Home Health Value-Based Purchasing (HHVBP) Model

CY 2024 Annual Performance Report

Your HHA

CCN	999999
HHA Name	We Love Home Health
HHA Address	999 Home Health Ln, Home Health, MD 99999
Your HHA's Cohort	Larger-volume



Table of Contents (TOC)

Worksheet/Tab	Description
<u>Overview</u>	This worksheet provides details about this Model report, an overview of the expanded HHVBP Model, and how your home health agency (HHA) can submit a recalculation request, a reconsideration request, and a request for Administrator Review.
<u>Achievement</u>	The "Achievement" worksheet shows your HHA's Achievement Points.
Improvement	The "Improvement" worksheet shows your HHA's Improvement Points.
<u>Care Points</u>	The "Care Points" worksheet shows your HHA's total points (i.e., "Care Points") based on the higher of your HHA's Achievement or Improvement Points.
Measure Scorecard	The "Measure Scorecard" worksheet outlines the calculation of your HHA's Total Performance Score (TPS) and how it compares to HHAs in your HHA's cohort.
Annual Payment Adjustment	The "Annual Payment Adjustment" worksheet reports the HHA's Final TPS-Adjusted Payment Percentage (APP), outlines the steps used to calculate the APP, and provides APP statistics for your HHA's cohort.
TNC Change Reference	The "TNC Change Reference" worksheet displays your HHA's performance on individual OASIS items composing the Total Normalized Composite (TNC) change measures.
AT and BM	The "AT and BM" worksheet reports final Achievement Thresholds (AT) and Benchmarks (BM) by volume- based cohort for the quality measure set applicable to the first two performance years, CY 2023 and CY 2024, respectively.
Model Resources	The "Model Resources" worksheet resources is designed to assist with understanding the expanded HHVBP Model and the Model reports.

Home Health Value-Based Purchasing (HHVBP) Model

CY 2024 Annual Performance Report

Your HHA	
CCN	999999
HHA Name	We Love Home Health
HHA Address	999 Home Health Ln, Home Health, MD 99999
Your HHA's Cohort	Larger-volume

This Annual Performance Report

This Annual Performance Report (APR) provides your HHA's measure performance compared to home health agencies (HHAs) in your HHA's cohort using performance year data covering the following time periods:

OASIS-based Measures	January 1, 2023 to December 31, 2023
Claims-based Measures	January 1, 2023 to December 31, 2023
HHCAHPS Survey-based Measures	January 1, 2023 to December 31, 2023

For this APR, your HHA's cohort is determined by your HHA's unique beneficiary count in CY 2022. Cohorts are determined based on each HHA's unique beneficiary count in the prior calendar year and updated once a year. Please refer to the Expanded HHVBP Model Guide at https://innovation.cms.gov/innovation-models/expanded-home-health-value-based-purchasing-model for additional information.

Your HHA's Final TPS-Adjusted Payment Percentage Applied to Home	0.4640/
Health Claim Payments in CY 2025:	0.161%

The Expanded HHVBP Model

The HHVBP Model is designed to support greater quality and efficiency of care among Medicare-certified HHAs nationally. Under this model, Medicare payments made to HHAs are dependent on the HHAs' performance on specified quality measures relative to their peers (i.e., value-based payments). The HHVBP Model was first tested among HHAs in nine states from January 1, 2016 to December 31, 2021. National expansion began on January 1, 2022. Calendar Year (CY) 2022 was the pre-implementation year. The first full performance year for the expanded HHVBP Model is CY 2023. For more information related to the expanded HHVBP Model, please refer to the CY 2022 and CY 2023 Home Health Prospective Payment System (HH PPS) Final Rules.

The Appeals Process

Publication of APRs occurs in three (3) stages: 1) a Preview APR, 2) a Preliminary APR, and 3) a Final APR. As cited in the <u>CY 2022 HH PPS final rule</u> (p. 62329) and CFR §484.375, the Preview APR provides an HHA with an opportunity to submit a recalculation request for applicable measures and performance scores if the agency believes there is evidence of a discrepancy in the calculation (e.g., the HHA did not receive achievement points for the OASIS-based Dyspnea applicable measure even though the HHA's achievement score/points exceeded the cohort's achievement threshold for this applicable measure). An HHA may request a reconsideration of a recalculation decision. In addition, an HHA may request Administrator review of a reconsideration decision as outlined in the CY 2024 HH PPS final rule (p. 77789).

