

homehealth

ADMINISTRATOR'S SUMMIT

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Follow the Data to Achieve Better Outcomes, HHVBP Bonuses, and Five-Star Ratings

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Presented By



Chris Attaya joined SHP in 2014 after spending 28 years in executive and consulting positions within the Home Health and Hospice industry. In his current role, he is responsible for product development and client relationships to help organizations achieve increased operational and financial performance through the use of SHP's industry leading analytics platform and benchmark data. Prior to SHP, Chris was the CFO at the VNA of Boston and had worked at Partners Health Care at Home as CFO and CEO. He received a B.A. in Public Health from Tufts University and a M.B.A. from the Graduate School of Management at Boston University, concentrating in Health Care Finance.

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Learning Outcomes

- At the completion of this educational activity, the learner will be able to:
 - Describe the data components of HHVBP and Star Ratings
 - Track and manage HHVBP Total Performance Scores (TPS)
 - Analyze outcomes and benchmarks for quality improvements

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Focus on the Measures That Are Important

- Quality of Patient Care Star Ratings (QoPC)
- Home Health Comprehensive Assessment of Health Providers and Systems (HHCAHPS) Star Ratings
- Home Health Value-Based Purchasing (HHVBP)
- CMS Care Compare for Home Health
 - Look for the overlap
 - How am I scoring in each measure?
 - Where are my opportunities to improve?



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HH QRP Measure Crossovers

Outcome Measures	Care Compare	HHVBP	Star Rating
Improvement: Ambulation	✓	✓ Included in TNC	★
Improvement: Bed Transferring	✓	✓ Included in TNC	★
Improvement: Bathing	✓	✓ Included in TNC	★
Improvement: Management Oral Meds	✓	✓	★
Improvement in Dyspnea	✓	✓	★
Discharged to Community (OASIS)	Claims-based Measure	✓	
60-Day Acute Care Hosp Rate	✓	✓	★
60-Day ED Use	✓	✓	

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HH QRP Measure Crossovers (cont.)

Process and HHCAHPS Measures	Care Compare	HHVBP	Star Rating
Timely Initiation of Care	✓		★
HHCAHPS: Communication	✓	✓	★
HHCAHPS: Care of Patients	✓	✓	★
HHCAHPS: Specific Care Issues	✓	✓	★
HHCAHPS: Overall rating	✓	✓	★
HHCAHPS: Willing to Recommend	✓	✓	

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Quality of Patient Care (QoPC) Star Ratings

- Summary of Current Methodology
 - For each of the 7 measures, ranks all agencies based on score and assigns into 10 equally-sized groups (deciles)
 - Each group is assigned star ratings and cut points
 - Adjust (or not adjust) the HHA's initial individual measure rating to help distinguish scores that are different from the national median based on a statistical test
 - For each agency, average the adjusted ratings across all measures (at least five needed) and round to the nearest 0.5
 - Assign ratings from 1 to 5 in half-star increments

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Who Gets a QoPC Star Rating?

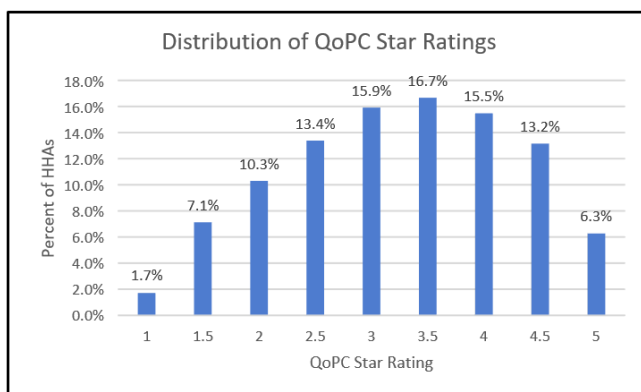
- All Medicare certified HHAs are eligible to receive a Star Rating, but there are several requirements that must be met in order to receive a score:
 - Completed episodes start with an SOC or ROC assessment and end with a DC assessment. Episodes must have a discharge date within the 12-month reporting period regardless of admission date
 - To get an Overall Star Rating, at least 5 of the 7 quality measures must have 20 or more completed quality episodes
 - HHAs that are new (< 6 months old) will not have Star Ratings reported
 - For January 2023, 7,786 providers had Star Ratings posted on HHC

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Distribution of QoPC Star Ratings

- January 2023 Care Compare refresh: 7,786 HHAs (67.1% of all CCNs) reported had an average rating of 3.25



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HHCAHPS Star Ratings

- The HHCAHPS Star Rating calculation uses a methodology called “Linearized Scoring.” This is different than the scores on Care Compare which utilize “Top Box” Scoring
- Individual survey responses are converted into linear scores on a 0-to-10-point scale
- The linear score for each answer changes based on the number of different response options for the question
- The HHCAHPS applies a patient mix adjustment in the final calculations
- The cut points for star rating assignments are derived from the range of individual measure Star Ratings using a Clustering Algorithm

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HHCAHPS Scoring Example

- **Q 20.** What number would you use to rate your care from this provider?

Top Box Scoring

Percent of patients who gave their Home Health Agency a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)

Response	Count	You	SHP
0 Worst home health care possible	0	0%	0%
1	0	0%	0%
2	0	0%	0%
3	0	0%	0%
4	0	0%	0%
5	0	0%	1%
6	1	2%	1%
7	1	2%	3%
8	6	12%	9%
9	9	18%	16%
10 Best home health care possible	33	66%	68%
Total	50		

Linearized Scoring

Score 0: $0 \times 0 = 0$
 Score 1: $0 \times 10 = 0$
 Score 2: $0 \times 20 = 0$
 Score 3: $0 \times 30 = 0$
 Score 4: $0 \times 40 = 0$
 Score 5: $0 \times 50 = 0$
 Score 6: $1 \times 60 = 60$
 Score 7: $1 \times 70 = 70$
 Score 8: $6 \times 80 = 480$
 Score 9: $9 \times 90 = 810$
 Score 10: $33 \times 100 = 3,300$
 Total Score: $= 4,720$

Top Box Example: $(33+9) / 50 = 84\%$

$4,720 / 50 \text{ responses} = 94.4\%$

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Who Gets a HHCAHPS Star Rating?

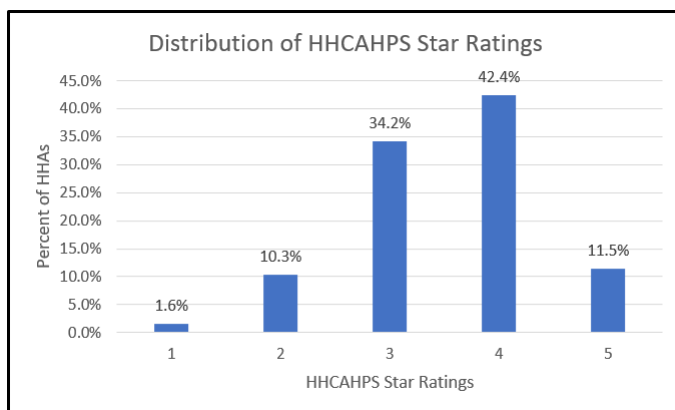
- CMS published the first round of HHCAHPS Star Ratings in January 2016
- HHAs must have at least 40 completed surveys over the four-quarter reporting period to receive HHCAHPS Star Ratings
- Four of the five publicly reported HHCAHPS measures are included in the Star Rating calculation
- HHAs that are new (< 6 months old) will not have Star Ratings reported
- For January 2023, **4,720** providers had Star Ratings posted on Care Compare

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Distribution of HHCAHPS Star Ratings

- January 2023 Care Compare refresh: 4,720 HHAs (40.7% of all CCNs) reported had an average rating of 3.52



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HHVBP - CMS CY 2022 Final Rule

- Finalized to expand HHVBP demonstration nationally effective January 1st, 2023
- All HHAs certified to participate in Medicare program prior to 1/1/22 required to participate
- 12 Quality Measures used for scoring points similar to the approach used in CMMI Performance Year (PY) 4 demonstration
 - 10 points for Achievement; 9 points for Improvement
- Payment adjustment range of increase or decrease of up to 5% of Medicare revenues

