

Hospice Visits in the Last Days of Life Quality Measure

November 2021

DISCLAIMER

The contents of this document are current as of this date and for informational purposes only. This is provided for informational purposes and is not intended to serve as a legal guidance. For specific agency practices, consult your legal and compliance teams for guidance. This should not be viewed as official policy of CMS. It is always the provider’s responsibility to determine and comply with applicable CMS requirements.

CMS regularly updates information about the Hospice Quality Reporting Program (HQRP) on the [Hospice QRP Announcements & Spotlight webpage](#). Providers need to monitor this webpage and the HQRP website frequently.

Fast facts about the measure:

- Added to the federal hospice quality reporting program (HQRP) in FY 2021
- This is a respecified measure of the ‘*Hospice Visits when Death is Imminent (HVWDII)*’ visit pair which was part of the Discharge Hospice Item Set (HIS) and replaces it as a claims-based measure.
- ‘*Hospice Visits when Death is Imminent*’ visit pair data submission requirement stopped – January 1, 2021.
 - [V.3.00 of the HIS manual](#) was effective in February 2021 and eliminates Section O which contains guidance about submitting data for the HVWDII.
- It is a claims-based measure which means data is obtained from provider submitted claims for the information needed to calculate the measure, so providers do not submit any additional data to CMS.
- The *Hospice Visits in the Last Days of Life (HVLDL)* quality measure is not part of the Hospice Item Set (HIS).

Measure title	Hospice Visits in the Last Days of Life (HVLDL)
Measure type	Process
Data source	Hospice claims
Measure numerator	The number of patient stays in the denominator in which the patient and/or caregiver received at least two days with visits from registered nurses or medical social workers in the final three days of life
Measure denominator	All hospice patient stays enrolled in hospice except those meeting exclusion criteria.

Exclusion criteria

1. Patient did not expire under hospice care.
2. Patient received any continuous home care, respite care or general inpatient care in the final three days of life.
3. Patient enrolled in hospice less than three days.

Respecified Measure Background

The Hospice Visits when Death is Imminent (HVWDII) measure pair began data collection began April 1, 2017. The Centers for Medicare and Medicaid Services (CMS) found that this measure met established standards for reliability, validity, and reportability, and has publicly reported Measure 1 since August 2019. However, Measure 2 did not meet CMS's readiness standards for public reporting. In particular, the measure failed to meet CMS's validity testing criteria. CMS decided to complete additional testing of measure 2 for this reason.¹

Results from the initial testing of Measure 2 suggested that CMS could re-specify the measure concept and achieve better testing result than achieved currently by the HVWDII measure pair; moreover, re-specification of Measure 2 could result in lower public burden. Further analysis led to the development of a re-specified version of the HVWDII measure, calculated as claims data and referred to as the Hospice Visits in the Last Days of Life (HVLDL) measure.²

Testing during the development of the HVLDL measure replicated the strong correlation between CAHPS® Hospice Survey outcomes and both RN and MSW visits near death, and poorer correlations with home aides. The HVLDL exhibited greater potential as a differentiator than the HVWDII measure pair, suggesting a greater potential for usefulness to consumers. Ultimately, measure testing of HIS, hospice claims, and CAHPS® Hospice Survey outcomes led CMS to a claims-based, re-specified version of the HVWDII measure pair. This new measure shows performance improvement over Measure 2 (which did not meet public reporting standards) but even over Measure 1 (which did meet these standards).³

Claims-based Measures

CMS plans to utilize data from Medicare claims for future quality measure development for the following reasons:

- Claims data are readily available and eliminates provider burden for implementation, as opposed to data collection through patient assessments or surveys, which require additional effort from clinicians, patients, and family caregivers before they can be submitted and used by CMS.

^{1,2,3} Abt. (2020, Sep 11). Hospice Visits When Death is Imminent: Measure Validity Testing Summary and Re-Specifications. Retrieved on 10/4/2021 from: <https://www.cms.gov/files/document/hqrp-hospice-visits-when-death-imminent-testing-re-specification-report-october-2020.pdf>

- Claims are a rich and comprehensive source of many care processes and aspects of health care utilization. As such, they are a valuable source of information that can be used to measure the quality of care provided to beneficiaries.
- Quality data submitted through claims are considered a reliable source of standardized data about the services provided and the hospices will be 100 percent compliant with submission of this information.
- Claims data are collected based on the actual care delivered, providing a more direct reflection of care delivery decisions and actions than patient assessments or surveys.
- Complements quality measures already in the HQRP and those considered with the implementation of the Hospice Outcomes & Patient Evaluation (HOPE)²

Calculation of the HVLDL Claims-based Measure

- HVLDL measure indicates the hospice provider's proportion of patients who have received visits from a registered nurse or medical social worker (non-telephonically) on at least two out of the final three days of the patient's life.³
- While all patient visits are meaningful, only patients with visits on two different days during the last three days of life will count towards the numerator for this measure.⁴
- These visits can be made by either the nurse, the social worker, or both, **BUT only one visit** (either RN or SW) will be counted if both disciplines visit on the same date.⁵
- Last 3 days of life calculation:
 - the three days are "indicated by the day of death, the day prior to death, and two days prior to death."
 - The day of death is the same as the date provided in A0270, Discharge Date. (Or the day of death)
 - One day prior to death is calculated as A0270 minus 1.
 - Two days prior to death is calculated as A0270 minus 2.⁶
- Calculation of the measure score as the rates of patients meeting the target process.
 - a. For each hospice, divide the total number of patients in the numerator (Step 3) by the total number of patients in the denominator (Step 2) and multiply by 100
 - b. The measure is not calculated for hospices with fewer than 20 patients in the denominator.
- CMS will use 2 years of Medicare claims data (8 quarters) to calculate the measure. They will extract the data at least 90 days after the last discharge date in the applicable period and use it for quality measure public reporting on Care Compare.⁷
- This is a process measure, so there are no risk adjustments to the measure score.⁴

