
Date: October 25, 2010

To: All Medicare Advantage Organizations, PACE Organizations, and Massachusetts Health Senior Care Options, Minnesota Senior Health Options, Minnesota Disability Health Options, and Wisconsin Partnership Program Plans

From: Thomas M. Kickham, Ph.D.
Director,
Information and Methods Group

SUBJECT: Release of 2009 Medicare Health Outcomes Survey (HOS) Reports and Summary Results, and Medicare HOS-Modified Reports in HPMS

On behalf of the entire Medicare Health Outcomes Survey (HOS) Team, I am pleased to announce the availability of the following reports and summary data for participating Medicare managed care plans:

- 2007-2009 Medicare HOS Cohort 10 Performance Measurement Report, Summary Measure Results, and Aggregate Score Analysis
- 2009 Medicare HOS Cohort 12 Baseline Report
- 2009 Medicare HOS-Modified Report

2007-2009 Cohort 10 Performance Measurement Report and Summary Data

The 2007-2009 Cohort 10 Performance Measurement Report presents results for Medicare Advantage Organizations (MAOs) based on data from the Medicare HOS 2007 Cohort 10 Baseline and 2009 Cohort 10 Follow Up surveys. The HOS performance measurement results describe change in health status over time for beneficiaries in your state.

The performance measurement report also includes, but is not limited to: a Reader's Guide, Program Highlights, Executive Summary, Performance Measurement Results for key health indicators such as Physical Health, Mental Health, General Health and Comparative Health, Chronic Medical Conditions, and Clinical Measures, as well as Calculation of Outcomes, and MAO Level Frequencies for the 2009 Cohort 10 Follow Up Survey Fields.

The 2007-2009 Cohort 10 Summary Measure Results present MAO findings by contract, state and region of actual versus expected two year changes in physical and mental health status. The corresponding Aggregate Score Analysis provides contract, state, regional, and national average baseline and follow up physical health and mental health summary scores, as well as percentages

reporting: (1) health better or the same compared to one year ago, (2) two or more limitation in daily activities, (3) two or more chronic diseases; and, (4) depressive symptoms.

2009 Cohort 12 Baseline Report

The baseline report includes a Reader’s Guide, Program Highlights, Executive Summary, Physical and Mental Component Summary Scores, General Health and Comparative Health, a Depression Screen, Chronic Medical Conditions, Activities of Daily Living, Healthy Days Measures, Clinical Measures, Urinary Incontinence in Older Adults, Physical Activity in Older Adults, Fall Risk Management, and Osteoporosis Testing in Older Women, as well as Program Background, Methodology and Design, and MAO Level Frequencies for the *2009 Cohort 12 Baseline* Survey Fields.

USES OF HOS DATA

CMS is encouraging each MAO to work in collaboration with their Quality Improvement Organization (QIO) to examine their results. Readers may visit the HOS website for Webinars addressing how HOS data can be used for quality improvement activities. Additionally, the “Featured Uses of HOS Data” section of each report provides examples of how MAOs may use their results to target quality improvement activities.

The baseline and two-year performance measurement results are intended to provide information for each MAO to use in designing an improved health care delivery system to better meet the needs of the beneficiaries in its service area.

2009 MEDICARE HOS-MODIFIED REPORT

The HOS-M, which is an abbreviated version of the Medicare HOS, assesses the physical and mental health functioning of enrollees in Program of All-Inclusive Care for the Elderly (PACE) Organizations to generate information for payment adjustment. *Please note that 2009 marks the last year that HOS-M data were collected for former dual eligible demonstration plans, which now participate in the MA program and are subject to MAO reporting requirements for HOS.*

The HOS-M report focuses on specialized plans serving frail and elderly beneficiaries, and provides a summary of demographic information, physical and mental health status, and selected health status measures. Additionally, in each respective plan report, the health status of the plan’s frail and elderly enrollees is compared to the combined Medicare HOS-M sample averages (HOS-M Total).

CMS encourages each participating PACE Organization and SNP to examine their results for use in quality improvement activities. You may submit inquiries to hos@azqio.sdps.org, or contact Health Services Advisory Group through the HOS Information and Technical Support telephone line at (888) 880-0077, and you may visit the CMS website at www.cms.gov/hos for more program information.

DISTRIBUTION OF REPORTS

All distribution occurs electronically to participating MAOs, PACE Organizations, and SNPs through the Health Plan Management System (HPMS). The HOS Baseline and Performance Measurement reports are disseminated to participating QIOs through the QualityNet application. In addition, QIOs can access their HOS reports, as well as reports for all MAOs in their state, via HPMS. The HOS Performance Measurement reports are available in HPMS for Cohorts 6-10. The HOS Baseline reports are available in HPMS for Cohorts 8–12. The HOS-M reports are available in HPMS for years 2007-2009.

Please note that if your MAO did not participate in the 2007-2009 Cohort 10 Performance Measurement or 2009 Cohort 12 Baseline, there are no MAO specific reports for your organization.

For a general overview of the Medicare Health Outcomes Survey program, visit CMS' HOS web address (www.cms.gov/hos).