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HHVBP Quality Measures

- Applicable measures included in the Total Performance Score (TPS)

Category	Count	Quality Measure	Payers
OASIS-based	5	Improvement in Dyspnea	Medicare FFS Medicare Advantage Medicaid FFS Medicaid managed care
		Discharged to Community	
		Improvement in Management of Oral Medications	
		Total Normalized Composite Change in Self-Care	
		Total Normalized Composite Change in Mobility	
Claims-based	2	Acute Care Hospitalization During the First 60 Days of Home Health Use	Medicare FFS
		Emergency Department Use without Hospitalization During the First 60 Days of Home Health	
HHAHPS Survey-based	5	Care of Patients/Professional Care	Medicare FFS Medicare Advantage Medicaid FFS Medicaid managed care
		Communication	
		Specific Care Issues/Team Discussion	
		Overall Rating	
		Willingness to Recommend	

Source: CMS HHVBP_Quality_Measures_Slide_Deck_April2022

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HHVBP Key Dates

- HHVBP dates
 - CY 2022 – Baseline year for Model and HHA baseline scores
 - CY 2022 – Pre-Implementation Year
 - CY 2023 – 1st Performance Year
 - CY 2025 – 1st Payment Adjustment Year
- Newly certified HHA schedule

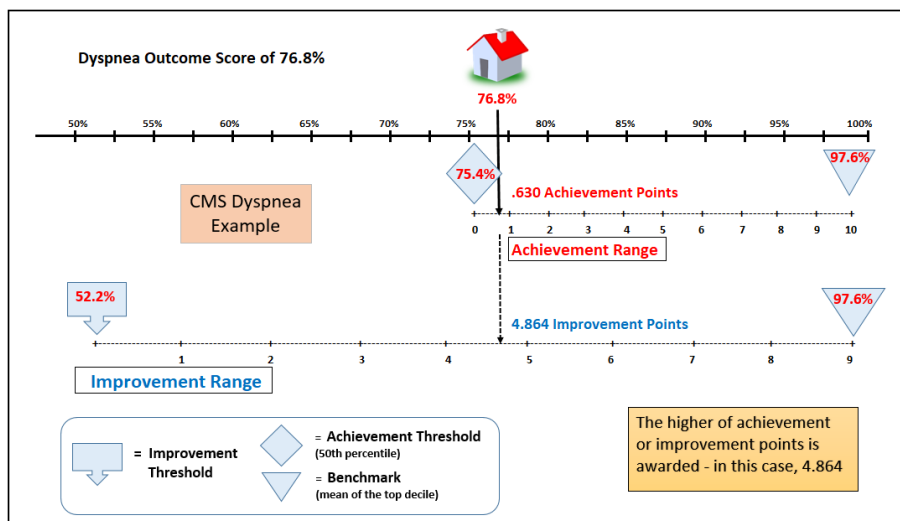
Medicare-certification Date	HHA Baseline Year	Performance Year	Payment Year
Prior to January 1, 2019	2022	2023	2025
January 1, 2019 – December 31, 2021	2022	2023	2025
January 1, 2022 – December 31, 2022	2023	2024	2026
January 1, 2023 – December 31, 2023	2024	2025	2027

Source: CMS CY 23 Proposed Rule

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HHVBP Measure Points Scoring



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TNC Scoring and Importance

Two Measures in HHVBP look at the Magnitude of Change (MoC) of outcomes:

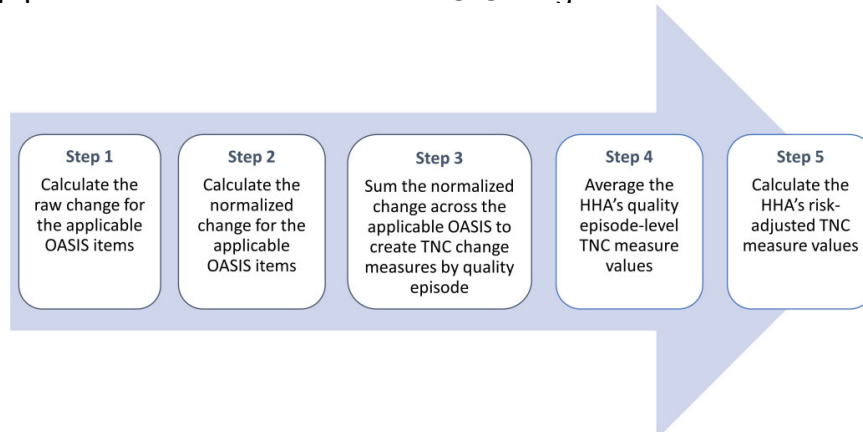
- Total Normalized Composite (TNC) Change in Mobility (3 Measures) - Ambulation, Bed Transferring and Toilet Transferring
- Total Normalized Composite (TNC) Change in Self-Care (6 Measures) - Grooming, Upper and Lower Dressing, Bathing, Toilet Hygiene and Eating
- Risk-Adjusted score based on the net changes in improvements and declines
- Weighted more than other OASIS items
- All Medicare and Medicaid patients are included

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TNC Measure Calculation

- 5-Step process for calculation the TNC Change measures



Source: CMS Resource: Calculating the Total Normalized Composite (TNC) Change Measures

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TNC vs Star Rating Measure Example

Impact on Star Rating and Care Compare

Impact on HHVBP TNC Self Care Score

- M1850 – Bed Transferring
- Star Rating is Binary (Improved or not improved)
- TNC looks at magnitude of change based on number of response items

		OASIS Answer at Discharge					
		0	1	2	3	4	5
OASIS Answer at SOC/ROC	0	Excluded	Excluded	Excluded	Excluded	Excluded	Excluded
	1	Improved +1/5	Not Improved -1/5	Not Improved -2/5	Not Improved -3/5	Not Improved -4/5	Not Improved -1
	2	Improved +2/5	Improved +1/5	Not Improved 0	Not Improved -1/5	Not Improved -2/5	Not Improved -3/5
	3	Improved +3/5	Improved +2/5	Improved +1/5	Not Improved 0	Not Improved -1/5	Not Improved -2/5
	4	Improved +4/5	Improved +3/5	Improved +2/5	Improved +1/5	Not Improved 0	Not Improved -1/5
	5	Improved 1	Improved +4/5	Improved +3/5	Improved +2/5	Improved +1/5	Not Improved 0

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HHVBP Cohorts and Weighting

- Uses Smaller- and Larger- Volume HHA Cohorts for setting benchmarks, achievement thresholds and competing for payments
- Smaller-volume HHAs cohort are exempt from submitting the HHCAHPS survey under HH QRP (fewer than 60 eligible patients)
- Cohorts would be compared nationwide vs. by state
- TPS Weighting
 - OASIS Items 35% (5 measures)
 - Claims Data 35% (2 measures)
 - 75% 60-Day Hospitalization
 - 25% ED use without Hospitalization
 - HHCAHPS 30% (5 measures)

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Measure Weighting Schedule

Measure Category	Quality Measures	Measure Reporting Scenarios			
		All Measures	No HHCAHPS	No Claims	No Claims or HHCAHPS
OASIS-based Measures	Discharged to Community	5.83	8.33	8.97	16.67
	Improvement in Dyspnea	5.83	8.33	8.97	16.67
	Improvement in Management of Oral Medications	5.83	8.33	8.97	16.67
	Total Normalized Composite (TNC) Change in Mobility	8.75	12.50	13.46	25.00
	Total Normalized Composite (TNC) Change in Self-Care	8.75	12.50	13.46	25.00
	Total for OASIS-based Measures	35.00	50.00	53.85	100.00
Claims-based Measures	Acute Care Hospitalizations	26.25	37.50	0.00	0.00
	Emergency Department Use Without Hospitalization	8.75	12.50	0.00	0.00
	Total for claims-based Measures	35.00	50.00	0.00	0.00
HHCAHPS Survey-based Measure Components	Care of Patients	6.00	0.00	9.23	0.00
	Communications Between Providers and Patients	6.00	0.00	9.23	0.00
	Specific Care Issues	6.00	0.00	9.23	0.00
	Overall Rating of Home Health Care	6.00	0.00	9.23	0.00
	Willingness to Recommend the Agency	6.00	0.00	9.23	0.00
	Total for HHCAHPS Survey-based Measure Components	30.00	0.00	46.15	0.00
Total for all Measure Categories		100.00	100.00	100.00	100.00

