



Home Health and Hospice Weekly: Recap of LeadingAge Updates

April 15, 2022

LeadingAge Coronavirus Calls Next Week. The pandemic has changed caregiving in many ways but one area that has been overlooked is the effects it has had on older adults who are caregivers. During the pandemic older adults became primary caregivers for children out of school and cared for sick family members and this shaped caregiving across the country and had an impact on the workforce.

On **Monday, April 18th**, we will be joined by **Dr. Yulya Truskinovsky from Wayne State University**, one of the leading authors of the study highlight the changes that have occurred with older adult caregivers leaving the workforce and the demands that caregiving has had on this age group. She will talk about how LeadingAge members can support older caregivers and provide some tips for how to recruit some of these older caregivers to be paid caregivers for older adults.

On **Wednesday, April 20th**, we will talk with LeadingAge member Cheryl Harding, President and CEO of the James L. West Dementia Center in Texas as she shares the organization's pivots during this last phase of COVID and how they are working with local high schools to educate students about the Center and the career opportunities that exist. **All calls are at 3:30pm ET.** If you haven't registered for LeadingAge Update Calls, [you can do so here](#). You can also find previous call recordings [here](#).

Public Health Emergency (PHE) Extension. The Department of Health and Human Services (HHS) on Tuesday [renewed the COVID-19 Public Health Emergency \(PHE\)](#) for another three months. The PHE was initially declared in January 2020 and has been subsequently renewed each quarter. Although the PHE was due to expire on April 16, [HHS announced the renewal](#) for an additional 90 days and said that it will give states at least 60-days' notice prior to its termination. The renewal will result in a continued expansion of telehealth services, state support, and Medicaid coverage protections through mid-July. The 3-day stay waiver remains in effect though CMS has the authority to end it early along with most other waivers if they so choose.

CMS Hospice Public Reporting Key Dates for Hospices. CMS [updated](#) their website listing the key reporting dates for hospice agencies. This includes schedules refreshes of the Care Compare website, upcoming data correction deadlines for public reporting, and the CAHPS Hospice Survey upcoming data submission deadlines. The Consolidated Appropriations Act, 2021 increased the payment reduction for hospices who fail to meet hospice quality measure reporting requirements from 2% to 4% beginning in FY 2024 annual payment update (APU) based on CY 2022 quality data.

Hospice Visits in the Last Days of Life Measure Goes Live in May. In February 2022, the National Quality Forum (NQF) [endorsed](#), through their consensus process, the claims-based measure, Hospice Visits in the Last Days of Life, or HVLDDL. HVLDDL reflects the proportion of hospice patients who received in-person visits from a registered nurse or a medical social worker on at least 2 of the final 3 days of life. HVLDDL is the re-specified measure replacing the HIS-based Hospice Visits When Death is Imminent

(HVWDII). Public reporting for HVLDL will begin in May 2022 and will replace public reporting of HVWDII. Provider Preview Reports were issued in March for hospice providers on CASPER and includes the new HVLDL measure.

MLN Article on Value-Based Insurance Design Model Hospice Services. This week's MLN [reviewed](#) the Value-Based Insured Design Model payment for hospice services. Under the Hospice Benefit Component of the Value-Based Insurance Design (VBID) Model, participating Medicare Advantage Organizations (MAOs) retain responsibility for all Original Medicare services, including hospice care. MAOs must pay for:

- Non-hospice care provided to a hospice enrollee during a hospice stay, such as the items, drugs, or services that are furnished to treat a condition unrelated to the terminal illness and related conditions
- Other non-hospice care (items, drugs, or services) that are furnished after a hospice stay ends (in the event of a live discharge, including non-hospice care provided on the last day of the stay through the end of the calendar month that the hospice stay ends)

The article links to relevant manuals and policy covering hospice services: [Section 90 Medicare Benefit Policy Manual, Chapter 9 \(PDF\)](#), [VBID Model Hospice Benefit Component Billing & Payment](#) webpage, [Calendar Year 2021 Technical and Operational Guidance](#)

Poll Finds, Despite Preference, Older Adults Unprepared to Age at Home. The National Poll on Healthy Aging [released](#) this week found that many people in their 50s, 60s, and 70s need to do more to modify their homes or plan for services they may need to age in place. The vast majority of people over 50 say they would like to live in the current homes as long as possible. But this poll finds many will have a hard time paying for in-home help. Of those who live alone, 48% said they don't have someone to help with personal care and 19% of older adults are confident they could pay for such help.

