

# Medicare Member Health Outcomes Survey (HOS): The Provider Role September 2021

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# VNSNY CHOICE Medicare Star Rating



Every year Medicare rates plans based on a 5-star rating system.

# 2021 New Medicare Plan Benefits

# New 2021 Member Incentive Program

**Members can earn financial rewards for completing quality screenings in 2021:**

- Breast cancer screening (BCS)
- Colorectal cancer screening (COL)
- Comprehensive diabetes care (CDC)
  - Retinal eye exam
  - HgA1c test
- Controlling blood pressure (CBP)
- Statin therapy for patients with cardiovascular disease - Received (SPC)
- Annual wellness visit (AWV) (all members eligible)
- Influenza vaccine (all members eligible)



# THIS IS WHERE YOU BELONG

In the home you love.  
In the community you know.  
In the health plan designed for you.

If you need help to safely live at home, VNSNY CHOICE Total can make it easier to get the care you need. This two-in-one plan combines Medicare and Medicaid Long-Term Care plans for people who need ongoing help with daily activities, such as bathing, cooking, dressing and walking.

### Benefits include:

- **\$0 plan premiums**
- **\$0 co-pays for medical care**
- **\$0 for unlimited transportation to medical appointments**
- **\$0 for skilled nursing, personal care services, rehabilitation therapy and more**
- **Consumer Directed Personal Assistance Services (CDPAS)**














You can also keep your doctors, specialists and home health aide!\*

## Total's New Benefits in 2021

Total has several new benefits to help you live safely in the comfort of your own home, where you belong.

## Below are some benefits you can expect from VNSNY CHOICE Total

### 2021 Benefits Overview

	Monthly plan premium	\$0	
	Medicare Parts A & B services (including doctors, hospitals, clinics, labs)	\$0	
	Medicare Part D services (brand name and generic prescription drugs)	\$0	
	Over-the-counter (OTC) and grocery items	Up to \$1,584/year (\$132 per month)	<b>NEW</b>
	Acupuncture	\$0 for up to 30 visits/year & more**	<b>NEW</b>
	Eye exam/Eyeglasses	\$0 for routine eye exam, \$300/year for eyeglasses (frames and lenses) or contacts	<b>NEW</b>
	Telehealth service	\$0	<b>NEW</b>
	Dental	\$0 for routine and preventative care	
	Transportation	Unlimited to medical appointments (to plan-approved locations)	
	Long-term services and supports (including Home Health Aide, nursing and social work)	\$0	
	Physical therapy	\$0	
	Social Day Care	\$0	
	Worldwide coverage	Up to \$50,000/year for emergency services and urgent care	

\*As long as the provider is in the network.

\*\*Additional acupuncture visits for chronic low back pain covered by Medicare.

# Objectives

- **Overview of the Medicare Health Outcome Survey (HOS)**
  - Discuss the importance of the HOS
    - Medicare STARS rating + Plan-level Frailty Risk Adjustment Score
- **Review HOS in Frailty Risk Adjustment**
  - ADLs + Physical Functioning
- **Review HOS Priority Medicare STARS Measures**
  - Improving Bladder Control
  - Monitoring Physical Activity
  - Falls Prevention
- **Discuss Provider's Role in HOS**
  - Streamline Physical Functioning/ADLs assessments
  - Help member set goals for their daily care/routines and educate on options/resources to meet them

# Medicare Health Outcomes Survey (HOS)

- The Medicare Health Outcomes Survey (HOS) is the first **patient-reported** outcomes measure used to assess the quality of Medicare Advantage Organizations (MAOs).
- The goal of the Medicare HOS is to gather valid, reliable, and clinically meaningful health status data to use in quality improvement activities, pay for performance, program oversight, public reporting, and to improve patient health.
- All managed care organizations with Medicare contracts must participate each year.



# What is the Medicare Health Outcomes Survey (HOS)?

HOS asks patients to assess their health status and the quality of their healthcare over time.

