



New England Financial Management Conference

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HHVBP – Tracking and Managing Results under the new CY 2025 Measure Set

Wednesday, October 1, 2025

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Objectives

- ❖ Describe the new CY 2025 HHVBP measures and how they are calculated
- ❖ Compare how scores are changing over the first two years of the expanded model
- ❖ Examine how to translate measure points and scoring to the TPS and APR
- ❖ Analyze clinical strategies to improve your HHVBP measure scores

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Describe the new CY 2025 HHVBP measures and how they are calculated

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Comparison of Applicable Measure Sets: CY 2023, CY 2024, and CY 2025

Category	Quality Measure	CY 2023, 2024	CY 2025
OASIS-based	Discharged to Community	X	
	Improvement in Dyspnea	X	X
	Improvement in Management of Oral Medications	X	X
	Total Normalized Composite Change in Mobility (TNC Mobility)	X	
	Total Normalized Composite Change in Self-Care (TNC Self-Care)	X	
Claims-based	Discharge Function Score (DC Function)		X
	Acute Care Hospitalization (ACH)	X	
	Emergency Department Use without Hospitalization (ED Use)	X	
	Home Health Within-Stay Potentially Preventable Hospitalization (PPH)		X
HHCAHPS Survey-based	Discharge to Community – Post Acute Care (DTC-PAC)		X
	Care of Patients	X	X
	Communication Between Providers and Patients	X	X
	Specific Care Issues	X	X
	Overall Rating of Home Health Care	X	X
	Willingness to Recommend the Agency	X	X

Source: CMS HHVBP Webinar – Nov 9, 2023

Measure Set Updates: Beginning with the CY 2025 Performance Year

Current Measure Category	Measures Removed	Replacement Measure Category	Replacement Measures
OASIS-based	TNC Change in Self-Care	OASIS-based	Discharge Function Score (DC Function)
	TNC Change in Mobility		
OASIS-based	Discharged to Community	Claims-based	Discharge to Community – Post Acute Care (DTC-PAC)
Claims-based	Acute Care Hospitalization (ACH)	Claims-based	Home Health Within-Stay Potentially Preventable Hospitalization (PPH)
	Emergency Department Use without Hospitalization (ED Use)		

Source: CMS HHVBP Webinar – Nov 9, 2023

New Measure Weights

Measure Category	Quality Measures	Finalized Redistributions			
		Current Measure Weights (CY 2023, CY 2024)	Measure Weights Beginning CY 2023	Current Measure Weights (CY 2023, CY 2024)	Measure Weights Beginning CY 2023
OASIS-based	Discharged to Community	5.83%	8.33%	-	-
	Improvement in Dyspnea	5.83%	8.33%	0.00%	15.57%
	Improvement in Management of Oral Medications	5.83%	8.33%	0.00%	12.86%
	Total Normalized Composite Change in Mobility (TNC Mobility)	8.75%	12.5%	-	-
	Total Normalized Composite Change in Self-Care (TNC Self-Care)	8.75%	12.5%	-	-
Claims-based	Discharge Function Score (DC Function)	-	-	20.00%	18.57%
	Acute Care Hospitalization (ACH)	15.00%	15.00%	15.00%	15.00%
	Emergency Department Use without Hospitalization (ED Use)	20.00%	27.14%	-	-
	Home Health within-stay Potentially Preventable Hospitalization (PPH)	8.75%	12.50%	-	-
HHCAHPS Survey-based	Discharge to Community – Post Acute Care (DTC-PAC)	-	-	9.00%	13.86%
	Care of Patients	0.00%	0.00%	6.00%	6.00%
	Communication Between Providers and Patients	6.00%	6.00%	6.00%	6.00%
Survey-based	Specific Care Issues	6.00%	6.00%	6.00%	6.00%
	Overall Rating of Home Health Care	6.00%	6.00%	6.00%	6.00%
Sum of HHCAHPS Survey-based measures		18.00%	18.00%	18.00%	18.00%
	Sum of HHCAHPS Survey-based measures	18.00%	18.00%	18.00%	18.00%
All	Sum of All Measures	100.00%	100.00%	100.00%	100.00%

Source: CMS HHVBP Webinar – Nov 9, 2023

Model Baseline Year

Performance Years	Measures	Model Baseline Year	
CY 2023 & CY 2024	All	CY 2022	
	Improvement in Dyspnea	CY 2023	
	Improvement in Management of Oral Medications	CY 2023	
	Discharge Function Score (DC Function)	CY 2023	
	Home Health Within-Stay Potentially Preventable Hospitalization (PPH)	CY 2023	
	Beginning CY 2025 and subsequent years	Discharge to Community – Post Acute Care (DTC-PAC)	CY 2022 & CY 2023
		Care of Patients	CY 2023
		Communication Between Providers and Patients	CY 2023
		Specific Care Issues	CY 2023
Overall Rating of Home Health Care		CY 2023	
Willingness to Recommend the Agency	CY 2023		

