

Home Health Quality Initiative (HHQI)
Satellite Broadcast and Webcast

Friday, October 3, 2003
1:00 PM –3:30 PM EDT

PLEASE ADJUST TIMES FOR YOUR TIMEZONE

This live satellite broadcast and Webcast will address issues related to the national launch of the Home Health Quality Initiative (HHQI).

(Mandatory Viewing for CMS RO and SA Home Health LTC Managers)

Goals

The goal is to provide the viewing audience with a better understanding of the Home Health Quality Initiative. Specifically, to provide information about the home health quality measures that will be displayed on Home Health Compare.

Objectives

After viewing this program, participants will have a better understanding of the:

- general introduction and background on the Home Health Quality Initiative, both the eight state Phase I that began in May 2003 and the national release scheduled for Fall 2003
- home health quality measures and its coding,
- data preview process,
- role of the Quality Improvement Organization, the role of the State Survey Agency, and,
- description of next steps prior to the national roll out.

Target Audience

Medicare-certified Home Health Agencies, home health provider associations, State Survey Agencies, State OASIS Education Coordinators, CMS Regional Offices, Quality Improvement Organizations, State Long Term Care Ombudsman, and State Medicaid Agencies.

Faculty

Tom Scully, Administrator
Centers for Medicare & Medicaid Services
Gail P. McGrath, Director
Center for Beneficiary Choices, CMS
Karen Pace, PhD, RN, Senior Scientist
Delmarva Foundation (MD QIO) Quality
Mary D. Weakland, RN, MS, Nurse Consultant
Division of Continuing Care Providers, Survey and Certification Group, Center Medicaid State Operations, CMS
Ana Nunez-Poole, Director
Division of Website Project Management, BISG, CBC, CMS

Melissa Hulbert, Acting Deputy Director
Survey and Certification Group, CMSO, CMS
Terry Ng, MSW,
QIO HH Quality Improvement Task Leader, Quality Improvement Group, Office of Clinical Standards & Quality, CMS
Rick McNaney
QIO Communications Task Leader, Quality Improvement Group, OCSQ, CMS
Verlon Johnson, MPA, Manager
Beneficiary Services, Division of Medicare Operations, Chicago Regional Office, CMS
Rob Sweezy, Director
Office of Public Affairs, CMS

Registration and Viewing Instructions

Individual and Site registration is available today. For individual and site registration and viewing instructions go to: <http://cms.internetstreaming.com>
Registrants will be able to obtain CEUs through this site.

Webcast Information

This program will have a live Webcast and will be available for viewing up to 3 months following October 3 at <http://cms.internetstreaming.com>

Satellite Technical Specifications

This broadcast will be available on C Digicipher bands. Specific satellite technical specifications are available at <http://cms.internetstreaming.com>

Handouts

Handouts for this broadcast will be available at the following website: <http://cms.hhs.gov/quality/hhqi>

Videotapes:

Videotaped copies of this program can be obtained from the National Technical Information Services (NTIS) 2 weeks following the transmission of this broadcast: (703) 605-6186 <http://www.ntis.gov>

Quality Measures

11 Publicly Reported Measures

HH Compare	OBQI
Patients who get better at getting dressed	Improvement in upper body dressing
Patients who get better at bathing	Improvement in bathing
Patients who stay the same (don't get worse) at bathing	Stabilization in bathing

HH Compare	OBQI
Patients who get better getting to and from the toilet	Improvement in toileting
Patients who get better at walking or moving around	Improvement in ambulation/locomotion
Patients who get better at getting in and out of bed	Improvement in transferring
Patients who get better at taking their medicines correctly (by mouth)	Improvement in management of oral medications

HH Compare	OBQI
Patients who are confused less often	Improvement in confusion frequency
Patients who have less pain when moving around	Improvement in pain interfering with activity
Patients who had to be admitted to the hospital	Acute care hospitalization
Patients who need urgent, unplanned medical care	Any emergent care

What's the Same as in OBQI?

- Outcome rates are computed the same way
 - Inclusion criteria
 - Numerator
 - Denominator
 - Based on 12 months of data
- The same risk adjustment models are used
 - Pain interfering with activity not risk-adjusted for OBQI
 - <http://cms.hhs.gov/quality/hhqi/RiskModels.pdf>
- Therefore, agency rates will be in the same relative position to the national reference

Risk Adjustment

- Statistically accounts for differences in one agency's patients vs. the reference sample
- Minimizes the possibility that differences in outcomes are due to differences in patient characteristics
- Separate risk models estimated for each outcome using a national reference sample

What's Different from OBQI?