MACPAC Releases Updated Medicaid Statute and Regulations Guide. MACPAC [updated](#) a comprehensive tool to help navigate the complexity of statutory and regulatory structures of Medicaid. This updated reference guide is meant to help locate specific provisions in statute and regulation as well as state plan language.

Hospice Proposed Rule Calls. LeadingAge will be hosting two calls to gather feedback from hospice members on the FY2023 Hospice Wage Index proposed rule. The first call will be with hospice agency finance staff to gather input on the proposed 2.7% increase and the proposed 5% wage index cap. The second call will be with hospice quality, HR, and business/community development staff to discuss CMS' proposed health equity measurement which includes recruitment of diverse staff and BOD as well as current efforts to engage diverse communities. Please share this information with the relevant staff in your agency.

- Monday, April 25 at 2:00 PM ET - Hospice Payment Call Registration: https://us02web.zoom.us/meeting/register/tZ0vd-uhrzkiEtwlJI8gwkfek_qHHQUxkuZx
- Wednesday, April 27 at 2:00 PM ET - Hospice Health Equity Call Registration: <https://us02web.zoom.us/meeting/register/tZYvdOihpzwGtGRcOdZWR4iMnO06W8QHmgV>

Recap of Dr. Paul Reinbold on 4th shots: Dr. Paul Reinbold, Chief Medical Officer for Acts and member of the LeadingAge Clinical Advisory Group joined our call on April 13th to discuss 4th shots, therapeutics, and more. A recap of his conversation with us can be found [here](#).

Update on Home Health U537F Assigning in Error on NOAs. Home health agencies need to be aware that U537F is continuing to assign incorrectly on some notices of admission (NOAs), due to the Common Working File (CWF) not correctly recognizing discharges (patient status other than 30 on the last HH period). There is no workaround. This edit will also assign correctly on duplicate NOAs for the same admission period and if the provider CCN does not match the CCN on the prior home health episode posted at CWF (instead bill with a condition code 47). Multiple NOAs should not be submitted for the same admission.

Demographic Post-Acute Care Data Transition from ASPEN/iQIES to PECOS. CMS will be transitioning to a new data source for a provider's demographic data for home health agencies and the other Post-Acute Care (PAC) provider types (Skilled Nursing Facilities / Nursing Facilities (SNF/NFs), Inpatient Rehabilitation Facilities (IRFs), and Long-Term Care Hospitals (LTCHs)). Historically provider demographic data have been maintained in the Automated Survey Processing Environment or ASPEN software; however, CMS will be transitioning to use the demographic information from Provider Enrollment, Chain and Ownership System (PECOS). During this transition, all PAC providers will be responsible to ensure their latest demographic data are updated and available in both ASPEN (SNF/NFs, IRFs, LTCHs, and Hospices) or iQIES (HHAs) and PECOS systems. The transition is currently underway however, CMS has not announced a final date when all demographic data will be available from PECOS. CMS created reference documents for all PAC settings that outlines the steps providers should follow to update demographic data page: [Home Health Agencies](#), [Hospice](#), [Skilled Nursing Facilities](#).

Circle of Life Award Nominations Now Open. The Circle of Life Awards recognize innovation in palliative and end-of-life care. All organizations or groups in the U.S. that provide care for patients with serious or life-limiting illness are eligible for the award. Up to three Circle of Life Awards will be presented annually; the awards committee also may present Citations of Honor to other noteworthy programs. The 2023 application has two parts: Part 1 is focused on innovations, achievements and quality in palliative and end-of-life care with applications due by May 31, 2022. The Circle of Life Award Committee will review these submissions and invite a subset of applicants to complete Part 2, which requests additional details about the program as well as patient demographics and staffing information. To review the new process, [click here](#).

Expert Insight: Dr. Caitlin Coyle, Ph.D. Dr. Coyle spoke on our April 11th call on social isolation and loneliness, before and after the COVID Pandemic. Dr. Coyle leads an instrumental task force through U. Mass. Boston on addressing this issue with older adults in Massachusetts. You can read the summary transcript from our conversation with her [here](#).

LeadingAge Joins LTC Providers in Asking DOL Implement a Streamlined Wage Determination Process for Foreign Nurses- UPDATED WITH LINK: We reported last week that LeadingAge in coalition with 12 long-term care provider organizations sent a letter calling on the U.S. Department of Labor (DOL) to improve the processing and timeliness of Schedule A petitions, which delays the permanent residence

and employment process of hiring foreign nurses and physical therapists. Here's the link to the letter: <https://leadingage.org/letter-department-labor-prevailing-wage-determinations-nurses> The coalition letter ask the DOL to implement a more streamlined process for wage determinations for registered nurses and physical therapist. Additionally, since the prevailing wage determination is one of the bottlenecks that delay employers in filing an immigrant petition, the letter requests the DOL to create a separate category for Schedule A category under the PERM processing queue.