Source: CMS HH CY 2022 Final Rule

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Track and Manage HHVBP Total Performance Scores (TPS)

Total Performance Score (TPS)

- A numeric score, ranging from 0 to 100, awarded to each qualifying HHA based on the weighted sum of the performance scores for each applicable quality measure
- The HHA's TPS reflects all of the claims- and OASIS-based measures for which the HHA meets the minimum of 20 home health episodes of care per year
- The individual components that compose an HHCAHPS survey measure for which the HHA meets the minimum of 40 HHCAHPS surveys received in the performance year
- HHA needs at least 5 Quality Measure scores to have a TPS score

TPS Example

① Quality Measure	② Points for Applicable Measures	③ Proposed Weight (percentage)	④ Weighted Points
OASIS			
TNC Self-care	7.661	8.75	6.703
TNC Mobility	5.299	8.75	4.637
Oral Medications	3.302	5.83	1.925
Dyspnea	4.633	5.83	2.701
Discharged to Community	0.618	5.83	0.360
Claims			
ACH	1.180	26.25	3.098
ED Use	0.000	8.75	0.000
HHAHPS Survey Components			
HHAHPS Professional Care	10.000	6.00	6.000
HHAHPS Communication	10.000	6.00	6.000
HHAHPS Team Discussion	10.000	6.00	6.000
HHAHPS Overall Rating	5.921	6.00	3.553
HHAHPS Willingness to Recommend	8.406	6.00	5.044
Total Performance Score		100.00	46.021

Source: CMS HH CY 2022 Final Rule

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Linear Exchange Function (LEF)

		Step 1	Step 2	Step 3	Step 4	Step 5	Step 6	Step 7
HHA	TPS	Prior Year Aggregate HHA Payment Amount*	5-Percent Payment Reduction Amount (C2*5 percent)	TPS Adjusted Reduction Amount (C1/100)*C3	Linear Exchange Function (LEF) (Sum of C3/ Sum of C4)	Final TPS Adjusted Payment Amount (C4*C5)	Quality Adjusted Payment Rate (C6/C2)	Final Percent Payment Adjustment +/- (C7-5%)
	(C1)	(C2)	(C3)	(C4)	(C5)	(C6)	(C7)	(C8)
HHA1	38	\$100,000	\$5,000	\$1,900	1.931	\$3,669	3.669%	-1.331%
HHA2	55	\$145,000	\$7,250	\$3,988	1.931	\$7,701	5.311%	0.311%
HHA3	22	\$800,000	\$40,000	\$8,800	1.931	\$16,995	2.124%	-2.876%
HHA4	85	\$653,222	\$32,661	\$27,762	1.931	\$53,614	8.208%	3.208%
HHA5	50	\$190,000	\$9,500	\$4,750	1.931	\$9,173	4.828%	-0.172%
HHA6	63	\$340,000	\$17,000	\$10,710	1.931	\$20,683	6.083%	1.083%
HHA7	74	\$660,000	\$33,000	\$24,420	1.931	\$47,160	7.146%	2.146%
HHA8	25	\$564,000	\$28,200	\$7,050	1.931	\$13,615	2.414%	-2.586%
Sum			\$172,611	\$89,379		\$172,611		

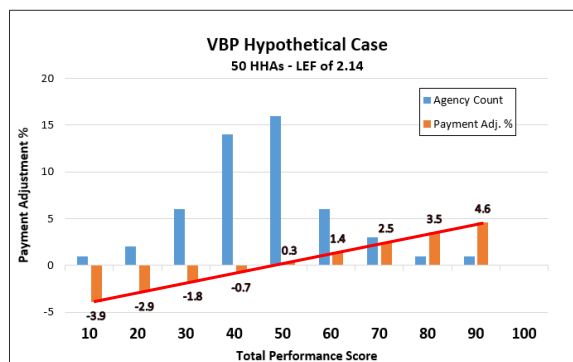
Source: CMS HH CY 2022 Final Rule

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Linear Exchange Function (LEF)

- Each agency's value-based incentive payment amount for a fiscal year will depend on:
 - Range and distribution of agency total performance scores
 - Amount of agency's base operating HHRG payment amount
- The value-based incentive payment amount for each agency will be applied as an adjustment to the base operating HHRG payment amount for each episode



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Examples of Payment Adjustments

- Shared in the CY 2022 Final Rule – Large volume cohort

State	# of HHAs	Average Payment Adjustment %	Payment Adjustment Percentile Distribution (%)		
			20%	50%	80%
ND	12	2.004	0.465	2.186	3.503
VT	10	(1.145)	(2.771)	(1.555)	0.310
NH	20	(0.376)	(2.041)	(0.189)	1.494
ME	19	1.081	(0.501)	0.704	2.862
MA	127	(0.162)	(2.207)	(0.091)	1.582
RI	18	0.504	(1.925)	0.663	1.658
CT	74	(0.083)	(2.908)	(1.481)	1.206
TX	978	0.154	(2.350)	(0.090)	2.732
FL	676	0.933	(1.416)	0.760	3.530
NJ	42	(0.730)	(1.931)	(1.311)	0.656
All	7,064	0.429	(1.919)	0.244	2.857

Source: CMS HH CY 2022 Final Rule

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Examples of Payment Adjustments

TPS Scores Comparison PY 4 to PY 5

	CY 2019		CY 2020		Chg TPS	Chg Adj %
	TPS	Adjusted %	TPS	Adjusted %		
Arizona State Cohort CCN #	112		117			
Mean	44.05	0.00%	50.33	0.00%	6.28	0.00%
25th Percentile	37.24	-1.08%	43.83	-1.03%	6.59	0.05%
50th Percentile	45.65	0.26%	50.34	0.20%	4.69	-0.06%
75th Percentile	52.68	1.37%	59.61	1.48%	6.93	0.10%
99th Percentile	71.53	4.37%	76.21	4.11%	4.69	-0.25%
Florida Large Cohort CCN #	676		655			
Mean	37.41	0.00%	43.22	0.00%	5.81	0.00%
25th Percentile	30.23	-1.34%	36.13	-1.31%	5.89	0.03%
50th Percentile	36.69	0.13%	42.86	-0.07%	6.16	-0.20%
75th Percentile	43.99	1.24%	48.96	1.06%	4.97	-0.17%
99th Percentile	70.06	6.12%	78.46	6.52%	8.40	0.41%
Iowa Large Cohort CCN #	95		94			
Mean	42.91	0.00%	49.34	0.00%	6.43	0.00%
25th Percentile	35.57	-1.20%	42.77	-1.07%	7.21	0.13%
50th Percentile	43.96	0.17%	47.90	-0.23%	3.94	-0.40%
75th Percentile	49.45	1.07%	55.47	0.99%	6.02	-0.07%
99th Percentile	77.98	5.72%	72.09	3.69%	(5.89)	-2.03%

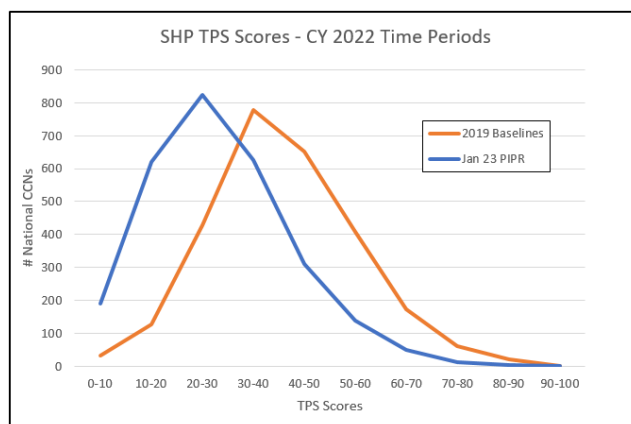
Source: CMS PY4 & 5 Payment Adjustment Reports