Source: CMS HHVBP Webinar – Nov 9, 2023

New HHVBP PY 2025 Measure: Discharge Function Score

- Measure Name: Discharge Function Score (DC Function)
- Measures success at achieving expected level of functional ability at discharge
- Assess current status for a subset of the GG-Items
- Patient observed **discharge score** meets or exceeds calculated **expected discharge score**
- Accounts for 20% weight of HHVBP score
- GG Items Measured: *Eating, Oral Hygiene, Toileting Hygiene, Roll L/R, Lying to Sitting, Sit to Stand, Chair/Bed-Chair Transfer, Toilet Transfer, Walk 10 feet, Walk 50 feet with 2 turns, Wheel 50 feet with 2 turns*

New HHVBP PY 2025 Measure: Discharge Function Score

- Sum of 10 individual function items at DC

Exhibit 1: Cross-Setting Function Item Set

Item	Item Description
GG0130A	Eating
GG0130B	Oral Hygiene
GG0130C	Toileting Hygiene
GG0130A	Roll Left and Right
GG0130C	Lying to Sitting or Side
GG0130D	Sit to Stand
GG0130E	Chair/Bed to Chair Transfer
GG0130F	Toilet Transfer
GG0130G	Walk 10 Feet
GG0130J	Walk 50 Feet with 2 Turns
GG0130K	Wheel 50 Feet with 2 Turns

Exhibit 2: DC Item Response

Category	Options	Response Description
Patient Function/Status Assessed	4	Independent
	3	Safety or other no assistance
	2	Supervision or timing assistance
	1	Part-time/intermittent assistance
	0	Continuous/constant assistance
	1	Dependent
Ability Not Measured/Other	9	No response
	10	Not observed due to contraindications or limitations
Other NA codes	00	Not observed due to medical condition or safety concerns
	01	Not assessed observation

$$\text{Number of HHV's episodes where observed discharge score} \geq \text{expected discharge score} / \text{Total number of HHV's episodes} \times 100$$

New HHVBP PY 2025 Measure: Discharge Function Score

- Excludes quality episodes that end in a transfer (6 or 7), that end in Death at Home (8), episodes lasting less than 3 days, Discharged to Hospice, under 18 or in coma/vegetative state
- Statistical imputation will be used on any GG item that is incomplete - activity not attempted (ANA), a dash (-) or a skip (^)
- July '25 Care Compare measure score distribution

Care Compare Detail	National			New England		
	Count	% Count	DFS	Count	% Count	DFS
Too small footnote	1,583	15.4%	N/A	76	17.6%	N/A
No data or too new footnote	2,227	18.4%	N/A	104	24.0%	N/A
Special Needs footnote	5	0.0%	53.04	N/A	N/A	N/A
No footnote	7,897	65.2%	61.04	253	58.4%	71.10
Total	12,112	100.0%	61.03	433	100.0%	71.10

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New HHVBP PY 2025 Measure: Potentially Preventable Hospitalization

- Measure Name: Home Health Within Stay Potentially Preventable Hospitalization (PPH)
- This measure reports a home health agency (HHA)-level rate of risk-adjusted potentially preventable hospitalization (PPH) or potentially preventable observation stays (PPOBS) that occur within a home health (HH) stay for all eligible stays at each agency
- Using Medicare claims data, CMS has identified the most frequent diagnoses associated with hospital admissions among home health beneficiaries, and applied the conceptual PPH definition to evaluate whether these common conditions for a hospitalization may be considered potentially preventable

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New HHVBP PY 2025 Measure: Potentially Preventable Hospitalization

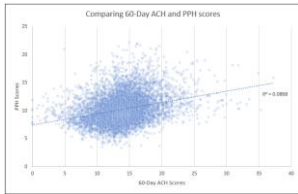
- Planned admissions are not counted in the numerator
- Exclusions similar to 60-day ACH <=18; Not FFS for last 12 months; LUPA; Multiple agencies; Risk adjustments missing
- Accounts for 26% weight of HHVBP score
- July '25 Care Compare measure score distribution

Care Compare Detail	National			New England		
	Count	% Count	PPH (RSR)	Count	% Count	PPH (RSR)
Listed as "-"	3,032	25.0%	N/A	155	35.8%	N/A
Better Than National Rate	739	6.1%	6.59	38	8.8%	7.33
Not Available	1,957	16.2%	N/A	65	15.0%	N/A
Same As National Rate	5,579	46.1%	9.93	159	36.7%	9.85
Worse Than National Rate	805	6.6%	15.33	16	3.7%	14.14
Total	12,112	100.0%	10.19	433	100.0%	9.72

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New HHVBP PY 2025 Measure: Potentially Preventable Hospitalization

- Care Compare – July 2024
- Not much correlation



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New HHVBP PY 2025 Measure: Discharge to Community

- Measure Name: Discharge to Community – Post Acute Care (PAC) Home Health Quality Reporting Program (Claims-based)
- Percentage of home health stays in which patients were discharged to the community and do not have an unplanned admission to an ACH or LTCH in the 31 days and remain alive in the 31 days following discharge to community
- Accounts for 9% weight of HHVBP score
- Exclusions include Discharges to psychiatric hospital, against medical advice, hospice and more

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New HHVBP PY 2025 Measure: Discharge to Community