Members	Survey Measures
Report	<ul style="list-style-type: none"> <li>▪ How their overall physical and emotional health has changed over time</li> </ul>
Rate	<ul style="list-style-type: none"> <li>▪ Improving or Maintaining Physical Health</li> <li>▪ Monitoring Physical Activity (<b>*STARS Measure</b>)</li> <li>▪ Improving or Maintaining Mental Health</li> <li>▪ Improving Bladder Control (<b>*STARS Measure</b>)</li> <li>▪ Reducing the Risk of Falling (<b>*STARS Measure</b>)</li> </ul>
When	<ul style="list-style-type: none"> <li>▪ Survey mailed July through November (currently in the field)</li> </ul>



# How is the HOS different from other assessments?

## HOS vs. UAS/SPOC/Other Health Assessments



HOS asks patients to **assess themselves** (vs. a formal assessment by a health care provider).

HOS asks patients to specifically detail **how their health impacts their daily living** and their ability to do what they love/want to do daily (i.e., cooking, walking pet, etc.).

HOS asks the patient if **any health care provider discussed options available** so that they can continue to, or start to, do what they want to do daily.

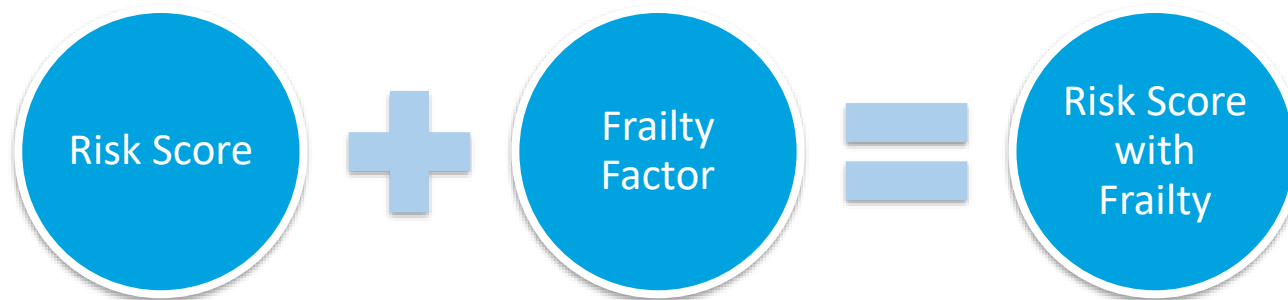
# Why is HOS important?

- Medicare uses our members' survey responses to assess the quality of our CHOICE Medicaid Advantage Plus (MAP) Plan.
- Medicare analysts use patients' HOS response results when determining risk adjustments to their Medicare budget/MAP premium (i.e., ADLs + Physical Functioning).
- HOS is used to collect three HEDIS® STARS Quality Measures:
  - Management of Urinary Incontinence in Older Adults
  - Physical Activity in Older Adults
  - Fall Risk Management
- Several HOS measures are included in the Star Ratings for MAP Quality Bonus Payments.
- Patients might use HOS results to compare health plans.

# **HOS Frailty Factor: Annual Medicare Risk Adjustment**

# Risk Adjustment Frailty Score

- The HOS survey is used to measure how the care provided by MAOs affects the functional status of their enrollees.
- Frailty scores are calculated using the limitation on activities of daily living (ADL) reported by a plan's enrollees, based on the Medicare Health Outcomes Survey (HOS) from the year prior to the payment year.
- CMS uses the risk adjustment models to calculate a risk score for each beneficiary. Calculation of the risk score requires pulling data from many sources.
- If applicable, Frailty factor is added to the Risk Score Calculation methodology.



# Contract Level Frailty Score

The Frailty Score is calculated at the Medicare Plan contract level using survey data and applied to the patients who are 55 or over and living in the community within the eligible organization.

Based on the CMS rule specified, the Frailty Score does not apply to members who are 54 or younger or who have Institutional status as the risk adjustment factor type.

Patients in the ESRD model also do not receive the additional frailty adjustment.

Separate estimations are done for the Medicaid and non-Medicaid subpopulations.

# HOS Frailty Questions for Risk Adjustment

The frailty model captures costs associated with functional impairments in the frail elderly using limitations on ADLs and physical functioning (**PFADL**) to measure a dimension of health status ***not captured by diagnoses***.

The specific **ADLs questions include**:

1. Bathing
2. Dressing
3. Eating
4. Getting in or out of chairs
5. Walking
6. Using the toilet

The specific **physical functioning questions include**:

***Does your health now limit you in:***

1. Moderate activities (pushing vacuum cleaner, bowling, or playing golf)
2. Ability to climb several stairs

\* For PY2021, 2020 HOS survey results are used:

- 0 ADLs result in negative impact to risk score; frailty score calculated based on 2-6 ADLs from members surveyed.

