Hospice Quality Reporting Program Quality Measure Specifications User's Manual

Draft Chapter for Proposed HOPE-Based Measures

Process Measures Calculated from the Hospice Outcome & Patient Evaluation (HOPE): Timely Reassessment of Pain Impact (#01795-02-C-HQR and Timely Reassessment of Non-Pain Symptom Impact (#01796-01-C-HQR)

Section 1: Measure Description

The purpose of this chapter is to describe *Timely Reassessment of Pain Impact* (#01795-02-C-HQR) and *Timely Reassessment of Non-Pain Symptom Impact* (#01796-01-C-HQR). These quality measures are calculated from data collected through the Hospice Outcomes & Patient Evaluation (HOPE) and submitted to CMS under the Hospice Quality Reporting Program
(HQRP). Both measures capture the percent of hospice patient assessments that have a symptom reassessment within two (2) days when the symptom impact was initially assessed as moderate or severe, as follows:

- *Timely Reassessment of Pain Impact* measure captures the percent of hospice patient assessments that have a pain reassessment within two (2) days after pain impact was initially assessed as moderate or severe; and
- *Timely Reassessment of Non-Pain Symptom Impact* measure captures the percent of assessments that have a symptom reassessment within two (2) days after non-pain symptom impact was initially assessed as moderate or severe.

Data for these measures are collected by hospice clinicians using HOPE. Symptom impact assessments are administered at fixed timepoints during a hospice election: at admission (ADM) and the two HOPE Update Visits (HUVs), each at specified timeframes. Symptom Impact item (J2051) may trigger the need for the Symptom Reassessment (SRA). When the patient's pain or non-pain symptom impact is assessed as moderate or severe, a HOPE SRA visit is expected within two (2) calendar days as a follow-up for any pain or non-pain symptom impact rated as moderate or severe. For these measures, the measurement time window begins at the date of the symptom impact screening (J2050B) where the impact is assessed as moderate or severe to within two (2) calendar days. Depending upon responses to the Symptom Impact item (J2051) at ADM and the two HUVs, each at specified timeframes, up to three SRAs may be required over the course of the hospice stay. If during an SRA visit, there is evidence of ongoing moderate or severe symptoms, no additional HOPE SRA is required. Although multiple SRA's are not required for the purpose of the HQRP, it is expected that the hospice staff will continue to follow up with the patient, based on their clinical and symptom management needs.

Section 2 below describes the method in which eligible records are selected. **Section 3** describes the steps for calculating the measure. **Section 4** and **Section 5** discuss considerations for public reporting, the minimum quality denominator threshold count for a hospice to have publicly reported data, and methods for calculating state and national measure scores, respectively.

Section 2: Data Sources

The eligible records for both hospice process measures are selected as follows (note that bold italic text indicates terms defined in **Appendix 1: Definitions**):

1. Obtain all records for the two-year/eight-quarter ***reporting*** period.
2. Identify case records(s) for each patient. This means:
    a. Identify the ADM record or HUV record (where applicable); and
    b. Identify the symptom impact assessment date (where available).
3. Select assessments to be included in the ***hospice process measure sample*** if the patient assessments have a discharge record with a ***target date*** within the ***reporting period***. All eligible assessments for a patient are included and a patient can have multiple assessments included in the sample.
4. Select each ADM record (A0250. = 01) and HUV record (A0250. = 02) associated with each patient assessment for the ***hospice process measure sample***.
5. Apply the measure specifications (see Section 3 below) to the selected ADM and HUV records. Round all measure scores using the rounding rule.

Section 3: Measure Calculation

Steps to calculate each measure and data elements used in each step are as follows. Note that in the notation, numbers in brackets index a data element located on the ADM or HUV (initial assessments) [1] or on the SRA (re)assessment [2].