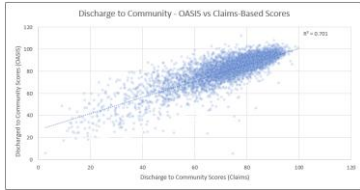
- Has been on the HH QRP for a couple of years and is reported on Care Compare
- Replaces the Discharged to Community (OASIS-Based) measure
- July '25 Care Compare measure score distribution

Care Compare Detail	National			New England		
	Count	% Count	DIC	Count	% Count	DIC
Listed as *	2,723	22.5%	N/A	125	31.2%	N/A
Better Than National Rate	3,404	28.1%	85.24	148	34.2%	86.22
Not Available	1,500	12.4%	N/A	62	14.3%	N/A
Same As National Rate	2,758	22.8%	76.46	49	11.3%	75.95
Worse Than National Rate	1,727	14.3%	55.89	39	9.0%	52.67
Total	12,112	100.0%	75.74	433	100.0%	76.54

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New HHVBP PY 2025 Measure: Discharge to Community

- Risk Adjusted Scores – OASIS higher than Claims 90.4% of the time
- Average difference = 6.7 points - Claims-based is lower



IPR July 2024 – CY 2025 Measure Set

- Added the Achievement Threshold and Benchmarks for the CY 2025 Measure set
- Note it refers to preliminary scores

Measure	Data Period [b]	Achievement Threshold [c]		Benchmark [c]	
		Smaller-volume Cohort	Larger-volume Cohort	Smaller-volume Cohort	Larger-volume Cohort
OASIS-based Measures					
Discharge Function (DC Function)	12-31-2023	53,955	62,350	53,426	63,179
Improvement in Symptoms	12-31-2023	83,205	89,474	100,000	99,422
Improvement in Management of Oral Medications	12-31-2023	72,665	83,325	95,992	98,786
Claims-based Measures					
Discharge to Community – Post Acute Care (DTC-PAC)	12-31-2023	71,390	60,550	66,390	60,123
Intentionally Preventable Hospitalizations (IPH)	12-31-2023	6,790	6,760	7,254	6,693
HCAHPS Survey-based Measures					
Care of Patients	12-31-2023	-	89,507	-	94,185
Communication Between Providers and Patients	12-31-2023	-	89,823	-	93,194
Specific Care Items	12-31-2023	-	83,373	-	93,297
Overall Rating of Home Health Care	12-31-2023	-	93,138	-	94,687
Willingness to Recommend the Agency	12-31-2023	-	89,228	-	93,393

IPR January 2025 – Agency for New Measures

- Includes your Baseline Year and Improvement Threshold for the CCN
- Your HHA's Ranking and Cohort Percentiles are available

Measure	Baseline Year Data Period [b]	CY 2025 Measure Set: Preliminary Improvement Thresholds				Your HHA's Cohort Statistics [d]			
		Your HHA's Improvement Threshold	Year rank's Percentile Ranking Within Your HHA's Cohort [c]	Year HHA's Cohort Statistics [d]					
				25th Percentile	50th Percentile	75th Percentile	90th Percentile		
OASIS-based Measures									
Discharge Function (DC Function)	12-31-2023	53,955	60.74	53,386	62,350	70,090	93,200	100,000	100,000
Improvement in Symptoms	12-31-2023	83,205	71.61	83,100	89,474	94,960	100,000	100,000	100,000
Improvement in Management of Oral Medications	12-31-2023	72,665	71.49	75,119	83,325	91,280	100,000	100,000	100,000
Claims-based Measures									
Discharge to Community – Post Acute Care (DTC-PAC)	12-31-2023	64,430	50.74	53,000	60,550	66,390	60,116	60,116	60,116
Intentionally Preventable Hospitalizations (IPH)	12-31-2023	6,890	50.74	13,100	6,760	6,110	5,690	5,690	5,690
HCAHPS Survey-based Measures									
Care of Patients	12-31-2023	89,507	71.49	87,026	89,507	93,524	96,339	96,339	96,339
Communication Between Providers and Patients	12-31-2023	89,823	71.49	89,640	89,823	93,976	96,112	96,112	96,112
Specific Care Items	12-31-2023	83,373	71.49	77,892	83,373	86,608	93,984	93,984	93,984
Overall Rating of Home Health Care	12-31-2023	93,138	71.49	83,006	86,308	89,026	93,460	93,460	93,460
Willingness to Recommend the Agency	12-31-2023	89,228	71.49	79,880	89,228	94,714	95,308	95,308	95,308

IPR July 2025 – Finalized CY 2025 AT and BM

- Additionally
 - Updated "CY 2025 Final Improvement Thresholds"
 - CY 2025 Measure set Performance Summary on 3 New Measures

