



Center for Clinical Standards and Quality /Quality, Safety & Oversight Group

Ref: QSO-18-13-HHA

REVISED 01.16.2018

DATE: January 12, 2018

TO: State Survey Agency Directors

FROM: Director
Quality, Safety & Oversight Group (*formerly Survey & Certification Group*)

SUBJECT: Home Health Agency (HHA) Survey Protocol – State Operations Manual (SOM)
Appendix B Revised

****Revised Attachments A & B to Reflect Removal of Tags G670, G700, G848 and G940;
Addition of G956 and G984****

Memorandum Summary

This memorandum revises Appendix B of the SOM pursuant to new Conditions of Participation (CoPs) for HHA which are effective January 13, 2018:

- New Aspen tags for each condition and standard for the new CoPs are attached to this memorandum. These tags will be used by the surveyors to enter survey data into the system as of January 13, 2018.
- Revised Level I and Level II standards, based on the new CoPs, are attached to this memorandum. The surveyors must use Level I and II standards to conduct standard and partially extended HHA surveys per Appendix B of the SOM.
- The survey process within Appendix B of the SOM is revised to reduce pre-survey preparation time and refocus the use of Certification and Survey Provider Enhanced Reports (CASPER) reports in the HHA sample selection. The total number of patient clinical record reviews has been reduced.

Discussion

Revised HHA CoPs will be effective January 13, 2018. Pursuant to the new regulations, certain portions of the SOM Appendix B have been revised.

Attachment A of this memorandum forwards the new ASPEN tags assigned to each of the new HHA conditions and standards. These new ASPEN tags will be uploaded into the ASPEN system in preparation for use beginning on January 22, 2018. The Level I and level II standards for the new HHA CoPs have been identified (highlighted) for the convenience of the surveyors.

Attachment B of this memorandum is a table of the new Level I and Level II standards for the new HHA CoPs to be used during the standard and partially extended surveys as discussed in Appendix B of the SOM.

Selected sections of the HHA survey process have also been revised and will be effective with all surveys conducted upon receipt of this memorandum. These changes replace the current, corresponding sections within Appendix B of the SOM. The changes are:

Task 1 - Pre-Survey (Offsite) Preparation

The offsite preparation task has been refocused to optimize surveyor time in planning for the HHA survey and to shift the focus of the offsite review to potentially avoidable events. The number of CASPER HHA reports that are to be reviewed prior to the HHA survey is reduced from six to three reports.

The three CASPER reports that surveyors will continue to review during Task 1 are:

1. Risk Adjusted Potentially Avoidable Event Report (12 months);
2. Potentially Avoidable Event Report: Patient Listing (12 months);
3. Agency Patient Related- Characteristics Report (12 months).

1. Risk Adjusted Potentially Avoidable Event Report

Surveyors will continue to utilize the Risk Adjusted Potentially Avoidable Event Report to identify potential areas of concern for the survey. Review the report to identify all potentially avoidable events. It is no longer required that the surveyor analyze this report for statistical significance or to determine if the provider exceeded twice the national reference value for a particular concern. All incidents contained within the report time period should be used as the universe, in conjunction with the *Potentially Avoidable Event: Patient Listing Report*, from which the closed record sample for the survey is selected. The closed record sample is selected during the pre-survey preparation. If the reports do not contain a sufficient number of events, the sample may be augmented onsite.

2. Potentially Avoidable Event: Patient Listing Report

This report is a companion to the above *Potentially Avoidable Event Report* and provides the names of the patients who experienced the events noted in that report. Patients listed under multiple areas in the above report should be selected as a priority. If an insufficient number of patients are listed in the *Potentially Avoidable Event Report* to meet the number of closed records required for the survey sample, additional records may be added to the sample from the list of patients discharged from the agency for the 6 months prior to the survey.

3. Agency Patient-Related Characteristics Report

Surveyors will continue to review this report, which compiles several OASIS data elements into one report that provides a high-level overview of the HHA patient demographics, home care diagnoses, and agency statistics. Surveyors should identify potential focus areas of concern where the agency's indicators exceed the national reference in the areas of Acute Conditions, Patient Diagnostic Information, and Home Care Diagnoses. Select patients for review and home visits during the survey who be associated with these areas of concern.

Task 3: Information Gathering

The minimum clinical record/sample size for HHA surveys has been revised as follows in Table

1. More clinical records may be reviewed and more home visits conducted as deemed necessary

to adequately assess compliance with the CoPs when deficient practice has been identified during the survey.

Table 1. HHA Survey Sample—Revised

Number of unduplicated skilled care admissions for the 12 months prior to the survey	Active Patient Sample: Record Review Only (No Home Visit)	Active Patient Sample: Record Review with Home Visit	Discharged Patients: Closed Record Review	Total Survey Sample
Less than 300	2	3	2	7
301 - 500	3	4	3	10
501 - 700	4	5	4	13
701 or more	5	7	5	17

Contact: Questions concerning this memorandum may be addressed to: HHA.SCG@cms.hhs.gov and David Escobedo at david.escobedo@cms.hhs.gov.

Effective Date: Immediately. This policy should be communicated with all survey and certification staff, their managers and the State/Regional Office training coordinators within 30 days of this memorandum.

/s/
David R. Wright

Attachment(s):

Attachment A- Revised ASPEN Tags with Level I and Level II Tags Highlighted

Attachment B-Revisions to the Level I and Level II HHA Standard/Partially Extended Survey Standards

cc: Survey and Certification Regional Office Management