

Centers for Medicare and Medicaid Services
Questions and Answers:
Home Health, Hospice and DME Open Door Forum
Wednesday, January 10, 2024

1. Question: I just have a question. In iQIES today, I notice that we have the home health—the HHA Provider Preview Report for April 2024. Do we know when the next star rating will be released?
 - a. Answer: We assume your question is in regard to the Star Rating Preview Report - As announced on the Home Health Quality Reporting Spotlight and Announcements webpage on January 10th, 2024, the Preview Reports and Star Rating Preview Reports for the April 2024 Refresh are now available in iQIES.
2. Question: My question is about whether CMS plans to update the State Operations Manual, Appendix M, to address the makeup of the interdisciplinary group? So, the clarification I'm looking for is at 418.56A1 about the makeup of the interdisciplinary group. Now with the addition of marriage and family therapists and mental health counselors, I think hospice programs are wondering if they always need to have a social worker on the group even though they might be using a marriage and family therapist or a mental health counselor with a particular patient and family. I just think more guidance needs to be issued. I work with hospice providers in the states of Oregon and Washington.
 - a. Answer: So, we currently have Qs and As related to this entire topic area. Finishing up CMS clearance right now and I hope to have them out to the industry, and it will also be posted on the hospice center—CMS hospice center web page, that will answer these questions. In regards to the State Operations Manual, once the Q&A is out, QSOG (Quality, Safety & Oversight Group), which is the survey side of CMS, will be spending out a QSO memo, and the guidance then currently being worked on. But guidance takes a little bit because it has to go through clearance at CMS and that will come out.
3. Question: My question relates to the hospice datasets published on the CMS website. There was an additional dataset published December 20 that was not associated with the Care Compare refresh. And we're just wondering if there is a difference in the December dataset compared to what was published along with the refresh in November or why there was an additional dataset published, if there's anything that providers should be aware of.
 - a. Answer: There's nothing that would have changed in the dataset. I think it may have been something with like a date to make sure that it was updated.

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But there's no change in the guidance itself and no change to the actual item set at this time.

4. Question: I'm asking about the TNC (Total Normalized Composite) numbers since they were frozen in October. I'm wondering if they will be unfrozen for January in the interim report.
 - a. Answer: They created a crosswalk to the new reporting numbers or whatever that caused the issue. I believe that will be done by then, but I don't want to promise something that I'm not in control of.
5. Question: I wanted to ask about DME post-rate setting and specifically in the 2020 final rule, you all talked about—you established a one-time price adjustment that could happen over a five-year lookback period for DME post items that didn't have a cross walked rate, and we were wondering what if any—given that 2024 could be the first year this could occur? What, if anything, CMS is planning in this policy area in this regard this year.
 - a. Answer: CMS is not adjusting the price beyond the annual update factor. If CMS determines that another one-time price adjustment is necessary, CMS will communicate their decision to the appropriate stakeholders.
6. Question: We are being inundated with CHOW (Change of Ownership) requests that have all come in like the last four days of December and they're all coming in the first week of January. Of course, they're dated. All these purchases took place in October, November, and December, but they're all wanting to be processed right now. The brand-new hospices that were just initially surveyed within a year and we're not able to go back out and find them. But they're all being purchased, and I just want to know if the 36-month rule, is it that they—if they were purchased before the 1st of January but we're processing them where they're applying for CHOW now, does the 36-month rule still apply?
 - a. Answer: The provisions of 42 CFR § 424.550(b)(1) and (2) with respect to the hospice 36-month rule became effective January 1, 2024. This means these provisions impact only those hospice ownership transactions whose effective date is on or after January 1, 2024. However, the provisions can apply irrespective of when the hospice first enrolled in Medicare. Consider the following illustrations:
 - Example 1 – Smith Hospice initially enrolled in Medicare effective February 1, 2022. Smith undergoes a change in majority ownership effective February 1, 2024. The provisions of § 424.550(b)(1) apply to Smith because it underwent a change in majority ownership within 36 months of its initial enrollment.

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- Example 2 – Jones Hospice initially enrolled in Medicare effective February 1, 2016. Jones undergoes its first change in majority ownership effective February 1, 2024. Section 424.550(b)(1) does not apply to this transaction because it occurred more than 36 months after Jones’s initial enrollment. Suppose, however, that Jones undergoes another change in majority ownership effective February 1, 2025. Section 424.550(b)(1) applies to this transaction because it took place within 36 months after Jones’s most recent change in majority ownership (i.e., on February 1, 2024).
 - Example 3 – Davis Hospice initially enrolled in Medicare effective February 1, 2012. It underwent its first change in majority ownership effective February 1, 2016. This change was not affected by § 424.550(b)(1) because it occurred more than 36 months after Davis’s initial enrollment. Davis underwent another change in majority ownership effective February 1, 2023. This change, too, was unaffected by § 424.550(b)(1), for it occurred more than 36 months after the hospice most recent change in majority ownership (i.e., on February 1, 2016). Davis underwent another majority ownership change on February 1, 2025. This change is impacted by § 424.550(b)(1), since it occurred within 36 months of the Hospice most recent change in majority ownership (i.e., on February 1, 2023).
7. Question: I'm just wondering where all the refresh dates and what [inaudible] for the Care Compare—is that posted somewhere for easy reference?
 - a. Answer: So, there are tables located on both the HQRP and HH QRP websites that lead into when the refreshes happen. But let me put those two in the chat for you. And then, if there's something that is outside of that or you're unable to find that information, you can always email both of the helpdesks for home health or for hospice and we should be able to get you a timeline.
 8. Question: Just wondered if there's any update on hospice HOPE (Hospice Outcomes & Patient Evaluation).
 - a. Answer: The HOPE is still in progress, and it will be provided, or updates will be provided, in an upcoming rule making.
 9. Question: I work for a health plan, and I'm wanting to know, is there going to be any updates to the All-Plan Letter (APL) in regards to any prior authorization approvals for hospice?
 - a. Answer: CMS does not publish All Plan Letters.
 10. Question: Where can I find any webinar education in regards to the—understanding the Home Health Value-Based Purchasing Report that was published? I know that there was a webinar that was going on, but I couldn't find the link to how to interpret the interim report that we had recently posted.

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- a. Answer: If you go on the model's web page, you will find the actual slides from that webinar. You can also listen to the recording of it. And then there's a Q&A document that came out as a result of that. The model guide also gives you some information. But let me look real fast and see if I can tell you what section it's under. There's section called "Model Reports." And it's after you get down to HHVBP resources, it's after the FAQs and model guide. But this model report, you'll find how to access reports, how to do a recalculation request, the quick reference guide and then the webinars and the related documents from that webinar.

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