

Home Health Value-Based Purchasing (HHVBP)



Annual Total Performance Score and Payment Adjustment Report

August 31, 2017

Prepared for CMS by the HHVBP Technical Assistance, contract number HHSM-500-2014-0033I. If you have suggestions for additional topics, please email the helpdesk at HHVBPquestions@cms.hhs.gov.









Agenda

- Annual Total Performance Score & Payment Adjustment Terminology Review
- How the Total Performance Score (TPS) and Adjusted Payment Percentage (APP) are related and calculated
 - » When and how payment adjustment are applied
- Review of important dates
 - » Recalculation and reconsideration process
- Discussion, Q&A, and Closing Notes

Handouts and Questions

- Handouts available via the green "Resources" widget for live presentations and on HHVBP Connect if viewing a recording
 - » Presentation Slides (PDF)
 - » HHVBP Annual TPS & Payment Adjustment Report Fact Sheet
 - » HHVBP Annual TPS & Payment Adjustment Report Glossary
 - » Adjusted Payment Percentage (APP) Fact Sheet
 - » Step-by-step Guide to Download and Print your Report
- Questions
 - May be submitted privately via the Q&A feature on your screen or anytime via the HHVBP Help Desk at
 - HHVBPquestions@cms.hhs.gov

Webinar Console Overview



Questions to Consider

- 1) Is your agency eligible for the Adjusted Payment Percentage (APP) computation?
- 2) How does your agency's Total Performance Score (TPS) value compare with the average TPS for your cohort in your state?
- 3) How is your agency's APP computed?

HHVBP Model Information

TPS Terminology TPS Calculation Payment Adjustment Calculation

Annual TPS & Payment Adjustment Report Terminology

- Eligibility criteria for the Annual Performance Payment
- Key Terminology
- 20/40 HHCAHPS calculation

Annual TPS & Payment Adjustment Reports

Three Versions:

- Preview Reports: August 2017
 - » Two reports: 20 HHCAHPS and 40 HHCAHPS
 - » Recalculation requests may be submitted within 15 days of when CMS publishes Preview Report
- Preliminary Report: October 2017
 - » Two reports: 20 HHCAHPS and 40 HHCAHPS
 - » Reconsideration requests must be submitted within 15 days of when CMS publishes the Preliminary Report
- Final Report: December 2017

Defining and Identifying Cohorts

- A cohort is based on state and HHA size and is the group in which the individual HHA competes
 - » If an HHA had fewer than 60 eligible unique HHCAHPS patients in CY2016, it is identified as a "small" HHA
 - » If a state has 8+ "small" HHAs, two cohorts are formed in these states – one for small HHAs and one for large HHAs
 - » If a state has fewer than 8 HHAs that are identified as "small," all HHAs in that state are assigned to a single cohort
- States with small and large cohorts in CY 2016:

Eligibility Criteria for the CY 2018 Annual Performance Payment

- HHAs must have data from the full 12 months of Baseline Year CY 2015
 - » If an HHA began operations during CY 2015, it is **not** be eligible for the CY 2018 APP calculation
 - » For OASIS and claims-based measures:
 - Must have at least 20 episodes of care on at least five measures in CY 2015

Eligibility Criteria for the CY 2018 Annual Performance Payment (cont.)

- HHAs must have Achievement and Improvement scores on at least five measures from Performance Year CY 2016
 - » For OASIS and claims-based measures:
 - Must have at least 20 episodes of care in CY 2016
 - At least five measures must be the same for both CY 2015 and CY 2016

For HHCAHPS measures...

20/40 HHCAHPS Calculation

To be included in the calculation of the TPS:

- Current CY 2016 Rule: minimum of 20 HHCAHPS completed surveys
- Proposed CY 2018 Rule: minimum of 40 completed HHCAHPS surveys
 - » To better align the Model with HHCAHPS policy for the Patient Survey Star Ratings on Home Health Compare
 - » If finalized, would apply to Benchmark, Achievement Thresholds, and Performance Scores for all Model years, beginning with Performance Year One (CY 2016)

