

Home Health and Hospice Weekly: Recap of LeadingAge Updates

August 26, 2022

LeadingAge Coronavirus Update Calls Next Week. Monday, August 29, 3:30 PM ET - Ben Oseroff, co-author of a study on homebound Americans will join us on Monday to discuss his profile of homebound older adults, their needs and ways to address them. **On Wednesday, August 31, at 3:30 PM ET, hear from David Putrino, Director of Rehabilitation Innovation for the Mt Sinai Health System,** and an Associate Professor of Rehabilitation Medicine at the Icahn School of Medicine at Mt Sinai, who will talk about the dangers of working while having COVID. If you haven't registered for LeadingAge Update Calls, [you can do so here](#). You can also find previous call recordings [here](#). Note that to access recordings of the calls you need a LeadingAge password. Any staff member of any LeadingAge member organization can set up a password to access previous calls and other "members only" content

Home Health Value-Based Purchasing: Getting Ready for 2023. [Register now to join](#) LeadingAge and Forvis on Wednesday, September 14th from 2:00-3:30 PM ET for a webinar which will provide an overview of the national expansion of the home health value-based purchasing demonstration and how to prepare your agency for success. The nationwide expansion of the home health value-based purchasing (HHVBP) model is set for Jan. 1, 2023. By expanding the HHVBP model, CMS seeks to improve the beneficiary experience by shifting from paying for home health services based on volume to a system that gives incentives to home health agencies for higher quality care. During this webinar, attendees will:

- Review the components of the HHVBP model and expectations for home health agencies.
- Relate HHVBP performance scores to estimated financial outcomes.
- Gain insights relating quality management strategies with financial outcomes.

CMS Finalizes Guidance for MACs on Hospice Enrollment and Certification Transition. Over the past year, CMS has been "transitioning" certain administrative functions involving certified provider/supplier types and enrollment transactions from the CMS Survey & Operations Group (SOG) to the Medicare Administrative Contractors (MACs) and CMS' Provider Enrollment & Oversight Group. In a new change request for the Medicare Program Integrity Manual ([CR 12868](#)), CMS outlines change for moving hospice provider enrollment functions and certification of multiple practice location changes administrative functions (including site visit requirements when adding or changing locations) to MACs. This new guidance will be effective September 30, 2022.

CMS Updates Hospice Quality Measure Manual and Quality Measure Table. CMS released an updated version of the [Quality Measure Change Tables](#) and [Quality Measure Manual](#). These documents reflect updates to the language in the manual to add clarity based on hospice provider questions about the quality measures finalized in the FY 2022 Hospice Wage Index and Payment Update Final Rule, which was published on July 30, 2021. In addition to general changes for clarity, CMS provided further specificity for the two new claims-based measures, Hospice Visits in the Last Days of Life (HVLDL) and Hospice Care Index (HCI):

- HVLDL: Clarified the target population definition to include discharged “due to death”
- HVLDL & HCI: Clarified that postmortem visits are not included in this measure
- HCI: Clarified that “claim thru dates” are used for which discharges and included information regarding benefit coverage for Medicare Advantage or other Medicare health plans
- HCI: Updated to clarify the inpatient claims included in the numerator stating, “Consecutive and overlapping inpatient claims are combined to determine the full length of a single inpatient hospital stay (looking at the earliest from date and latest through date from a series of combined inpatient claims for a beneficiary).”
- HVLDL: Updated to clarify which nursing visits are NOT included in the measure, specifically G0300 – LPN visits

Emerging State Innovations in Developing a Medicaid Community-Based Palliative Care Benefit:

Providing access to palliative care can promote positive outcomes, and avoid costly, unnecessary, and often unwanted treatment, for people with serious illness—many of whom may be dually eligible for Medicare and Medicaid. To advance palliative care, several states are developing a Medicaid community-based palliative care benefit. This benefit can help provide palliative care services outside of hospice and can reimburse for interdisciplinary palliative care teams to support individuals with serious illness throughout the continuum of care and not only at end of life. More information on state strategies are outlined in this NASHP [article](#).

Congress Considers Strategies To Improve Medicare And Medicaid Integration For Dual-Eligible Individuals.

At the end of July, Senators Rob Portman (R-OH) and Sherrod Brown (D-OH) introduced [legislation](#) to create a new state option to fully integrate the financing and delivery of care for individuals eligible for full Medicaid and Medicare benefits. This legislation is among the most ambitious of a number of bills introduced this session that seek to improve Medicare and Medicaid integration for dual-eligible individuals. Health Affairs, in this [article](#), highlights the Portman-Brown bill and other recent legislative proposals related to integrated care for dual-eligible individuals, including support for states in undertaking planning and activities to improve the coordination of care, opportunities to expand the Program of All-Inclusive Care for the Elderly (PACE), and a proposal to create a federal structure for Medicare premium and cost-sharing subsidies for low-income individuals.

Taking Public Health Action for Family Caregivers Webinar.

The National Alliance for Caregiving and the National Association of Chronic Disease Directors will host a webinar, *Taking Public Health Action for Family Caregivers*, to share insights into caregiving issues relevant to public health and outline actions public health professionals can take to protect the health of family caregivers. This webinar will also act as a release for their new report, *Chronic Disease Family Caregiving Through a Public Health Lens: The Framework for Family Caregiving and Public Health*. This webinar will be held on Wednesday, September 14, 2022 from 10:00 a.m to 11:00 a.m ET. [Click here](#) to register.