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SHP National TPS Scores – CY 2022

- As expected, graphs show a bell curve



Source: SHP National Database – VBP National Preview, 5 or more measures

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CMS National TPS Scores Targets

- Expect to see the TPS scores increase as measure scores improve – based on Improvements from the HHA Baseline Year (2022 or later) and scores within the Model Baseline Year achievement range (2022)
- Need to improve at or faster than the agencies in your cohort. Need to anticipate where the scores will be to set your target



Wayne Gretzky Quote:

“I skate to where the puck is going to be, not where it has been”

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Pre-Implementation Provider Reports (PIPR)

- The goal of the PIPRs is to provide HHAs with a current snapshot of their performance compared to others in their cohort on each of the applicable measures used in the expanded HHVBP Model
- Instructions on how to download reports from iQIES are available on the Expanded HHVBP Model webpage under “Model Reports”
<https://innovation.cms.gov/innovation-models/expanded-homehealth-value-based-purchasing-model>
- As of the February 23rd Open Door Forum, CMS reported that only 20% of the HHAs had downloaded their PIPR reports

Source: CMS – Introduction to the PIPR Webinar

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Benefits of the PIPR

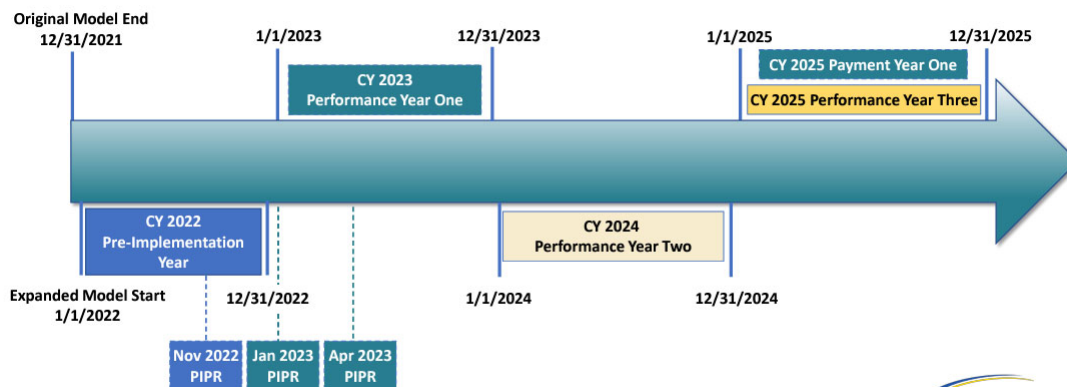
- Provides a comprehensive overview of quality performance
- Responds to requests of CMS to provide agencies with data prior to the start of the first performance year
- Aligns measurement with the HHVBP Model that has been adopted nationally for Medicare fee-for-service
- Helps you to become familiar with subsequent reports, like IPRs and APRs, that will be released later in the Model
- Allows you to see how you're doing compared to peers nationally at this point in time
- Provided through the iQIES system

Source: CMS – Introduction to the PIPR Webinar

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CMS Updated Reporting Timeline



Source: CMS – Introduction to the PIPR Webinar

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CMS Updated Reporting Timeline (cont.)

PIPR Report Date	Data Period	
	OASIS-based Measures	Claims-based Measures HHAHPS Survey-based Measure Components
November 2022	July 1, 2021 to June 30, 2022	April 1, 2021 to March 31, 2022
January 2023	Oct. 1, 2021 to Sep. 30, 2022	July 1, 2021 to June 30, 2022
April 2023	Jan. 1, 2022 to Dec. 31, 2022	Oct. 1, 2021 to Sep. 30, 2022

- Interim Performance Reports (IPRs) will be available quarterly beginning July 2023
- Annual Performance Reports (APRs) will be available annually beginning August 2024

Source: CMS – Introduction to the PIPR Webinar

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Key PIPR Data Elements

- Larger- or smaller-volume Cohort based on CY 2021 beneficiaries
- Measure Performance is based on 12 months ending in quarters from CY2022
- Percentile Ranks by measure showing the 25th, 50th, 75th and Mean of the 90th decile is provided
- The 50th percentile (median) measure value for HHAs in your HHA's cohort is the preliminary Achievement Threshold for each measure
- The mean of the 90th percentile measure value for HHAs in your HHA's cohort is the preliminary Benchmark
- Detail of the Sub-measures to TNC is provided under a separate tab

Source: CMS – Introduction to the PIPR Webinar

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PIPR Measure Performance

Report
CCN
HHA Name
HHA Address
Your HHA's Cohort [a]

CY 2022 Pre-Implementation Performance Report
999999
We Love Home Health
999 Home Health Ln, Home Health, MD 99999
Larger-volume

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Measure Performance Summary

Measure Performance Summary				Your HHA's Cohort Statistics [d] N = 6,982			
Measure	Performance Year Data Period [b] (12-Month End Date)	Your HHA's Performance Year Measure Value	Your HHA's Percentile Ranking Within Your HHA's Cohort [c]	25th Percentile	50th Percentile	75th Percentile	Mean of 90th Percentile
OASIS-based Measures							
Discharged to Community	6-30-2022	76.942	50-74	67.594	72.820	77.119	84.871
Improvement in Dyspnea	6-30-2022	92.936	≥75	68.887	79.416	87.063	97.478
Improvement in Management of Oral Medications	6-30-2022	88.765	≥75	74.728	85.116	91.193	98.200
Total Normalized Composite (TNC) Change in Mobility [e]	6-30-2022	0.970	≥75	0.631	0.724	0.804	0.986
Total Normalized Composite (TNC) Change in Self-Care [f]	6-30-2022	2.528	≥75	1.811	2.064	2.275	2.669
Claims-based Measures							
Acute Care Hospitalizations	3-31-2022	9.420	≥75	15.519	13.366	11.238	7.019
Emergency Department Use Without Hospitalization	3-31-2022	13.328	25-49	14.471	11.809	9.130	4.456
HHCAHPS Survey-based Measure Components							
Care of Patients	3-31-2022	88.868	50-74	86.370	88.794	91.001	94.873
Communications Between Providers and Patients	3-31-2022	88.829	50-74	83.007	86.221	88.854	93.400
Specific Care Issues	3-31-2022	87.351	≥75	77.606	81.757	85.540	92.262
Overall Rating of Home Health Care	3-31-2022	84.980	25-49	81.096	85.187	88.784	94.780
Willingness to Recommend the Agency	3-31-2022	83.119	50-74	74.129	79.502	84.247	91.678

Source: CMS – Introduction to the PIPR Webinar

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HHVBP Performance Feedback Reports

- Interim Performance Report (IPR)
 - Distributed Quarterly (first one in July 2023)
 - Includes 12 most recent months of data
 - Provides feedback to HHAs regarding performance both achievement and improvement within their applicable nationwide cohort
 - Both Preliminary and Final IPRs (after any appeals) will be issued
- Annual TPS and Payment Adjustment Report (3)
 - Preview Annual Report – confidential review of scores and adjustments
 - Preliminary Annual Report (if applicable) if agencies appeal their data
 - Final Annual Report – issued before the start of the payment adjustment year

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HHVBP Scoring Changes

HHVBP Demonstration had both minor and major revisions

- HHCAHPS measure minimum
- Drug Education removal
- 5 OASIS Measures removed, Two New TNC measures in its place
- Revamping of Measure and Category Weighting (**Significant!**)
- Reducing the maximum points for Improvement from 10 points to 9 points
- Removed the Pain Measure (CY 23)
- Minor adjustments to Improvement and Achievement calculations and scoring of the TNC total points and weighting (CY 23)
- Self reported “New Measures” are no longer required to be submitted (CY 23)

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Scoring Changes

- Change to National Cohorts
 - Now one large-volume cohort and one small-volume cohort
- Changes to the HH QRP and Implications
 - Replacing Acute Care Hospitalization During the First 60 Days of Home Health (ACH) and ED Use w/o Hospitalization During the First 60 Days (ED Use) with
 - Home Health Within Stay Potentially Preventable Hospitalization (PPH)
 - Risk-adjusted claims based measure
 - Includes observation stays
 - Identifies the most frequent Dx's associated with admissions from HH
 - Not just 30 or 60 days but across the entire patients stay
- Expect more to come...