OBQI	HH Compare
Outcome	Quality measure
Agency observed current rate	Agency <i>risk-adjusted</i> current rate (whole %)
National reference IS <i>risk-adjusted</i> to reflect the case mix of each HHA	National reference is the observed rate for all patients in all HHAs (whole %)

What's Different cont.?

OBQI	HH Compare
No state rate	<i>Risk-adjusted</i> state rate for all patients in all HHAs in state (whole %)
Two adjacent 12-month periods: current <u>and</u> prior	Most recently available 12 months of data
Statistically significant differences from the national reference & prior adjusted rate indicated	Statistical significance not reported

Small Samples and Extreme Values

- Quality measures will not be reported for less than 20 episodes
- No quality measures shown for agencies certified less than 6 months as of end of reporting period
- If value less than 5% reported as “< 5%”
- If value greater than 95% reported as “> 95%”

Purpose of Reporting

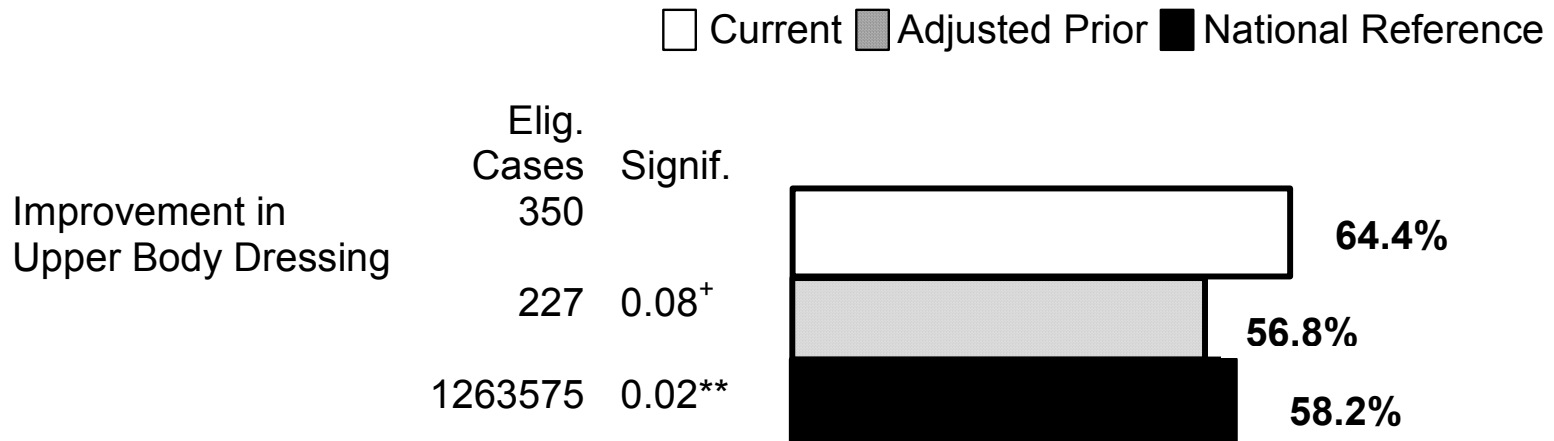
OBQI Report

- Provide HHAs with performance data to use for quality improvement and monitoring of performance changes over time

Home Health Compare

- Provide consumers with data to compare outcome performance among home health providers

Example: OBQI Report



Difference between Agency & National Reference Rates
(64.4 – 58.2) = 6.2

Example: Public Report

Percentage of patients who get better at getting dressed

Why is this important?

Most people value being able to take care of themselves. . . .

