

2017-2018 Spotlight and Announcements Archives

About this Page

The Spotlight page provides recent news and updates pertinent to the Home Health Quality Initiative. On this page you will find announcements about posting of resource guides and fact sheets, the availability of Q&A documents, information about Home Health Care, among other notifications. Questions about home health quality measures, including the Quality of Patient Care star ratings, can be sent to HomeHealthQualityQuestions@cms.hhs.gov.

Updates

December 20, 2018

NOW AVAILABLE - Final OASIS-D Guidance Manual and final OASIS-D Instrument

The Office of Management and Budget (OMB) approved the OASIS-D Guidance Manual and OASIS-D Instrument December 6, 2018. The final OASIS-D Guidance Manual is available on the [OASIS User Manuals](#) webpage, in the Downloads section. The final OASIS-D Instrument is available on the [OASIS Data Sets](#) webpage, in the Downloads section.

December 17, 2018

Post-Training Materials Available – November 2018 Home Health QRP Provider Training

Post-training materials for the **Home Health Quality Reporting Program (QRP) Provider Training** held on November 6 and 7, 2018, are now available in the Downloads section of the [Home Health Quality Reporting Training](#) webpage.

December 15, 2018

The OASIS-D Guidance Manual and OASIS-D Instrument were approved by the Office of Management and Budget (OMB) on December 6, 2018. The finalized Guidance Manual and data set are currently in the 508 process for publication. CMS expects to post these materials shortly.

A spotlight announcement will be posted on the [HH QRP Spotlight and Announcements](#) page to alert providers when the items are available.

December 06, 2018

Disaster Information Now Available on the Reconsiderations and Exceptions & Extensions Page

For all disaster related information moving forward, please visit the [Reconsiderations and Exceptions & Extensions](#) web page for your Quality Reporting Program. Memos will be posted in the downloads section of this page with additional information for each specific disaster impacting the Quality Reporting Programs.

December 4, 2018

NOW AVAILABLE – Updated technical measure specifications and measure tables for OASIS-D

Updated technical measure specifications and measure tables, aligned with the implementation of OASIS-D on January 1, 2019, are now available on the [Quality Measures](#) page, in the Downloads sections. The updated measure specifications provide the logic and pseudo-code for all OASIS-based measures and patient characteristics available through the Certification and Survey Provider Enhanced Reports (CASPER) system. The outcome, process, and potentially avoidable events measure tables include measure definitions and data sources, as well as information about National Quality Forum endorsement and use in the Quality of Patient Care star ratings. Questions about these resources can be sent to HomeHealthQualityQuestions@cms.hhs.gov.

OASIS-D Q+A is Available

A question and answer (Q+A) document related to the OASIS-D is now available. See the [Home Health Quality Reporting Training](#) webpage for details.

November 13, 2018

REGISTRATION OPEN – Follow-Up Question and Answer Session on Guidance Related to Implementation of OASIS-D on November 29

The Centers for Medicare & Medicaid Services (CMS) is hosting a question and answer session related to guidance on the OASIS-D presented during webinars in August and September and the Train-the-Trainer event in Baltimore. This Q+A Session will take place via teleconference on November 29 from 2:00 to 3:00 p.m. See the [Home Health Quality Reporting Training](#) webpage for details.

November 05, 2018

NOW AVAILABLE – Updated Risk Models for OASIS-D

Updated risk model information for outcome measures using OASIS-D data is available on the [Quality Measures](#) page, in the Downloads sections. This includes the model parameters and fit statistics for revised models for the 13 OASIS-based measures that will be risk-adjusted for public reporting and confidential feedback, along with technical documentation on the risk adjustment methodology. These models are effective for quality episodes beginning on or after January 1, 2019. In addition, the summary of public comments CMS received on these models is also posted here. Questions about these models and their application can be sent to HomeHealthQualityQuestions@cms.hhs.gov.

November 01, 2018

Pre-Training Materials Available for the November 2018 Home Health QRP Provider In-Person Training Event

Available under the Downloads section of the [Home Health Quality Reporting Training](#) webpage.