Please note, the recalculation request does not apply to errors in data submission since submission requirements for the expanded Model align with current Code of Federal Regulations (CFRs). HHAs must electronically report all OASIS data collected in accordance with the Medicare Conditions of Participation (CoPs) (§484.55), and as a condition for payment (§484.205(c)). HHAs are required to submit HHCAHPS Survey-based measure data for the Home Health Quality Reporting Program (HH QRP) under §484.245(b)(1).

To dispute the calculation of the performance scores in the Preview APR, an HHA must submit a recalculation request within 15 calendar days after publication of the Preview APR. To dispute the recalculation decision, an HHA must submit a reconsideration request within 15 calendar days after the publication of the Preliminary APR. Only HHAs that submit a recalculation request may submit a reconsideration request. To dispute the reconsideration decision, an HHA must submit a request for Administrator review within 7 calendar days from CMS' notification to the HHA contact of the outcome of the reconsideration request. The Final APR will reflect any changes resulting from an approved request.

HHAs may submit requests for recalculation, reconsideration, and Administrator review by emailing hhvbp recalculation requests@abtassoc.com.

Recalculation requests must contain the following information, as cited in the CY 2022 HH PPS final rule (p. 62331) and CFR § 484.375:

- The provider's name, address associated with the services delivered, and CMS Certification Number (CCN).

- The basis for requesting recalculation to include the specific data that the HHA believes is inaccurate or the calculation the HHA believes is incorrect.

- Contact information for a person at the HHA with whom CMS or its agent can communicate about this request, including name, email address, telephone number, and mailing address (must include physical address, not just a post office box).

- A copy of any supporting documentation, not containing PHI, the HHA wishes to submit in electronic form.

Instructions on how to submit a recalculation request are available on the Expanded HHVBP Model webpage, under "Reports".

Achievement

Report	CY 2024 Annual Performance Report
CCN	999999
HHA Name	We Love Home Health
HHA Address	999 Home Health Ln, Home Health, MD 99999
Your HHA's Cohort	Larger-volume

Return to TOC Go to Model Resources

Achievement Points

Measure	Performance Year Data Period [a] (12-Month End Date)	Your HHA's Performance Year Measure Value [b]	Your Cohort's Achievement Threshold [c]	Your Cohort's Benchmark [d]	Your HHA's Achievement Points [e]	Maximum Possible Achievement Points	
OASIS-based Measures							
Discharged to Community	12-31-2023	49.684	72.652	84.249	0.000	10.000	
Improvement in Dyspnea	12-31-2023	61.248	86.305	98.512	0.000	10.000	
Improvement in Management of Oral Medications	12-31-2023	63.962	80.990	97.899	0.000	10.000	
Total Normalized Composite (TNC) Change in Mobility [f]	12-31-2023	0.639	0.744	1.011	0.000	10.000	
Total Normalized Composite (TNC) Change in Self-Care [g]	12-31-2023	1.577	2.123	2.733	0.000	10.000	
Claims-based Measures							
Acute Care Hospitalizations	12-31-2023	16.246	13.907	7.773	0.000	10.000	
Emergency Department Use Without Hospitalization	12-31-2023	8.115	11.782	4.689	5.170	10.000	
HHCAHPS Survey-based Measures							
Care of Patients	12-31-2023	92.873	89.254	94.448	6.968	10.000	
Communications Between Providers and Patients	12-31-2023	88.774	86.626	93.036	3.351	10.000	
Specific Care Issues	12-31-2023	83.702	82.048	91.198	1.808	10.000	
Overall Rating of Home Health Care	12-31-2023	91.293	85.941	94.337	6.374	10.000	
Willingness to Recommend the Agency	12-31-2023	85.232	79.986	91.202	4.677	10.000	

Notes:

Dash (-) indicates no or insufficient data available. Measures with no or insufficient data available are excluded from the TPS calculation.

N/A = Not Applicable.

[a] The Performance Year Data Period is CY 2023 for all measure categories.

[b] The Performance Year Measure Value is also referred to as "HHA Performance Score".