HHVBP Model Information

TPS Terminology

TPS Calculation

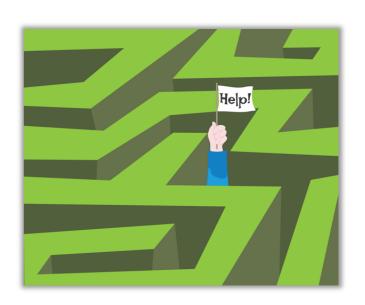
Payment Adjustment Calculation

Review of the Annual TPS & Payment Adjustment Report

Reviewing the elements of the Annual TPS & Payment Adjustment Report "tab-by-tab"

- 1) Achievement
- 2) Improvement
- 3) Care Points
- 4) New Measures
- 5) Total Performance Score
- 6) Payment Adjustment

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1. The Achievement Tab

	Achiev	vement Point	ts		
Measures	Data Period 12 Month Ending	HHA Performance Score	Achievement Threshold	Benchmark	Current Achievement Points
Oasis-Based Measures					
Drug Education on All Medications Provided to Patient/Caregiver during all Episodes of Care	2016-12-31	99.509	97.888	100	7.408
Influenza Immunization Received for Current Flu Season	2016-12-31	49.181	62.754	93.133	0
Pneumococcal Polysaccharide Vaccine Ever Received					
Improvement in Bathing					
Improvement in Bed Transferring Improvement in Ambulation- Locomotion					
Improvement in Management of Oral Medications					
Improvement in Dyspnea					
Improvement in Pain Interfering with Activity					
Discharged to Community					
Claims-Based Measures					
Emergency Department Use Without Hospitalization	2016-12-31	11.762	10.11	4.491	0
Acute Care Hospitalizations					
HHCAHPS Measures					
Care of Patients					
Communications Between Providers					
and Patients					
Specific Care Issues					
Overall Rating of Home Health Care					
Willingness to Recommend the Agency					
NOTE : * Represents No Data Available fo	or that time period.				

Achievement Threshold:

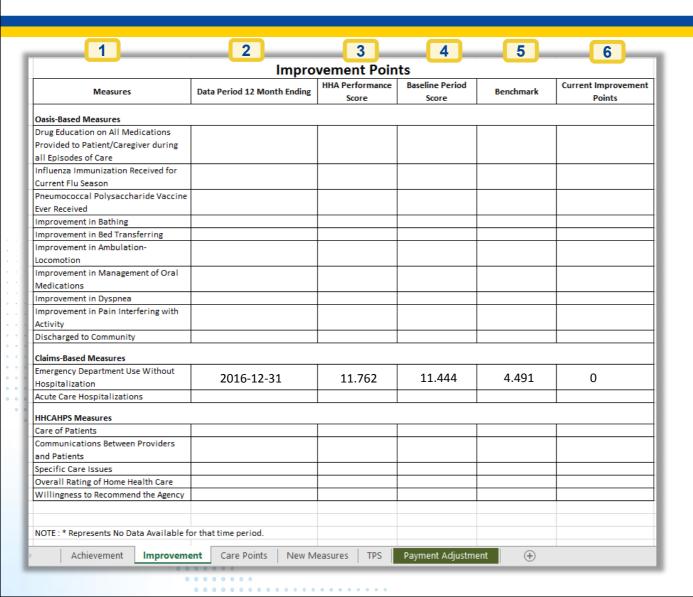
Median quality measure score for agencies within a state in the baseline year.

KEY TERMS

Benchmark:

Mean of the best 10% of all agencies within a state in the baseline year.

2. The Improvement Tab

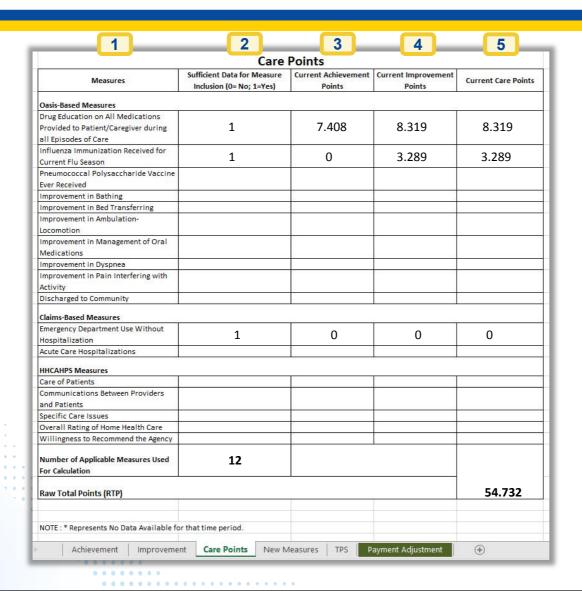


KEY TERM

Improvement Points:

HHA performs better than itself on a measure in the performance year as compared to the baseline year.