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Analyze Outcomes and Benchmarks for Quality Improvements

decisionhealth

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decisionhealth

What Does Your Data Tell You?

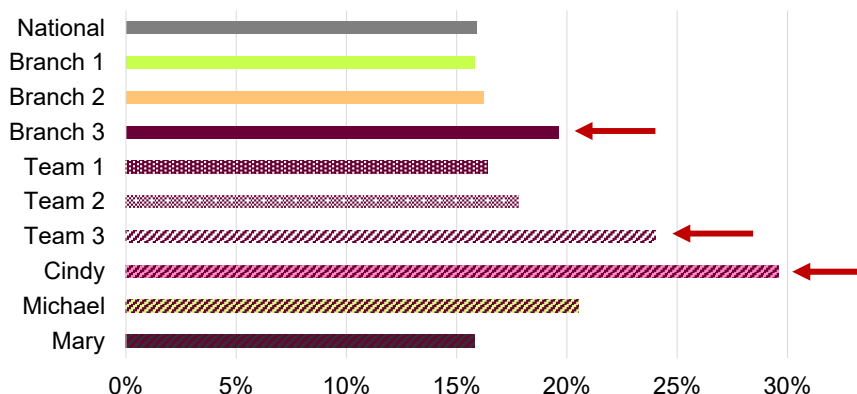
- Identify your organization's outcome scores in 2022
- Determine how you look in 2023 compared to 2022
 - Are your scores improving?
 - Above the 50th Percentile based on the PIPR reports
- Striving for higher TPS scores leads to higher payment adjustments
- Where are the best practices at your Agencies?
- Bring together your quality teams to identify opportunities for resource sharing and training

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Drill-Down to Identify Root-Causes

60-Day Acute Care Hospitalization Rate



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Measure Outcomes CY 2022 and 2021

- Across the board, HHVBP measures have improved year over year
- OASIS-based scores have improved greater than claims and HHCAHPS

HHVBP Measures	CY 2022	CY 2021	Percent Improved
TNC Change in Mobility (Risk-Adj)	0.832	0.793	4.9%
Toilet Transferring	0.289	0.269	7.4%
Transferring	0.269	0.259	3.9%
Ambulation/Locomotion	0.274	0.265	3.4%
TNC Change in Self-Care (Risk-Adj)	2.307	2.189	5.4%
Grooming	0.424	0.401	5.7%
Ability to Dress Upper Body	0.436	0.415	5.1%
Ability to Dress Lower Body	0.484	0.464	4.3%
Bathing	0.389	0.368	5.7%
Toileting Hygiene	0.450	0.424	6.1%
Feeding or Eating	0.124	0.116	6.9%
Improvement in Mgmt of Oral Meds (Risk-Adj)	85.1%	82.7%	2.9%
Improvement in Dyspnea (Risk-Adj)	89.2%	87.4%	2.1%
Discharged to Community (Risk-Adj)	73.7%	73.1%	0.8%
60-Day Hospitalizations (Observed)	14.7%	14.9%	1.3%
Care of Patients	89.6%	89.2%	0.4%
Communications	87.4%	86.8%	0.7%
Specific Care Issues	85.0%	84.6%	0.5%
% who Rated Agency 9,10	85.2%	84.5%	0.8%
% who would Recommend	79.6%	79.0%	0.8%

Source: SHP National Database (4/21/23)

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Tracking Trends and Percentile Rankings

- Improving scores are important, improving rankings is the Key
- Set goals based on targets that are attainable and that increases percentile ranking



Outcomes	5%	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%
TNC: Change in Self-Care (Risk-Adj)	1.729	1.891	1.979	2.047	2.094	2.134	2.170	2.203	2.239	2.270	2.302	2.335	2.362	2.395	2.433	2.477	2.539	2.610	2.713
Grooming	0.210	0.273	0.307	0.331	0.349	0.367	0.380	0.393	0.405	0.416	0.427	0.438	0.448	0.459	0.471	0.483	0.496	0.517	0.545
Ability to Dress Upper Body	0.231	0.290	0.324	0.345	0.365	0.381	0.395	0.407	0.418	0.428	0.439	0.449	0.459	0.468	0.479	0.490	0.503	0.522	0.550
Ability to Dress Lower Body	0.268	0.333	0.365	0.390	0.409	0.425	0.438	0.451	0.461	0.472	0.482	0.492	0.502	0.514	0.526	0.538	0.554	0.577	0.609
Bathing	0.174	0.223	0.252	0.274	0.291	0.308	0.323	0.337	0.349	0.361	0.375	0.386	0.399	0.413	0.430	0.446	0.464	0.489	0.523
Toileting Hygiene	0.222	0.284	0.322	0.350	0.371	0.390	0.405	0.418	0.430	0.441	0.453	0.462	0.473	0.484	0.497	0.510	0.524	0.545	0.574
Feeding or Eating	0.038	0.058	0.071	0.082	0.090	0.098	0.106	0.112	0.119	0.125	0.130	0.135	0.141	0.146	0.152	0.158	0.166	0.175	0.191
TNC: Change in Mobility (Risk-Adj)	0.605	0.668	0.698	0.722	0.743	0.758	0.771	0.782	0.796	0.809	0.822	0.835	0.848	0.863	0.882	0.901	0.928	0.960	1.031
Toilet Transferring	0.121	0.164	0.183	0.197	0.207	0.217	0.225	0.234	0.244	0.252	0.262	0.276	0.289	0.305	0.324	0.345	0.380	0.428	0.538
Transferring	0.132	0.170	0.197	0.212	0.224	0.234	0.242	0.250	0.257	0.264	0.269	0.274	0.280	0.287	0.292	0.300	0.308	0.320	0.339
Ambulation/Locomotion	0.130	0.168	0.193	0.211	0.223	0.232	0.241	0.250	0.258	0.265	0.272	0.279	0.286	0.294	0.301	0.309	0.318	0.331	0.357
Improvement Rollup (Risk-Adj)	69.7%	76.0%	78.3%	80.1%	81.6%	82.7%	84.0%	85.1%	86.0%	86.8%	87.8%	88.6%	89.5%	90.2%	91.1%	91.8%	92.7%	93.8%	95.6%
Management of Oral Meds (Risk-Adj)	63.6%	69.6%	73.1%	75.4%	77.0%	78.6%	80.1%	81.3%	82.7%	84.0%	85.3%	86.2%	87.2%	88.3%	89.5%	90.6%	92.2%	94.3%	97.7%
Dyspnea (Risk-Adj)	67.0%	74.4%	78.0%	80.8%	82.5%	84.0%	85.3%	86.4%	87.5%	88.5%	89.4%	90.2%	91.0%	91.7%	92.5%	93.4%	94.3%	95.5%	97.6%
Ambulation/Locomotion (Risk-Adj)	67.6%	74.2%	77.1%	79.1%	80.8%	82.0%	83.1%	84.2%	85.2%	86.2%	87.1%	88.2%	89.0%	89.9%	90.9%	91.8%	92.8%	94.2%	96.5%
Bed Transferring (Risk-Adj)	71.2%	76.8%	79.8%	81.5%	82.8%	84.0%	85.0%	86.0%	86.7%	87.3%	88.0%	88.7%	89.5%	90.3%	91.0%	91.8%	92.9%	94.1%	96.3%
Bathing (Risk-Adj)	70.7%	76.8%	79.9%	81.7%	83.4%	84.7%	85.8%	86.8%	87.8%	88.7%	89.5%	90.4%	91.1%	91.9%	92.6%	93.5%	94.5%	95.6%	98.0%
Skin Integrity (Risk-Adj)	1.02%	0.75%	0.60%	0.50%	0.44%	0.39%	0.34%	0.29%	0.26%	0.22%	0.19%	0.15%	0.12%	0.08%	0.05%	0.01%	0.00%	0.00%	0.00%
Falls with Major Injury	2.58%	2.03%	1.75%	1.54%	1.40%	1.28%	1.17%	1.07%	0.97%	0.89%	0.82%	0.75%	0.68%	0.61%	0.52%	0.41%	0.29%	0.12%	0.00%