[c] The Achievement Threshold is the median measure value for HHAs in your HHA's cohort in CY 2022.

[d] The Benchmark is the mean of the top decile measure values for HHAs in your HHA's cohort in CY 2022.

[e] The formula for calculating the Achievement Points is:

 $10 \, \, x \, \left(\, \frac{\textit{HHA Performance Score - Achievement Threshold}}{\textit{Benchmark - Achievement Threshold}} \, \right)$

Achievement Points are only calculated if the HHA had sufficient data to calculate <u>both</u> HHA Improvement Threshold and HHA Performance Score for a given measure. For more information on how Achievement Points are calculated under the HHVBP Model, please refer to the Expanded HHVBP Model Guide.

[f] Measures the magnitude of change based on normalized total possible change across three OASIS-based Activities of Daily Living (ADL) items (M1840 Toilet Transferring, M1850 Transferring, and M1860 Ambulation/Locomotion). For more information, please refer to the Expanded HHVBP Model Guide.

[g] Measures the magnitude of change based on normalized total possible change across six OASIS-based Activities of Daily Living (ADL) items (M1800 Grooming, M1810 Current Ability to Dress Upper Body, M1820 Current Ability to Dress Lower Body, M1830 Bathing, M1845 Toileting Hygiene, and M1870 Feeding or Eating). For more information, please refer to the Expanded HHVBP Model Guide.

Improvement

Report
CCN
HHA Name
HHA Address
Your HHA's Cohort

CY 2024 Annual Performance Report 999999 We Love Home Health 999 Home Health Ln, Home Health, MD 99999 Larger-volume Return to TOC Go to Model Resources

Improvement Points

Measure	Performance Year Data Period [a] (12-Month End Date)	Baseline Year Data Period [b] (12-Month End Date)	Your HHA's Performance Year Measure Value [c]	Your HHA's Improvement Threshold [d]	Your Cohort's Benchmark [e]	Your HHA's Improvement Points [f]	Maximum Possible Improvement Points
OASIS-based Measures							
Discharged to Community	12-31-2023	12-31-2022	49.684	49.909	84.249	0.000	9.000
Improvement in Dyspnea	12-31-2023	12-31-2022	61.248	38.341	98.512	3.426	9.000
Improvement in Management of Oral Medications	12-31-2023	12-31-2022	63.962	36.511	97.899	4.025	9.000
Total Normalized Composite (TNC) Change in Mobility [g]	12-31-2023	12-31-2022	0.639	0.396	1.011	3.556	9.000
Total Normalized Composite (TNC) Change in Self-Care [h]	12-31-2023	12-31-2022	1.577	0.873	2.733	3.406	9.000
Claims-based Measures							
Acute Care Hospitalizations	12-31-2023	12-31-2022	16.246	10.183	7.773	0.000	9.000
Emergency Department Use Without Hospitalization	12-31-2023	12-31-2022	8.115	14.176	4.689	5.750	9.000
HHCAHPS Survey-based Measures							
Care of Patients	12-31-2023	12-31-2022	92.873	94.929	94.448	0.000	9.000
Communications Between Providers and Patients	12-31-2023	12-31-2022	88.774	88.273	93.036	0.947	9.000
Specific Care Issues	12-31-2023	12-31-2022	83.702	85.972	91.198	0.000	9.000
Overall Rating of Home Health Care	12-31-2023	12-31-2022	91.293	91.984	94.337	0.000	9.000
Willingness to Recommend the Agency	12-31-2023	12-31-2022	85.232	89.400	91.202	0.000	9.000

Notes:

Dash (-) indicates no or insufficient data available. Measures with no or insufficient data available are excluded from the TPS calculation. N/A = Not Applicable.

[a] The Performance Year Data Period is CY 2023 for all measure categories.

[b] The Baseline Year is CY 2022 for all measure categories.

[c] The Performance Year Measure Value is also referred to as "HHA Performance Score".

[d] The Improvement Threshold is also referred to as "HHA Baseline Year Score".

[e] The Benchmark is the mean of the top decile of measure values for HHAs in your HHA's cohort in CY 2022.

