



Running the VBP Triathlon and Winning!



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AGILE

AXXESS GROWTH INNOVATION & LEADERSHIP EXPERIENCE

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Objectives

- Attendees will:
 - Develop foundational knowledge about the data elements related to value-based purchasing.
 - Understand the operational best practices for value-based purchasing success.
 - Depart with actionable takeaways to improve clinical, operational and financial outcomes.

Objective 1

Attendees will develop foundational knowledge about the data elements related to value-based purchasing.

Why VBP and Why Now?



2010
Affordable
Care Act



2016
Nine-State
Trial



2022
Baseline
Performance
Year



2023
Performance
Year 1




2025
First
Payment
Year

CMS Quality Framework



IMPROVING POPULATION HEALTH

Preventing and managing prevalent, costly and chronic diseases



REDUCING COST OF CARE

Reducing resource utilization and readmissions while assuming greater risk

QUADRUPLE AIM



ENHANCING THE PATIENT EXPERIENCE

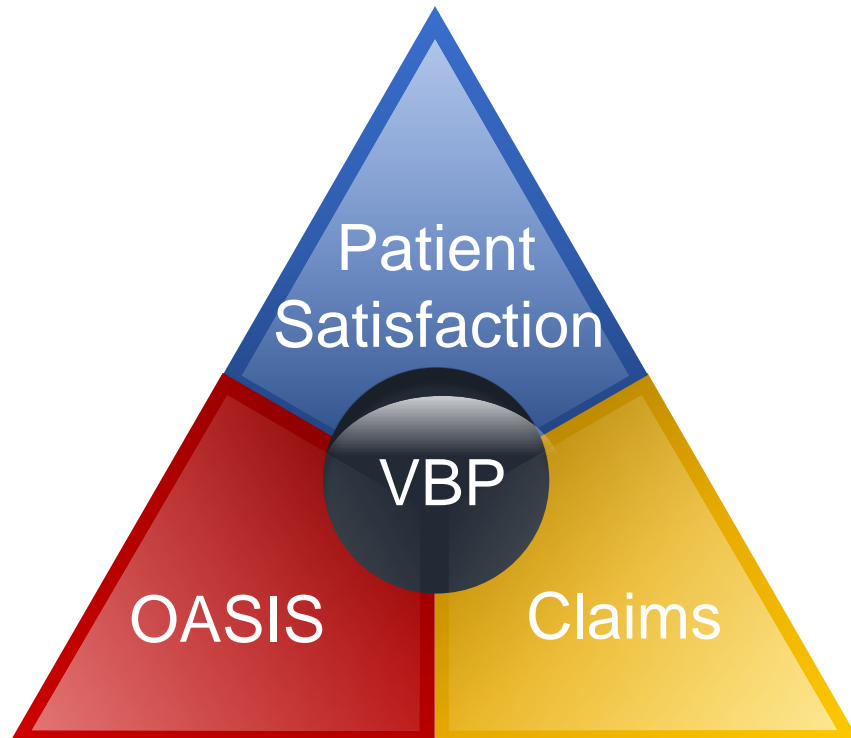
Motivating and engaging patients to play an active role in their care to improve outcomes and safety



IMPROVING PROVIDER SATISFACTION

Providing access to tools and resources to address provider burden and burnout

Three Focus Areas of VBP



HHCAHPS

Patient Engagement and Satisfaction

OASIS

Change in Self Care
Change in Mobility

Claims

Hospitalization and ER Visits

HHVBP Quality Measures

Measures

OASIS-
based
(35%)

- Improvement in dyspnea
- Discharged to community
- Improvement in management of oral medications
- TNC change in self-care
- TNC change in mobility

Claim-based
(35%)

- Acute care hospitalization during the first 60 days of home health
- ACH emergency department use without hospitalization during the first 60 days of home health

HHCAHPS
Survey-
based
(30%)

- Care of patient
- Communication between providers and patient
- Specific care issues
- Overall rating of home health care
- Willingness to recommend the agency