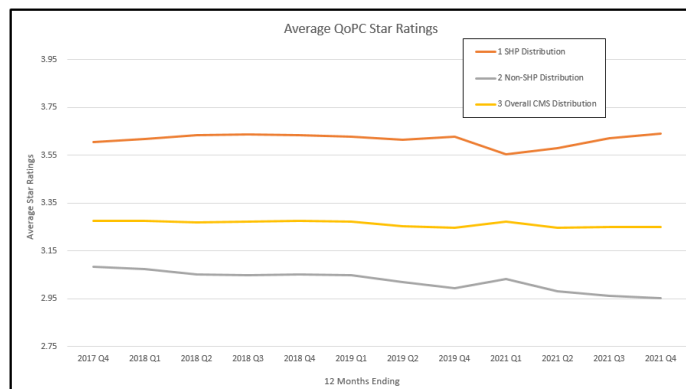
Source: SHP Clinical Scorecard Percentiles report

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Understand Your Data Sources

- Real-time vs Historical
- Make adjustments for Data Source and Time Horizons



Source: Care Compare Star Ratings by CCN

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Comparing QoPC and TPS Performance

- Higher QoPC Star ratings correlate with higher TPS scores
- Differences in scoring can be seen in Claims-based Measures

TPS Scores	QoPC Star Ratings								
	1	1.5	2	2.5	3	3.5	4	4.5	5
0-10	0.5%	3.3%	10.9%	21.9%	31.7%	19.7%	6.6%	2.7%	2.7%
10-20	0.2%	0.5%	3.7%	13.3%	20.8%	20.8%	24.2%	14.0%	2.4%
20-30	0.0%	0.6%	2.0%	6.8%	13.8%	19.2%	25.3%	24.8%	7.5%
30-40	0.0%	0.3%	2.1%	4.8%	7.7%	17.3%	25.0%	31.9%	10.9%
40-50	0.3%	0.3%	0.0%	4.6%	11.8%	15.7%	22.6%	28.5%	16.1%
50-60	0.0%	0.0%	1.5%	2.2%	6.7%	15.6%	20.7%	32.6%	20.7%
60-70	0.0%	0.0%	0.0%	6.5%	8.7%	8.7%	19.6%	21.7%	34.8%
70-80	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	25.0%	41.7%	33.3%
80-90	0.0%	0.0%	0.0%	0.0%	0.0%	50.0%	0.0%	0.0%	50.0%

Source: SHP National Database and CMS Care Compare

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Measure Weighting Considerations

- A 50% improvement in your ACH score within the achievement range generates 13.3 TPS points versus 2.9 and 3.0 for Dyspnea and Care of Patients, respectively
- Look at the spread between the achievement threshold and benchmark
- A two-percentage point improvement in scores produces over double the weighted points between Dyspnea (0.9 pts) compared to Care of Patients (2.2 pts) due to the tighter range of scores.

Quality Measure	Achievement Threshold (median)	Benchmark (mean of top decile)	Range (Threshold - Benchmark)	25% Score Improvement	50% Score Improvement	75% Score Improvement	2% Point Score Improvement
Dyspnea Scores (OASIS)	85.7	98.3	12.6	88.8	92.0	95.1	87.7
Dyspnea Weighted Points				1.4	2.9	4.4	0.9
60-Day ACH Scores (Claims)	13.8	7.7	6.0	12.3	10.7	9.2	11.8
60-Day ACH Weighted Points				5.0	13.3	19.8	8.5
Care of Patients Scores (HHAHPS)	89.0	94.4	5.4	90.4	91.7	93.1	91.0
Care of Patients Weighted Points				1.5	3.0	4.6	2.2

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Star Rating Opportunities With Cut Points

SHP Real-Time Star Ratings Preview - Quality of Patient Care
Superior Outcomes Home Health - Superior Outcomes - CCH 000029

Period: 01/2024 (PHE Exclusion), OMPM: 04/22-03/23, Hosp: 01/22-12/22
Report Date: 3/10/2023

Initial Decile Rating		Outcomes						
High/Low Better (+/-)		Timely Initiation of Care	Mgmt of Oral Meds	Ambulation	Bed Transfer	Bathing	Dyspnea	60-Day Hospitalizations
		+	+	+	+	+	+	-
2	0.5	0.0-83.8	0.0-57.3	0.0-63.2	0.0-64.0	0.0-67.6	0.0-60.4	18.8-100.0
3	1.0	83.9-90.7	57.4-67.6	63.3-73.9	64.1-75.7	67.7-77.0	60.5-72.7	16.8-18.7
4	1.5	90.9-94.2	67.7-73.0	74.0-78.9	75.0-81.5	77.1-81.8	72.8-79.1	15.6-16.7
5	2.0	94.3-96.2	73.9-78.9	79.0-82.5	81.6-84.6	81.9-84.9	79.2-83.1	14.7-15.5
6	2.5	96.3-97.4	79.0-82.5	82.6-85.2	84.9-87.1	85.0-87.6	83.2-86.3	14.0-14.6
7	3.0	97.5-98.4	82.6-85.5	85.3-87.9	87.2-89.3	87.7-89.8	86.4-88.8	13.4-13.9
8	3.5	98.5-99.1	85.6-88.3	88.0-90.0	89.4-91.0	89.9-92.1	88.9-90.8	12.5-13.3
9	4.0	99.2-99.7	88.4-91.5	90.1-92.5	91.1-93.4	92.2-94.5	90.9-93.2	11.2-12.4
10	4.5	99.8-99.9	91.6-96.6	92.6-96.2	93.5-97.0	94.6-97.6	93.3-96.7	9.3-11.1
11	5.0	100.0-100.0	96.7-100.0	96.3-100.0	97.1-100.0	97.7-100.0	96.8-100.0	0.0-9.2
12	Your HHA Score	99.6	92.6	91.8	90.0	91.3	96.1	16.2
13	Your Initial Decile Rating (Requires N ≥ 20)	4.0	4.5	4.0	3.5	3.5	4.5	1.5
14	Your Number of Cases (N)	785	548	555	556	558	525	413
15	National (All HHA) Median	97.4	82.5	85.2	87.1	87.6	86.3	14.0
16	Your Statistical Test Probability Value (p-value)	0.000	0.000	0.000	0.024	0.003	0.000	0.111
17	Your Statistical Test Results (Is the p-value ≤ 0.0507?)	Yes	Yes	Yes	Yes	Yes	Yes	No
18	Your HHA Adjusted Rating	4.0	4.5	4.0	3.5	3.5	4.5	2.0↑
19	Your Average Adjusted Rating					3.7		
20	Your Average Adjusted Rating Rounded					3.5		

Final Step: Convert Your Average Adjusted Rating Rounded (Line 20) to the 1.0 to 5.0 star scale as shown below:

Your Overall Star Rating (1.0 to 5.0)		% of CCHs with Rating (CMS: 10/2022)
Average Adjusted Rating Rounded	Overall HHC Star Rating	
4.5 and 5.0	(5.0) ★★★★★	6.17%
4.0	(4.5) ★★★★☆	12.95%
3.5	(4.0) ★★★☆☆	15.78%

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New OASIS-E SDOH Measures

- Comparing 30-Day ACH with new SDOH measures coded at SOC Assessments

D0160 - Patient Mood Severity Score

Severity Score	30 Day ACH %	# Assessments	% Total Count
0 - 9	11.0%	1,598,175	97.6%
10 - 27	15.6%	39,141	2.4%
Total	11.2%	1,637,316	100.0%

D0700 - Social Isolation

Code	Description	30 Day ACH %	# Assessments	% Total Count
0	Never	10.6%	1,173,140	69.1%
1	Rarely	12.1%	249,655	14.7%
2	Sometimes	12.7%	172,665	10.2%
3	Often	13.2%	36,389	2.1%
4	Always	13.7%	11,616	0.7%
7	Patient Declines	14.8%	12,998	0.8%
8	Patient Unable	13.5%	42,279	2.5%
All Responses		11.2%	1,698,742	100.0%

Source: SHP National Database (4/21/23)

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Risk of Hospitalization in Plans of Care

- Utilize Risk of Hospitalization predictions your vendor may have
- Front load, High Risk Case Conference, Remote Patient Monitoring
- The data is compelling...

