

Questions and Answers from Home Health, Hospice and DME Open Door Forum- November 4, 2020

1. This question is about the Home Health Quality Reporting Program publicly reporting. We were refreshed on Home Health Compare in October 2020. Am I understanding you correctly that the next time it will refresh will not be until January 2022?
 - a. You are correct. The October 30 refresh was the last refresh and that will be followed by four quarters during which we hold that data constant on the website. We will then resume public reporting on Home Health Compare with the January 2022 refresh.
2. When will the updated risk adjustment model be published on the HQRP website, which is based on items such as 1242, the frequency of paying being voluntary or optional?
 - a. We are working with the contractors who are going through a transition period. So they have all the specifications and as soon as we can get it up. We definitely hope to be able to have it up by January 1 at which time we will post the documentation to explain our changes on our website.
3. When will the home health risk-adjusted model be reflected in iQIES reporting?
 - a. That's the reference I was making to the changes to the specification we handed them over to the contractor and trying to get it scheduled so that they can make the changes within the system.
 - i. Around that time we'd expect the publication on the (HHQRP) website as well?
 1. That's correct. And then they would make all of the changes necessary for all of the dates of service (M0090 of January 1, 2021 and later.
4. Just wanted to find out if a RAP goes into an RTP how long do we have to correct it before it - while it's still being considered timely?
 - a. It's the same five-day period you'd want to work in the RTPs.
5. I was just wanting to clarify here something further on the home health publicly reporting date, that I understand that it will be frozen until January 2022? Where then it will be publicly reported again. My question is regarding some of the data for the time period that will be reported in January 2022 will still technically include Quarter 1 and Quarter 2 of this year during the public health emergency. Have you guys been able to come up with a decision on how you will use or not use that data when that January report comes out?
 - a. We made a decision and we issued this in a memo back in March that with respect to Quarter 1 and Quarter 2 of 2020 we would not use any of that data for the purposes of public reporting. So if you will, the pause in our publicly reported data has to do with, you know, those two quarters running through the period of performance. Our measures are based on either four or eight rolling quarters of data depending upon the measure. And as those quarters roll through the periods of performance, you know, we'll be pausing any reporting on the site. When we begin public reporting again we will be beyond those two quarters and will be within Quarter 3 and Quarter 4 and so forth. So the period of performance that we use for the January 2022 refresh will not include either of those two quarters.
 - i. I guess the specifically the measure of the hospitalizations in the Star quality patient care that would usually be an entire calendar year of 2020. So are you

saying that the first two quarters would be just excluded when you're using that measure for reporting?

1. Yes.

6. Could you tell me again where I can find the written documentation on the final rule on the telehealth visits?
 - a. If you want to look at the calendar year 2021 HHPPS final rule you can find it on the Home Health Agency Center webpage. There is a link there that you can click on that will take you to the final rule.
7. I would just like to verify data for 2021 that we as an agency will still have the availability of all of our reports in the iQIES system?
 - a. Yes you will. We will still be issuing those confidential feedback reports and you will still have access to all of your data during the period.
8. Wanted to clarify on the RAP penalties a couple of things. So you said just to make sure I understood right the first visit date no longer needs to match what comes across on the final, is that right?
 - a. On the RAP you can report the firm date, the first day of 30-day period as the line item date on the Revenue Code 00239. And then the first visit date, say the first nursing line, that date no longer needs to match what was submitted on the 0023 line.
 - i. And it was kind of gone over kind of quick so I kind of missed it. Did you say that we don't need to wait for the starter care OASIS to be accepted before we could submit the RAP?
 1. You don't need to use the always this information to calculate the HPPS code. So you can submit any valid HPPS code value on the RAP.
9. So going back to the RAP going into RTP if it was submitted timely within five days but goes into RTP that would still be considered timely submitted if corrected within two business days?
 - a. No you would need to correct it within the 5-day period. And the circumstance of RAPs being RTP'd, you know, should be fairly infrequent but, you know, if that happens you need to, you know, turn them around and resubmit them right away.