OASIS items in TNC Change in Self-Care

M1800



M1810



M1820



M1830



M1845



M1870



OASIS items in TNC Change in Mobility

M1840



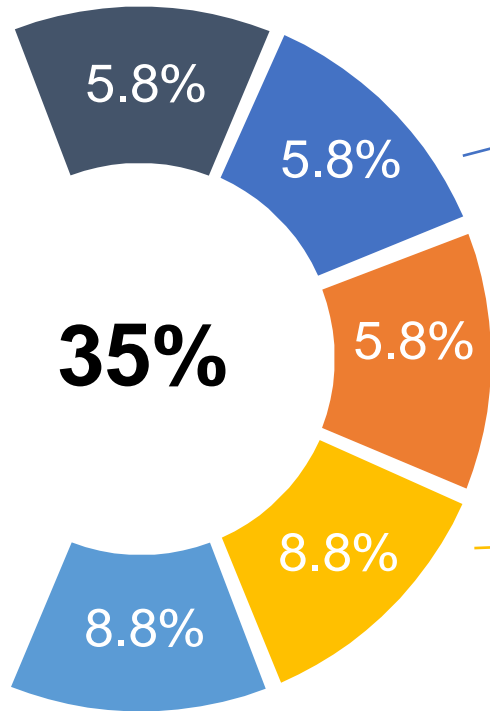
M1850



M1860



OASIS Measures



Improvement
in Dyspnea

Discharged
to Community

Improvement
in Management
of Oral
Medications

TNC Change
in Self-Care

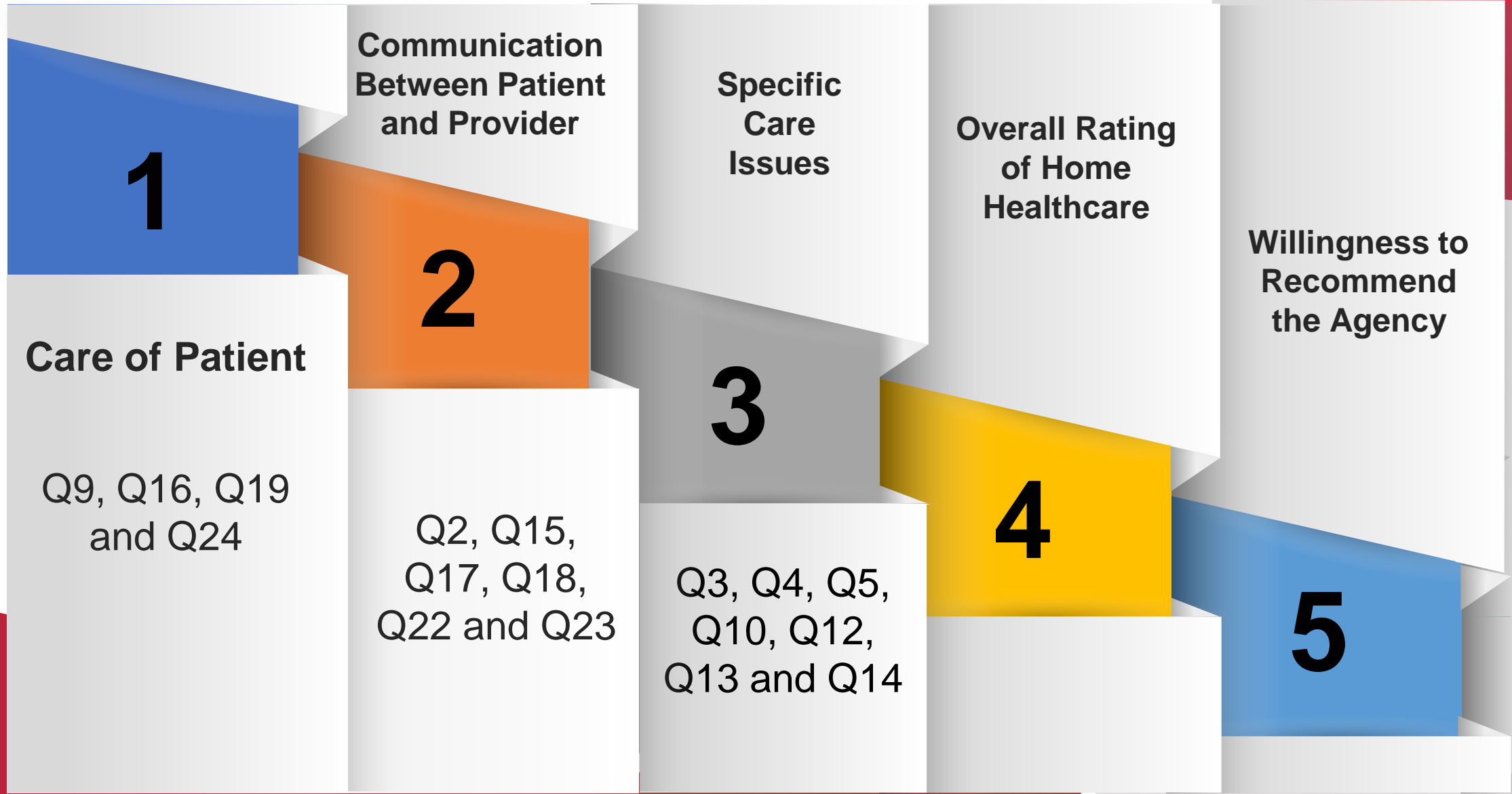
TNC Change
in Mobility

Claims Data: Hospital and ED Use

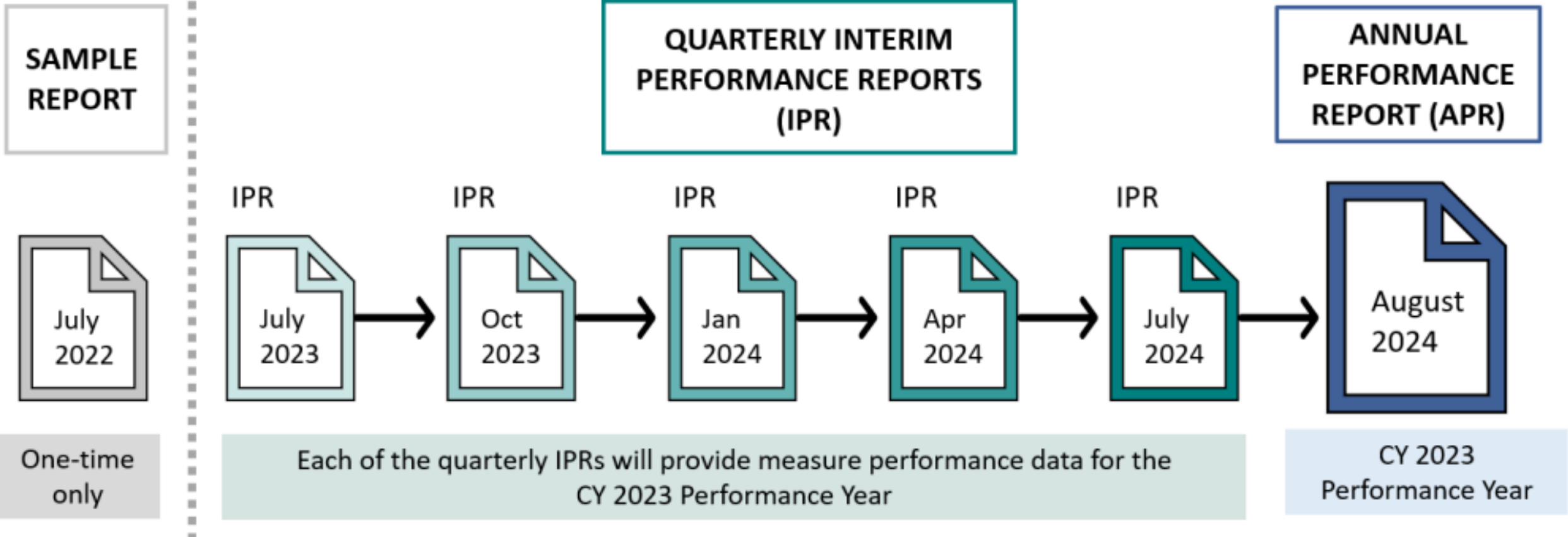
- 26% of entire VBP score from hospitalization