Step	Calculation for *Timely Reassessment of Pain Impact*	Calculation for *Timely Reassessment of Non Pain Symptom Impact*
Step 1: Calculate the denominator	Total number of HOPE ADM or HUV assessments where pain impact was assessed as moderate or severe. • At ADM or HUV (A0250. = 1. Admission or 2. HUV) [1], Symptom Impact - Pain (J2051.A.) [1] = 2. Moderate or 3. Severe	Total number of HOPE ADM or HUV assessments where any non-pain symptom impact was assessed as moderate or severe. • Symptom Impact - Shortness of Breath (J2051.B.) at ADM or HUV (A0250. = 1 or 2) [1] = 2. Moderate or 3. Severe, or • Symptom Impact - Anxiety (J2051.C.) at ADM or HUV (A0250. = 1. Admission or 2. HUV) [1] = 2. Moderate or 3. Severe, or • Symptom Impact - Nausea (J2051.D.) at ADM or HUV (A0250. = 1. Admission or 2. HUV) [1] = 2. Moderate or 3. Severe, or • Symptom Impact - Vomiting (J2051.E.) at ADM or HUV (A0250. = 1. Admission or 2. HUV) [1] = 2. Moderate or 3. Severe, or • Symptom Impact - Diarrhea (J2051.F.) at ADM or HUV (A0250. = 1. Admission or 2. HUV) [1] = 2. Moderate or 3. Severe, or • Symptom Impact - Constipation (J2051.G.) at ADM or HUV (A0250. = 1. Admission or 2. HUV) [1] = 2. Moderate or 3. Severe, or • Symptom Impact - Agitation (J2051.H.) at ADM or HUV (A0250. = 1. Admission or 2. HUV) [1] = 2. Moderate or 3. Severe
Step 2: Remove any denominator exclusions	Remove if: • Patient was discharged from hospice for any reason before an SRA could be completed → exclude o Symptom Reassessment in-person visit was not completed (Symptom Reassessment Visit (J2052.A.) [2] = 0, and o Discharge Date (A0270.) [2] ≤ Date of Symptom Impact Screening (J2050.B.) [1] + two days • Hospice was unable to complete the SRA Visit → exclude o Symptom Reassessment in-person visit was not completed (Symptom Reassessment Visit (J2052.A.) [2] = 0, and	Remove if: • Patient was discharged from hospice for any reason before an SRA could be completed → exclude o Symptom Reassessment in-person visit was not completed (Symptom Reassessment Visit (J2052.A.) [2] = 0, and o Discharge Date (A0270.) [2] ≤ Date of Symptom Impact Screening (J2050.B.) [1] + two days • Hospice was unable to complete the SRA Visit → exclude o Symptom Reassessment in-person visit was not completed (Symptom Reassessment Visit (J2052.A.) [2] = 0, and o Hospice Unable to Visit (J2052.C.) [2] = 1. Patient and/or caregiver declined an in-person visit, 2. Patient unavailable

Step	Calculation for *Timely Reassessment of Pain Impact*	Calculation for *Timely Reassessment of Non Pain Symptom Impact*
	o Hospice Unable to Visit (J2052.C.) [2] = 1. Patient and/or caregiver declined an in-person visit, 2. Patient unavailable (e.g., in ED, hospital, travel outside of service area), or 3. Attempts to contact patient and/or caregiver were unsuccessful.	(e.g., in ED, hospital, travel outside of service area), or 3. Attempts to contact patient and/or caregiver were unsuccessful.
Step 3: Calculate the numerator	Number of HOPE ADM or HUV assessments for which a symptom impact reassessment date was within two days of the initial/triggering assessment date. • Date of SRA in-person visit (J2052.B.) [2] - Date of Symptom Impact Screening (J2050.B.) [1] ≤ Two (2) days when a Symptom Impact Screening occurred (J2050.A. = 1. yes) [1]	Number of HOPE ADM or HUV assessments for which a symptom impact reassessment date was within two days of the initial/triggering assessment date. Date of SRA in-person visit (J2052.B.) [2] - Date of Symptom Impact Screening (J2050.B.) [1] ≤ Two (2) days when a Symptom Impact Screening occurred (J2050.A. = 1. yes) [1]
Step 4: Express the measure score as a proportion	Divide the hospice's numerator count by its denominator count to obtain the hospice's observed score; that is, divide the result of step 3 by the result of step 2. The score is converted to a percent value by multiplying by 100. Round the score using the rounding rule, as defined in Appendix 1.	Divide the hospice's numerator count by its denominator count to obtain the hospice's observed score; that is, divide the result of step 3 by the result of step 2. The score is converted to a percent value by multiplying by 100. Round the score using the rounding rule, as defined in Appendix 1.

Section 4: Public Reporting Threshold

Hospices must have at least 20 qualifying denominator cases (i.e., 20 HOPE ADM or HUV assessments where symptom impact was assessed as moderate or severe) during the reporting period in each respective measure for scores to be publicly reported on the Care Compare site. Hospices that do not meet this threshold will have measure scores suppressed. If there are 20 qualifying denominator cases for one measure but not the other, then the measure above the threshold will be reported but the other with below 20 qualifying denominator cases will be suppressed.

Section 5: National and Average State Calculation

To calculate the national average for each measure, take the national sum of all the hospices' individual numerators and divide by the total summation of nationwide hospices' individual denominators. Statewide averages are calculated by dividing the statewide summations of numerators by statewide summation of denominators among all hospices located in that state. Round the national and state averages using the ***rounding rule***, as defined in **Appendix 1**. Note that both state and national averages include the numerators and denominators of hospices that are publicly suppressed individually because the denominator size did not meet the minimum threshold for public reporting.