[f] The formula for calculating the Improvement Points is:

9 x (HHA Performance Score – HHA Improvement Threshold Benchmark – HHA Improvement Threshold)

Improvement Points are only calculated if the HHA had sufficient data to calculate <u>both</u> HHA Improvement Threshold and HHA Performance Score for a given measure. For more information on how Improvement Points are calculated under the HHVBP Model, please refer to the Expanded HHVBP Model Guide.

[g] Measures the magnitude of change based on normalized total possible change across three OASIS-based Activities of Daily Living (ADL) items (M1840 Toilet Transferring, M1850 Transferring, and M1860 Ambulation/Locomotion). For more information, please refer to the Expanded HHVBP Model Guide.

[h] Measures the magnitude of change based on normalized total possible change across six OASIS-based Activities of Daily Living (ADL) items (M1800 Grooming, M1810 Current Ability to Dress Upper Body, M1820 Current Ability to Dress Lower Body, M1830 Bathing, M1845 Toileting Hygiene, and M1870 Feeding or Eating). For more information, please refer to the Expanded HHVBP Model Guide.

Care Points

Report	CY 2024 Annual Performance Report	Return to TOC
CCN	999999	Go to Model Resources
HHA Name	We Love Home Health	
HHA Address	999 Home Health Ln, Home Health, MD 99999	
Your HHA's Cohort	Larger-volume	

Care Points

Measure	Sufficient Data for Measure Inclusion?	Your HHA's Achievement Points	Your HHA's Improvement Points	Your HHA's Care Points [a]	Your HHA's Percentile Ranking Within Your HHA's Cohort [b]	
OASIS-based Measures						
Discharged to Community	Yes	0.000	0.000	0.000	<25	
Improvement in Dyspnea	Yes	0.000	3.426	3.426	25-49	
Improvement in Management of Oral Medications	Yes	0.000	4.025	4.025	50-74	
Total Normalized Composite (TNC) Change in Mobility	Yes	0.000	3.556	3.556	50-74	
Total Normalized Composite (TNC) Change in Self-Care	Yes	0.000	3.406	3.406	25-49	
Claims-based Measures						
Acute Care Hospitalizations	Yes	0.000	0.000	0.000	<25	
Emergency Department Use Without Hospitalization	Yes	5.170	5.750	5.750	≥75	
HHCAHPS Survey-based Measures					•	
Care of Patients	Yes	6.968	0.000	6.968	≥75	
Communications Between Providers and Patients	Yes	3.351	0.947	3.351	50-74	
Specific Care Issues	Yes	1.808	0.000	1.808	25-49	
Overall Rating of Home Health Care	Yes	6.374	0.000	6.374	≥75	
Willingness to Recommend the Agency	Yes	4.677	0.000	4.677	≥75	
Number of Measures Included	12		Summed Care Points:	43.341	50-74	

Notes:

Dash (-) indicates no or insufficient data available. Measures with no or insufficient data available are excluded from the TPS calculation. N/A = Not Applicable.

[a] Your HHA's Care Points are the higher of your HHA's Achievement or Improvement Points.

[b] Your HHA's Percentile Ranking is computed by comparing your HHA's Care Points to those of the HHAs in your HHA's cohort:

- <25 indicates that, on this measure, your HHA is performing in the lowest (worst performing) quartile in your HHA's cohort.
- 25-49 indicates that, on this measure, your HHA is performing in the second lowest quartile in your HHA's cohort.
- 50-74 indicates that, on this measure, your HHA is performing in the second highest quartile in your HHA's cohort.
- ≥75 indicates that, on this measure, your HHA is performing in the highest (best performing) quartile in your HHA's cohort.

Report	CY 2024 Annual Performance Report	Return to TOC
CCN	999999	Go to Model Resources
HHA Name	We Love Home Health	
HHA Address	999 Home Health Ln, Home Health, MD 99999	
Your HHA's Cohort	Larger-volume	