CY 2025 Measure Set: Final Achievement Thresholds and Benchmarks

Measure	Data Period (s)	Achievement Threshold (t)		Benchmark (s)	
		Smaller-volume Cohort	Larger-volume Cohort	Smaller-volume Cohort	Larger-volume Cohort
OSAS-based Measures					
Discharge Function (DC Function)	10-31-2023	83,305	81,200	85,436	83,179
Improvement in Dyspnea	10-31-2023	82,300	80,872	85,000	84,422
Improvement in Management of Oral Medications	10-31-2023	73,666	81,175	89,987	88,746
OSAS-based Measures					
Discharge to Community – Post Acute Care (DC-PAC)	10-31-2023	75,665	81,581	85,136	85,689
Potentially Preventable Hospitalization (PPH)	10-31-2023	81,966	81,688	7,500	4,262
HIC/SHPS Survey-based Measures					
Care of Patients	10-31-2023	89,307	-	-	94,585
Communications Between Providers and Patients	10-31-2023	-	88,821	-	85,192
Specific Care Topics	10-31-2023	-	89,173	-	91,497
Overall Rating of Home Health Care	10-31-2023	-	88,108	-	88,687
Willingness to Recommend the Agency	10-31-2023	-	89,208	-	85,393

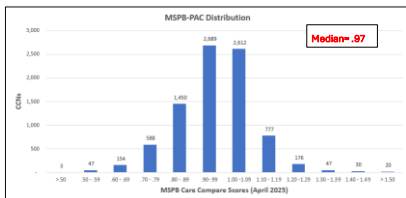
CY 2026 Proposed Rule

TABLE 34—CY 2025 AND PROPOSED INDIVIDUAL MEASURE WEIGHTS AND CATEGORY WEIGHTS FOR THE EXPANDED HHBP MODEL

Measure	CY 2025 Measure Weights		Proposed Measure Weights	
	Larger-Volume Cohort	Smaller-Volume Cohort	Larger-Volume Cohort	Smaller-Volume Cohort
Improvement in Dyspnea	6.00%	8.5%	7.00%	8.75%
Improvement in Management of Oral Medications	9.00%	12.86%	11.00%	13.75%
Discharge Function Score (DC Function)	20.00%	28.5%	15.00%	18.75%
Improvement in Billing	-	-	3.50%	4.88%
Improvement in Upper Body Dressing	-	-	1.75%	2.19%
Improvement in Lower Body Dressing	-	-	1.75%	2.19%
Sum of OSAS-based Measures	35.00%	50.00%	40.00%	50.00%
Home Health within-stay Potentially Preventable Hospitalization (PPH)	26.00%	37.14%	15.00%	18.75%
Discharge to Community – Post Acute Care (DC-PAC)	9.00%	12.86%	15.00%	18.75%
Medicare Spending Per Beneficiary-Post-Acute Care (MSPB-PAC)	-	-	10.00%	12.50%
Sum of Claims-based measures	35.00%	50.00%	40.00%	50.00%
Care of Patients	6.00%	0.00%	-	-
Communications Between Providers and Patients	6.00%	0.00%	-	-
Specific Care Topics	6.00%	0.00%	-	-
Overall Rating of Home Health Care	6.00%	0.00%	10.00%	0.00%
Willingness to Recommend the Agency	6.00%	0.00%	10.00%	0.00%
Sum of HIC/SHPS Survey-based measures	30.00%	0.00%	20.00%	0.00%
Sum of All Measures	100.00%	100.00%	100.00%	100.00%

Medicare Spending Per Beneficiary - PAC

- Measure on Care Compare we tend to overlook
- Two Year measure captures Medicare Part A & B cost during episode and up to 30 days after treatment period



Compare how scores are changing over the first two years of the expanded model

Measure Outcomes CY 2021 - CY 2024

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

HHVPB Measure	CY 2021	CY 2022	CY 2023	CY 2024	Percent Improved '21 to '23	Percent Improved '23 to '24
The Change in Mobility (Risk-Adj)	0.798	0.808	0.806	0.802	18.4%	-0.8%
Lift/Towel/Transfer	0.269	0.268	0.270	0.267	24.8%	0.3%
Transfer/ing	0.258	0.268	0.269	0.267	12.4%	1.8%
Ambulation/Locomotion	0.265	0.271	0.267	0.266	11.7%	0.0%
The Change in Self-Care (Risk-Adj)	2.185	2.299	2.433	2.551	16.8%	5.9%
Grooming	0.680	0.623	0.651	0.67	28.8%	6.8%
Ability to Dress Upper Body	0.614	0.615	0.621	0.617	15.2%	0.3%
Ability to Dress Lower Body	0.864	0.862	0.907	0.920	12.1%	2.8%
Dressing	0.507	0.507	0.421	0.427	16.3%	0.4%
Toileting/Hygiene	0.421	0.449	0.484	0.503	18.9%	3.9%
Eating or Drinking	0.118	0.124	0.127	0.126	29.1%	0.6%
Improvement in Mgmt of Oral Meds (Risk-Adj)	81.2%	83.4%	86.1%	87.4%	7.9%	1.7%
Improvement in Dyspnea (Risk-Adj)	89.7%	89.5%	90.2%	91.8%	2.1%	1.2%
Discharge Function Score	79.2%	79.1%	79.7%	79.2%	4.3%	-1.5%
Potentially Preventable Hospitalizations (PPH)	7.8%	8.2%	8.5%	9.2%	-17.8%	-8.2%
Discharge for Community - Claims-Based (CMB)	76.2%	76.8%	76.2%	76.1%	-	-
Discharged to Community - OASIS (Risk-Adj)	73.1%	73.4%	74.7%	74.4%	1.8%	-0.4%
30-Day Hospitalizations (OASIS)	14.9%	14.7%	14.9%	15.1%	-1.9%	-0.2%
Days of Patients	89.2%	89.8%	89.9%	90.1%	1.4%	0.2%
Communications	84.8%	87.4%	87.8%	87.8%	1.3%	0.1%
Specific Care Issues	84.4%	85.0%	85.8%	85.2%	1.2%	-0.2%
% who Rated Agency 5/5	84.5%	85.2%	85.9%	86.4%	2.2%	0.6%
% who would Recommend	79.9%	79.4%	79.9%	79.9%	1.2%	0.0%

