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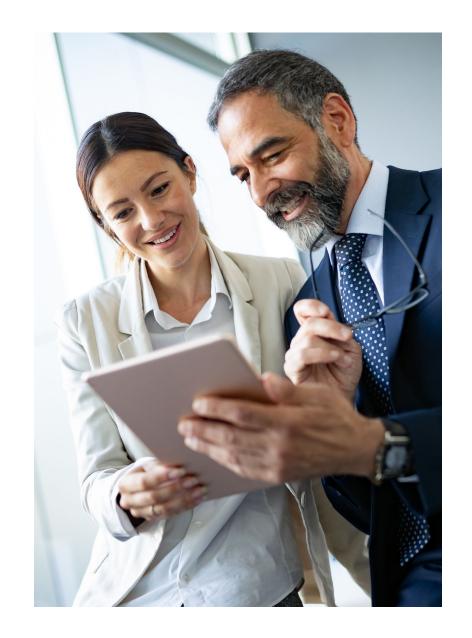
CMS News

Hospital Compare July 2020 Refresh

Reporting on over 4,000 hospitals nationwide, <u>Hospital Compare</u> provides information for patients and caregivers on hospital care delivery and encourages hospitals to improve the quality of their care by publicly displaying quality information. Users can compare performance across many common conditions, and Overall Hospital Quality Star Ratings summarize data to allow users to easily compare hospitals. Data were updated on July 22, 2020.

CMS Proposed Changes to Star Ratings

CMS has proposed changes to the star ratings calculation methodology. A hospital's star rating is based on the performance of specific quality measures. If finalized, the rule would discontinue use of the LVM for quality measure group scores, and instead CMS would take 100% divided by the number of measures reported to calculate the weight of each quality measure. The proposal also includes a consolidation of three measure groups: Effectiveness of Care, Timeliness of Care, and Efficient Use of Medical Imaging into one process measure group: Timely and Effective Care. The proposed rule is available for preview here.





HCAHPS

October 2020 Public Report Preview

October 2020 Public Report Preview Reports are available on the <u>QualityNet Secure Portal</u>. Preview Reports will be available until August 17, 2020. These data will be publicly reported on <u>Hospital Compare</u> in October 2020.

Patient-Mix Adjustments and National Means for October 2020 HCAHPS Results

Patient-Mix Adjustments and National Means for the October 2020 HCAHPS public reporting have been posted. The October 2020 public report includes discharges from January 1, 2019 to December 31, 2019. The document is available on the Mode & Patient-Mix Adjustment page.

2021 Fiscal Year 2021 ICD-10-CM Codes

FY 2021 ICD-10-CM codes are available for download on CMS.gov. These codes should be applied to patient discharges beginning October 1, 2020.

New Point of Origin Code for Transfer from a Disaster Alternate Care Site

In response to impacts of the COVID-19 pandemic, the National Uniform Billing Committee (NUBC) has created a new point of origin code defined as "Transfer from a Designated Disaster Alternative Care Site (ACS)." Point of Origin Code G will take effect beginning with patient discharges on August 3, 2020. For additional information, the CMS MLN Matters document is available here.



HHCAHPS

Corrected HHCAHPS Preview Reports

Updated HHCAHPS Provider Preview Reports and Quality of Patient Care Star Rating Preview Reports have been posted on the HHCAHPS website. The reports posted June 25, 2020 contained observed values instead of risk-adjusted values. The corrected reports are now available and contain data that will be displayed on Home Health Compare after the October 2020 refresh. Preview Reports will be available until August 20, 2020.

Coordination Team Quarterly Review

The HHCAHPS Coordination team has published their quarterly newsletter, which includes reminders of changes to protocol due to COVID-19. The July 2020 HHCAHPS Coordination Team Quarterly Review is available here.

Home Health QRP COVID-19 Tip Sheet

A Home Health COVID-19 Tip Sheet is available now under Downloads on the Home Health Quality Reporting Program (QRP) Training website. The tip sheet provides information and resources for home health agencies on HHCAHPS during the COVID-19 public health emergency, including data submission requirements.