SHP Risk of Acute Care Hospitalizations - CY 2022 Episodes

Predicted Tier	Avg ACH	Episodes	% of Episodes
1 - Low	4.8%	1,198,253	19.9%
2 - Low	14.1%	1,763,150	29.2%
3 - Mod	23.8%	1,261,147	20.9%
4 - Mod	33.4%	809,626	13.4%
5 - Mod	42.5%	498,695	8.3%
6 - High	51.3%	287,575	4.8%
7 - High	59.8%	143,479	2.4%
8 - High	68.6%	55,062	0.9%
9 - High	77.4%	15,022	0.2%

Source: SHP National Database (4/21/23)

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Sensitivity Analysis

CCN Provider Name Large Agency Cohort Percentage Improvement

Quality Measure	Agency Base Year	Agency Real-Time	Threshold	Benchmark	What if	Achievement Points	Improvement Points	Weight %	Weighted Care Points
OASIS Measures									
TNC Self-care	2.370	2.358	2.096	2.693	2.358	4.389	-	8.75	3.840
TNC Mobility	0.907	0.899	0.734	0.995	0.899	6.322	-	8.75	5.532
Oral Medications	97.6	97.6	80.3	97.7	97.6	9.960	1.125	5.83	5.807
Dyspnea	95.1	94.0	85.7	98.3	94.0	6.600	-	5.83	3.848
Discharge to Community	79.0	79.4	72.7	84.4	79.4	5.678	0.631	5.83	3.310
Claims Measures									
ACH	13.4	13.1	13.8	7.7	13.1	1.026	0.442	26.25	2.695
ED Use	13.8	13.8	11.7	4.6	13.8	-	-	8.75	-
HHAHPS Measures									
Care of Patients	84.0	85.8	89.0	94.4	85.8	-	1.542	6.00	0.925
Communication	84.0	84.6	86.4	93.0	84.6	-	0.551	6.00	0.331
Specific Care Issues	82.0	85.0	81.8	91.1	85.0	3.451	2.957	6.00	2.071
Overall Rating	75.0	78.4	85.6	94.2	78.4	-	1.590	6.00	0.954
Willing to Recommend	70.0	72.6	79.7	90.8	72.6	-	1.116	6.00	0.669
Total Performance Score									29.981

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Sensitivity Analysis (cont.)

CCN Provider Name Large Agency Cohort Percentage Improvement **1.00%**

Quality Measure	Agency Base Year	Agency Real-Time	Threshold	Benchmark	What if	Achievement Points	Improvement Points	Weight %	Weighted Care Points
OASIS Measures									
TNC Self-care	2.370	2.358	2.096	2.693	2.382	4.784	0.323	8.75	4.186
TNC Mobility	0.907	0.899	0.734	0.995	0.908	6.666	0.101	8.75	5.833
Oral Medications	97.6	97.6	80.3	97.7	98.6	10.000	9.000	5.83	5.830
Dyspnea	95.1	94.0	85.7	98.3	94.9	7.347	-	5.83	4.283
Discharge to Community	79.0	79.4	72.7	84.4	80.1	6.358	1.949	5.83	3.707
Claims Measures									
ACH	13.4	13.1	13.8	7.7	13.0	1.244	0.650	26.25	3.266
ED Use	13.8	13.8	11.7	4.6	13.7	-	0.135	8.75	0.119
HHAHPS Measures									
Care of Patients	84.0	85.8	89.0	94.4	86.6	-	2.285	6.00	1.371
Communication	84.0	84.6	86.4	93.0	85.4	-	1.399	6.00	0.839
Specific Care Issues	82.0	85.0	81.8	91.1	85.9	4.359	3.795	6.00	2.615
Overall Rating	75.0	78.4	85.6	94.2	79.2	-	1.958	6.00	1.175
Willing to Recommend	70.0	72.6	79.7	90.8	73.3	-	1.430	6.00	0.858
Total Performance Score									34.081

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Sensitivity Analysis (cont.)

CCN Provider Name Large Agency Cohort Percentage Improvement **10.00%**

Quality Measure	Agency Base Year	Agency Real-Time	Threshold	Benchmark	What if	Achievement Points	Improvement Points	Weight %	Weighted Care Points
OASIS Measures									
TNC Self-care	2.370	2.358	2.096	2.693	2.358	4.389	-	8.75	3.840
TNC Mobility	0.907	0.899	0.734	0.995	0.899	6.322	-	8.75	5.532
Oral Medications	97.6	97.6	80.3	97.7	97.6	9.960	1.125	5.83	5.807
Dyspnea	95.1	94.0	85.7	98.3	94.0	6.600	-	5.83	3.848
Discharge to Community	79.0	79.4	72.7	84.4	79.4	5.678	0.631	5.83	3.310
Claims Measures									
ACH	13.4	13.1	13.8	7.7	11.8	3.202	2.517	26.25	8.405
ED Use	13.8	13.8	11.7	4.6	13.8	-	-	8.75	-
HHAHPS Measures									
Care of Patients	84.0	85.8	89.0	94.4	85.8	-	1.542	6.00	0.925
Communication	84.0	84.6	86.4	93.0	84.6	-	0.551	6.00	0.331
Specific Care Issues	82.0	85.0	81.8	91.1	85.0	3.451	2.957	6.00	2.071
Overall Rating	75.0	78.4	85.6	94.2	78.4	-	1.590	6.00	0.954
Willing to Recommend	70.0	72.6	79.7	90.8	72.6	-	1.116	6.00	0.669
Total Performance Score									35.691

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Thank you. Questions?

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In order to receive your continuing education certificate(s) for this program, you must complete the online evaluation. The link can be found in the continuing education section of the program guide.

decisionhealth

homehealth

ADMINISTRATOR'S SUMMIT

MAY 8–10, 2023



National Benchmarks for New OASIS-E Items and ToH Process Measures

Chris Attaya, MBA

VP of Product Strategy

Strategic Healthcare Programs (SHP)

Santa Barbara, CA

OASIS-E Handout – Transfer of Health Measures

Transfer of Health Information Process Measure Scores

OASIS-E items	Provision of Medication List	Jan 2023	Feb 2023	Mar 2023	YTD 2023
A2120	To Provider at Transfer	66.3%	70.2%	72.4%	69.7%
A2121	To Provider at Discharge	71.4%	76.0%	78.3%	75.2%
A2123	To Patient at Discharge	83.0%	85.6%	87.3%	85.4%

Route in Transfer to Subsequent Provider

Code	Route	# Assess.	Percent
A	Electronic Health Record	95,904	33.3%
B	Health Information Exchange	18,254	6.3%
C	Verbal	21,470	7.5%
D	Paper-based	145,985	50.7%
E	Other Methods	6,051	2.1%
Total		287,664	100.0%

Route in Transfer to Patient

Code	Route	# Assess.	Percent
A	Electronic Health Record	181,964	14.8%
B	Health Information Exchange	8,951	0.7%
C	Verbal	394,572	32.0%
D	Paper-based	631,807	51.3%
E	Other Methods	14,969	1.2%
Total		1,232,263	100.0%