HHCAHPS Data



Performance Reports Coming Soon





Benchmark:

Top 10%

HHA Performance:

Your score

Achievement Threshold:

Mean score of all agencies

Improvement Threshold:

Your score in baseline year



89.9%

Benchmark

Mean Performance of the Top 10% in Model Baseline Year by Cohort



80.2%

HHA Performance Score

HHA Performance Score in Performance Year



79.6%

Achievement Threshold

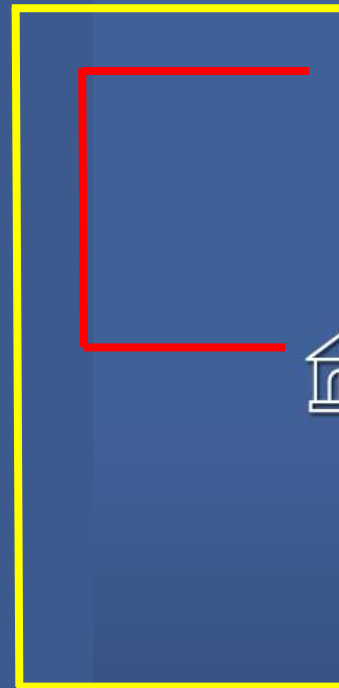
Median Performance Score in Model Baseline Year by Cohort



77.4%

Improvement Threshold

HHA Performance Score in HHA Baseline Year



Objective 2

Attendees will understand the operational best practices for value-based purchasing success.