² Centers for Medicare and Medicaid Services. (2021, Aug 4). Medicare Program; FY 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice and Home Health Quality Reporting Program Requirements. Retrieved on 10/4/2021 from: <https://www.govinfo.gov/content/pkg/FR-2021-08-04/pdf/2021-16311.pdf>

^{3,4,5,6} Centers for Medicare and Medicaid Services. (2021, Feb). Common Questions – HQRP Claims-Based Quality Measures: February 2021. Retrieved on 10/4/2021 from: <https://www.cms.gov/files/document/common-questions-hqrp-claims-based-measuresfeb2021.pdf>

⁷Centers for Medicare and Medicaid Services. (2021, Aug 4). Medicare Program; FY 2022 Hospice Wage Index and Payment Rate Update, Hospice Conditions of Participation Updates, Hospice and Home Health Quality Reporting Program Requirements. Retrieved on 11/16/2021 from: <https://www.govinfo.gov/content/pkg/FR-2021-08-04/pdf/2021-16311.pdf>

⁴ Centers for Medicare and Medicaid Services. (2021, Oct). Hospice Quality Reporting Program Quality Measure Specifications User's Manual Version 1.00. Retrieved on 11/16/2021 from: <https://www.cms.gov/files/document/hqrp-qm-users-manual-v100oct2021.pdf>

HVLDL Measure and HCI Indicator #10 Differences

1. The HVLDL measure captures only registered nurse (RN) visits.
 - Registered nurse visits are identified by revenue code 055x with the presence of HCPCS code G0299. For HVLDL, only RN visits are included. ii. In-person visits from medical social workers are identified by revenue code 056x (other than 0569); HCPCS code G0155.⁵
2. The HVLDL measure captures RN and SW on routine home days only.
3. Visits on the same date – if an RN and SW make a visit to the patient/family on the same date, only one of the visits will count towards the measure calculation.

Public reporting

- CMS will start publicly reporting the HVLDL measure on [Care Compare](#) beginning no earlier than **May 2022**.
- The HVLDL will only be refreshed on Care Compare annually.
- A preview report will be available to providers prior to the May 2022 refresh of Care Compare.
- Hospices must have at least 20 patients in the denominator during the reporting period for measure scores to be publicly reported. Hospices that do not meet this threshold will have measure scores suppressed.
 - (i.e., 20 hospice discharges to death with enrollment of at least three days, and without any continuous home care, respite care or general inpatient care in the final three days of life)


CASPER Reports⁶

- Hospice-Level Quality Measurement (QM) reports became available in the CASPER folder in QIES as of September 2021 and include Hospice Visits in the Last Days of Life (HVLDL) baseline data.
- Hospice providers can use this baseline QM report to learn about their performance with the HVLDL measure and begin efforts to improve quality of care.
- Hospice Observed Percent:
 - The percentage of patient stays in the hospice that triggered the measure.
 - This value is derived by dividing the numerator value by the denominator value multiplied by 100. If the hospice's denominator for a measure is zero, a dash (-) displays.
- National Average:
 - The average for the hospice-level incidence of the measure occurrence for all hospices in the nation.
- Percentile Rank Among Hospices Nationally:
 - The hospice's national rank. For example, if the hospice's national percentile value is 88, this means that 88% of the hospices in the nation had a QM score that was less than or equal to the hospice's score. If the hospice's denominator for a measure is zero, a dash (-) displays.

⁵ Centers for Medicare and Medicaid Services. Medicare Claims Processing Manual Chapter 11 - Processing Hospice Claims. Retrieved on 10/4/2021 from: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c11.pdf>

⁶ Centers for Medicare and Medicaid Services. (2021, Oct). CASPER – Hospice Reporting User's Guide - Section 4 - Hospice Quality Reporting Program (v1.05). Retrieved on 10/4/2021 from: https://qtso.cms.gov/system/files/qtso/cspr_sec4_hospic_prvdr_3.pdf

Example QM report; HVLDL data



CASPER Report
Hospice-Level Quality Measure Report

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Provider ID: [REDACTED]
 CCN: [REDACTED]
 Hospice Name: [REDACTED]
 City/State: [REDACTED]

Report Period - Claims (HVLDL): 10/01/2018 - 09/30/2020
 Data was calculated on: 03/01/2021
 Report Run Date: 08/09/2021
 Report Version Number: 5.00

Source: Medicare Fee-For-Service Hospice Claims

Table 2 Legend
 N/A = Not Available
 Dash (-) = A dash represents a value that could not be computed

Table 2. Claims-based Quality Measure-Hospice Visits in the Last Days of Life (HVLDL)

Measure Name (NQF ID)	CMS Measure ID	Numerator	Denominator	Hospice Observed Percent	National Average	Percentile Rank Among Hospices Nationally
Hospice Visits in the Last Days of Life	H011.01	68	150	45.30%	67.80%	18

CMS resources:

- Common Questions – [HQRP Claims-Based Quality Measures: February 2021](#)
- [Hospice Visits When Death is Imminent \(HVWDII\) report](#)
- [The FY 2022 Hospice Final Rule: What Hospices Need to Know!](#) (Webinar slides, Aug 2021)
- [Hospice Quality Reporting Program Forum QM Manual v1.00 and QM Reports](#) (Webinar slides, Oct 2021)
- [Hospice Quality Reporting Program \(HQRP\) Current Measures](#) (Sep 2021)
- CASPER – Hospice Reporting User’s Guide - [Section 4 - Hospice Quality Reporting Program \(v1.05 posted 08/2021\)](#)