Source: SHP National Clinical Scorecard Benchmarks; CMS Care Compare

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



Measure	1%	5%	10%	25%	50%	75%	90%	95%	99%
Hospitalizations / Episodes
Discharge Function Score (PPH)
OASIS
HHVPB Quality Measures

Source: SHP Clinical Scorecard Percentiles report - 6/17/25

Comparing VBP Measure Scores in CY 24

- SHP VBP median scores using the new CY 2025 Measure Set

HHVBP Measures	National Median	N.E. Median	% Variance
Improvement in Mgmt of Oral Meds (Risk-Adj)	88.3%	84.3%	-4.5%
Improvement in Dyspnea (Risk-Adj)	91.9%	90.2%	-1.8%
Discharge Function Score	73.9%	79.7%	7.8%
Potentially Preventable Hospitalizations (PPH)	9.5%	8.7%	8.4%
Discharge to Community - Claims-Based (CMS)*	81.8%	85.3%	4.3%
Care of Patients	90.4%	90.5%	0.1%
Communications	88.3%	88.4%	0.1%
Specific Care Issues	85.8%	85.0%	-0.9%
% who Rated Agency 9,10	86.9%	87.0%	0.1%
% who would Recommend	80.3%	82.5%	2.7%

* April 25 Care Compare

Source: SHP National DW CY 2024 - SHP with Agencies with TPS Scores

CMS National TPS Scores Targets

- Expect to see the TPS scores increase as measure scores improve – based on improvements from the HHA Baseline Year and scores within the Model Baseline Year achievement range (2023)
- Need to improve at or faster than the agencies in your cohort
- Need to anticipate where the scores will be to set your target

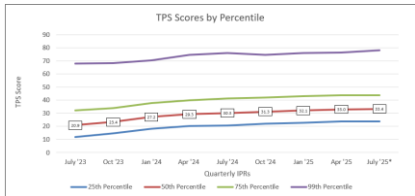


Wayne Gretzky Quote:

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

IPR Changes in TPS Percentile Scores

- Scores are increasing
- Lower percentile ranks increasing faster than upper %tile rankings



* July 25 Preliminary IPR

Source: CMS Quarterly IPRs

Changes to Baselines and Weighting

- Based on Larger-volume cohorts scores in CY 2024
- Oral Meds

Performance Year	Baseline Year	Achievement Threshold	Benchmark	Range	Average Care Points	Average Weighted Points
PY 23,24	CY 2022	80.99	97.90	16.91	4.70	3.10
PY 25	CY 2023	85.18 ↑	98.75 ↑	13.57 ↓	3.31 ↓	3.30 ↑
Percent Change		5.2%	0.9%	-19.8%	-29.6%	6.5%

- Dyspnea

Performance Year	Baseline Year	Achievement Threshold	Benchmark	Range	Average Care Points	Average Weighted Points
PY 23,24	CY 2022	86.31	98.51	12.20	4.85	3.22
PY 25	CY 2023	89.67 ↑	99.42 ↑	9.75 ↓	3.28 ↓	2.18 ↓
Percent Change		3.9%	0.9%	-20.1%	-32.4%	-32.3%

Source: SHP National DW CY 2024 – SHP with Agencies with TPS Scores

Changes to Baselines and Weighting

- Based on Larger-volume cohorts scores in CY 2024
- Care of Patients

Performance Year	Baseline Year	Achievement Threshold	Benchmark	Range	Average Care Points	Average Weighted Points
PY 23,24	CY 2022	89.25	94.45	5.20	3.83	2.33
PY 25	CY 2023	89.51 ↑	94.59 ↑	5.08 ↓	3.53 ↓	2.13 ↓
Percent Change		0.3%	0.1%	-2.3%	-7.8%	-8.6%

- Willingness to Recommend

Performance Year	Baseline Year	Achievement Threshold	Benchmark	Range	Average Care Points	Average Weighted Points
PY 23,24	CY 2022	79.99	91.20	11.21	2.78	1.68
PY 25	CY 2023	80.23	91.39 ↑	11.16 ↓	2.60 ↓	1.57 ↓
Percent Change		0.3%	0.2%	-0.4%	-6.5%	-6.5%