Winning Strategies for VBP

Patient Engagement

QAPI/Data



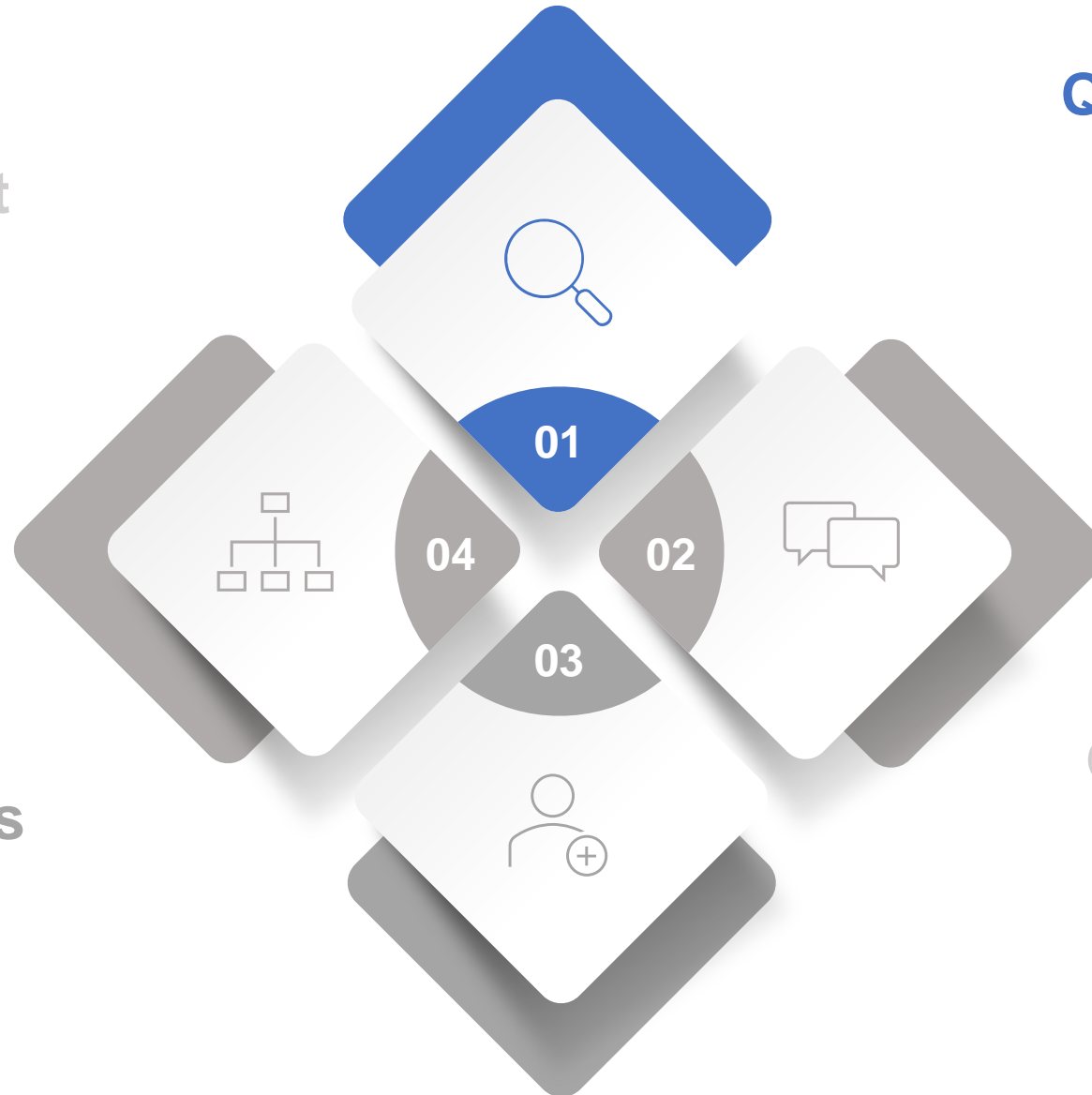
OASIS Accuracy

Minimize Hospitalizations

Winning Strategies for VBP: QAPI

Patient
Engagement

QAPI/Data



Minimize
Hospitalizations

OASIS Accuracy



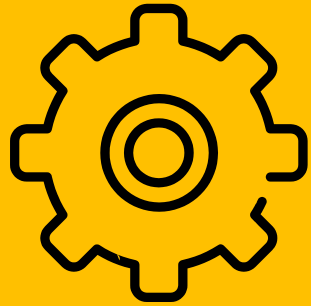
You can't improve what you can't measure.



💡	Toileting Hygiene (M1845)	93%	89%	85%	85%
💡	Eating (M1870)	66%	62%	60%	57%
💡	Observed Total Normalized Composite: Self-Care	2.32	2.28	2.11	2.10
💡	Toileting Transferring (M1840)	83%	80%	81%	79%
💡	Bed Transferring (M1850)	87%	88%	87%	86%
💡	Ambulation/Locomotion (M1860)	92%	89%	85%	83%
💡	Observed Total Normalized Composite: Mobility	1.12	1.01	0.94	0.93
💡	Dyspnea (M1400)	90%	88%	83%	80%
💡	Discharge to Community (M2420)	47%	81%	75%	58%

OASIS Measures

Data Analysis



BI Graphs



Drilldown



Scorecards

QAPI: Performance Improvement Project

SAMPLE PERFORMANCE IMPROVEMENT PROJECT

Agency Name: _____

Reporting Period: _____

Report Prepared By: _____

Performance Improvement Project	
Person(s) Responsible	
Team Members	
What is the opportunity for improvement?	

Hospital and ED Use (Claims)



	Past 4 Quarters			Quarter In Progress
	2022 Q1	2022 Q2	2022 Q3	2022 Q4
💡 ER Use w/o Hospitalization	0%	5%	9%	
💡 Acute Care Hospitalization	33%	57%	58%	0%

HHCAHPS Data

Home Health

Survey Administration

Survey Summary

Survey Result

Survey Comments

Survey Measures

Monthly

Quarterly

Annual

Testing Home Health Agency, Inc.

