**Hospice Update - November 15, 2022**

 Tuesday, November 15, 2022

News and updates to prepare for the new year!

Now that the excitement of a 3.8% increase in Hospice for CY2023 has died down, Hospice can really focus on quality and new payment models. Welcome Hospice to even more public reporting and Star ratings. Just a reminder, if your agency does not have a star rating posted, odds are you have not reached the threshold of 75 completed surveys. CMS is aware of the challenge agencies face with survey participation and is considering a web-based application to increase completed surveys. Stay tuned, stay informed and at ALECC we encourage your agency to continue to provide input to CMS on this topic.

Star ratings are critical for agencies who want to move forward with contracting opportunities and becoming preferred providers within payer networks. Now is the time for your agency to do what it can to begin educating staff on how they can impact survey results. Learn what is acceptable by Medicare to say and what is not through proper education of the staff. If it is your agencies strategic plan for continued growth and to join provider networks, now is the time to focus on all areas that impact quality such as education, employee satisfaction and patient engagement.

VBID – Value-based Insurance Design Model Hospice Benefit Participating Plans for CY 2023 were announced October 26, 2022. Fifteen Medicare Advantage Organizations (MAO’s) will participate in the Hospice Benefit Component, offering 119 plan benefit packages (PBPs).

**Information for Hospice Providers:**

CMS requires participating plans to communicate with hospice providers in its service area.

CMS encourages hospice providers to communicate with participating plans regarding any questions about joining the plan’s network of hospice providers.

For questions about enrollment, billing, claims, and contracting related to enrollees of participating plans, hospice providers should contact the participating MAO. For questions about the Model, please contact CMS at VBID@cms.hhs.gov.

**Top 3 Things Hospices should know with VBID:**

1. You must send all notices and claims to both the participating MAO and your Medicare Administrative Contractor (MAC). The MAO will process payment, and the MAC will process the claims for informational and operational purposes and for CMS to monitor the Model.
2. If you contract to provide hospice services with the plan, be sure to confirm band processing steps before the calendar year begins, as they may be different.

Note: While we encourage you to reach out to participating MAOs about contracting opportunities, you are not required to contract. If you choose not to contract, the participating MAO must continue to pay you at least equivalent to Original Medicare rates for Medicare-covered hospice care.

1. The Model does not permit prior authorization requirements around hospice elections or transitions between different levels of hospice care.

It is that time of year for Strategic Planning. If your agency is recovering from all of the challenges experienced in recent years, it is time to get back on track and review all aspects of what is working for your agency and where optimization is needed. Perhaps it is time to do an agency assessment, a leadership assessment, a board review, and a deep dive look at quality and best practices. Margins are tighter than before, quality is critical, best practices and streamlined processes are required for optimal results. So much to pay attention to, and if we can help at ALECC, our team is here to partner, educate, mentor, and help you elevate your agency to its greatest potential.