Final Segment of State Policy Roadmap for Family Caregivers Released:

On August 25th, the [National Academy for State Health Policy](#) (NASHP) released the final component of the [State Policy Roadmap for Family Caregivers](#). The goal of this publication is to provide a guide for state officials to better understand the state policy landscape for supporting family caregivers, and to identify opportunities for innovation in their states. The sections of this tool for states include:

- Public Awareness and Outreach

- The Direct Care Workforce
- Financial and Workplace Security
- Family Caregiver Services and Supports
- Using Research, Data, and Evidence-Informed Practices to Support Family Caregivers
- Engagement of Family Caregivers in Health Care Systems

[View the entire roadmap.](#)

Sanford Health Hosts Rural Health Care Summit. Sanford Health convened leaders from around the country and various walks of life from health care to educational institutions to Congressional leaders to technology organizations for a Rural Health Care Summit in Sioux Falls, SD on Tuesday, August 23. The Summit examined the current situation and needs for maintaining access to health care in rural America. Much of the discussion was on the lessons learned from the pandemic highlighting the need and opportunity to improve access for all through telehealth services. This approach showed promise during the pandemic by eliminating the need for long hours of travel for patients and exposure to COVID in waiting rooms, while broadening access to specialists. The importance of high-speed, broadband internet access to ensure this access was underscored by speakers. Senator John Thune noted that addressing workforce needs was “job #1” and would likely require a public-private partnership. He said he had heard from many nursing and long-term care facilities on the challenges they are facing and acknowledged that reimbursement issues must be addressed. Few solutions were offered though most speakers believe that telehealth will be critical to the future but that the current FFS reimbursement system structure isn’t designed for this approach to care. Most felt that rural America should lead the way in transforming the future of health care delivery and addressing access, instead of waiting to follow. LeadingAge was in attendance at the event.

CMS Awards 5 New Planning Grants for Money Follows the Person. The Centers for Medicare and Medicaid Services (CMS) [announced](#) new Money Follows the Person (MFP) awards of up to \$5 million for Illinois, Kansas, and New Hampshire, as well as for American Samoa and Puerto Rico – the first time MFP grants have been made available to territories. These awards will support the early planning phase for their MFP programs. This includes:

- Establishing partnerships with community stakeholders, including those representing diverse and underserved populations, Tribal entities and governments, key state and local agencies (such as state and local public housing authorities), and community-based organizations;
- Conducting system assessments to better understand how HCBS support local residents;
- Developing community transition programs;
- Establishing or enhancing Medicaid HCBS quality improvement programs; and
- Recruiting HCBS providers as well as expert providers for transition coordination and technical assistance.

This LeadingAge [article](#) delves into how HCBS providers can look to be involved in the planning process, and how MFP programs will fit together with new HCBS Quality Measure Set reporting

Study Finds Discrimination Barrier to Advance Care Planning for Sexual, Gender Minorities. [Investigators](#) at the University of Colorado School of Medicine utilized the Advance Care

Planning Engagement Survey to capture experiences of discrimination within sexual and gender minority (SMG) adults. Results found most SGM participants already talked to someone about their end-of-life wishes or were planning to do so, but further interviews found those conversations occurred outside the clinical setting. Those who did not have or plan to have these conversations did not feel they were necessary or felt discriminated against. Researchers recommended health systems could support clinician sensitivity training including guidance on documentation and requirements.

Study Finds Home Dialysis Costs Medicare Less. A study from researchers at Baylor University's College of Medicine [analyzed](#) Medicare beneficiaries starting dialysis between 2008 and 2015. They found patients who treated themselves at home using peritoneal dialysis cost about \$91,716 compared to \$108,656 for those who used hemodialysis at a facility, an 11% difference. Researchers did say the savings may diminish over time as more patients with conditions like diabetes and obesity require dialysis, often those individuals have more complications with home peritoneal dialysis.

FROM CDC:

1. **Healthcare Workers – Health, Stress, and Mental Health.** CDC's National Institute of Occupational Safety and Health (NIOSH) has [launched a multi-year initiative](#) to improve the mental health and well-being of the nation's health workforce. For many of the 20 million health workers in the U.S., already challenging work conditions (long work hours, heavy workloads, and exposure to human suffering and death) have intensified during the COVID-19 pandemic. These conditions have led to new and worsening mental health concerns, including burnout, compassion fatigue, depression, anxiety, substance use disorders, and suicidal ideation. This initiative emphasizes the importance of intervening *before* work stress negatively impacts mental health. NIOSH Director Dr. John Howard and U.S. Surgeon General Dr. Vivek Murthy kicked-off the initiative with the webinar [Protecting Health Worker Mental Health: A Call-to-Action](#).

Resources:

- [Healthcare Workers: Work Stress & Mental Health](#)—Why health workers are more likely to experience mental health problems
 - [Healthcare Workers: Work Stress & Mental Health Resources](#)—Resources for stress, fatigue, burnout, substance use and suicide
2. **CDC COVID-19 All-State, Tribal, Local, and Territorial (STLT) Update Call:** The CDC COVID-19 All-STLT Update Call will occur on the third Monday of each month from 2:00–2:30 PM ET. **The next call will be on Monday, September 19th, from 2:00–2:30 PM ET.** If you have any questions, please contact eoevent382@cdc.gov.
Upcoming Calls: September 19th, October 17th, November 21st, and December 19th
[Register now](#) for this call series.
 3. **Vaccine Planning for the Fall.** On August 16th, CDC released the [CDC Fall COVID-19 Vaccination Operational Planning Guide](#) on the [COVID-19 Vaccination Program Operational Guidance](#) webpage. This operational planning guide includes details about the anticipated bivalent COVID-19 booster.