Hospice Evaluation & Assessment Reporting Tool (HEART) Pilot Project Overview

The Centers for Medicare & Medicaid Services (CMS) has contracted with RTI International to develop the Hospice Evaluation & Assessment Reporting Tool (HEART), an expanded item set covering the comprehensive patient assessment for hospice providers. The contract name is Hospice Quality Reporting Program Measure Development, Maintenance and Support. The contract number is HHSM-500-2013-13015I. As part of the HEART development process, RTI will be pilot testing the draft HEART instrument by conducting two sequential pilot tests.

The purpose of this project is to develop an item set that would provide data that allows for a broader picture of the quality of care provided by hospice agencies, as well as a more comprehensive understanding of patient needs and service delivery for hospice patients. Thus, the HEART instrument includes items that are critical for high-quality patient care, including elements that help hospice providers work with patients and families to establish goals of care consistent with the individual's values. HEART may give CMS insights into the quality of care delivered to patients, generating the ability to calculate meaningful quality measures from the items, and may also help CMS identify patients who require the highest intensity of hospice services. Finally, the HEART instrument will be useful for other CMS regulatory activities, including survey and care planning, to ensure a multifunctional assessment that meets CMS' core needs.

HEART will include current items from the Hospice Item Set (HIS), as well as additional clinical items. Additionally, HEART will complement the Medicare Hospice Conditions of Participation (COP) requirements and the data that is routinely collected as part of high-quality clinical care. The focus of the pilots will be twofold: First, to evaluate the feasibility of implementing the HEART instrument by examining provider data collection methods, disruption to current clinical practice, and experiences of provider burden. These evaluation areas will give RTI and CMS insight into issues that could impact the reliability and validity of HEART data items (and thus any quality measures that could be developed using HEART items). Second, the pilots will ascertain the usability of the piloted items to capture the key concepts integral to HEART's purpose.

Projected Project Timeline
- October 2017: Recruit hospices with varying characteristics (size, location, organizational features)
- January 2018: Train hospices for Pilot A data collection
- January 2018: Begin data collection (six weeks)
- February 2018: End data collection
- February/March 2018: Debriefing calls with all hospice pilot sites to collect qualitative data about their data collection and submission processes
- March 2018: RTI data analysis
- June 2018: Train hospices for Pilot B data collection
- July 2018: Begin data collection (eight weeks)
- August/September 2018: End data collection
- August/September 2018: Debriefing calls with all hospice pilot sites to collect qualitative data about their data collection and submission processes
- September 2018: RTI data analysis

Provider Role and Responsibilities
- Participate in data collection training (via webinar)

- Complete the HEART admission assessment for each newly admitted hospice patient during the initial assessment period
- Complete HEART interim assessment for eligible patients
- Complete HEART discharge assessment for eligible discharges
- Electronically submit the HEART assessments every week to RTI, following the data submission timeline and procedures provided by RTI
- During data collection, participate in weekly calls with RTI and other participants to address data collection process issues
- Participate in a structured "debriefing" call with RTI once data collection has been completed
- Hospices may be selected to participate in either Pilot A, Pilot B, or both Pilot A and Pilot B

How RTI will help hospices during the pilot
- Train pilot participants on the use of HEART. Training methods will include webinars, individual contact with the project team, and a variety of instructional reference materials
- Help pilot sites establish data collection procedures consistent with their workflows
- Support hospices throughout the pilot, making available a helpdesk, and conducting weekly "check-in" calls with pilot sites to address any questions or problems with data collection and submission
- Receive completed HEART assessments, conduct data entry, and electronically store the assessment data for analysis

If you are interested in participating, please complete the pilot interest form located in the download section of the HQRP Requirements and Best Practices tab on the HQRP website and email it to hospice@rti.org **by October 31, 2017.** The project team will contact you to further discuss the pilot project. If you have questions about the pilot, please contact Jennifer Tierney Lyden at 919-541-7447 or at jlyden@rti.org.