Quality Reporting](#)

[Training](#) webpage and the [Home Health Data Submission Deadlines](#) webpage.

April 27, 2022

Care Compare Quarterly Refresh – April 2022

The April 2022 quarterly refresh for the Home Health Quality Reporting Program (HH QRP) is now available on [Care Compare](#). For this refresh, Home Health (HH) Outcome and Assessment Information Set (OASIS) measure scores are based on the standard number of quarters. The April 2022 refresh will add new OASIS-based measures for public reporting in alignment with the [Improving Medicare Post-Acute Care Transformation \(IMPACT\) Act of 2014](#):

- Percent of Residents Experiencing One or More Falls with Major Injury
- Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan that Addresses Function

Claims-based quality measure data remains frozen following CMS's decision to delay the public reporting of these measures. This delay allows time to analyze the impact of the required comprehensive exclusion of Q1 and Q2 2020 claims data on risk adjustment and reporting. CMS is targeting the July 2022 refresh of Care Compare for the resumption of HH claims-based measure updates on Care Compare. For additional information, please see the HH QRP COVID-19 Public Reporting Tip Sheet in the downloads section of the [HH Quality Reporting Training](#) webpage and the [FY 2022 Hospice Wage Index and Payment Update Final Rule \(HH Rider\)](#).

April 20, 2022

NOW AVAILABLE IN iQIES - Preview Reports and Star Rating Preview Reports for the July 2022 Refresh

For this refresh, Home Health (HH) Outcome and Assessment Information Set (OASIS) will be based on the standard number of quarters. This refresh resumes the reporting of all claims-based measures for the Home Health Quality Reporting Program (QRP). Due to the COVID-19 reporting exceptions, the claims-based measures have been calculated excluding Q1 and Q2 2020 data from measure calculations. For additional information, please see the HH QRP COVID-19 Public Reporting Tip Sheet in the downloads section of this Home Health Quality Reporting Training webpage below.

For additional information, please see the HH QRP COVID-19 Public Reporting Tip Sheet in the downloads section of the [HH Quality Reporting Training](#) webpage and the [Home Health Data Submission Deadlines](#) webpage.

March 25, 2022

Attention HHA Providers!

We had previously identified an issue in the iQIES system that may have affected your HHA's Services Provided values that are displayed on the HHA Provider Preview reports that were distributed in iQIES on 02/23/2022. Moreover, we had previously asked HHAs to review the Services Provided Information on the HHA Provider Preview Reports for the April 2022 refresh and contact their OASIS Education Coordinator (OEC) or OASIS Automation Coordinator, should inaccuracies be identified. The process to collect and maintain the Services Provided information recently migrated into iQIES and we are addressing the issues identified.

To allow time to complete the identified changes, we have decided for the April 2022 refresh, to publish the same Services Provided data for each Home Health Agency that was posted on Care Compare for the January 2022 refresh. We believe that this will allow us to publish the most accurate Services Provided data at this time.

We are still urging HHA providers to carefully review the Services Provided data within the recently issued Preview Reports, however, we would like to note that we are not attaching a deadline to this review. These reports were distributed in iQIES on 02/23/2022. If the values are incorrect for your agency, please contact your State Automation or State OEC and request an update of your Services Provided data in iQIES. Should you have questions, please contact the iQIES Help Desk by phone at (800) 339-9313 or by email at iQIES@cms.hhs.gov. CMS continues to work to refine and rectify the update process moving forward.

For those experiencing issues locating your agency's HHA Provider Preview Report, follow the steps outlined below:

New Users

1. Only active users with login credentials to iQIES as of the distribution date of the HHA Provider Preview reports for the April 2022 refresh will have the report in their HHA Provider Preview Report folder.
 - If you are a new user of iQIES and received your iQIES login credentials after the February 23, 2022 distribution of the HHA Provider Preview reports, please contact the iQIES Help Desk for assistance (see iQIES Help Desk contact information below).
 - Inform the help desk staff that you are a new user of iQIES since the HHA Provider Preview reports for the April 2022 refresh were made available. The iQIES help desk team will gather the necessary information from you including such things as your agency's CMS Certification Number (CCN) and will then make the report for your agency available to you in the HHA Provider Preview Reports folder in iQIES
 - Follow the steps below to locate your agency's report in the HHA Provider Preview Report folder.

