What you need to know about HHVBP

AND HOW BAMBOO HEALTH CAN HELP

BACKGROUND

The Home Health Value-Based Purchasing Model (HHVBP) is aimed to give Medicare-certified home health agencies (HHA) incentives to give higher quality and more efficient care. This model started as a pilot in January 2016 in nine states: Arizona, Florida, Iowa, Maryland, Massachusetts, Nebraska, North Carolina, Tennessee, and Washington. The goals of the original HHVBP Model were to:

- **Provide** incentives for better quality care with greater efficiency
- **Study** new potential quality and efficiency measures for appropriateness in the home health setting
- **Enhance** the current public reporting process

The first performance year for HHVBP is 2023, and participation is mandatory for all Medicare-certified HHAs with a CMS certification number and receiving payment from CMS for home healthcare services. Medicare-certified HHAs are incentivized to provide higher quality and more efficient care to beneficiaries, with performance assessed by quality measures achievement and improvement.

HOW DOES IT WORK?

Quality performance data from 2023 will be used to calculate Total Performance Score (TPS) which will reflect in payment adjustments of up to +/- 5% in 2025. HHAs will be scored to determine incentive payments based on identified improvements from the baseline year, relative to their peers' performance, on data derived from:

- **CMS Medicare Claims Data**
- **Outcome and Assessment Information Set (OASIS) items**
- **Home Health Consumer Assessment of Healthcare Providers & Systems (HHCAHPS) survey responses**

Twelve measures can be utilized in HHVBP TPS calculation. HHAs must have sufficient data to allow calculations for 5 of the 12 measures. Sufficient data per reporting period is defined as: 20 home health quality episodes for OASIS-based measures; 20 home health stays for claims-based measures; and 40 completed surveys for the HHCAHPS measures.
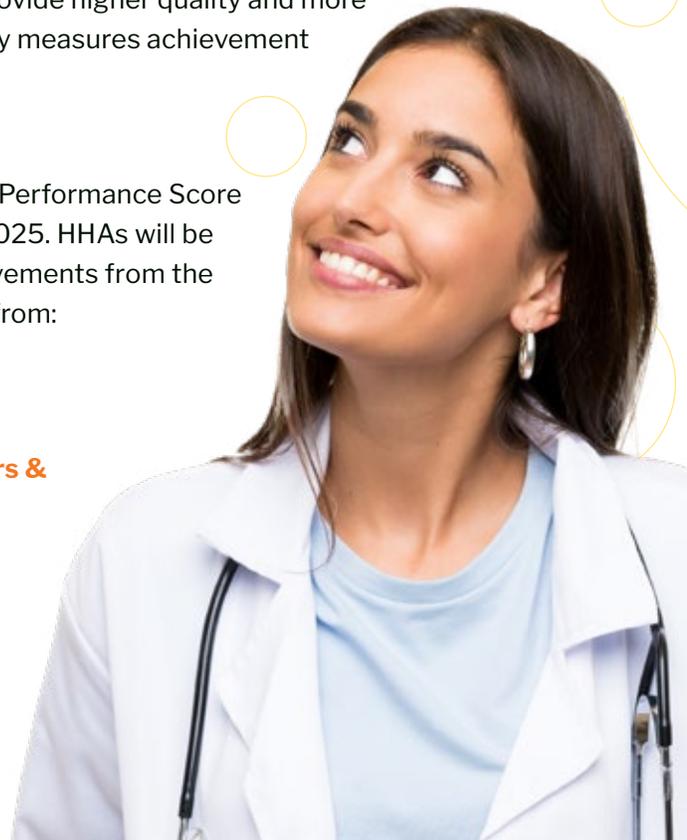
HOW BAMBOO HEALTH CAN HELP HHAS SUCCEED IN HHVBP

With the majority of the 2023 performance measures directly linked to readmissions and emergency department (ED) presentations, the most impactful ways HHAs can meet HHVBP measures is through initiatives aimed at reducing unnecessary readmissions, as well improving post-discharge transitions and overall care coordination.

Our Real-Time Care Intelligence™ helps HHAs successfully comply with such HHVBP measures via real-time admission, discharge, and transfer (ADT) notifications during the moments that matter most. As a result, HHAs are able to:

- **Foster continued patient engagement and care coordination post-discharge**
- **Intervene at the ED to prevent unnecessary inpatient admissions and reduce unneeded readmissions**
- **Deploy quick, proactive, and informed outreach, thus strengthening partnerships with health systems and improving continuity of care**

Our Pings solution helps HHAs achieve the majority of HHVBP measures, including:

- CMS Medicare Claims Data – Derived from Medicare FFS claims submitted to CMS
  - Acute Care Hospitalizations During the First Sixty (60) days of Home Health Use (ACH)
  - Emergency Department Use without Hospitalization During the First Sixty (60) Days of Home Health (ED Use)
- OASIS – Communication and Care Coordination Measures
  - Discharging to Community as opposed to higher acuity or long-term care
- HHCAHPS Survey
  - Improved Communication
  - Team Discussion

If you're interested in learning more about how Pings can help HHAs improve quality metrics, reach out to Bamboo Health to get started.

"Timeliness is an essential component of successful post-acute care. We no longer have to seek out our patients as they go through the continuum. Instead, the automated, immediate notifications let [us] be proactive in our outreach and ready as soon as we are needed for a smoother transition home."

- David Curtis, COO for Home Health, Graham Healthcare Group

Bamboo Health