OASIS-E Handout – SDoH Items

	Medicare Region										
D0700 - Social Isolation	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
Never	69.1%	70.9%	71.9%	70.6%	69.7%	67.9%	69.2%	64.6%	59.9%	55.8%	69.1%
Rarely	13.7%	13.9%	13.3%	14.5%	14.2%	15.2%	15.4%	17.2%	20.0%	17.4%	14.7%
Sometimes	10.6%	9.3%	9.0%	9.4%	9.5%	10.9%	10.3%	12.5%	13.7%	14.8%	10.2%
Often	2.3%	1.4%	1.8%	1.9%	2.0%	2.5%	2.1%	2.8%	3.2%	4.2%	2.1%
Always	0.8%	0.4%	0.6%	0.6%	0.6%	0.8%	0.6%	0.8%	0.9%	1.8%	0.7%
Patient Declines	0.9%	0.8%	0.8%	0.8%	0.9%	0.7%	0.6%	0.5%	0.6%	1.3%	0.8%
Patient Unable	2.6%	3.3%	2.6%	2.3%	3.0%	2.0%	1.8%	1.5%	1.7%	4.7%	2.5%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

	Medicare Region										
B1300 - Health Literacy	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
Never	45.1%	45.5%	47.3%	43.9%	42.9%	45.3%	39.1%	41.7%	41.7%	34.8%	43.8%
Rarely	14.5%	14.5%	14.8%	16.2%	15.2%	15.3%	17.5%	18.0%	18.3%	15.7%	15.7%
Sometimes	19.4%	19.3%	18.6%	19.9%	19.2%	19.1%	21.9%	21.2%	20.3%	19.6%	19.7%
Often	8.7%	8.3%	8.4%	9.3%	9.4%	9.1%	10.7%	9.2%	9.3%	10.7%	9.2%
Always	9.5%	9.3%	8.6%	8.5%	10.5%	9.2%	9.2%	8.5%	8.7%	14.5%	9.3%
Patient Declines	0.5%	0.5%	0.4%	0.5%	0.5%	0.4%	0.3%	0.3%	0.3%	0.7%	0.4%
Patient Declines	2.2%	2.6%	1.9%	1.8%	2.4%	1.6%	1.3%	1.1%	1.3%	3.9%	1.9%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Source: SHP OASIS SOC Assessment CY 23 (received as of April 20th, 2023)

OASIS-E Handout – SDoH Items - Transportation

	Medicare Region										
A1250A - Transportation kept me from Medical Appts	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
No	94.4%	94.0%	94.5%	94.2%	91.3%	93.4%	92.7%	93.9%	92.7%	91.3%	93.5%
Yes	5.6%	6.0%	5.5%	5.8%	8.7%	6.6%	7.3%	6.1%	7.3%	8.7%	6.5%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

	Medicare Region										
A1250B - Transportation kept me from Non-Medical Appts	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
No	95.6%	95.7%	96.0%	95.8%	93.1%	95.1%	94.2%	95.4%	93.0%	92.7%	95.0%
Yes	4.4%	4.3%	4.0%	4.2%	6.9%	4.9%	5.8%	4.6%	7.0%	7.3%	5.0%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

OASIS-E Handout – New Items

	Medicare Region										
B0200 - Hearing	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
Adequate	66.8%	70.9%	67.5%	62.9%	67.3%	66.0%	55.2%	60.8%	61.0%	58.7%	64.6%
Minimal Difficulty	22.0%	19.4%	21.8%	25.1%	20.7%	22.8%	30.0%	26.2%	26.1%	26.4%	23.6%
Moderate Difficulty	10.6%	9.1%	10.1%	11.3%	11.1%	10.6%	13.9%	12.3%	12.1%	13.9%	11.1%
Highly Impaired	0.7%	0.7%	0.7%	0.7%	0.9%	0.6%	0.8%	0.7%	0.8%	1.0%	0.7%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

	Medicare Region										
D0160 - Patient Mood Severity Score	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
0 - 9	97.2%	98.5%	97.7%	98.1%	97.8%	97.2%	98.0%	96.6%	96.0%	94.4%	97.6%
10 - 27	2.8%	1.5%	2.3%	1.9%	2.2%	2.8%	2.0%	3.4%	4.0%	5.6%	2.4%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

	Medicare Region										
C0500 - BIMS Summary	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
00 - 07	7.4%	6.8%	7.0%	8.0%	8.1%	6.9%	7.5%	6.5%	7.9%	11.0%	7.5%
08 - 12	17.1%	17.9%	16.4%	18.5%	18.3%	17.3%	19.6%	17.0%	18.9%	20.7%	18.0%
13 - 15	74.3%	73.8%	75.4%	72.1%	71.9%	74.6%	71.4%	75.6%	72.1%	67.0%	73.1%
99	1.2%	1.5%	1.2%	1.4%	1.7%	1.2%	1.4%	0.9%	1.1%	1.3%	1.3%
All Responses	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Source: SHP OASIS SOC Assessment CY 23 (received as of April 20th, 2023)

OASIS-E Handout – New Pain Items

	Medicare Region										
J0510 Pain Effect on Sleep	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
Does not Apply	17.1%	17.4%	17.1%	13.0%	20.7%	15.4%	10.8%	11.8%	13.9%	13.9%	15.3%
Rarely or not at all	28.5%	28.8%	31.1%	28.2%	26.9%	29.8%	26.3%	30.8%	30.2%	31.8%	28.8%
Occasionally	26.1%	30.8%	27.5%	31.1%	28.5%	27.5%	32.9%	27.6%	28.5%	24.7%	29.1%
Frequently	16.7%	15.0%	14.9%	17.4%	15.0%	16.4%	19.5%	18.7%	17.1%	16.0%	16.6%
Almost Constantly	9.7%	6.0%	7.7%	8.9%	7.0%	9.6%	9.4%	10.2%	9.2%	10.1%	8.6%
Unable to Answer	1.9%	2.1%	1.8%	1.5%	2.0%	1.4%	1.2%	1.0%	1.1%	3.5%	1.7%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

	Medicare Region										
J0520 Pain Interference with Therapy Activities	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
Skipped	17.2%	17.6%	17.1%	13.1%	21.4%	15.5%	11.0%	11.9%	14.1%	13.9%	15.5%
Does not Apply	24.4%	21.2%	23.0%	24.8%	20.3%	24.6%	26.8%	25.1%	24.2%	31.7%	24.1%
Rarely or not at all	18.6%	18.7%	20.3%	17.3%	16.3%	18.5%	15.7%	19.5%	19.1%	16.7%	17.9%
Occasionally	18.1%	23.1%	20.2%	21.9%	20.9%	19.5%	22.3%	19.3%	20.6%	15.9%	20.7%
Frequently	12.8%	12.3%	11.8%	14.2%	13.2%	13.1%	15.5%	14.8%	13.6%	11.6%	13.4%
Almost Constantly	7.2%	5.0%	5.7%	7.2%	5.9%	7.4%	7.6%	8.4%	7.3%	6.9%	6.8%
Unable to Answer	1.8%	2.1%	1.8%	1.4%	1.9%	1.4%	1.1%	1.0%	1.2%	3.3%	1.6%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Source: SHP OASIS SOC Assessment CY 23 (received as of April 20th, 2023)

OASIS-E Handout – New Pain Items (Cont.)

J0530 Pain Interference with Day-to-day Activities	Medicare Region										
	Region I - New England	Region II - Northeast	Region III - East	Region IV - South	Region V - Central	Region VI - Southwest	Region VII - Midwest	Region VIII - Mountain	Region IX - West	Region X - Northwest	All Regions
Skipped	17.2%	17.6%	17.1%	13.1%	21.4%	15.5%	11.0%	11.9%	14.0%	13.9%	15.5%
Rarely or not at all	15.8%	16.0%	17.6%	15.0%	14.7%	16.3%	13.4%	17.0%	16.3%	16.7%	15.7%
Occasionally	27.5%	33.0%	30.4%	31.9%	29.1%	29.1%	32.6%	28.3%	29.3%	26.3%	30.4%
Frequently	23.5%	22.4%	21.9%	25.4%	22.3%	23.6%	28.4%	26.1%	25.1%	23.6%	24.1%
Almost Constantly	14.1%	8.9%	11.0%	13.0%	10.5%	14.0%	13.5%	15.7%	14.2%	15.9%	12.6%
Unable to Answer	1.9%	2.2%	1.9%	1.6%	2.0%	1.5%	1.2%	1.0%	1.2%	3.6%	1.7%
Overall	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%