



Missouri Alliance for HOME CARE

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COVID019 Home Care & Hospice Town Hall-Part 1 Recording Available Now!

On March 25, 2020 the National Home Care and Hospice Association (NAHC) held the first of six free virtual town hall webinars devoted to disseminating knowledge about COVID-19. The first speaker was Brent Korte, Chief Home Care Officer & Molly McDonald, PT, DPT, MBA, Quality & Regulatory Manager, EvergreenHealth direct from the state of Washington with their firsthand experience with the COVID-19 health crisis.

Many of you may have already listened to this but if you didn't have the opportunity or had problems getting on due to technical difficulties we wanted to make available to everyone the recording as this valuable information will give perspective from someone who has been in the thick of this crisis.

Click [here](#) access the recording of Part 1 – COVID-19 Home Care & Hospice Town Hall

Click [here](#) if you would like to register for the remainder of the free virtual town halls

CMS Announces Quality Reporting Program Relief

The Centers for Medicare & Medicaid Services (CMS) [announced](#) new quality reporting program relief for providers, including data submission relief for both home health and hospice providers.

For both home health and hospice there are some data that do not need to be submitted, as follows: Deadlines for October 1, 2019 – December 31, 2019 (Q4) data submission optional. If Q4 is submitted, it will be used to calculate the 2019 performance and payment (where appropriate). Data from January 1, 2020 through June 30, 2020 (Q1-Q2) does not need to be submitted to CMS for purposes of complying with quality reporting program requirements. This means that:

Home Health and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey data from January 1, 2020 through September 30, 2020 (Q1-Q3) does not need to be submitted to CMS.

OASIS and HIS Q1-Q2 (Jan-June 2020) does not need to be submitted to CMS for quality reporting program purposes.

The OASIS still needs to be submitted before the final claim for payment purposes.

Cost Report: Delay Filing Deadline for Part A, Home Health, and Hospice Providers

The Centers for Medicare & Medicaid Services (CMS) is currently authorizing delay for the following fiscal year end dates. CMS will delay the filing deadline of FYE 10/31/2019 cost reports due by March 31, 2020 and FYE 11/30/2019 cost reports due by April 30, 2020. The extended cost report due dates for these October and November FYEs will be June 30, 2020.

CMS will also delay the filing deadline of the FYE 12/31/2019 cost reports due by May 31, 2020. The extended cost report due date for FYE 12/31/2019 will be July 31, 2020 (42 CFR § 413.24 (f) (2) (ii) allows this flexibility). In addition, this is a blanket extension and providers do not need to request for extensions.

CMS to Update Home Health Grouper for COVID-19

The Centers for Disease Control and Prevention (CDC) recently [announced](#) a change to the effective date for the new ICD-10 diagnosis code for COVID-19 to April, 1 2020, and issued supplemental [guidance](#). According to the announcement, due to the urgent need to capture the reporting of this condition on health care claims and surveillance data, the CDC, under the National Emergencies Act Section 201 and 301, is changing the effective date of new diagnosis code U07.1, COVID-19, from October 1, 2020 to April 1, 2020. The new ICD-10 code is to be reported as primary for cases with a confirmed COVID-19 diagnosis.

CMS is planning to update the home health Grouper with an **implementation date of April 6**. The update will include the new ICD-10 code for vaping and the new ICD-10 code for COVID-19. Therefore, both codes will be implemented timely. The new software should be posted soon and CMS will be issuing a correction to Change Request 11656 reflecting these changes.

CMS Addresses Survey Suspension, Survey Priorities and Access to Facilities

The Centers for Medicare & Medicaid Services (CMS) posted a [memo](#) outlining the suspension of some survey activities and current survey priorities. CMS is prioritizing and suspending certain federal and state survey agency (SSA) surveys and delaying revisit surveys beginning March 20, 2020 for all certified provider and supplier types.

Standard surveys for home health agencies and hospices will not be authorized during this period. Revisit surveys not associated with Immediate Jeopardy (IJ) situations will also not be authorized during this period. For home health agencies this also means the imposition of suspension of payments for new admissions (SPNA) following the last day of the survey when termination is imposed will be lifted to allow for new admissions during this time and suspension of per day civil money penalty (CMP) accumulation, and imposition of termination for facilities that are not in substantial compliance at six months.

While CMS' directive applies to CMS' federal surveyors and state agency surveyors, CMS urged accrediting organizations (AOs), to follow suit. Additionally, CMS' survey prioritization applies to surveys for compliance with federal regulations, not state surveys pursuant to state licensure.

During this three-week timeframe, only the following types of federal surveys will be prioritized and conducted:

- Complaint/facility-reported incident surveys: State survey agencies (SSAs) will conduct surveys related to complaints and facility-reported incidents (FRIs – apply to nursing homes) that are triaged at the Immediate Jeopardy (IJ) level. A streamlined Infection Control review tool will also be utilized during these surveys, regardless of the Immediate Jeopardy
- Targeted Infection Control Surveys: Federal CMS and State surveyors will conduct targeted Infection Control surveys of providers identified through collaboration with the Centers for Disease Control and Prevention (CDC) and the Health and Human Services (HHS) Assistant Secretary for Preparedness and Response (ASPR). They will use a streamlined review checklist to minimize the impact on provider activities, while ensuring providers are implementing actions to protect the health and safety of individuals to respond to the COVID-19 pandemic.

This checklist, *COVID-19 Focused Infection Control Survey: Acute and Continuing Care Providers*, is part of the memo and can be used by providers as a self-assessment. This document is meant to serve a variety of non-long term care providers so it is not specific to home health agencies and hospices, but there are components of it that are applicable. They are self-evident in the document.

The memo also provides a detailed explanation of the prioritization of surveys that will be conducted and tips for providers on various issues being faced during this pandemic, i.e. education, access to facilities, etc. Regarding access to facilities, CMS wrote: *CMS is aware that some providers (nursing homes, assisted living facilities, etc.) have significantly restricted entry for staff from other Medicare/Medicaid certified providers who are providing direct care to patients. In general, if the staff is appropriately wearing PPE, and do not meet criteria for restricted access, they should be allowed to enter and provide services to the patient (interdisciplinary hospice care, dialysis, organ procurement, home health, etc.).* This is more prescriptive than other guidance from CMS as it specifically mentions hospice care and home health.

Surveyors are also subject to proper use of PPE. This memo states: If state or federal surveyors are unable to meet the Personal Protective Equipment (PPE) expectations outlined by the latest CDC guidance to safely perform an onsite survey due to lack of appropriate PPE supplies, they are instructed to refrain from entering the /provider, and obtain information necessary remotely, to the extent possible. Surveyors should continue the survey once they have the necessary PPE to do so safely.

NOW AVAILABLE: Draft OASIS-E Instrument

The draft OASIS-E All Items Instrument is now available in the Downloads section of the [OASIS Data Sets webpage](#). OASIS-E will be effective January 01, 2021. Please note the instrument is not yet final. Office of Management and Budget (OMB) approval is required and expected later this year.