THIS IS THE AVERAGE FOR
ALL THE HOME HEALTH
AGENCIES IN THE UNITED
STATES



THIS IS THE AVERAGE FOR
ALL HOME HEALTH
AGENCIES IN THE STATE
OF XXXXX



ABC HOME HEALTH AGENCY



Difference between Agency & National Reference Rates

$$68 - 62 = 6$$

**Comparison Table of OASIS Items used in OASIS Outcome Measures and
Publicly Reported Consumer Language in Home Health Compare
(October 3, 2003)**

<i>OASIS Items Used</i>	<i>OASIS Outcome Measures</i>	<i>Consumer Language in Home Health Compare</i>
M0650 Ability to Dress Upper Body ¹	Improvement in upper body dressing	Patients who get better at getting dressed
M0670 Bathing ¹	Improvement in bathing	Patients who get better at bathing
M0670 Bathing ¹	Stabilization in bathing	Patients who stay the same (don't get worse) at bathing
M0680 Toileting ¹	Improvement in toileting	Patients who get better getting to and from the toilet
M0700 Ambulation/Locomotion ¹	Improvement in ambulation/locomotion	Patients who get better at walking or moving around
M0690 Transferring ¹	Improvement in transferring	Patients who get better at getting in and out of bed
M0780 Management of Oral Medications ¹	Improvement in management of oral medications	Patients who get better at taking their medications correctly (by mouth)
M0570 When Confused ¹	Improvement in confusion frequency	Patients who are confused less often
M0420 Frequency of Pain ¹	Improvement in pain interfering with activity	Patients who have less pain when moving around

¹ Item collected at SOC/ROC and at Discharge

² Item collected at Discharge or Transfer

³ Item collected at Transfer

JOIN THE CMS LIVE WEBCAST AND SATELLITE CONFERENCE!

Home Health Quality Initiative (HHQI) Webcast and Satellite Broadcast Friday, October 3, 2003 1:00-3:30 PM EDT

On October 3, 1:00-3:30 p.m. EDT, the Center for Beneficiary Choices in conjunction with the Centers for Medicaid and State Operations will broadcast a live two and ½ hour presentation via satellite and Internet that will provide the viewing audience with a better understanding of the Home Health Quality Initiative.

Time (EDT)	Topic	Presenter(s) *
1:00 - 1:05 p.m.	General Introduction and Background	Tom Scully, Administrator Centers for Medicare & Medicaid Services
1:05 - 1:15 p.m.	Overview of Home Health Quality Initiative	Gail P. McGrath, Director Center for Beneficiary Choices, CMS
1:15 – 1:30 p.m.	Quality Measures	Karen Pace, PhD, RN Senior Scientist Home Health Care Quality Improvement Delmarva Foundation (MD QIO)
1:30 - 1:40 p.m.	OASIS Coding of Quality Measures	Mary D. Weakland, RN, MS Nurse Consultant Division of Continuing Care Providers, SCG, CMSO, CMS
1:40 – 2:00 p.m.	Home Health Compare	Ana Nunez-Poole, Director Division of Website Project Management, BISG, CBC, CMS
2:00 - 2:15 p.m.	Live Q & A: Quality Measures, Coding, and Home Health Compare	Panel includes speakers above
2:15 - 2:30 p.m.	Role of: <ul style="list-style-type: none"> ▪ State Survey Agencies (SSA) ▪ Quality Improvement Organizations (QIOs) 	Melissa Hulbert, Acting Deputy Director, Survey and Certification Group, CMSO, CMS Terry Ng MSW, QIO HH Quality Improvement Task Leader, Quality Improvement Group, OCSQ, CMS
2:30 – 3:00 p.m.	Communications: Phase I Experience/Next Steps in National Roll Out	Rick McNaney QIO Communications Task Leader, Quality Improvement Group, OCSQ, CMS Phase I Quality Improvement Organizations Verlon Johnson, MPA, Manager Beneficiary Services, Division of Medicare Operations, Chicago Regional Office, CMS Rob Sweezy, Director Office of Public Affairs, CMS Home Health Stakeholders
3:00 - 3:15 p.m.	Live Q & A: QIOs, Roles of the QIO and SSAs and National Rollout of HHQI	Panel includes speakers above
3:15 – 3:30 p.m.	Broadcast Closing	Moderator

* Presenters for the HHQI Satellite Broadcast include Centers for Medicare & Medicaid Services, Quality Improvement Organizations, and Home Health stakeholders.

Presenter Biographies

Gail P. McGrath

Gail McGrath is the Director of the Center for Beneficiary Choices in the Centers for Medicare and Medicaid Services. She heads the Center responsible for all planning, analysis, operations, and communications related to Medicare beneficiaries. She also oversees all of CMS' policy and operations interactions with managed health care organizations. Ms. McGrath was a member of President Bush's transition team.