# HCC Risk Adjustment: Why is Frailty Score important?

No Conditions Coded	RAF	Some Conditions Coded	RAF	All Conditions Coded	RAF
76 year old female	0.468	76 year old female	0.468	76 year old female	0.468
Medicaid eligible	0.177	Medicaid eligible	0.177	Medicaid eligible	0.177
Diabetes not coded	0	Diabetes no complications	0.118	Diabetes w/vascular complications	0.368
Vascular disease not coded	0	Vascular disease no complications	0.299	Vascular disease w/ complications	0.41
CHF not coded	0	CHF not coded	0	CHF coded	0.368
No disease interaction	0	No disease interaction	0	Disease Interaction Bonus RAF (DM +CHF)	0.182
Patient Total RAF	<b>0.645</b>	Patient Total RAF	<b>1.062</b>	Patient Total RAF	<b>1.973</b>
Yearly Reserve for Care	<b>\$5,418</b>	Yearly Reserve for Care	<b>\$8,921</b>	Yearly Reserve for Care	<b>\$16,573</b>
No ADLs for Plan-wide Frailty Score	<b>-0.093</b>	0-2 ADLs for Plan-wide Frailty Score	<b>+0.105</b>	5-6 ADLs for Plan-wide Frailty Score	<b>+0.420</b>

An inaccurate Plan-wide frailty score can negatively impact the resources/budget for a member’s care.

**Note:** For illustration purposes only. Should not be used for financial inference.

# Q: Do you know how the Medicare HOS impacts risk adjustment?

## A: The HOS impacts Risk Score ‘Frailty Factor’

- The HOS survey is used to measure how the care provided by MAOs affects the functional status of their enrollees.
- Frailty scores are calculated using the limitation on activities of daily living (ADLs) + Physical Functioning as reported by a plan’s enrollees to create the “PFADL” factor from the year prior to the payment year.
- If applicable, Frailty factor is added to the Risk Score Calculation methodology for eligible members, which “builds the Medicare budget” for a member’s care. If the plan-wide factor is inaccurately low, **members with greater care needs may not have sufficient resources for care.**





# The Provider Role

## HOS STARS Quality Measures

Monitoring Physical Activity

Improving Bladder Control

Reducing The Risk Of Falling

## & HOS Frailty Risk Assessment

# Streamlining Medicare Workflows

## HOS STARS Quality Measure: Monitoring Physical Activity & HOS Frailty Risk Assessment

# Streamlining Workflows for all Medicare Payers: on All Measures Related to Physical Functioning

HOS Frailty PFADL Score: 6 ADL Questions

HEDIS COA-Functional Assessment Measure: 5 of same 6 HOS ADL Questions

HOS Frailty PFADL Score: 2 Physical Functioning Questions

HOS Monitoring Physical Activity STARS Measure: 2 Physical Activity Questions

# HOS ADL Questions Meet the HEDIS COA-Functional Assessment Measure

**Note:** Documenting assessment of 5 of 6 same ADLs asked in HOS for the frailty score meets HEDIS COA-Func\_ Assessment

10. Because of a health or physical problem, do you have any difficulty doing the following activities **without special equipment or help from another person?**

a. Bathing

- 1  No, I do not have difficulty
- 2  Yes, I have difficulty
- 3  I am unable to do this activity

b. Dressing

- 1  No, I do not have difficulty
- 2  Yes, I have difficulty
- 3  I am unable to do this activity

c. Eating

- 1  No, I do not have difficulty
- 2  Yes, I have difficulty
- 3  I am unable to do this activity

d. Getting in or out of chairs

- 1  No, I do not have difficulty
- 2  Yes, I have difficulty
- 3  I am unable to do this activity

e. Walking

- 1  No, I do not have difficulty
- 2  Yes, I have difficulty
- 3  I am unable to do this activity

f. Using the toilet

- 1  No, I do not have difficulty
- 2  Yes, I have difficulty
- 3  I am unable to do this activity

# Streamlining Workflows for all Medicare Payers: What's the difference in PF measures?

HOS PFADL Score: 6 ADL Questions

HEDIS COA-Functional Assessment Measure: 5 of same 6 HOS ADL Questions

What's different?