Measure Scorecard

Measure	Your HHA's Care Points	Maximum Possible Points	Measure Weight [a]	Your HHA's Weighted Measure Points [b]
OASIS-based Measures				•
Discharged to Community	0.000	10.000	5.833	0.000
Improvement in Dyspnea	3.426	10.000	5.833	1.999
Improvement in Management of Oral Medications	4.025	10.000	5.833	2.348
Total Normalized Composite (TNC) Change in Mobility	3.556	10.000	8.750	3.112
Total Normalized Composite (TNC) Change in Self-Care	3.406	10.000	8.750	2.980
Sum of OASIS-based Measures	14.413	50.000	35.000	10.438
Claims-based Measures				
Acute Care Hospitalizations	0.000	10.000	26.250	0.000
Emergency Department Use Without Hospitalization	5.750	10.000	8.750	5.031
Sum of Claims-based Measures	5.750	20.000	35.000	5.031
HHCAHPS Survey-based Measures				
Care of Patients	6.968	10.000	6.000	4.181
Communications Between Providers and Patients	3.351	10.000	6.000	2.011
Specific Care Issues	1.808	10.000	6.000	1.085
Overall Rating of Home Health Care	6.374	10.000	6.000	3.824
Willingness to Recommend the Agency	4.677	10.000	6.000	2.806
Sum of HHCAHPS Survey-based Measures	23.178	50.000	30.000	13.907
Sum of All Measures	43.341	120.000	100.000	29.376

Total Performance Score (TPS)				
Number of Measures Included	12			
Your HHA's Summed Care Points	43.341			
Your HHA's TPS	29.376			
Percentile Ranking within Your HHA's Cohort [c]	25-49			

TPS Statistics for Your HHA's Cohort					
Number of HHAs in Your HHA's Cohort	6,484				
25th Percentile	20.448				
50th Percentile	29.639				
75th Percentile	40.520				
99th Percentile	75.587				

Notes:

Dash (-) indicates no or insufficient data available. Measures with no or insufficient data available are excluded from the TPS calculation.

N/A = Not Applicable.

[a] The weights for each measure may vary depending on the availability of measures within each measure category. For more information, please refer to the Expanded HHVBP Model Guide.

[b] Your HHA's Weighted Measure Points are calculated by dividing your HHA's Care Points by the Maximum Possible Points and multiplying by the Measure Weight. The totals for each measure category are computed by summing across the individual measures within the measure category.

[c] Your HHA's Percentile Ranking is computed by comparing your HHA's TPS to those of the HHAs in your HHA's cohort:

- <25 indicates that your HHA is performing in the lowest (worst performing) quartile in your HHA's cohort.
- 25-49 indicates that your HHA is performing in the second lowest quartile in your HHA's cohort.
- 50-74 indicates that your HHA is performing in the second highest quartile in your HHA's cohort.
- ≥75 indicates that your HHA is performing in the highest (best performing) quartile in your HHA's cohort.

Return to TOC Go to Model Resources

Report	
CCN	999999
HHA Name	We Love Home Health
HHA Address	999 Home Health Ln, Home Health, MD 99999
Your HHA's Cohort [a]	Larger-volume
Performance Year	CY 2023
Maximum Adjusted Payment Percentage	5.000%
Payment Year	CY 2025
Your HHA's Final TPS-Adjusted Payment Percentage	0.161%

Annual Payment Adjustment Calculation

	(C1)	Step 1 (C2)	Step 2 (C3)	Step 3 (C4)	Step 4 (C5)	Step 5 (C6)	Step 6 (C7)	Step 7 (C8)
	Total Performance Score (TPS)	Prior Year Payment	Unadjusted Payment Amount 5% 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) - 5%
Your HHA:	29.376	\$4,652,696	\$232,635	\$68,339	3.514	\$240,116	5.161%	0.161%
Your HHA's Cohort (all HHAs):	28.786	\$16,533,718,824	\$826,685,941	\$235,281,179	3.514	\$826,685,949	5.000%	-

Notes:

All dollar amounts in this table are rounded to the nearest dollar. Dash (-) indicates no data available. Measures with no data available are excluded from the TPS calculation.

[a] Your HHA's cohort is determined by your HHA's unique beneficiary count in CY 2022.

TPS. Your HHA's TPS based on CY 2023 performance is shown in (C1). The average TPS for all HHAs in your HHA's cohort is shown below the value for your HHA.

Step 1. Your HHA's total Medicare FFS home health claim payments from CY 2022, the calendar year prior to the performance year, is shown in (C2). The total amount of prior year Medicare FFS home health claim payments for HHAs in your HHA's cohort is shown below the value for your HHA.