October 29, 2018

For all QRP web pages that reference qtso.com please update to new web address to qtso.cms.gov

October 16, 2018

NOW AVAILABLE- Updated Quarterly OASIS Q&As

October 2108 OASIS Q&A's are available in the OASIS Quarterly Q&As section of the CMS [QTSO](#) webpage, <https://qtso.cms.gov/providers/home-health-agency-hha-providers/reference-manuals> .

October 16, 2018

NOW AVAILABLE – Updated Home Health OASIS Static Q&As (Categories 1-4)

Categories 1, 2, 3 & 4 of the OASIS Q&As have been updated to reflect the OASIS-D item set and are now available on the QTSO Home Health Agency (HHA) Providers page under References & Manuals <https://qtso.cms.gov/providers/home-health-agency-hha-providers/reference-manuals>

The update involved removing references to OASIS items that will not be included in OASIS-D. Q&As related to the one clinician convention/collaboration and to the 2018 Home Health Conditions of Participation (CoP)

change involving the physician-ordered Resumption of Care were also revised. Ninety-three Q&As were revised, and 133 Q&As were retired as a result of this update. Additional Static Q&A updates and edits are expected in 2019.

October 15, 2018

Updates to the Home Health Quality of Patient Care (QoPC) Star Rating

During an October 3, 2019 Medicare Learning Network event CMS finalized the recommendation to modify the QoPC Star Ratings by removing the Drug Education on All Medications Provided to Patient/Caregiver during All Episodes of Care measure and adding the Improvement in Management of Oral Medications measure. The modified QoPC Star Ratings will first be reported during the April 2019 Home Health Compare refresh. Provider Preview Reports will be available in January 2019. The data reporting period for this refresh will be July 1, 2017 to June 30, 2018 for OASIS-based measures and CY 2017 for the claims-based measure.

The slides from the Medicare Learning Event are available [here](#).

For more information, visit the [Home Health Star Ratings](#) webpage.

October 12, 2018

Home Health Quality Reporting: Non-Compliance Letters

CMS is providing notifications to Home Health Agencies that were determined to be out of compliance with Home Health Quality Reporting Program (HGRP) requirements for CY 2017, which will affect their CY 2019 Annual Payment Update (APU). Non-compliance notifications are in the process of being mailed by the Medicare Administrative Contractors (MACs). Home Health Agencies that receive a letter of non-compliance may submit a request for reconsideration to CMS via email no later than 30 days after the date the non-compliance letter is issued. 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 Reconsiderations and Exception & Extension](#) page.

October 11, 2018

Hurricane Florence - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs located in areas affected by Hurricane Florence. These healthcare providers and suppliers will be granted exceptions without having to submit a request if they are located in one of the counties listed in the memo posted on [October 11, 2018](#), all of which have been designated by the [Federal Emergency Management Agency \(FEMA\)](#) as a major disaster county. Please check this site for the most up to date list of affected counties.

For Home Health agencies (HHAs) outside the FEMA-designated counties affected by Hurricane Florence, please follow the directions related to requesting an exemption or extension, as listed on the [Home Health Quality Reporting Reconsideration and Exception & Extension](#) .

September 24, 2018

NOW AVAILABLE--Post-Training Materials for Home Health Webinars (August 28 and September 5, 2018) Related to Changes Associated with the January 1, 2019, Implementation of the OASIS-D

Post-training materials for the Introduction to the OASIS-D and Section GG: Functional Abilities and Goals Webinars held on August 28 and September 5, 2018, respectively are now available in the Downloads section of the [Home Health Quality Reporting Training](#) webpage.

September 18, 2018

Updates to the Home Health Quality of Patient Care Star Rating

Wednesday, October 3, 2018

2-3 p.m. ET

[Register for the 10-3-18 HH QRP Webinar](#)

Following the [6/27/2018 MLN call](#) describing recommended changes to the Quality of Patient Care (QoPC) Star Ratings and a one-month comment period, CMS is finalizing the proposal to modify the QoPC Star Ratings by removing the Drug Education on All Medications Provided to Patient/Caregiver during All Episodes of Care measure and adding the Improvement in Management of Oral Medications. During this webinar, CMS will present the comments received, rationale for the final decision, timing, and impact of this change.

For more information, visit the [Home Health Star Ratings](#) webpage.

