



FY 2025 Hospice Wage Index Final Rule

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Panelists

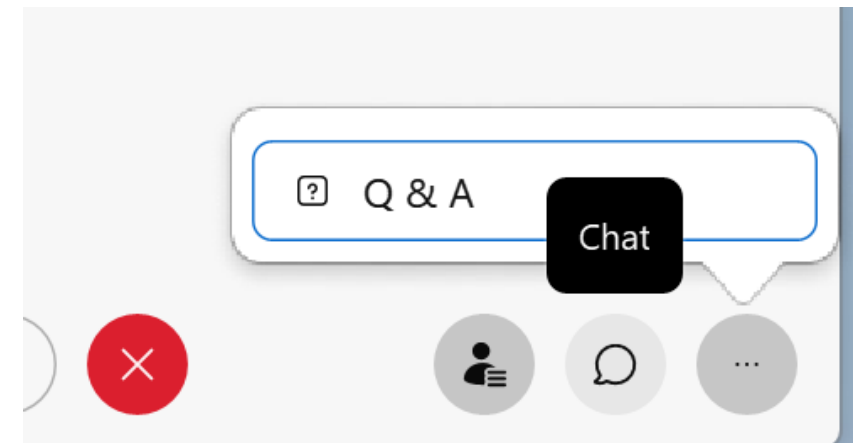


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Major Provisions in the FY 2025 Hospice Final Rule



Payment Updates and Statistical Area Changes

Regulatory Technical Updates

HOPE Data Collection Instrument and Quality Measures

CAHPS Hospice Survey Changes

Requests for Information

FY 2025 Hospice Wage Index Final Rule



- **The Centers for Medicare & Medicaid Services (CMS) released the [FY 2025 Hospice Wage Index and Payment Rate Update](#) final rule on July 30**
 - Finalizes a 2.9% increase in payments
 - Updates the cap to \$34,465.34
- **Most provisions of the rule are effective October 1, 2024**
 - Hospice Outcomes and Patient Evaluation (HOPE): On or after **October 1, 2025**
 - Quality Measures: No earlier than November 2027 (FY 2028)
 - CAHPS® Hospice Survey Changes: Beginning with **April 2025 decedents**
- **CMS Fact Sheet: [Fiscal Year \(FY\) 2025 Hospice Payment Rate Update Final Rule](#)**

FY 2025 Payment Rate Update



CMS finalizes a 2.9% increase in payments for FY 2025

FY 2024 Final Cap Amount	FY 2025 <i>Final</i> Cap Amount
\$33,494.01	\$34,465.34

FY 2025 Final Payment Rates



Payment Rates for Hospices Who Submit Quality Data

Code	Description	SIA Budget Neutrality Factor	Wage Index Standardization Factor	FY 2025 Hospice Payment Update	Final FY 2025 Payment Rates	FY 2024 Payment Rates
651	Routine Home Care (days 1-60)	1.0009	0.9983	1.029	\$224.62	\$218.33
651	Routine Home Care (days 61+)	1.0000	0.9975	1.029	\$176.92	\$172.35
652	Continuous Home Care Full Rate = 24 hours of care	N/A	1.0026	1.029	\$1,618.59 (\$67.44/hour)	\$1,565.46
655	Inpatient Respite Care	N/A	0.9947	1.029	\$518.78	\$507.71
656	General Inpatient Care	N/A	0.9931	1.029	\$1,170.04	\$1,145.31

CMS Finalizes Statistical Area Changes



- The hospice wage index is calculated based on hospital wage information in a geographic area, or core-based statistical area (CBSA)
- For FY 2025, CMS will update CBSAs to calculate hospice wage index information
 - Based on the Office of Management and Budget (OMB) issued [Bulletin No. 23-01](#)
- **This will result in CBSA and wage index changes for some hospices**
 - Hospices would not see more than a 5% decrease in their wage index in the given year
- CMS has published a [crosswalk of the changes](#) with the FY 2025 final rule



Clarifying Regulatory Text Changes

Aligning Physician Certification Regulations



CMS will align Medicare hospice payment and CoP requirements:

- Update CoPs to clarify that physician member of hospice interdisciplinary group may review patient clinical information and certify a patient's terminal illness
- Update CoPs to clarify that a physician designee may review patient clinical information and certify their terminal illness if the medical director is unavailable

Does not reflect a change in policy, but is intended to promote clarity and consistency

Reorganizing Notice of Election and Election Statement Regulations



- CMS will reorganize regulations to clearly distinguish between the Hospice Election Statement and the Notice of Election (NOE)
- Does not reflect a change in policy, but is intended to promote clarity

Election Statement	Notice of Election
An individual who meets the eligibility requirements in §418.20 may file an election statement with a particular hospice.	Within five days after the hospice election date, a hospice must submit a NOE, which must be accepted by the Medicare Administrative Contractor



Hospice Quality Reporting Program

HOPE (Hospice Outcomes and Patient Evaluation)



Hospice patient-level item set to collect & submit standardized data on each hospice patient

Will collect data related to:

- Demographics
- Pain and symptom management
- Symptom impact
- Skin conditions
- Medications
- Imminence of death

Replaces Hospice Item Set (HIS)

HOPE



- Provide data for HQRP quality measures
- Inform future payment refinement
- Support quality measures
- Contributes to the patient's plan of care through providing patient data throughout the hospice stay
 - Improved practice and
 - Care quality

HOPE Implementation and Timeline



Required for all patients

- Regardless of payer or age

Requires up to 4 visits per patient, depending on length of stay

- HOPE Admission (day 0-5)
- HOPE Update Visit within first 30 days after election
 - HOPE Update Visit (HUV) 1 (day 6-15)
 - HOPE Update Visit (HUV) 2 (day 16-30)
- HOPE Discharge

Finalized timeline

- Data collection to begin on or after **Oct 1, 2025**
- Public reporting no sooner than FY2028

HOPE Compliance and Impact



Same compliance thresholds as HIS

- Submit 90 percent of all required HOPE records within 30 days of the event or completion date (patient's admission, discharge, and up to two HUV time points based on the patient's length of stay)

Hospices that fail to submit required HOPE assessments will receive payment reduction

- will be subject to a four percent reduction in the Annual Payment Update

HQRP Reporting Requirements



Reporting Year for HIS/HOPE and Data Collection Year for CAHPS data (calendar year)	Annual Payment Update Impacts Payment for the FY	Reference Year for CAHPS Size Exemption (CAHPS only)
CY 2023	FY 2025 APU	CY 2022
CY 2024	FY 2026 APU	CY 2023
CY 2025	FY 2027 APU	CY 2024
CY 2026	FY 2028 APU	CY 2025

TABLE 15: HQRP Reporting Requirements and Corresponding Annual Payment Updates

HOPE-based Quality Measures



Timely Reassessment of Pain Impact and Timely Reassessment of Non-Pain Impact

- Measures how many patients who were assessed with moderate/severe pain or non-pain symptom impact were reassessed within two calendar days
- Severity and impact based on HOPE assessments
- Non-pain symptoms include shortness of breath, anxiety, nausea, vomiting, diarrhea, constipation, and agitation

Exclusions

- Died or discharged within 2 days
- Reassessment visit refused
- Unable to contact/locate patient
- Patient in ER/hospital
- Patient travelling outside of service area

HOPE-based Quality Measures



- Data collected from Admission or Symptom Follow-up Visits (SFV)
 - In-person visit
 - SFV cannot be same visit as initial assessment, but can be later on same day
 - RN or LPN/LVN

<https://www.cms.gov/medicare/quality/hospice/hope>

HOPE-based Quality Measures



Public reporting

- No sooner than FY2028
- CMS must establish reliability and validity
- At least four quarters of data analyzed

Example:

Implementation October 1, 2025

October – December 2025 NOT ELIGIBLE

All four quarters CY2026 analyzed in CY2027

CAHPS Hospice Survey Changes



- Addition of web-mail mode option as an alternate to current survey modes
 - Would include email invitation to a web-based survey, with mail follow-up to non-responders
- Addition of pre-notification letter
 - Sent by survey vendor one week prior to survey instruments
- Extension of response time from 42-49 days
- Removal of Care Received in a Nursing Home items
- Replacement of multi-item Getting Hospice Care Training
- Addition of new Care Preferences measure
- Additional items removed and simplified wording in multiple measures

CAHPS Hospice Survey Public Reporting



- Public reporting implications:
 - CMS will treat revised Getting Hospice Care Training and new Care Preferences measure as new measures
 - Will wait until 8 quarters of data before public reporting
 - CMS anticipates measures will first be included in February 2028 Care Compare refresh
 - Scores calculated from Q2 2025 – Q1 2027
 - No public reporting of *Care Preferences* or *Getting Hospice Care Training*
 - During the transition time, Star Ratings will be based on 7 measures instead of 8
 - After transition time
 - Star Rating will be based on 9 measures
 - *Training* added back in, plus *Care Preferences*

Special Focus Program (SFP) Considerations



Raised concerns about CAHPS proposal impacts to the SFP

CMS believes CAHPS changes are non-substantive and will not impact the SFP algorithm

Agency has not provided data in support of this assertion

NAHC-NHPCO Alliance committed to the implementation of effective algorithm

CMS Addresses Requests for Information



Potential implementation of a separate payment mechanism for high-intensity palliative care services

Potential Hospice Quality Reporting Program social determinants of health (SDoH) changes

Key Takeaways from the FY 2025 Hospice Wage Index Final Rule



Determine whether counties served by your hospice will experience a wage index change

Download and review the HOPE Manual

- Review the proposed new assessment and demographic items
- Consider how to address staff training needs

Review the new process measures

- Consider how your organization may be able to implement

CAHPS

- Educate staff and stakeholders on measure and public reporting changes
- Engage in conversations with your survey vendor
- Review Top Box versus Bottom Box scores



NHPCO

National Hospice and Palliative
Care Organization

QUESTIONS?

Thank you for your participation!

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