Provider Relief Late Report Request Form Available: Providers who meet the extenuating circumstances laid out by HRSA can request to submit a late report for Reporting Period 1 (RP1) starting today through Friday, April 22 at 11:59 p.m. ET. Additional details about what extenuating circumstances make a provider eligible to apply for this opportunity to submit a late RP1 report along with other aspects of the process, can be found [here](#).

LeadingAge comments on OASIS-E changes in home health: LeadingAge submitted comments on the proposed OASIS-E changes in home health. We asked for OASIS-E to be delayed until CY2024 and cited the current workforce shortage and competing pressure with home health value based purchasing implementation. Those comments can be found [here](#).

New PHI Report on State Policy Options for Strengthening the Direct Care Workforce Released: PHI released a report on state policy options for strengthening the direct care workforce. It has 24 specific policy strategies with concrete examples. The report can be found [here](#).

HUD, HHS present Federal Equity Action Plans. The Biden Administration [announced](#) the next steps in its strategy to improve diversity and advance racial and gender equity across the federal government. President Biden signed an [executive order](#) on his first day in office aimed at advancing racial equity and support for underserved communities through the federal government. Today, more than 90 federal agencies – including [HHS](#), [HUD](#), and [DOL](#) -- released their first-ever Equity Action Plans, outlining more than 300 strategies and commitments to implement the President's executive order and address the systemic barriers across our nation's policies and programs. The Administration recognizes that this is not a one-year project, but a generational commitment. HUD Secretary Fudge reviewed the agency's recently-released HUD Equity Action Plan, which emphasizes equitable home ownership and access to homelessness services. HHS Secretary Becerra emphasized efforts to reduce infant mortality for Black and Native American enrollees in Medicaid or Children's Health Insurance Program; Becerra also discussed outreach to communities of color to encourage enrollment in free and low-cost health care. LeadingAge will continue working with HUD, HHS, and other agencies to advance equitable aging across America. More information will be available [here](#).

CMS Announces Cross-Cutting Initiatives. CMS [announced](#) cross-cutting initiatives as mechanisms to advance CMS' strategic vision and six strategic pillars. In addition to advancing the six strategic pillars that CMS announced last year, the CCI's 13 initiatives include efforts to address safety and quality of care in nursing homes, strengthen quality improvement strategies and ensuring coverage for eligible individuals post-pandemic. CMS will be developing measures to track, monitor, and refine success for these initiatives in partnership with stakeholders and to report on progress to the public. CMS expanded further on CCIs covering [Behavioral Health](#) and the [National Quality Strategy](#).

White House Announces Initiative on Medical Debt: The White House announced an initiative on reducing medical debt for consumers. The announcement does not contain many details on how the policies will be carried out but one aspect of the announcement is that Secretary Becerra is directing HHS to evaluate how providers' billing practices impact the affordability and accessibility of care and the accrual of medical debt. We will monitor this initiative and keep you informed of any impacts on LeadingAge members. The announcement can be found [here](#).

Public Service Campaign Materials Available: Keep Leading Life. Keep Leading Life, the new LeadingAge public service campaign to introduce the full aging services sector to the general public, is now live. Stemming from the research-backed guidance developed through the Opening Doors to Aging Services initiative, the campaign reflects a range of care and services options for older adults—demonstrating that with extra help from aging services professionals, older adults continue to live fulfilling lives. Find the campaign's digital, print and video assets—free to LeadingAge members—at OpeningDoors.org/resources. Visit the campaign landing page: KeepLeadingLife.org.

Get a firsthand look at Keep Leading Life on April 21 at our live, virtual workshop. We'll help members from across the continuum leverage the campaign's customizable campaign creative—from radio and TV spots to digital and print ads. [Learn more and register here](#).

Nominate Someone for a LeadingAge Award Today! The LeadingAge annual awards honor individuals that embody excellence in mission-focused aging services leadership, are models of quality and innovation, and are making outstanding contributions to our field that merit national recognition. Nominations are currently being accepted in three categories: [Award of Honor](#), [RWJF Award for Health Equity presented by LeadingAge](#), and [Joan Anne McHugh Award for Leadership in LTSS Nursing](#). The deadline to submit your nomination is June 17, 2022. [Learn more about the award criteria and nomination process](#).