CAHPS Hospice

Hospice Quality Reporting Program Updates

The Hospice Quality Reporting Program (HQRP) COVID-19 Tip Sheet and Quarterly Updates for Q2 - Q3 2020 are available on the <u>HQRP Requirements and Best Practices</u> website under Downloads. These two documents contain COVID-19 announcements, tips, highlights, and upcoming events.





OAS CAHPS

Outpatient Prospective Payment System Proposed Rule

CMS has released an Outpatient Prospective Payment System Proposed Rule that, if finalized, would continue voluntary participation in the Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey. The proposed rule is available for preview here.

Public Reporting Results Refresh

OAS CAHPS Survey results based on responses from patients who received an outpatient surgery or procedure between January 2019 and December 2019 (Q1 2019 – Q4 2019) are now publicly available. OAS CAHPS data are displayed on Hospital Compare and data.medicare.gov.

CAHPS for ACOs and MIPS

Quality Payment Program Proposed Rule

CMS has released a proposed rule with updates to the Quality Payment Program (QPP) that would make CAHPS for Accountable Care Organizations (ACOs) optional for the 2020 Performance Year due to potential negative impacts of the COVID-19 pandemic. If finalized, the rule would automatically provide ACOs full points for each of the CAHPS survey measures within the patient/caregiver experience domain. The proposed rule is available for preview <a href="https://example.com/here-new-main-rule-rule-new-main-rule-rule-new-main-rule-rule-new-main-rule-rule-new-main-rule-rule-new-main-rule-new-

Provider Engagement Toolkit

CMS has released a new toolkit to help ACOs engage with providers. The toolkit includes suggestions on how to communicate with providers, identify opportunities to improve care, implement financial incentives, and more. This toolkit is the third in a series published by CMS, which is available on the <u>ACOs: General Information</u> page.

Physician Compare Preview Period

2018 Quality Payment Program performance is available for preview on the <u>Quality Payment Program</u> website before it is published on <u>Physician Compare</u> and in the Downloadable Database. The 60-day Preview Period will close on August 20, 2020 at 8 pm ET. Please reach out to <u>PhysicianCompare-Helpdesk@AcumenLLC.com</u> with any questions.

2018 Quality Payment Program Experience Report

CMS has released the 2018 Quality Payment Program Experience Report with insights into program participation. 356,353 clinicians participated in MIPS in 2018, a 15,000 clinician increase from the 2017 performance year. Learn about participation, performance, and payment adjustments in the full report here.



ICH CAHPS

ESRD Prospective Payment System Rule

The ESRD Prospective Payment System (PPS) Calendar Year 2021 Proposed Rule was published on July 13, 2020. The proposed rule is available for preview here.

ED CAHPS

Emergency Department CAHPS Survey Updates

On July 21, 2020 CMS announced changes to the ED CAHPS Survey. The survey is designed for emergency room patients 18 and older who are discharged to home. It includes 35 questions and remains voluntary. For an overview of the survey and available downloads, visit the ED CAHPS website.



External Submission Deadlines

	Q4 2019 Discharges	Q1 2020 Discharges	Q2 2020 Discharges	Q3 2020 Discharges*
HCAHPS	4/1/2020	7/1/2020	10/7/2020	1/6/2021
Premier	4/17/2020	7/17/2020	10/23/2020	1/22/2021
Vizient	4/17/2020	7/17/2020	10/23/2020	1/22/2021
HHCAHPS	4/16/2020	7/16/2020	10/15/2020	1/21/2021
CAHPS Hospice	5/13/2020	8/12/2020	11/11/2020	2/10/2021
OAS CAHPS	4/8/2020	7/8/2020	10/14/2020	1/13/2021
ICH CAHPS	7/29/2020 (Spring 2020)		1/27/2021	(Fall 2020)
CAHPS for ACOs	1/23/2020		1/2021 (Day TBD)	
CAHPS for MIPS	1/21/2020		1/21/2021	
				*Activity COMPLETE

^{*}The COVID-19 Extraordinary Circumstance Exception ends and normal CAHPS data collection and reporting requirements resume for Q3 2020.



If you have any questions regarding the information included in this edition of the CAHPS Insider, please contact NRC Health Corporate Compliance at compliance@nrchealth.com.

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