3. The Care Points Tab

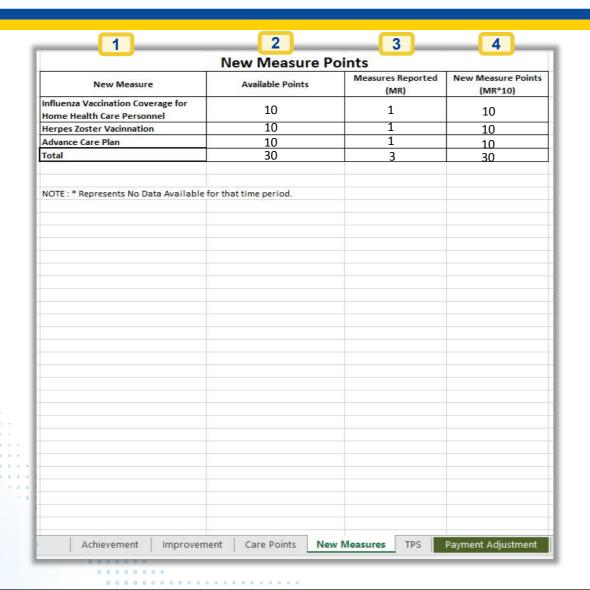


KEY TERM

Care Points:

Care Points are the greater value of either the Achievement or the Improvement Points.

4. The New Measures Tab



KEY TERM

New Measures:

You receive the full 10 points for submitting complete data for a measure.

4. The New Measures Tab (cont.)

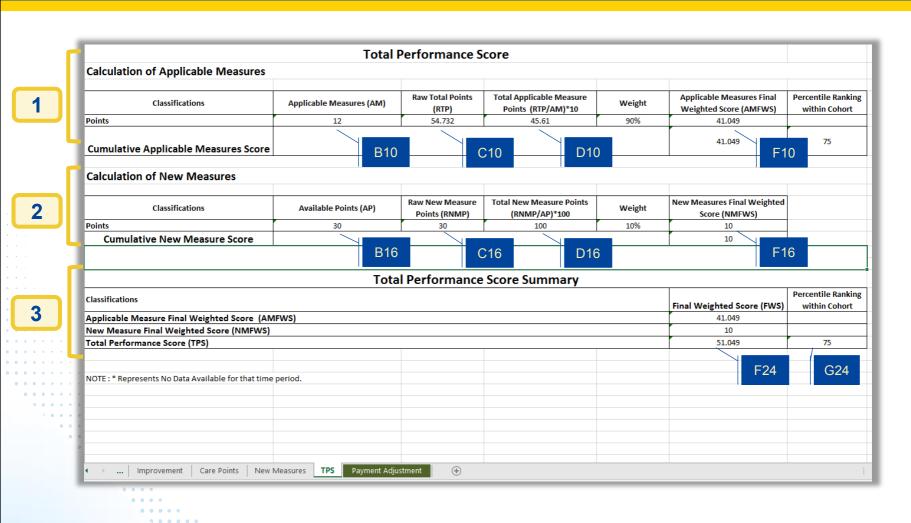
New Measure Points for Annual PY 1 (CY 2016)

Data Submitted and Used for Annual Report:	Influenza Vaccination	Herpes Zoster	Advance Care Plan
Apr-16*	2.5	2.5	2.5
Jul-16*	2.5	2.5	2.5
Oct-16	5.0	2.5	2.5
Jan-17	0**	2.5	2.5
Minimum Annual PY1 Points	5	5	5
Maximum Annual PY1 Points	10	10	10

^{*}No data requested; all HHAs will receive points for these two reporting periods.