Source: SHP National DW CY 2024 – SHP with Agencies with TPS Scores

APR Results – CY 2023 vs CY 2024

- Larger-Volume Cohort
- TPS Scores have increased year over year

TPS Statistics for Your HHA's Cohort	PY 23	PY 24	% Chg.
Number of HHAs in Your HHA's Cohort	6,484	6,407	-1.2%
25th Percentile	20,758	23,620	13.8%
50th Percentile	30,227	33,317	10.2%
75th Percentile	41,404	43,548	5.2%
99th Percentile	75,232	77,753	3.4%

Examine how to translate measure points and scoring to the TPS and APR

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Annual Payment Calculation

- Linear Exchange Function
- Two inputs 1) TPS scores and 2) Prior Year Payment

Performance Year CY 2023
 Maximum Payment Adjustment Percentage 5.000%
 Payment Adjustment Application Year CY 2025
Your HHA's Final TPS-Adjusted Payment Percentage -4.337%

	(C3)	Step 1 (C4)	Step 2 (C5)	Step 3 (C6)	Step 4 (C7)	Step 5 (C8)	Step 6 (C9)	Step 7 (C10)
Total Performance Score (TPS)		Prior Year Payment	Unadjusted Payment Amount % x (C2)	TPS-Adjusted Payment Amount (C2)(C6) + (C3)	Linear Exchange Function (C7) Rate Total (C3)/(Total (C6))	Final TPS-Adjusted Payment Amount (C6) x (C7)	TPS-Adjusted Payment Percentage (C7) / (C2)	Final TPS-Adjusted Payment Percentage (C7) / (C2)
Your HHA	27,000	\$998,867	\$49,943	\$13,519	3.44%	\$46,573	-4.667%	-4.667%
Your HHA's Cohort (All HHAs)	29,328	\$26,533,738,828	\$826,681,561	\$129,569,354	3.42%	\$826,681,535	3.000%	3.000%

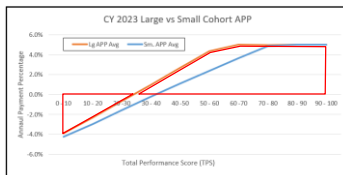
Number of HHAs in Your Cohort	Mean	25th Percentile	50th Percentile	75th Percentile	99th Percentile
6,484					
Final TPS-Adjusted Payment	0.000%	-1.507%	-0.241%	1.266%	5.000%

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APP Results – First Year 2023

- Comparing Larger-volume to Smaller-volume cohorts

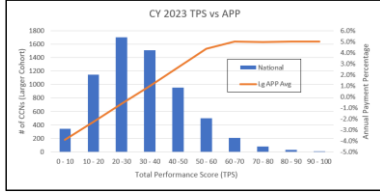
State/National	Larger-volume Cohort #	Smaller-volume Cohort #
National	6,484	676
New England	236	8



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APP Results – First Year 2023

- Larger-Volume Cohort
- TPS scores over 58.06 received 5% payment adjustments



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APR Results – First Year 2023

- New England Larger-Volume Cohort by CCN
- NE distribution skews more to the left



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APR Results – Top and Bottom 5

- Larger-Volume Cohort

State	Count of CCNs	Average of OASIS Weighted Points	Average of Claims Weighted Points	Average of HHCAMPS Weighted Points	Average of TPS
UT	61	22.90	12.95	3.69	39.54
AL	111	18.82	6.87	13.85	39.04
CA	1,112	18.28	16.86	2.42	37.56
ME	20	19.77	5.21	11.70	36.67
KY	84	16.21	7.93	11.90	36.04
MA	106	17.10	4.40	6.51	28.01
RI	18	12.00	6.26	9.48	27.83
DC	9	16.23	8.00	1.91	26.14
NH	19	12.94	3.38	8.79	25.11
VT	10	11.12	4.13	8.05	23.31
CT	63	12.37	4.46	5.95	22.79
AK	10	11.86	7.37	3.22	22.45
Grand Total	6,448	16.47	9.77	5.84	32.08

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APR Results – Reaching 5% Bonuses

- Larger-Volume Cohort
- 71.0% of CCNs had no HHCAPHS data
- HHCAPHS required if over 59 eligible patients in a calendar year but scores are not reported if under 40 returned surveys
- OASIS and Claims-based scores are reallocated to 50%/50% of the total TPS

% APR Agencies	CCN #	Wgt. OASIS	Wgt. Claims	Wgt. HHCAPHS	Avg. TPS
All CCN's	397	31.97	28.64	6.50	67.11
No HHCAPHS	282	35.99	32.61	-	68.60
No HHCAPHS, Claims	32	71.06	-	-	71.06
No Claims	5	32.00	-	28.11	60.11

Sensitivity Analysis (What-if)