From 1998-2001, Ms. McGrath was a consultant, specializing in health and small business issues, particularly those related to Medicare and Medicaid. She helped clients identify government contracts, advised clients on community health and outreach programs, and represented them before Congress and government agencies.

In the 1980s, Ms. McGrath was an executive for two health-related organizations in the Washington, D.C. area, The Home Health Services and Staffing Association and JGM Associates in Bethesda, Md., where she represented clients before Congress and regulatory agencies on issues relating to Medicare and Medicaid.

Ms. McGrath received her bachelor's degree cum laude in 1975 from the University of Tennessee at Knoxville.

Karen Beckman Pace, PhD, RN

Dr. Karen Pace is the Senior Scientist for Home Health Quality Improvement at the Delmarva Foundation. There she works on the Quality Improvement Organization Support Contract for national implementation of Medicare's Outcome Based Quality Improvement system for home health agencies. She brings over 20 years of experience in health care to her career in health services research. She has held a variety of positions in home care, hospice and home infusion therapy including clinical, management, education, and policy. Prior to beginning her doctoral studies, Karen was the vice president for research and regulatory affairs at the National Association for Home Care. She received a PhD in Nursing, with a minor in Health Care Policy and Management and a Certificate in Health Care Outcomes Management and Research from the University of Kansas. A St. Louis native, Pace received a Bachelor's degree in Nursing from Southern Illinois University and a Master's degree in Nursing from St. Louis University.

Mary Weakland, MS, RN

Mary is a Nurse Consultant in the Center for Medicaid and State Operations and is co-project officer for the OASIS Web-based Training contract and project manager for the national implementation of the Outcome and Assessment Information Set (OASIS) for home health agencies. At CMS for 8 years, Mary develops OASIS policy, oversees the CMS OASIS web page and the OASIS Web-based Training Internet site, and develops a variety of training materials for the States and home health agencies.

Prior to her current OASIS responsibilities, Mary worked on the Minimum Data Set (MDS) automation project for long-term care facilities, MDS training, and swing bed hospitals. Mary has held clinical and administrative positions in home health agencies, health maintenance organizations, nursing education, and clinical nursing positions in a variety of settings. Mary holds a master's degree from the University of Maryland and a bachelor's degree from the Pennsylvania State University.

Ana Nunez-Poole

Ana Nunez-Poole is the Director of the Division of Website Project Management in the Center for Beneficiary Choices at the Centers for Medicare & Medicaid Services (CMS). In this capacity, Ana oversees the Agency's two public web sites, www.medicare.gov (for consumers) and www.cms.hhs.gov (for all other audiences). Ana Nunez-Poole started in CMS in 1995 as a Scholar Intern, landing in the Office of Managed Care after a year of rotational assignments. After developing and implementing the "Medicare Compare" database as the first section on the www.medicare.gov web site in 1998, Ana expanded her skills and expertise in database management and health care issues. In 2003, Ana accepted the challenge as Division Director over both of the Agency's web sites. Ana has a Bachelor of Business Administration from Loyola College in Baltimore, MD. However, her most significant accomplishment to date is being the mother of a terrific one-year old little girl!

Melissa M. Hulbert

Ms. Hulbert currently serves as the Acting Deputy of the Survey and Certification Group within the Centers for Medicaid and State Operations. The Survey and Certification Group works with a number of external stakeholders, including State Survey Agencies to ensure providers that participate in the Medicare, Medicaid, and Clinical Laboratory Improvement

Amendment (CLIA) programs comply with the health and safety standards established by CMS. During her 10 years of service, Ms. Hulbert has served in a number of analytic, supervisory, and management positions within CMS, including Survey and Certification, the Office of the Administrator, and CMS' research and demonstration arena. Ms. Hulbert holds a Master's Degree in Policy Sciences from the University of Maryland.

Terry Ng, MSW

Terry Ng is Government Task Leader for the Home Health Task, within CMS Office of Clinical Standards and Quality, Quality Improvement Group. She also directs two developmental Quality Improvement projects on the topic of Depression. Prior to her joining CMS in July 2000, she held clinical and managerial positions at for profit and not for profit health care settings for 24 years. Those settings included psychiatric hospitals, community outpatient clinics, nursing home, medical rehabilitation and managed care companies.