^{**}Data not requested for this quarter.

5. The Total Performance Score Tab



6. The Payment Adjustment Tab

Three Parts:

- 1) Summary Information
- 2) Statistics For Your Cohort
- 3) Payment Adjustment Calculation

6. The Payment Adjustment Tab (cont.)

1) Summary Information

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Your Cohort	All Large Volume HHAs in Your State	
TPS Performance Year	CY 2016	
Maximum Payment Adjustment Percentage	3%	
Payment Adjustment Application Year	CY 2018	
Your HHA's Final TPS- Adjusted Payment Percentage	1.012%	

6. The Payment Adjustment Tab (cont.)

2) Statistics for Your Cohort

	tics For Your Cohor	Statis	
53	7	Number of HHAs in Your Cohort	
Final TPS-Adjusted Payment Percentage	TPS	х	
0.004%	39.854	Mean	
-0.675%	29.577	25th Percentile	
-0.034%	37.732	50th Percentile	
0.817%	48.563	75th Percentile	
3%	79.366	99th Percentile	
Payment Percentage 0.004% -0.675% -0.034% 0.817%	39.854 29.577 37.732 48.563	Mean 25th Percentile 50th Percentile 75th Percentile 99th Percentile	

6. The Payment Adjustment Tab (cont.)

3) Payment Adjustment Calculation

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Payment Adjustment Calculation								
	Step 1 (C1)	Step 2 (C2)	Step 3 (C3)	Step 4 (C4)	Step 5 (C5)	Step 6 (C6)	Step 7 (C7)	Step 8 (C8)
	Total Performance Score (TPS)	Prior Year Payment	Unadjusted Payment Amount 3% x (C2)	TPS-Adjusted Payment Amount (C1/100) x (C3)	Linear Exchange Function (LEF) Ratio Total (C3)/Total (C4)	Final TPS-Adjusted Payment Amount (C4) x (C5)	TPS-Adjusted Payment Percentage (C6)/(C2)	Final TPS-Adjusted Payment Percentage (C7) - 3%
Your HHA:	51.049	\$1,567,484	\$47,025	\$24,006	2.62	\$62,894	4.012%	1.012%
Your Cohort (all HHAs):	39.854	\$1,849,154,797	\$55,474,644	\$21,200,580	2.62	\$55,545,096	3%	
Note that all dollar amounts	Note that all dollar amounts in this table are rounded to the nearest dollar.							

HHVBP Model Information

TPS Terminology TPS Calculation Payment Adjustment Calculation

Payment Adjustment: Three Scenarios

Three Scenarios:

- Two HHAs in the same state and cohort with different TPS values
- 2) Two HHAs with the same TPS values and CY 2015 payments but from different states representing different groups (i.e. cohorts) of HHAs
- 3) Two HHAs with the same TPS values but substantially different CY 2015 payments who are in the same cohort of HHAs



Scenario #1: Two HHAs; Same State/Cohort; Different TPS Values

Note: We transposed the table values from a horizontal list to a vertical list, and labeled the "Your Cohort" values with an "a" for those values that are used in the computations.

Computation Elements	HHA #1	HHA #2
C1 – Total Performance Score (HHAs' TPS)	38	50
C1a – Ave. TPS for Cohort	49.375	49.375
C2 - Prior Year Payment (HHA's CY2015 Payment)	\$200,000	\$190,000
C2a – Cohort Total CY2015 Payment	\$3,507,222	\$3,507,222
C3 - <u>Unadjusted Payment Amount [HHA 2015 payment (C2) * 3%]</u> [\$200,000 * 3% = \$6,000]	\$6,000	\$5,700
C3a – Sum of Unadjusted Payment Amount for Cohort	\$105,217	\$105,217
C4 - TPS-Adjusted Payment Amount [HHA's TPS/100 (C1/100) * C3 value] [(38/100) * \$6,000 = \$2,280]	\$2,280	\$2,850
C4a – Sum of TPS-Adjusted Payment Amount for Cohort	\$53,515	\$53,515
C5 - Linear Exchange Function (LEF) [C3a / C4a] [\$105,217 / \$53,515 = 1.966]	1.966	1.966
C6 – Final TPS-Adjusted Payment Amount [Adjusted at Risk (C4) * LEF (C5)] [\$2,280 * 1.966 = \$4,483]	\$4,483	\$5,603
C7 - TPS-Adjusted Payment Percentage [C6 / C2] [\$4,483 / \$200,000 = 2.241%]	2.241%	2.949%
C8 - Final TPS-Adjusted Payment Percentage (APP) [C7 - 3%] [2.241% - 3% = - 0.759%]	-0.759%	-0.051%

