

# Home Health Quality Measures (archives)

May 30, 2019

## Publication of Potentially Preventable Readmission Measures for the Post-Acute Care Quality Reporting Programs (QRPs)

Beginning fall 2019, CMS will publicly display measure results on the Home Health Compare website for the Potentially Preventable 30-Day Post-Discharge Readmissions measure adopted for the Home Health (HH) Quality Reporting Program (QRP). We postponed publishing this measure in late 2018 to allow more testing to ensure it provides a reliable, accurate picture of provider performance on quality, in line with CMS's Meaningful Measures Initiative to address high-priority areas for quality measurement with measures that will help improve patient outcomes while minimizing provider burden. We have since completed this additional testing.

### Background

- The Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014 directs the Secretary to specify a measure that reflects all-condition risk-adjusted potentially preventable hospital readmission rates for use in the HH QRP. The IMPACT Act also requires the Secretary to publicly report provider performance on resource use and other measures, including measures to reflect all-condition risk-adjusted potentially preventable hospital readmission measures.
- CMS developed a potentially preventable 30-day readmission measure for the HH QRP to meet the resource use and other measures domain as mandated by the IMPACT Act.
- Since potentially preventable readmission rates are relatively low, we conducted additional testing to ensure that this measure reliably assesses a provider's performance on quality. We postponed publishing this measure while we were conducting this additional testing.
- We have since completed our additional testing and will publish this measure on the HH Compare website for the October 2019 HH Compare Quarterly Refresh.

### Quality Measures Used in the Home Health Quality Reporting Program

The following two categories of quality measures are used in the Home Health Quality Reporting Program (HH QRP):

1. Outcome measures; and
2. Process measures.

It is important to note that only a subset of process and outcome measures are HH QRP measures that have been finalized via rule-making and that are publicly reported on Home Health Compare.

This page contains brief descriptions of each measure type and how the data for that measure is calculated. The Downloads section below provides links to technical documentation, tables identifying which Home Health Quality Measures are risk-adjusted and reported publicly, and additional resources.

Questions about home health quality measures may be sent to [HomeHealthQualityQuestions@cms.hhs.gov](mailto:HomeHealthQualityQuestions@cms.hhs.gov).

**NOTE:** Medicare-certified HHAs are required to participate in the HH QRP by participating and reporting both OASIS (patient quality of care) measures and HHCAHPS (patient survey results) measures. The HHCAHPS measures are from a 34-question survey. CMS groups the measures by topic into three composite measures and two overall measures. CMS publicly reports the HHCAHPS on [www.medicare.gov](http://www.medicare.gov) on Home Health Compare, and they are called "patient survey results" on the compare site. The five measures are: (1)

Care of Patients, (2) Communications between Providers and Patients, (3) Specific Care Issues, (4) Overall Rating of Care, and (5) Patient willingness to recommend HHA to family and friends.

## **Outcome Measures**

Outcome measures assess the results of health care that are experienced by patients. The data for the Home Health outcome measures are derived from 2 sources: (1) data collected in the Outcome and Assessment Information Set (OASIS) submitted by home health agencies; and (2) data submitted in Medicare claims.

Measures based on OASIS data are calculated using a completed episode of care that begins with admission to a home health agency (or a resumption of care following an inpatient facility stay) and ends with discharge, transfer to inpatient facility or, in some cases, death. Measures based on home health claims data are calculated based on the first home health claim that starts an episode of care for a patient and end either 30 or 60 days after the initial claim, across an entire episode of care, or in the period of time following discharge (see section titled **Claims-Based Measures** below).

Many home health outcome measures are risk adjusted. Risk-adjusted outcome measures are identified in the [Home Health Outcome Measures Table \(PDF\)](#) that is available in the “Downloads” section below. The risk adjustment methodology, using a predictive model developed specifically for each measure, compensates for differences in the patient population served by different home health agencies.

The HH QRP measures and the broader list in the Home Health Quality Initiative, include four types of Outcome measures:

1. Improvement measures (i.e., measures describing a patient’s ability to get around, perform activities of daily living, and general health);
2. Measures of potentially avoidable events (i.e., markers for potential problems in care);
3. Utilization of care measures (i.e., measures describing how often patients access other health care resources either while home health care is in progress or after home health care is completed); and
4. Cost/Resource measures

For a list of home health outcome measures, please refer to the Home Health Outcome Measures Table, which can be located via the link for Home Health Measures Tables in the Downloads section below. Technical Specifications for calculating OASIS-based outcome measures, patient-related characteristics measures, and the factors used to risk adjust outcome measures, can be accessed via the link for Technical Documentation of OASIS-Based Measures in the Downloads section below.

## **Potentially Avoidable Event Measures**

Potentially Avoidable Event (PAE) measures are a subset of outcome measures. Potentially avoidable events serve as markers for potential problems in care because of their negative nature and relatively low frequency. The potentially avoidable events reported are outcome measures, in the sense that they represent a change in health status between start or resumption of care and discharge or transfer to inpatient facility. All the potentially avoidable event measures are adjusted for variation in patient characteristics.