September 11, 2018

REGISTRATION OPEN – Home Health QRP Provider In-Person Training Event, November 6 and 7, 2018

The Centers for Medicare & Medicaid Services (CMS) will be hosting a 2-day Home Health (HH) Quality Reporting Program (QRP) in-person 'Train the Trainer' event for providers on November 6 and 7, 2018, in Baltimore, MD. See the [Home Health Quality Reporting Training](#) webpage for details.

August 27, 2018

Pre-Training Materials Now Available for the Upcoming Home Health Webinars (August 28 and September 5, 2018) Related to Changes Associated with the January 1, 2019, Implementation of the OASIS-D

The training materials for the upcoming Introduction to the OASIS-D Webinar, scheduled for Tuesday, August 28, 2018, from 2:00 to 4:00 p.m. EDT and Section GG: Functional Abilities and Goals Webinar, scheduled for Wednesday, September 5, 2018, from 2:00 to 4:00 p.m. EDT are now available under the Downloads section of the [Home Health Quality Reporting Training](#) webpage.

August 27, 2018

Revised versions of the Outcome Measures table, CY2017 HH PPS Final Rule quality measure specifications and risk model documentation for the cross-setting Discharge to Community (DTC) measure have been posted on the [Quality Measures](#) page. These materials have been updated to clarify that a prior proximal hospital stay is not required for inclusion in the DTC denominator, and to clarify denominator exclusions.

August 07, 2018

An OASIS-D Guidance Errata, updated 08-06-2018, is available in the Downloads section of the OASIS User Manuals web page.

July 17, 2018

Updated Quarterly OASIS Q&As

July 2108 OASIS Q&A's are available in the downloads section of the [OASIS User Manuals](#) webpage.

July 16, 2018

A Quick Reference Guide for the Home Health QRP for FY2020 is now available on the [Home Health Quality Reporting Requirements webpage](#). The guide includes frequently asked questions, information on QRP help desks, and helpful links to additional resources for the Home Health QRP.

July 03, 2018

Draft OASIS-D Guidance Manual Available

The draft Guidance Manual for the OASIS-D version of the OASIS data set, effective January 1, 2019, is available in the Downloads section on the [OASIS Users Manuals](#) page.

July 03, 2018

CMS held an MLN call on June 27 to describe proposed changes to the Quality of Patient Care star ratings algorithm. Specifically, CMS is proposing to remove the Drug Education on All Medications Provided to Patient/Caregiver during All Episodes of Care measure and add the Improvement in Oral Medications measure to the calculation. Presentation slides are available in the “Downloads” section of the [star ratings](#) page. Public comment on the proposed changes can be sent to HH_QM_Comment@abtassoc.com through July 26, 2018.

June 08, 2018

Updated Process Measures Table and Specifications for “Timely Initiation of Care”

An updated home health process quality measure table is available on [Quality Measures](#), along with updated specifications for the Timely Initiation of Care measure. These documents have been modified to further align with the Medicare Conditions of Participation (CoPs) for home health agencies that became effective January 13, 2018. These included a change regarding resumption of care (ROC) dates for patients returning to home health following an inpatient stay, which allowed for a physician ROC date as an alternative to the fixed 48-hour timeframe for the post-hospital reassessment.

April 20, 2018

Post-Training Materials Available – Home Health Review and Correct Reports Webinar, March 6, 2018

Post-training materials from the **Home Health Review and Correct Reports Webinar** held on March 6, are now available on the [Home Health Quality Reporting Training](#) webpage.

April 17, 2018

Updated Quarterly OASIS Q&As

April 2108 OASIS Q&A's are available in the downloads section of the [OASIS User Manuals](#) webpage.

April 16, 2018

Quality of Patient Care Star Ratings

Several updated documents have been posted in the Downloads section of [Star Ratings](#) page. The Fact Sheet, Frequently Asked Questions (FAQ) and methodology documents have been revised to reflect the removal of *Influenza Immunization Received for Current Flu Season* from the Quality of Patient Care star ratings calculation.

March 07, 2018

Updated Process Measures Table

An updated home health process quality measure table is available on [Quality Measures](#). This table has been modified to align with the revised technical specification for the Timely Initiation of Care measure, which were effective for episodes of care starting on or after January 13, 2018.