- Larger-Volume Cohort

CCN Provider Name Large Agency Cohort Percentage Improvement: **6.86%**

Quality Measure	Agency Base Year	Agency Real Time	Threshold	Benchmark	What if	Revised Actv. Pts	Revised Impr. Pts	Weight %	Potential Weighted Points	
OASIS Measures										
Out Medications	86.90	88.01	85.19	88.75	88.01	2,085	0.843	3.00	1,877	
Dyspnea	94.15	96.58	89.67	89.67	98.92	7,087	4,100	6.00	4,951	
Discharge Function Score	76.92	75.44	82.36	83.18	75.44	-	4,284	-	20.00	12,983
Claims Measures										
PIPS	9.68	12.97	9.76	6.89	12.97	-	-	26.00	-	
Discharge to Community (Items based)	86.31	86.31	89.53	90.51	86.31	-	6,035	-	3.00	5,431
HHCAPHS Measures										
Care of Patients	92.00	91.31	89.21	94.01	91.31	1,443	-	6.00	3,126	
Communication	91.00	88.88	88.82	93.18	88.88	1,911	-	6.00	2,533	
Specific Care Issues	89.00	89.00	82.37	91.30	89.00	7,424	-	6.00	4,455	
Overall Rating	82.00	93.07	89.33	94.01	93.07	9,660	5,253	6.00	5,785	
Willing to Recommend	89.00	84.24	89.23	91.30	84.24	1,931	-	6.00	2,101	
Total Performance Score									48.86	

Sensitivity Analysis (What-if)

- Larger-Volume Cohort

CCN Provider Name Large Agency Cohort Percentage Improvement: **1.96%**

Quality Measure	Agency Base Year	Agency Real Time	Threshold	Benchmark	What if	Revised Actv. Pts	Revised Impr. Pts	Weight %	Potential Weighted Points
OASIS Measures									
Out Medications	86.90	88.01	85.19	88.75	88.01	2,174	1,071	3.00	3,467
Dyspnea	94.15	96.58	89.67	89.67	97.03	8,078	6,790	6.00	4,847
Discharge Function Score	76.92	75.44	82.36	83.18	76.92	6,646	-	20.00	13,293
Claims Measures									
PIPS	9.68	12.97	9.76	6.89	12.97	-	-	26.00	-
Discharge to Community (Items based)	86.31	86.31	89.51	90.51	86.31	6,934	2,030	3.00	6,348
HHCAPHS Measures									
Care of Patients	92.00	91.31	89.21	94.01	91.31	5,341	0,775	6.00	3,264
Communication	91.00	88.88	88.82	93.18	88.88	4,788	-	6.00	2,873
Specific Care Issues	89.00	89.00	82.37	91.30	89.00	8,421	3,483	6.00	5,937
Overall Rating	82.00	93.07	89.33	94.01	93.07	9,760	8,263	6.00	6,468
Willing to Recommend	89.00	84.24	89.23	91.30	84.24	4,348	-	6.00	3,009
Total Performance Score									46.48

Sensitivity Analysis (What-if)

- Larger-Volume Cohort

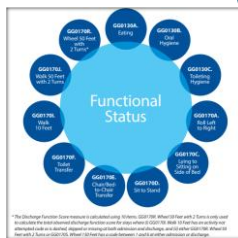
CCN Provider Name: Large Agency Cohort Percentage Improvement: 2.00%

Quality Measure	Agency Base Year	Agency Post/Time	Threshold	Benchmark	What If	Revised Actv. Pts	Revised Ingr. Pts	Weight %	Potential Weighted Points
OASIS Measures									
Oral Medications	86.50	88.01	85.19	89.75	88.01	2,095	0.843	9.00	1,877
Diapering	84.75	84.58	89.67	89.67	84.58	7,097	4,150	6.00	4,262
Discharge Function Score	76.82	75.44	62.35	83.15	75.44	7,005	0.041	20.00	14,017
Climate Measures									
WPH	9.68	12.97	9.76	6.88	12.97	-	-	26.00	-
Discharge to Community (clarno-based)	85.21	86.11	80.51	90.42	86.11	6,075	-	9.00	5,462
PHCA/PC Measures									
Care of Patients	92.00	91.31	89.61	84.93	91.31	7,130	3,948	6.00	4,283
Communication	91.88	88.86	88.86	92.93	88.79	4,186	-	6.00	2,513
Specific Care Issues	89.00	89.00	92.37	91.35	90.79	9,418	4,965	6.00	6,611
Overall Rating	92.00	93.07	89.32	84.69	93.44	10,000	9,000	6.00	6,000
Dilting to Improvement	89.00	84.24	89.23	91.24	84.24	9,103	-	6.00	3,862
Total Performance Score									66.36

Analyze clinical strategies to improve your HHVBP measure scores

VBP in 2025

- Where are we today
- Potentially Preventable Hospitalizations
 - Same type of strategies
 - Prioritize prevention – ingrain in culture now
- Discharge Function Score
 - GG education for your staff
- Discharge to Community
 - Difference from OASIS-based measure



Potentially Preventable Hospitalizations

- Hospitalization prevention is still the name of the game
- Keep in mind- observation stays count so avoid the ED
- Assess the risk and address in the care plan
- It's everyone's job to prevent – continued accountability
- Hospitalization retrospectives – a must
- Assess the risk and use technology available to you

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Potentially Preventable Hospitalizations

- Standardized Intake Assessment Form
- Front Load Visits
- Comprehensive Med Reconciliation
- Teach Caregiver- Especially on Call Me First
- Teach Back
- Videos as a resource

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Hospitalization/ED prevention