Richard McNaney

Richard McNaney is a senior communications specialist with the Quality Improvement Group in CMS's Office of Clinical Standards and Quality. Rick is currently the government task leader for the Quality Improvement Program leading efforts to promote the use of performance data through QIO information and communication. Prior to joining OCSQ, he was director of the Communications Staff in the Centers for Beneficiary Choice responsible for the promotion and publicity of Medicare's information channels (1-800 MEDICARE, www.medicare.gov and the Handbook).

Verlon Johnson, MPA

Verlon Johnson currently serves as the Manager for Medicare Beneficiary Services for the Chicago Regional Office of the Centers for Medicare & Medicaid Services (CMS). She has the primary responsibility of planning, directing, evaluating, and managing activities that affect over 7 million Medicare beneficiaries located in the States of Illinois, Indiana, Ohio, Michigan, Minnesota, and Wisconsin. Ms. Johnson has worked for CMS for 7 years. Before assuming her current position, she served as the Special Assistant to the Regional Administrator of CMS. In this role, she was the focal point for issues and policies having regional and/or national impact that required the Regional Administrator's involvement. Ms. Johnson obtained a Bachelor of Science degree from Texas A&M University and a Master of Public Administration from Texas Tech University.

Dallas "Rob" Sweezy

Dallas R. "Rob" Sweezy is the Director Public Affairs for the Centers for Medicare & Medicaid Services. He manages the agency's relations with the media, state and local governments, Native American tribes and provider and beneficiary outreach efforts. Mr. Sweezy developed the agency's first nationwide advertising campaign targeted to those who rely on Medicare and Medicaid. Mr. Sweezy is the key "Open Door" contact for home care and hospice care providers and for groups that work with individuals with disabilities who rely on Medicare and Medicaid services. Prior to coming to CMS, he was President of Public Affairs Strategies, a comprehensive public relations, political communications and issues management consulting group. Mr. Sweezy has served as the Director of Legislative and Public Affairs for an Agriculture Department agency, managing day-to-day media, public relations and legislative strategy. Mr. Sweezy received his Bachelor of Arts degree in political science from Baylor University and has completed post-graduate studies in public policy and international business at George Washington University.

**Home Health Quality Initiative
Satellite Broadcast
TECHNICAL FACT SHEET
DATE: October 3, 2003**

TEST TIME: 12:30 - 1:00 p.m. EDT
11:30 - 12:00 p.m. CDT
10:30 - 11:00 a.m. MDT
9:30 - 10:00 a.m. PDT

PROGRAM TIME: 1:00 - 3:30 p.m. EDT
12:00 - 2:30 p.m. CDT
11:00 - 1:30 p.m. MDT
10:00 - 12:30 p.m. PDT

**WEBCAST
TROUBLESHOOTING
NUMBER:**

703-812-8816

**SATELLITE TROUBLE
NUMBER:**

410-786-3618

SATELLITE COORDINATES Galaxy 3C, 95W, Tx 03, 3760 MHz, HD
CMS Digital Network: Channel 712

Individuals and Sites outside of the CMS satellite network who wish to set up a site for this program or view this broadcast via webcast should go to **[http:// cms.internetstreaming.com](http://cms.internetstreaming.com)** to register. Handouts can be found at <http://www.cms.hhs.gov/quality/hhqi>

IMPORTANT SATELLITE INFORMATION TO HELP YOU TUNE IN

1. Galaxy 3R is located at 95 degrees West. You can probably find it by choosing G3 on your receiver. If you would like to set up early or test your equipment on another day, go to Galaxy 3R and see if you can see the following programming:

Channel 10 & 18 Occasional infomercials

2. Once you establish that you are on the correct satellite, don't forget to change back to Channel 6 for our program. If you can't find it or if you believe you are on Galaxy 3R, but don't see any of this programming, you'll need to have your system checked out by a professional before our program.
3. It is very important for you to test your equipment as soon as possible to ensure that it is functioning properly and to see if you can get programming from one of the satellites we'll be on. Storms can cause damage and/or move your antenna out of alignment or you

may not have your satellite of choice programmed in. Do not wait until test time to discover problems. If you think your dish and/or receiver are malfunctioning or not programmed correctly, have them checked out by a professional well before the program.

4. The signal will start out with color bars that say "CMS" and a tone. After that there will be a program ID slate and music. You should see AND hear during the entire test. If you do not, report the problem to your technical person and call the Trouble Line to check if it's an origination problem or a local problem.
5. Although a Troubleshooter will be provided, we cannot guarantee the performance of your equipment.