March 02, 2018

Pre-Training Materials Available -- Home Health Review and Correct Reports Webinar, March 6, 2018

Pre-training materials (without answers to knowledge checks) for the Home Health Review and Correct Reports Webinar are now available under the Downloads section of the [Home Health Quality Reporting Training](#) webpage. The webinar is scheduled for March 6, 2018, from 2:00 p.m. to 3:30 p.m. ET.

February 27, 2018

Revised Logic for the Timely Initiation of Care Measure

The Medicare Conditions of Participation (CoPs) for home health agencies that became effective January 13, 2018 included a change regarding resumption of care (ROC) dates for patients returning to home health following an inpatient stay. Specifically, the revised guidance allows for a physician ROC date as an alternative to the fixed 48-hour timeframe for the post-hospital reassessment. To align with this CoP change, updated logic for the *Timely Initiation of Care* process measure has been posted in the "Downloads" section [Quality](#)

[Measures](#) page. With this update, an episode will also be included in the numerator (achieve success in the measure) when the physician-ordered ROC date is later than two days after inpatient stay and the agency completes the ROC assessment on the physician-ordered ROC date. Use of this new calculation logic will be effective for quality episodes that begin on or after January 13, 2018. This change will be reflected in the Quality of Patient Care Star Rating and Home Health Compare Preview Reports available in September 2018 for the January 2019 Home Health Compare update. Also, in September CMS will retroactively apply these specifications to the confidential feedback and Review and Correct reports available through CASPER.

February 23, 2018

Hurricane Nate - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs to acute care hospitals, inpatient psychiatric facilities, skilled nursing facilities, home health agencies, hospices, inpatient rehabilitation facilities, long-term care hospitals, renal dialysis facilities, ambulatory surgical centers as well as Merit-Based Incentive Payment System (MIPS) eligible clinicians located in areas affected by Hurricane Nate. These healthcare providers and suppliers will be granted exceptions without having to submit a request if they are located in one of the counties listed in the memo posted on [February 8, 2018](#), all of which have been designated by the [Federal Emergency Management Agency \(FEMA\)](#) as a major disaster county.

The scope and duration of the exception under each Medicare quality reporting program is described in the memo as well, however, all of the exceptions are being granted to assist these providers while they direct their resources toward caring for their patients and repairing structural damages to facilities.

If FEMA expands the current disaster declaration to include additional counties, CMS will update this memo to expand the list of providers eligible to receive an exception without submitting a request.

In addition, CMS will continue to monitor the situation and adjust exempted reporting periods and submission deadlines accordingly.

Additional details and materials are available on the [CMS Hurricanes](#) webpage. Please check back frequently for updates.

February 22, 2018

California Wildfires - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs to acute care hospitals, inpatient psychiatric facilities, skilled nursing facilities, home health agencies, hospices, inpatient rehabilitation facilities, long-term care hospitals, renal dialysis facilities, ambulatory surgical centers as well as Merit-Based Incentive Payment System (MIPS) eligible clinicians located in areas affected by the California wildfires (FEMA [DR-4353](#)). These healthcare providers and suppliers will be granted exceptions without having to submit a request if they are located in one of the California counties listed in the memo posted on [February 8, 2018](#), all of which have been designated by the [Federal Emergency Management Agency \(FEMA\)](#) as a major disaster county.

The scope and duration of the exception under each Medicare quality reporting program is described in the memo as well, however, all of the exceptions are being granted to assist these providers while they direct their resources toward caring for their patients and repairing structural damages to facilities.

If FEMA expands the current disaster declaration to include additional counties, CMS will update this memo to expand the list of providers eligible to receive an exception without submitting a request.

In addition, CMS will continue to monitor the situation and adjust exempted reporting periods and submission deadlines accordingly.

Additional details and materials are available on the [CMS Wildfires](#) webpage. Please check back frequently for updates.

February 14, 2018

Updated Quality Measure Specification Document Available

An updated quality measure specifications document for the cross-setting measure Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened is now available in the Downloads section of the [Quality Measures](#) webpage. The measure specification logic has not changed but language has been added to clarify how valid skips are accounted for in the measure denominator.

February 08, 2018

HHA Review and Correct Report Issue

Please be informed there was a technical issue with the weekly calculation which was to occur on February 5, 2018 for the HHA Review and Correct Report. Any OASIS records submitted beginning January 29, 2018 have not yet been included in the calculations for the HHA Review and Correct Report.