SURVEY ADMINISTRATION

Download

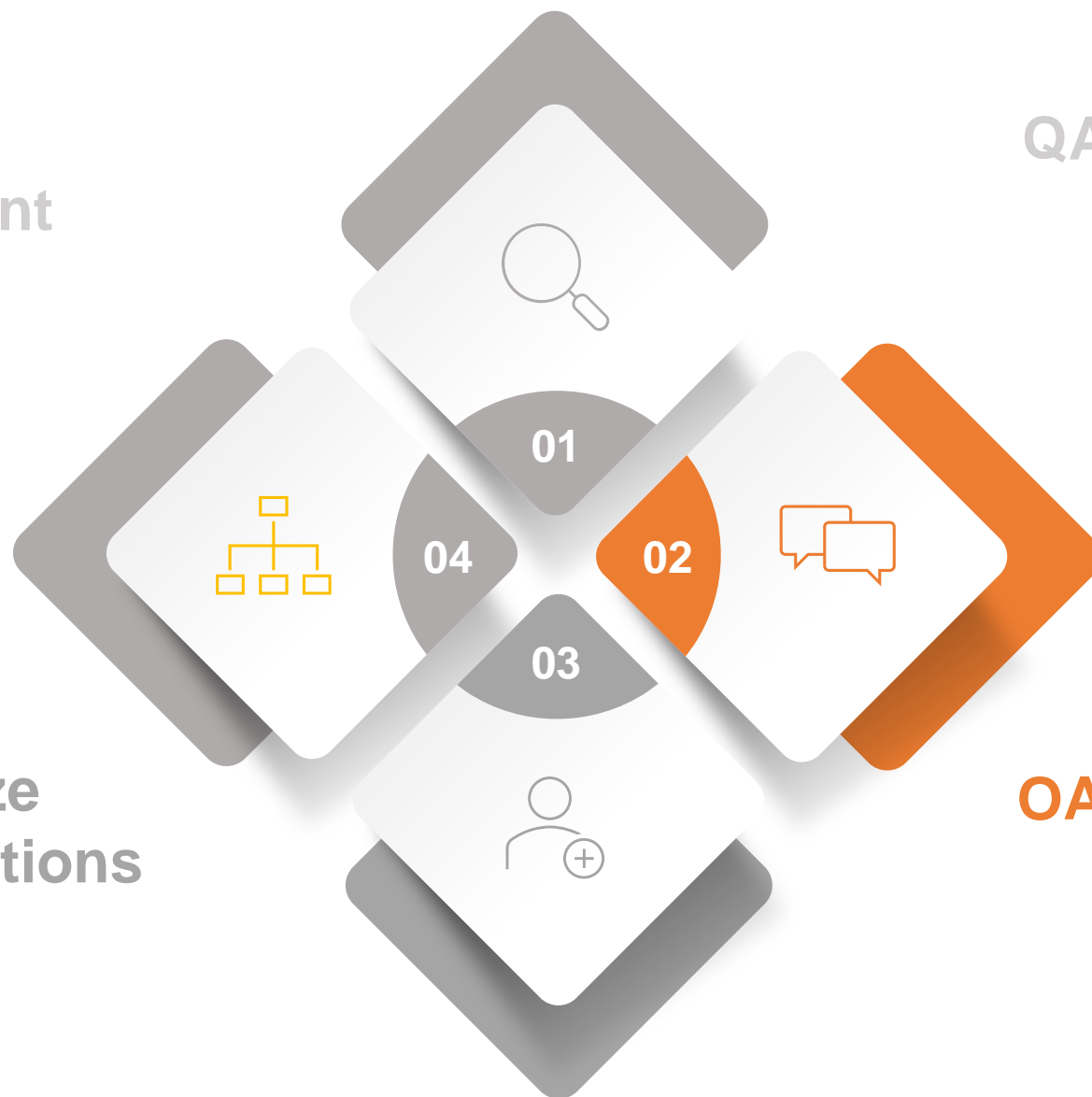
Print

Survey		Survey Preparation			Survey Result				CMS Submission	
Period	Method	Uploaded	Eligible	Sampled	Ongoing	Unresponded	Complete	Response Rate	Date	Status
09-2022	Mixed	512	205	143	143	0	0	0%	-	Unauthorized
08-2022	Mixed	512	205	143	89	0	54	37.76%	-	Unauthorized
07-2022	Mixed	502	201	141	0	0	48	34.04%	-	Unauthorized
06-2022	Mixed	495	198	139	0	0	54	38.85%	-	Unauthorized
05-2022	Mixed	6	5	1	0	0	57	5700%	-	Unauthorized
04-2022	Mixed	503	201	141	0	0	55	39.01%	-	Unauthorized
03-2022	Mixed	509	204	143	0	0	43	30.07%	Jul 18, 2022	Successful
02-2022	Mixed	501	200	140	0	0	53	37.86%	Jul 18, 2022	Successful

Winning Strategies for VBP: OASIS

Patient
Engagement

QAPI/Data



Minimize
Hospitalizations

OASIS Accuracy

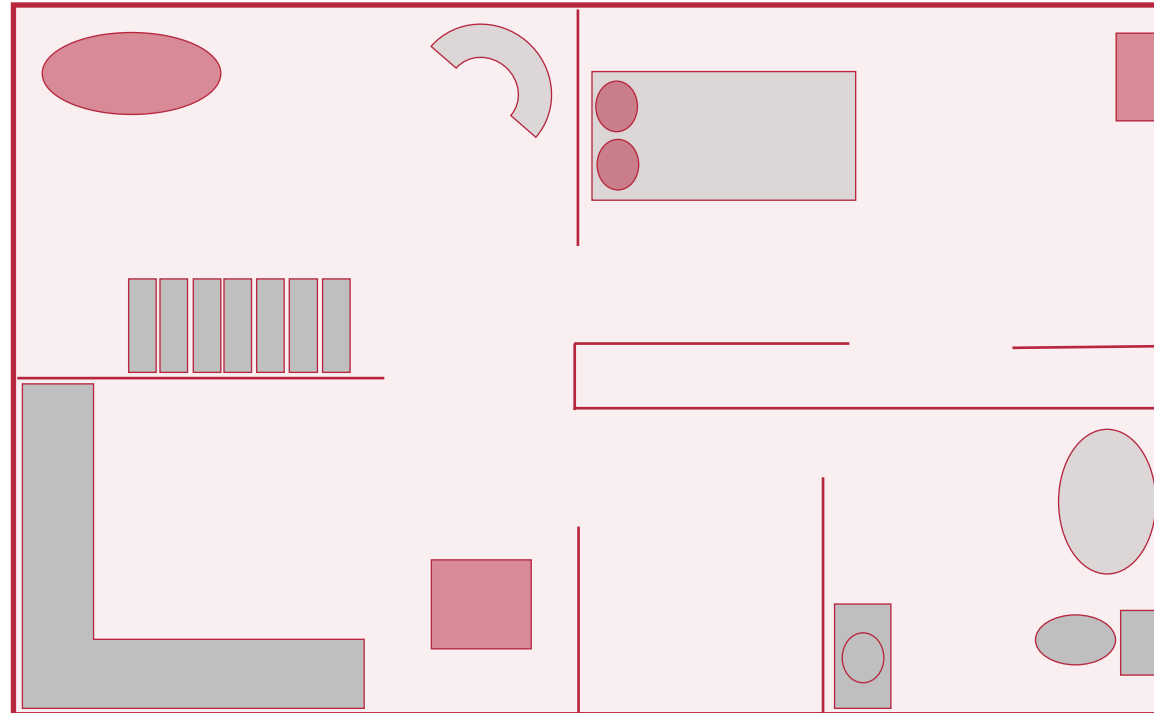
OASIS Accuracy

- Score before you fix
- OASIS walk
- Collaboration
- Always consider safety
- Know the guidance manual
- Train and retrain



OASIS Walk

ROOM-BY-ROOM ASSESSMENT OF FUNCTIONAL OASIS ITEMS



M1860

Ambulation/Locomotion

- “Show me how you get around your house, and up and down stairs”
- *Note whether patient is safe with current ambulation/ locomotion.*
- *Are verbal cues needed for safety?*

M1870 Feeding or Eating

M1033 Risk for Hospitalization

- *Ask yourself, would you be surprised if you learned the patient was hospitalized?*
- *It is important to make certain to mark all items that apply.*