Scenario #2: Two HHAs; Different State/Cohort; Same TPS Values

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Computation Elements	HHA #1 in State 1	HHA #2 in State 2
C1 – Total Performance Score (HHAs' TPS)	50	50
C1a – Ave. TPS for Cohort	49	43.5
C2 - Prior Year Payment (HHA's CY2015 Payment)	\$190,000	\$190,000
C2a – Cohort Total CY2015 Payment	\$3,452,222	\$4,507,222
C3 - <u>Unadjusted Payment Amount [HHA 2015 payment (C2) * 3%]</u> [\$190,000 * 3% = \$5,700]	\$5,700	\$5,700
C3a – Sum of Unadjusted Payment Amount for Cohort	\$105,217	\$135,217
C4 - TPS-Adjusted Payment Amount [HHA's TPS/100 (C1/100) * C3 value] [(50/100) * \$5,700 = \$2,850]	\$2,850	\$2,850
C4a – Sum of TPS-Adjusted Payment Amount for Cohort	\$52,927	\$55,619
C5 - Linear Exchange Function (LEF) [C3a / C4a] [\$105,217 / \$52,927 = 1.988]	1.988	2.431
C6 - Final TPS-Adjusted Payment Amount [Adjusted at Risk (C4) * LEF (C5)] [\$2,850 * 1.9879 = \$5,666]	\$5,666	\$6,929
C7 - TPS-Adjusted Payment Percentage [C6 / C2] [\$5,666 \$190,000 = 2.982%]	2.982%	3.647%
C8 - Final TPS-Adjusted Payment Percentage (APP) [C7 - 3%] [2.982% - 3% = - 0.018%]	-0.018%	0.647%

Scenario #3: Two HHAs; Same State/Cohort and TPS Values; Different Prior Payments

Computation Elements	HHA #1 in State 1	HHA #2 in State 1
C1 – Total Performance Score (HHAs' TPS)	55	55
C1a – Ave. TPS for Cohort	53.6	53.6
C2 – Prior Year Payment (HHA's CY2015 Payment)	\$100,000	\$1,450,000
C2a – Cohort Total CY2015 Payment	\$4,757,222	\$4,757,222
C3 – Unadjusted Payment Amount [HHA 2015 payment (C2) * 3%] [\$1,450,000 * 3% = \$43,500]	\$3,000	\$43,500
C3a – Sum of Unadjusted Payment Amount for Cohort	\$142,717	\$142,717
C4 – TPS-Adjusted Payment Amount [HHA's TPS/100 (C1/100) * C3 value] [(55/100) * \$43,500 = \$23,925]	\$1,650	\$23,925
C4a – Sum of TPS-Adjusted Payment Amount for Cohort	\$76,510	\$76,510
C5 – Linear Exchange Function (LEF) [C3a / C4a] [\$142,717 / \$76,510 = 1.865]	1.865	1.865
C6 – Final TPS-Adjusted Payment Amount [Adjusted at Risk (C4) * LEF (C5)] [\$23,925 * 1.865 = \$44,628]	\$3,078	\$44,628
C7 – PS-Adjusted Payment Percentage [C6 / C2] [\$44,628/ \$1,450,000 = 3.080%]	3.080%	3.080%
C8 – Final TPS-Adjusted Payment Percentage (APP) [C7 – 3%] [3.080% - 3% = - 0.080%]	0.080%	0.080%

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Payment Adjustment: Key Take-Away Messages

Key take-away messages from these computations:

- Your TPS value works as a multiplier.
 The higher you are relative to others in your cohort, the larger your Final Adjusted Payment Percentage (APP)
- 2) Large HHAs have no advantage in APP scores compared with small HHA; TPS performance counts
- 3) The same HHA performance but in different cohorts will produce different APP values



Payment Adjustment: How Will This be Applied in CY2018?