For a list of the potentially avoidable event measures, please refer to the Home Health PAE Measures Table, which can be located via the link to the Home Health Measures Tables in the Downloads section below.

Technical documentation for calculating potentially avoidable event measures can be accessed via the link to Technical Documentation of OASIS-Based Measures in the Downloads section below. The Downloads section also has a link for the Outcome-Based Quality Monitoring Manual which contains additional information about the PAE measures.

## **Claims-based measures**

Claims-based utilization measures are a subset of home health outcome measures. We calculate them using:

- The first home health claim that starts an episode of care for a patient, or in the period after discharge
- Negative events like a hospitalization or emergency department care in a certain time frame or a lack of negative events.

These measures look at the rate of problems that might happen in care when specific services are used. In most cases, lower values are better than higher values because they show fewer negative events for patients at that home health agency.

These are the six claims-based utilization measures:

1. Acute Care Hospitalization During the First 60 days of Home Health (ACH)
2. Emergency Department (ED) Use without Hospitalization During the First 60 Days of Home Health
3. Rehospitalization during the First 30 Days of Home Health (Rehospitalization)
4. ED Use without Hospital Readmission During the First 30 Days of Home Health (ED Use without Hospital Readmission)
5. Discharge to Community
6. Potentially Preventable 30-Day Post-Discharge Readmission

The HH QRP also includes one measure of cost/resource use, Medicare Spending per Beneficiary – Post-Acute Care (MSPB-PAC) Home Health. This measure weighs the Medicare spending of a home health agency's MSPB-PAC HH episodes, relative to the Medicare spending of the national median home health agency's MSPB-PAC HH episodes across the same performance period.

Starting with the January 2019 refresh of Home Health Compare, we'll update the HH QRP claims-based measure results every year. We'll re-calculate in the October before the update. You can find detailed specifications for the claims-based measures under Downloads.

\*\*\*Please note that that Emergency Department Use without Hospital Readmission During the First 30 Days of Home Health and Rehospitalization during the First 30 Days of Home Health have been removed from the HH QRP and will no longer be publicly reported beginning in January 2020.

## **Process Measures**

Process measures evaluate the rate of home health agency use of specific evidence-based processes of care. The HH process measures focus on high-risk, high-volume, problem-prone areas for home health care. These include measures pertaining to all or most home care patients, such as timeliness of home care admission or immunizations. There are also measures for specific diagnoses (heart failure, diabetes, pressure ulcers) and measures of care planning and clinical interventions delivered for patients experiencing certain symptoms

Process measures are derived from data collected in the OASIS submitted by home health agencies and are calculated using a completed episode of care that begins with admission to a home health agency (or a resumption of care following an inpatient facility stay) and ends with discharge, transfer to inpatient facility or sometimes death.

Unlike the outcome measures, process measures are not risk-adjusted. Risk adjustment is not considered to be necessary for process measures because the processes being measured are appropriate for all patients included in the denominator (patients for whom the measure is not appropriate are excluded).

For a list of process measures, please refer to the Home Health Process Measures Table, which can be located via the link to Home Health Measures Tables in the Downloads section below. Technical documentation for calculating process measures can be accessed via the link to Technical Documentation of OASIS-Based Measures in the Downloads section below.

## Downloads

- [Revised Process PAE and Patient Characteristics Documentation June 2017.zip \(ZIP\)](#)
- [OASIS 2019 Change Table for CY18 HH PPS Final rule.pdf \(PDF\)](#)
- [Data elements finalized for removal in CY 2018 HH PPS Final Rule.pdf \(PDF\)](#)
- [Home-Health-Outcome-Measures-Table-OASIS-C2\\_August\\_2018 \(PDF\)](#)
- [Function Process Measure\\_Public Comment Summary 3-01-17.pdf \(PDF\)](#)
- [Home Health Process Measures Table OASIS-D 11-2018 \(PDF\)](#)
- [Home Health PAE Measures Table OASIS-D 11-2018 \(PDF\)](#)
- [Change Table for Proposed HH QRP Items - Effective January 1 2021 \(PDF\)](#)
- [Proposed HH QRP Items Mockup - Effective January 1 2021 \(PDF\)](#)
- [Home Health QRP QM Users Manual V1.0 August 2019 \(PDF\)](#)
- [PPR Risk Adjustment Methodology 07DEC2016-508 v3.pdf \(PDF\)](#)
- [ItemSetSpecificationsForCY17-HH-QRP-FR.pdf \(PDF\)](#)
- [HH QRP Measure Risk Specifications New and Worsened Pressure Ulcers \(PDF\)](#)
- [Home-Health-Process-Measures-Table OASIS-C2 updated 06 19 18 \(PDF\)](#)
- [Technical Documentation of OASIS-Based Measures for OASIS-C, OASIS-C1, OASIS-C2\\_02\\_03\\_2017 final \(ZIP\)](#)
- [OASIS Items for the CY 2018 HH PPS Final Rule.pdf \(PDF\)](#)
- [Home Health ReHospitalization Measures Technical Documentation and Risk Adjustment.ZIP \(ZIP\)](#)
- [Home-Health-Outcome-Measures-Table-OASIS-D-11-2018 \(PDF\)](#)