M1840 Toilet Transferring

- “Show me how you get to the bathroom from other rooms.”
- “Show me how you get on/off the toilet.”
- *Note presence of raised commode seat, toilet frame and/or grab bars.*
- *Observe unsafe use of toilet roll holder, towel rack or sink countertops.*

M1800 Grooming

- “Where do you keep your grooming supplies?”
- “Can you get them out for me?”
- *Observe items located out of safe reach.*

M1850 Transferring

- “Show me how you get on/off bed.”
- “Show me how you get from your bed to the nearest chair.”
- “Show me how you get up/down from a chair.”
- *Note use of unsafe techniques or “plopping” when sitting.*
- *Are verbal cues needed for safety?*

M1820 Lower Body Dressing

- “Show me how you get pants out of your dresser.”
- “Show me how you take off your shoes and socks. I need to check your feet.”
- *Note use of dressing aids and balance.*

M1810 Upper Body Dressing

- “Show me how you get a shirt out of the closet.”
- *Note use of dressing aids and balance.*

M1830 Bathing

- “Show me how you get into your tub/shower.”
- *Note presence of grab bars, hand-held shower head and shower seat.*
- *Observe incorrect use of fixtures, towel rack, shower door/frame, or curtain rod.*

OASIS Scoring Tip

The Color of the Car Is:

- 0 - Red
- 1 - Dark Red
- 2 - Burgundy
- 3 - Maroon
- 4 - Passion Red



OASIS Collaboration Tools

THERAPIST'S OASIS & ASSESSMENT CHEAT SHEET

Information includes data compiled from Centers for Medicare and Medicaid Services by MAC Legacy. Distribution of this document is a service to the client. MAC Legacy will not be held responsible for use, interpretation or the updating of these guidelines.

OASIS & THERAPY SERVICES

Home care therapists have the unique opportunity to directly improve the patient's functional outcome. Specific OASIS items are

OASIS ITEM - M1400 - Dyspnea:

When is the patient dyspneic or noticeably **Short of Breath**?

- 0 - Patient is not short of breath
- 1 - When walking more than 20 feet, climbing stairs
- 2 - With moderate exertion (for example, while dressing, using commode or bedpan, walking distances less than 20 feet)
- 3 - With minimal exertion (for example, while eating, talking, or performing other ADLs) or with exertion