Existing Users

1. If you were an active user prior to the February 23, 2022 distribution of the HHA Provider Preview Reports but you cannot locate your report, please follow the steps below:
 - Log into iQIES at <https://iqies.cms.gov/>.
 - Select the My Reports option from the Reports menu.
 - From the My Reports page, locate the HHA Provider Preview Reports folder.
- **NOTE:** The folders and reports on the My Reports page are listed in alphabetic order so users may need to utilize the page forward functionality at the bottom of the webpage to advance to the page where the folder is located. Alternatively, users may change the default number of rows that display on the webpage from 10 to a larger number to view the larger list of items.
 - Select the HHA Provider Preview Reports link to open the folder.
 - To locate the latest HHA Provider Preview report, select the down arrow adjacent to the Created Date label at the top of the table. This will order the reports in the folder from newest to oldest.
 - Select the report file with the following label: ***Preview of Home Health Agency Quality Measure Scores To Be Posted on Care Compare (April 2022)_Updated [provider's CCN will display after the word Updated]***.
 - Once the report is open, users will notice the Services Provided information displayed beneath their agency's demographic information at the top of the report.

Should you have questions, please contact the iQIES Help Desk by phone at (800) 339-9313 or by email at iQIES@cms.hhs.gov.

March 16, 2022

Attention HHA Providers!

CMS identified an iQIES system nuance that may affect your HHA's Services Provided values that are displayed on the HHA Provider Preview reports for the April 2022 refresh. These reports were distributed in iQIES on 02/23/2022. CMS is asking each HHA to carefully review the Services Provided values that display on these reports. If the values are incorrect for your agency, please contact your State Automation or State OASIS Education Coordinator (OEC) and request an update of your Services Provided data in iQIES. Should you have questions, please contact the iQIES Help Desk by phone at (800) 339-9313 or by email at iQIES@cms.hhs.gov.

February 24, 2022

NOW AVAILABLE IN iQIES - Preview Reports and Star Rating Preview Reports for the April 2022 Refresh

For this refresh, Home Health (HH) Outcome and Assessment Information Set (OASIS) measure scores are based on the standard number of quarters. The April 2022 refresh will add new OASIS-based measures for public reporting in alignment with the [Improving Medicare Post-Acute Care Transformation \(IMPACT\) Act of 2014](#):

- Percent of Residents Experiencing One or More Falls with Major Injury
- Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan that Addresses Function

The claims-based quality measures within this preview report remain frozen. CMS decided to delay the resumption of public reporting for these measures. This delay allows time to analyze the impact of the required comprehensive exclusion of Q1 and Q2 2020 claims data on risk adjustment and reporting. CMS is targeting the July 2022 refresh of Care Compare for the resumption of HH claims-based measure updates on Care Compare. For additional information, please see the HH Quality Reporting Program (QRP) COVID-19 Public Reporting Tip Sheet in the

downloads section of the [HH Quality Reporting Training](#) webpage and the [FY 2022 Hospice Wage Index and Payment Update Final Rule \(HH Rider\)](#).

February 01, 2022

NOW AVAILABLE- Updated Draft OASIS-E Instrument

The updated draft OASIS-E All Items Instrument is now available in the **Downloads** section of the [OASIS Data Sets](#) webpage.

January 19, 2022

Care Compare Quarterly Refresh – January 2022

The January 2022 quarterly refresh for the Home Health (HH) Quality Reporting Program (QRP) is now available on [Care Compare](#). For this refresh, HH Outcome and Assessment Information Set (OASIS) measure scores are based on three-quarters of OASIS assessment data, due to the temporary exception to the HH QRP data submission requirements in response to the COVID-19 Public Health Emergency.

We would also like to note that the claims-based quality measures have not been updated, as CMS has decided to continue with the data freeze for claims-based measures for an additional six months. This decision will allow CMS more time to analyze the impact of the required comprehensive exclusion of Q1 and Q2 2020 claims data on risk adjustment and reporting. CMS is targeting the July 2022 refresh of Care Compare for the resumption of HH claims-based measure updates on Care Compare.

For additional information, please see the HH QRP COVID-19 Public Reporting Tip Sheet in the downloads section of the [HH Quality Reporting Training](#) webpage and the [FY 2022 Hospice Wage Index and Payment Update Final Rule \(HH Rider\)](#).

November 10, 2021

NOW AVAILABLE IN iQIES - Preview Reports and Star Rating Preview Reports for the January 2022 Refresh

For this refresh, Home Health (HH) Outcome and Assessment Information Set (OASIS) measure scores are based on three-quarters of OASIS assessment data, due to the temporary exemption to the HH Quality Reporting Program (QRP) data submission requirements in response to the COVID-19 Public Health Emergency (PHE). We would also like to note that the claims-based quality measures within this preview report have not been updated, as CMS has decided to continue with the data freeze for claims-based measures for an additional six months. This decision will allow CMS more time to analyze the calculation of these measures, given the required comprehensive exclusion of claims data that occurred during Q1 2020 and Q2 2020, and the effect of that missing data on such aspects of measure calculation as lookback periods, and risk adjustment. We are targeting the July 2022 refresh of Care Compare for the resumption of HH claims-based measure updates on Care Compare. For additional information, refer to the HH QRP COVID-19 Public Reporting Tip Sheet in the downloads section of the [HH Quality Reporting Training](#) webpage and the HH QRP Rider contained within the [FY 2022 Hospice Wage Index and Payment Update Final Rule](#).