Step 2. The Unadjusted Payment Amount in (C3) is calculated by multiplying the 5% maximum payment percentage by your Prior Year Payments in (C2). The total Unadjusted Payment Amount for all HHAs in your cohort is shown below the value for your HHA.

Step 3. The TPS-Adjusted Payment Amount (C4) is calculated by dividing your HHA's TPS in (C1) by 100 and multiplying it by the Unadjusted Payment Amount in (C3). The total TPS-Adjusted Payment Amount across all HHAs in your HHA's cohort is shown below the value for your HHA. Note that this cohort-level value is obtained by applying the calculation to each HHA in the cohort separately and then summing across the individual values (and thus is not exactly the same as applying the calculation for Step 3 to the cohort values for (C1) and (C3).

Step 4. The Linear Exchange Function (LEF) ratio in (C5) is calculated by dividing the total cohort-level Unadjusted Payment Amount (C3) by the total cohort-level TPS-Adjusted Payment Amount (C4). This ratio is needed to ensure that the total TPS-Adjusted Payment Amount is equal to the total Unadjusted Payment Amount across all HHAs in your HHA's cohort. The LEF ratio is the same for each HHA in your HHA's cohort.

Step 5. The Final TPS-Adjusted Payment Amount (C6) is calculated by multiplying the TPS-Adjusted Payment Amount (C4) by the LEF ratio (C5). The total Final TPS-Adjusted Payment Amount (C6) is calculated by multiplying the TPS-Adjusted Payment Amount (C4) by the LEF ratio (C5). The total Final TPS-Adjusted Payment Amount (C6) is calculated by multiplying the TPS-Adjusted Payment Amount (C4) by the LEF ratio (C5). The total Final TPS-Adjusted Payment Amount (C6) is calculated by multiplying the TPS-Adjusted Payment Amount (C6) is calculated by multiplying the TPS-Adjusted Payment Amount (C6) is calculated by multiplying the TPS-Adjusted Payment Amount (C4) by the LEF ratio (C5).

Step 6. The TPS-Adjusted Payment Percentage (C7) is calculated by dividing the Final TPS-Adjusted Payment Amount (C6) by your HHA's Prior Year Payment (C2). This represents the gross payment percentage applicable to your HHA without accounting for the 5% payment reduction.

Step 7. The Final TPS-Adjusted Payment Percentage (C8) is calculated by subtracting the 5% maximum payment adjustment percentage from the TPS-Adjusted Payment Percentage (C7). This percentage represents the overall payment percentage that will be applied to your CY 2025 Medicare FFS home health claim payments. A positive Final TPS-Adjusted Payment Percentage would result in increases to your CY 2025 Medicare FFS home health claim payments. A negative Final TPS-Adjusted Payment Percentage (C8) is capped at 5%.

Final TPS-Adjusted Payment Percentage Statistics For Your HHA's Cohort							
Number of HHAs in Your HHA's Cohort: 6,484							
Mean 25th Percentile 50th Percentile 75th Percentile 99th Percentile							
Final TPS-Adjusted Payment Percentage	0.000%	-1.511%	-0.254%	1.263%	5.000%		

Report	CY 2024 Annual Performance Report	Return to TOC
CCN	999999	Go to Model Resources
HHA Name	We Love Home Health	
HHA Address	999 Home Health Ln, Home Health, MD 99999	
Your HHA's Cohort [a]	Larger-volume	

Performance Summary for TNC Change Measures [b]

Your HHA's count of eligible quality episodes [c]	302							
	Changes in	Changes in OASIS Item Responses between SOC/ROC and EOC as a Percent of Eligible Quality Episodes [e]						
OASIS Item [d]		YOUR HHA			AVERAGE FOR YOUR HHA'S COHORT [f]			
CASIS item [u]	% No	% Positive	% Negative	% No	% Positive	% Negative		
	Change	Change	Change	Change	Change	Change		
Total Normalized Composite (TNC) Change in Mobility								
M1840 Toilet Transferring (0-4)	49%	44%	6%	28%	71%	1%		
M1850 Transferring (0-5)	62%	36%	2%	21%	78%	1%		
M1860 Ambulation/Locomotion (0-6)	27%	66%	6%	19%	79%	1%		
Total Normalized Composite (TNC) Change in Self-Care								
M1800 Grooming (0-3)	40%	52%	8%	19%	80%	1%		
W1810 Current Ability to Dress Upper Body (0-3)	41%	50%	10%	18%	81%	1%		
V1820 Current Ability to Dress Lower Body (0-3)	34%	61%	5%	19%	80%	1%		
V1830 Bathing (0-6)	29%	63%	8%	16%	83%	1%		
M1845 Toileting Hygiene (0-3)	46%	49%	4%	20%	79%	1%		
M1870 Feeding or Eating (0-5)	62%	26%	12%	44%	54%	2%		