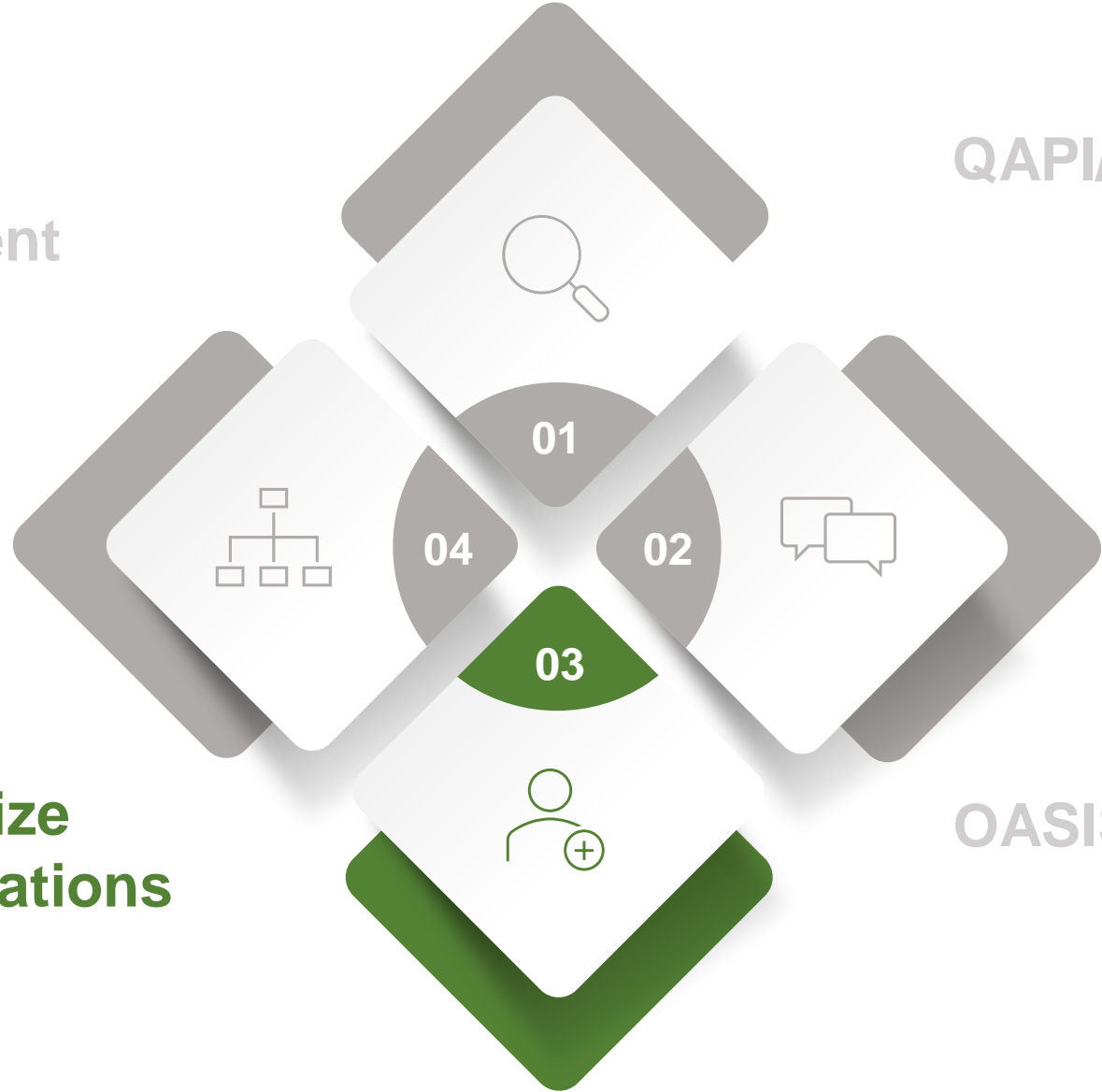


AXXESS GROWTH INNOVATION & LEADERSHIP EXPERIENCE

Winning Strategies for VBP: Hospital/ED Use

Patient
Engagement

QAPI/Data



Minimize
Hospitalizations

OASIS Accuracy



Minimizing Hospital Risk

- Home safety and fall prevention
- Patient-specific interventions and goals
- Interdisciplinary team approach
- Medication management individualized to the patient
- Telephone/telehealth visits
- Front-loading visits and staggering discipline visit

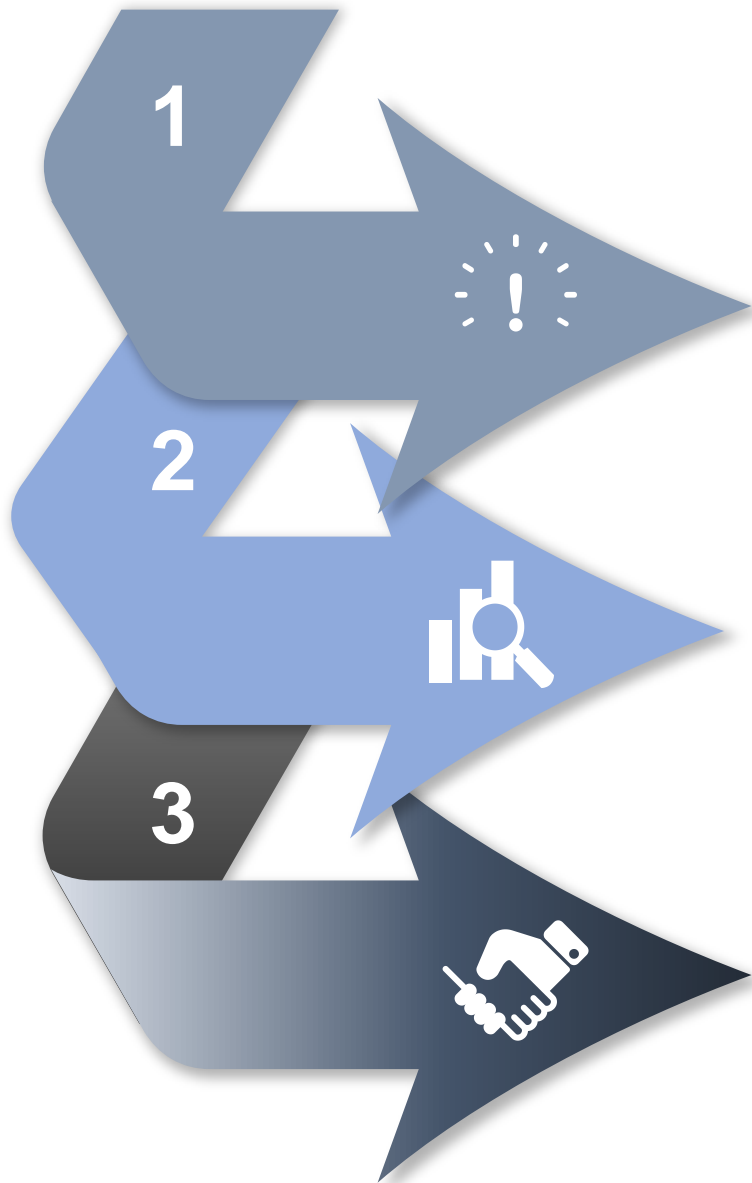


Medication Teaching

- Ask to see all medications
- Assess health literacy level of patient and caregiver
- Perform medication reconciliation
- Provide education and re-assess for retention of information
- Front-load visits for patients that need additional medication support