The HHCAHPS Survey Preview Reports are available only on the HHCAHPS Survey website, <https://homehealthcahps.org>. HHAs go into the secure portal called "For HHAs" to view their agency's preview reports. HHAs are encouraged to routinely go into the "For HHAs" portal to view their survey vendor's data submission reports. If HHAs forget their ID and password, please email RTI at HHCAHPS@RTI.org or call RTI toll-free at (866) 354-0985.

November 4, 2021

Medicare and Medicaid Programs: Omnibus COVID-19 Health Care Staff Vaccination

CMS displayed the Interim final rule with comment period. The emergency regulation is effective as of November 5, 2021.

SUMMARY: This interim final rule with comment period revises the requirements that most Medicare- and Medicaid-certified providers and suppliers must meet to participate in the Medicare and Medicaid programs. These changes are necessary to help protect the health and safety of residents, clients, patients, Program for All-Inclusive Care for the Elderly (PACE) participants, and staff, and reflect lessons learned to date as a result of the COVID-19 public health emergency. The revisions to the requirements establish COVID-19 vaccination requirements for staff at the included Medicare- and Medicaid-certified providers and suppliers.

Stakeholders have 60 days to submit a formal comment on the emergency regulation. It is important to note that since this is an emergency regulation, the requirements will go into effect immediately and before any additional response is provided on the comments by CMS. The comment period officially closes on January 4, 2022.

The interim final rule went on display at the Federal Register's Public Inspection Desk and will be available at <https://www.federalregister.gov/public-inspection/2021-23831/medicare-and-medicaid-programs-omnibus-covid-19-health-care-staff-vaccination>. To view a list of frequently asked questions, visit: www.cms.gov/files/document/cms-omnibus-staff-vax-requirements-2021.pdf (PDF)

October 28, 2021

CMS identified on Monday, October 18, 2021, a problem with receiving emails via our reconsideration email address (HHAPUReconsiderations@cms.hhs.gov). The problem was resolved on Friday, October 22, 2021. We are extending the deadline for HHAs to file a reconsideration to November 17, 2021, at 11:59 pm (which represents an additional week).

October 8, 2021

Home Health Quality Reporting Program: Non-Compliance Notifications

CMS is providing notifications to home health agencies that were determined to be out of compliance with the Home Health Quality Reporting Program (HH QRP) requirements for calendar year (CY) 2020, which will affect their calendar year (CY) 2022 Annual Payment Update (APU). Non-compliance notifications will be distributed by the Medicare Administrative Contractors (MACs) and will be placed into HHA's My Reports folders in iQIES on October 8, 2021. Facilities that receive a letter of non-compliance may submit a request for reconsideration to CMS **via email no later than 11:59 pm, November 10, 2021**. If you receive a notice of non-compliance and would like to request a reconsideration, see the instructions in your notification and on the [Home Health Quality Reporting Reconsideration and Exception & Extension](#) webpage.

Note: Any reconsideration containing protected health information (PHI) will not be processed. All PHI must be removed for a reconsideration to be reviewed.

July 29, 2021

Fiscal Year 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice Quality Reporting Program Requirements, and Home Health Quality Reporting Program Final Rule CMS-1754-F

On July 29, 2021, the Centers for Medicare & Medicaid Services (CMS) issued a final rule (CMS-1754-F) that provided updates to and finalized proposals for fiscal year (FY) 2022 Hospice Quality Reporting Program (HQRP). This rule includes finalizations for changes to the Home Health Quality Reporting Program beginning with January 2022 to address exceptions related to the COVID-19 public health emergency. We included Home Health in this rule because we will resume public reporting for the HH QRP with the January 2022 refresh of Care Compare. In order to accommodate the exception of 2020 Q1 and Q2 data, we finalized the

resumption of public reporting using 3 out of 4 quarters of data for the January 2022 refresh. In order to complete this proposal in time to release the required preview report related to the refresh, which we release 3 months prior to any given refresh (Oct. 2021), we needed the rule containing this proposal to finalize by October 2021.

The final rule went on display at the Federal Register's Public Inspection Desk and will be available under "Special Filings," at <https://www.federalregister.gov/public-inspection>.

For further information, visit <http://www.cms.gov/Center/Provider-Type/Hospice-Center.htm>.