How will the Adjusted Payment Percentage be applied to your claims in CY 2018?

- HHA submits claim as usual
- Medicare claims processing system reviews the claim, calculates payment including any applicable adjustments (add-ons, etc.) and applies the HHVBP payment adjustment to applicable component(s) of the claim
- MAC pays the claims and returns remittance advice with documentation of claim information including payment adjustments



Annual TPS & Payment Adjustment Report Timeline

1. Preview Reports & Recalculation Requests

2. Preliminary Reports & Reconsideration Requests

3. Final Reports

Before

12/2/2017

August 15 days after 2017 Preview Report

is available



After Recalculation Requests are processed (Sept-Oct 2017)

15 days after Preliminary Report is available



Preview Report:

Annual TPS & Payment Adjustment Report

Annual TPS & Payment Adjustment Report

Preliminary Report:

Final Report:
Annual TPS &

Payment
Adjustment
Report

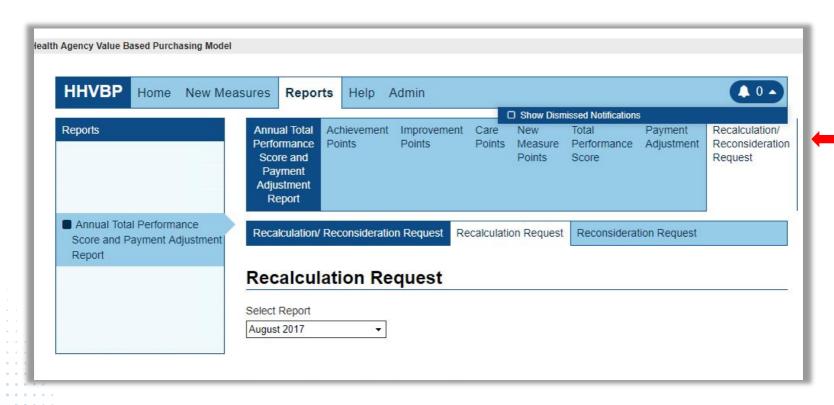
Recalculation
Requests due for
Preview Report:
Annual TPS &

Payment Adjustment Report

Reconsideration
Requests due for
Preliminary Report:
Annual TPS &

Payment Adjustment Report

Recalculation Request Tab



PPOCs may submit recalculation requests only through the Recalculation/
Reconsideration Request menu item under the "Reports" → "Annual Total
Performance Score and Payment Adjustment Report" tab on the HHVBP
Secure Portal.

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Discussion!



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Resources & Reminders

Mark Your Calendars

Upcoming Learning Event Topic	Date	Time
Improvement Strategies for Immunization Measures	September 14, 2017	2:00 PM ET

All learning events will be held at 2 PM, Eastern Time.

Please register via the *HHVBP Connect* Calendar.

We value your input! Watch *HHVBP Connect* in September for the upcoming Needs Assessment survey

Questions

Do you have questions about the HHVBP Model? Contact the HHVBP Model Help Desk at

HHVBPquestions@cms.hhs.gov.

If you are experiencing technical issues with gaining access to the HHVBP Secure Portal, please call:

(844) 280-5628.

Stay on the line until your issue is resolved.

HHVBP Connect Chatter

- Join the discussion!
 - » Engage with your peers on HHVBP Connect by liking and commenting on their posts
- If you would like to ask a question of your peers:
 - » Log into the HHVBP Connect site at https://app.innovation.cms.gov/HHVBPConnect/CommunityLogin
 - » On the Chatter page, select "Post" at the top and type in your question and post to the "HHVBP All" group
- To request access to HHVBP Connect, visit the HHVBP
 Connect site and select the "New User" registration link
 - >> Follow the on-screen instructions
 - » The CMMI Connect Help Desk will contact you to complete the registration process





Thank You!

Prepared for CMS by the HHVBP Technical Assistance, contract number HHSM-500-2014-0033I. If you have suggestions for additional topics, please email the helpdesk at HHVBPquestions@cms.hhs.gov.