Hospitalization and ED Use



Fall Interventions

- Strength and balance
- Environment
- Cognition and judgement

Disease Management

- Education (patient and caregivers)
- Frequent touchpoints
- Remote monitoring

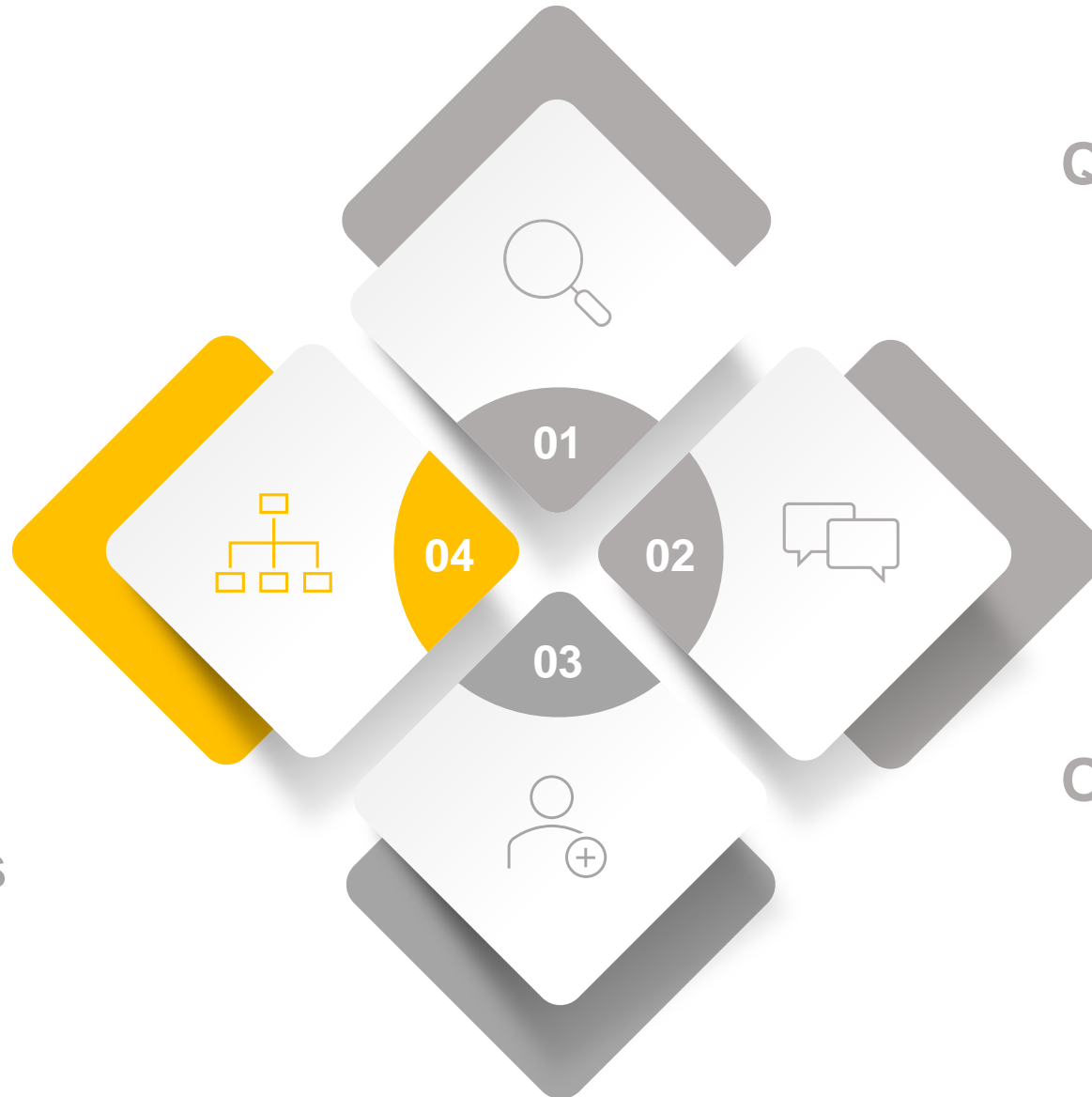
Medication Management

- Education (patient and caregivers)
- Health literacy
- Automated reminders

Winning Strategies for VBP

Patient
Engagement

QAPI/Data



OASIS Accuracy

Minimizing
Hospitalizations

Winning Strategies for VBP: Patient Engagement



Provide all staff with HHCAHPS questions



Let patients know they will receive a survey



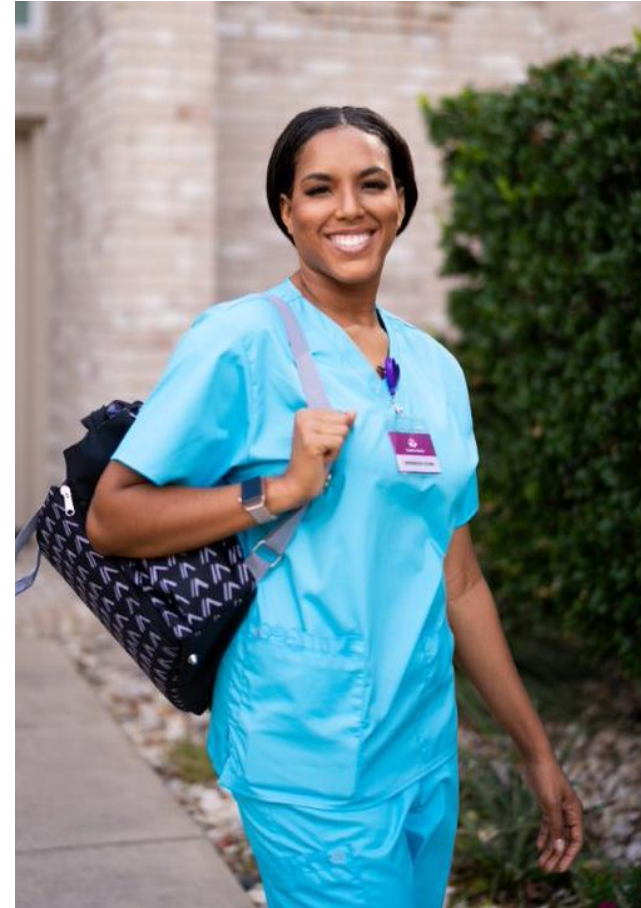
Use key phrases when interacting with patients



Track all patient calls and follow until resolved



Investigate every complaint and incident



HHCAHPS Tools

Home Health Value-Based Purchasing (HHVBP) Model

Methods to Improve Quality Measures: HHCAHPS

- Ensure names and mailing addresses are current and accurate.
- Inform patients/caregivers on the purpose and importance of the survey.
- Use the teach-back method for educating patients and caregivers. This allows the patient/caregiver to repeat what they heard. The clinician can assess comprehension and possible need for additional teaching.
- At the end of each visit, summarize what was done (teaching, bathing, therapeutic exercise, etc.) to reinforce patient's memory and understanding of services provided.

Objective 3

Attendees will depart with actionable takeaways to improve clinical, operational and financial outcomes.

Actionable Takeaways

- Understand VBP metrics
- Minimize hospitalizations
- Embrace QAPI
- Prepare for change

THANK YOU



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