Notes:

......

Dash (-) indicates no or insufficient data available. Measures with no or insufficient data available are excluded from the TPS calculation.

SOC = Start of Care; ROC = Resumption of Care; EOC = End of Care. N/A = Not Applicable.

[a] Your HHA's cohort is determined by your HHA's unique beneficiary count in CY 2022.

If your HHA's cohort shows "N/A" (Not Applicable), your HHA could not be assigned to a cohort in this report and cohort information presented in this report is based on the larger-volume cohort, which most HHAs fall into. Updates to your cohort assignment will appear in future reports as applicable. For more information, please refer to the Expanded HHVBP Model Guide.

[b] This table is a reference tool for HHAs to view their performance on the components of the two TNC change measures. It is not intended to provide HHAs with all the information needed to construct the TNC change measures. HHAs should refer to their iQIES reports or internal databases to track how each patient performed at EOC relative to SOC/ROC. Please refer to the Expanded HHVBP Model Guide for more information on the TNC change measures.

[c] The count of quality episodes used in constructing each TNC Normalized Composite measure. For more information on measure specifications, including exclusions, please refer to the Expanded HHVBP Model Guide.

[d] Response value range in parentheses. OASIS item response zero (0) indicates independence in performing the activity and higher values indicate less independence in performing the activity.

[e] For each HHA, eligible quality episodes used in constructing the TNC change measures are categorized as follows:

- The episode is categorized as "No Change" if the End of Care (EOC) item value is the same as the Start of Care (SOC)/Resumption of Care (ROC) item value.
- The episode is categorized as "Positive Change" if the EOC item value indicates greater independence (lower response value) compared with the SOC/ROC item value.
- The episode is categorized as "Negative Change" if the EOC item value indicates less independence (higher response value) compared with the SOC/ROC item value.

The counts for each category are divided by the total number of eligible quality episodes to obtain the percentages shown in the table. Due to rounding, percentages may not add up to 100%.

[f] "Average for Your HHA's Cohort" represents the average percentages by category (No Change, Positive Change, Negative Change) for all HHAs in your HHA's cohort. Due to rounding, percentages may not add up to 100%.

AT and BM

Report	CY 2024 Annual Performance Report	Return to TOC
CCN	999999	Go to Model Resources
HHA Name	We Love Home Health	
HHA Address	999 Home Health Ln, Home Health, MD 99999	
Your HHA's Cohort [a]	Larger-volume	

Final Achievement Thresholds and Benchmarks

		Achievement	Threshold [c]	Benchmark [c]	
Measure	Data Period [b] (12-Month End Date)	Smaller-volume Cohort	Larger-volume Cohort	Smaller-volume Cohort	Larger-volume Cohort
OASIS-based Measures				•	
Discharged to Community	12-31-2022	66.012	72.652	88.914	84.249
Improvement in Dyspnea	12-31-2022	74.818	86.305	99.991	98.512
Improvement in Management of Oral Medications	12-31-2022	68.978	80.990	99.409	97.899
Total Normalized Composite (TNC) Change in Mobility	12-31-2022	0.605	0.744	0.987	1.011
Total Normalized Composite (TNC) Change in Self-Care	12-31-2022	1.726	2.123	2.773	2.733
Claims-based Measures					
Acute Care Hospitalizations	12-31-2022	12.011	13.907	4.869	7.773
Emergency Department Use Without Hospitalization	12-31-2022	8.327	11.782	1.245	4.689
HHCAHPS Survey-based Measures					
Care of Patients	12-31-2022	-	89.254	-	94.448
Communications Between Providers and Patients	12-31-2022	-	86.626	-	93.036
Specific Care Issues	12-31-2022	-	82.048	-	91.198
Overall Rating of Home Health Care	12-31-2022	-	85.941	-	94.337
Willingness to Recommend the Agency	12-31-2022	-	79.986	-	91.202

Notes:

N/A = Not Applicable.