We anticipate that the issue will be corrected and calculations will be performed later this week for any records submitted on or after January 29, 2018. We will send a follow-up announcement when the calculations have occurred.

If you have any questions concerning this information, please contact the QTSO Help Desk at help@qtso.com or 1 (800) 339-9313.

HHA Review and Correct Report Issue Correction

Earlier this week HHA's were notified of an issue which prevented the February 5, 2018 weekly calculations for the HHA Review and Correct Report, and that any OASIS records submitted beginning January 29, 2018 had not yet been included in the calculations for the HHA Review and Correct Report.

This issue has been corrected, and calculations have been performed for all OASIS records submitted between January 29, 2018 and (will insert date here, potentially February 8, 2018). The updated calculations for those records should now be apparent for the Open periods within any new HHA Review and Correct Reports that are requested. The regular weekly calculations will also resume on January 12, 2018.

If you have any questions concerning this information, please contact the QTSO Help Desk at help@qtso.com or 1 (800) 339-9313.

February 01, 2018

Correction of Home Health Review and Correct Report

CMS has determined that the denominator counts for the Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (NQF #0678) on the home health Review and Correct reports are incorrect. Specifically, they do not include episodes where M1313 was coded as a valid skip, when the response to M1306 was "0" (No). The numerator counts on these reports were calculated correctly. The forthcoming confidential feedback reports for this measure (the HH on-demand Risk Adjusted Outcome Reports), as well as public reporting on Home Health Compare starting in 2019, will both correctly incorporate episodes with valid skips in the denominator.

As a result, HHAs can expect to see much lower rates for the measure relative to the values on their Review and Correct reports to date. The Review and Correct reports going forward will also include this update. As a result, measure calculation will be standardized across post-acute care settings.

January 02, 2018

Home Health QRP: Transcript and Audio from Removal of Influenza Vaccination Measure from Quality of Patient Care Star Rating Webinar Available

An audio recording and transcript is now posted in the related links section of the [Home Health Quality Reporting Program Training](#) webpage for the December 14, 2017 webinar on Removal of Influenza Vaccination Measure from Quality of Patient Care Star Rating.

December 20, 2017

NEW TRAINING EVENT — Section GG Web-based Training Module Now Available

The Centers for Medicare & Medicaid Services (CMS) is offering a web-based training module to address questions submitted by providers during trainings between November 2015 and August 2016 related to Section GG across the Skilled Nursing Facility (SNF), Long-Term Care Hospital (LTCH), Inpatient Rehabilitation Facility (IRF), and Home Health (HH) care settings. Visit the [Home Health Quality Reporting Training](#) webpage for more information.

November 01, 2017

A Quick Reference Guide for the Home Health QRP is now available on the [Home Health Quality Reporting Requirements](#) webpage. The guide includes frequently asked questions, information on QRP help desks, and helpful links to additional resources for the Home Health QRP.

August 31, 2017

Expansion of the One Clinician Convention

Further guidance related to application of the Home Health one clinician convention has been posted to the downloads section of the [OASIS User Manuals](#) webpage. If providers have questions after reviewing the guidance instructions, questions may be submitted to the Home Health Quality Help Desk at homehealthqualityquestions@cms.hhs.gov.

August 08, 2017

One Clinician Rule

Based on feedback from home health stakeholders, and to better align with assessment practices in other Post-Acute Care settings, we have modified the current home care guidance related to the one clinician convention. As required by the Conditions of Participation, the Comprehensive Assessment will continue to be the responsibility of one clinician. However, effective January 1, 2018, the assessing clinician will be allowed to elicit feedback from other agency staff, or order to complete any or all OASIS items integrated within the Comprehensive Assessment.

Again, this new guidance will go into effect January 1, 2018, and at the time should be considered to supersede all previously published guidance related to application of the one clinician convention. Additional clarification is available in Chapter 1 of the [2018 OASIS Guidance Manual](#).

If providers have questions after reviewing the guidance manual instruction, questions may be submitted to the home health quality help desk at homehealthqualityquestions@cms.hhs.gov.

-

[Home Health QRP Archives](#)