- Patient Focused Approach
 - What are the risks?
 - If the patient were to go in the hospital – what would be the cause?
 - Plan to mitigate the risks?
 - What is in the care plan now?
 - What can each member do to prevent?
 - Assess SDoH
- Agency initiative
 - Call Me First
 - Tuck In Calls
 - Telehealth visits

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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 2024 Episodes

Predicted Tier	Avg ACH	Episodes	% of Episodes
1 - Low	5.0%	1,580,863	24.3%
2 - Low	14.6%	1,683,239	25.9%
3 - Mod	24.3%	1,239,802	19.1%
4 - Mod	34.0%	831,017	12.8%
5 - Mod	43.9%	543,570	8.4%
6 - High	53.4%	331,948	5.1%
7 - High	62.5%	180,056	2.8%
8 - High	71.3%	81,582	1.3%
9 - High	79.8%	27,633	0.4%

Source: SHP National Database (3/7/25)

Discharge Function Scores

- Reinforce education
- Assess your current GG outcomes
- Identify opportunities for improvement
- Item by item education needed
- Understand the ANA definitions
- Focus on what you can control
- Investment in proficiency now pay off

Exhibit 1. Cross-Setting Function Item Set

Item	Item Description
G0100A	Eating
G0100B	Chewing/swallow
G0100C	Toileting/hygiene
G0100A	Bed call and help
G0100C	Lying in bed/get up/into chair
G0100B	Showering
G0100E	Checked in Care Transfer
G0100P	Order Transfer
G0100B	Risk of Fall
G0100J	Walk 50 feet with 3 Turns
G0100R	Wheel 50 feet with 3 Turns

Exhibit 2. GG Items Progress

Category	GG Item Progress	Response Percentage
Patient Functional Status Assessment	1	Independent
	2	Stand or walk w/ assistance
	4	Supervision or handling assistance
	5	Continuous assistance
	7	Substantial physical assistance
Activity Not Attempted (ANA) Status	1	Complete
	2	Partial or initial
	3	Not attempted
Other NA codes	10	Not attempted due to environmental limitations
	11	Not attempted due to medical condition or safety concerns
Other NA codes	1	No answer
	2	Not assessable information

Discharge Function Score

- Complete OASIS review for success
- Items included for Expected Score: Age, BMI, Prior Function/Device Use, Availability of Assistance, Supervision and Safety and many more
- Review of M items to GG



Discharge to Community



- Focus on what it will take to achieve successful discharge
 - Thirty-one day forecast for hospitalization/death
- Discharge planning for success – starts at the beginning of care
- Monitor track and trend agency results - 2 years of data – longer runway
- Discharge to hospice if needed

Discharge to Community



- Recert vs Discharge
 - Ask at Case Conference: Do you see this patient readmitted in 31 days? If yes consider a recert. If no, proceed with the discharge.
 - Ask if there was a need for Social Work to ensure community resources are in place to decrease likelihood of readmit

Discharge to Community



- Clear discharge instructions
- Ensure Community Resources are in place
- Patient/CG have printed resources
- Discharge Call- follow up post-discharge
- Utilize videos

Prioritize OASIS Competency

- PDGM/VBP items
- Identify trends of learning need by clinician/team/location
- Apply clinician specific education to meet the clinicians need
- Apply team/location education if identified
- Monitor progress (QAPI) is a great resource for identification
- Reinforce education as needed



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CAHPS Strategy

- Longer to see results of all the VBP measures
- Focus on the questions that impact VBP first
- Focus on complaints
- Customer service – same day follow-up
- Part of QAPI
 - Review monthly
 - Plans to address
- Education based on results

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CAHPS Strategy

- Courteous Intake
- Consistency in staffing
- Timeliness in follow up of any complaints
- Clear expectations
- Discharge calls week before planned discharge
- Role play with staff
- Use survey terms

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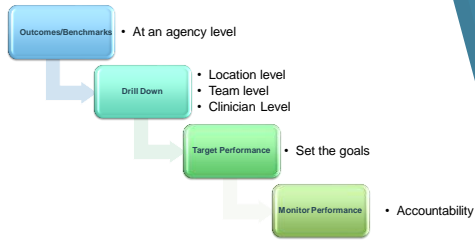
Foundation for Success

- Culture of Quality
 - QAPI Focused
- Staff knowledge – VBP/PDGM
 - Know the “Why” – hard to land if you don’t know where you are going
 - How they contribute
- Current VBP performance
 - IPR
 - Real Time Data
- OASIS Competency
 - Start with the VBP/PDGM items
- Episode Management Strategy
 - Focused on outcomes – not report
- Performance Accountability



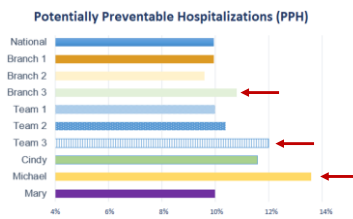
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Evaluating Outcomes



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Importance of Drill Down



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Winning Plan - Intentionality

- Daily/Weekly
 - Episode Management
- Monthly
 - Real Time Data Outcomes
 - By Clinician
 - By Team
 - By location
 - QAPI
 - Review results – entire team
 - Adjustments to plans
- Quarterly
 - IPR/APR
 - Clinician/location scorecard



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Questions?

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