[a] Your HHA's cohort is determined by your HHA's unique beneficiary count in CY 2022.

[b] Data period for calculating the final Achievement Thresholds and Benchmarks.

[c] The 50th percentile (median) measure value for HHAs in your HHA's cohort is the final Achievement Threshold for each measure. The mean of the top decile measure values for HHAs in your HHA's cohort is the final Benchmark. The final Achievement Threshold and Benchmark for each measure is based on CY 2022 baseline year data. Achievement Thresholds and Benchmarks are not calculated for HHCAHPS Survey-based measures for HHAs in the smaller-volume cohort. For additional guidance on how to interpret your HHA's cohort statistics, please refer to the Expanded HHVBP Model Guide.

Home Health Value-Based Purchasing (HHVBP) Model

CY 2024 Annual Performance Report

Model Resources

CMS encourages HHAs to utilize the following resources designed to assist with implementation of the expanded HHVBP Model and understanding the Model reports. These key resources, as well as additional resources and information, are available on the Expanded HHVBP Model webpage.

Podcasts, instructional videos, and on-demand recordings on the expanded HHVBP Model webpage are also accessible on the Expanded HHVBP Model <u>YouTube playlist</u>.

Subscribe to the CMS HHS YouTube channel to receive updates when the latest videos are available.

If you are interested in receiving additional information and updates: Subscribe to the <u>HHVBP Model Expansion listserv</u>.

Frequently Asked Questions (FAQs)

The Expanded HHVBP Model FAQs assist HHAs in understanding common terms used in the expanded HHVBP Model. CMS provides updates to the FAQs as needed and notifies HHAs that have signed up to receive communications when an updated version is available on the Expanded HHVBP Model webpage.

Model Guide

The Expanded HHVBP Model Guide includes an overview of the expanded Model, information on eligibility and cohorts, quality measures used in the expanded Model, Total Performance Score (TPS) and payment adjustment methodologies, and an overview of the performance feedback reports.

The CY 2024 Annual Performance Report (APR)

Webinar: The HHVBP CY 2024 Annual Performance Report - What You Need to Know: On August 13, 2024, CMS hosted a webinar to educate HHAs about the CY 2024 APRs. The webinar recording, slides, and other webinar resources are available on the Expanded HHVBP Model webpage under "Model Reports".

TPS & Payment Adjustment Resource Series

These three (3) on-demand videos and accompanying resources are designed to support HHAs' understanding of how performance on quality measures may impact future Medicare payments. HHAs can view them as stand-alone resources or as part of a series. However, we suggest you review the materials in the following order:

1) How Measure Performance Becomes Care Points (15-minute video)

Designed to illustrate how performance on a quality measure becomes achievement points, improvement points, and care points.

2) How Care Points Become the Total Performance Score (TPS) (<u>16-minute video</u> & downloadable resource)

Provides an overview of the use of care points in the TPS calculation.

3) How the Total Performance Score (TPS) Becomes the Final Payment Adjustment (<u>12-minute video</u> & downloadable resource)

Presents an overview of how the TPS informs the calculation of the payment adjustment. Includes a review of Model concepts such as the Linear Exchange Function (LEF) and adjusted payment percentage (APP).

Preparing for Calendar Year (CY) 2024 and CY 2025

To learn more about the second and third performance years, please consider watching the <u>recording</u> of the "Expanded HHVBP Model: Preparing for Calendar Year (CY) 2024 and CY 2025" webinar that took place on November 9, 2023. You may also find the following 1-page written resources helpful:

1) CY 2024 Written Resource (PDF) Provides an overview of the CY 2024 measure set and reports at a glance.

2) CY 2025 Written Resource (PDF)

Provides an overview of the CY 2025 measure set and reports at a glance.

For questions, please email the HHVBP Model Help Desk at HHVBPquestions@cms.hhs.gov.