Are you asking and documenting whether patient reports ADL difficulty and whether they attribute it to their health?

# HOS STARS Measure Questions: Monitoring Physical Activity

*In the last 12 months:*

- Did you talk with a doctor or other healthcare provider about your level of exercise or physical activity?
- Did a doctor or other healthcare provider advise you to start, increase, or maintain your level of exercise or physical activity?

# HOS Physical Functioning Questions

Two questions are related to Physical Functioning and are used with ADLs to create the *PFADL for frailty score*:

2. The following items are about activities you might do during a typical day. Does **your health now limit you** in these activities? If so, how much?

a. **Moderate activities**, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf

1  Yes, limited a lot

2  Yes, limited a little

3  No, not limited at all

b. Climbing **several** flights of stairs

1  Yes, limited a lot

2  Yes, limited a little

3  No, not limited at all

# Streamlining Workflows for all Medicare Payers: What's the difference in PF measures?

HOS Frailty PFADL Score: 2  
Physical Functioning Questions

HOS Monitoring Physical Activity  
STARS Measure: 2 Physical  
Activity Questions

What's the difference?

Are you asking and documenting patient's reported level of activity, including exercise, and offering advice on how to increase or maintain?



# Key Takeaways: Physical Functioning Measures

- How are you asking patients about ADLs? Do you query their level of difficulty in completing due to their health to ensure you're recognizing their interpretation of functioning?
- Are you asking them additionally about their ability to engage in physical activities that impact their daily enjoyment of life, i.e., walking the dog, exercise, cooking, gardening?
- Are you providing suggestions on how to maintain or increase their physical activity by educating them on options to help them meet their ADL and daily physical functioning goals, and discussing the benefits of staying active?
- Discuss reasons if member does not engage in activities.
- Standardize EMR tools/checklists to address all PF measures.

***CHOICE Care Management can help with referrals for pain management, PT/OT, community + remote resources for socializing/exercising, DME, and home care coordination on daily routines to meet goals.***

# Q: What tool(s) are you using to assess ADLs and all Physical Functioning Measures?

**A: Does your EMR build have a tool or checklist to address all 4 Physical Functioning Assessments?**

- 6 HOS ADLs Questions (PFADL score) +
  - CPT II codes to close HEDIS COA Functional Assessment Measure
  - 2 HOS Physical Functioning Questions (PFADL score) +
  - STARS Physical Activity Questions



# The Provider Role

## HOS STARS Quality Measure: Improving Bladder Control

# HOS STARS Measure Questions Differ from Other Assessments: Improving Bladder Control

- Many people experience leakage of urine, also called urinary incontinence. In the past six months, have you experienced leaking of urine?
- During the past six months, how much did leaking of urine make you change your daily activities or interfere with your sleep?
- Have you ever talked with a doctor, nurse, or other health care provider about leaking of urine?
- There are many ways to control or manage the leaking of urine, including bladder training exercises, medication, and surgery. Have you ever talked with a doctor, nurse, or other health care provider about any of these approaches?

# Key Takeaways: Improving Bladder Control

- If member has urine leakage, are you asking about what precipitate's leakage: e.g., exercise, coughing, laughing as well as urgency associated with leakage, i.e., only when bladder is full?
- Are you educating them about when to notify you for any change in urine smell/color/appearance?
- Are you asking them how the leakage interferes with their goals for activities so that they can engage in daily activities they enjoy?
- Are you offering them treatments and suggestions to help them meet their goals, e.g., timed voiding/behavioral therapy, limiting fluids and caffeine in the evening, exercise, medications, devices, surgery?

**CHOICE Care Management is available to help with referrals and hygiene supplies, DME that fits in the bathroom, and home care coordination on daily routines to meet goals.**

# The Provider Role

## HOS STARS Quality Measure: Reducing the Risk of Falling

# HOS STARS Measure Questions: Reducing the Risk of Falling

**A fall is when your body goes to the ground without being pushed.**

- In the past 12 months, did you talk with your doctor or other healthcare provider about falling or a problem with balance or walking?
- Did you fall in the past 12 months?
- In the past 12 months have you had a problem with balance or walking?
- Has your doctor or healthcare provider done anything to help you prevent falls or treat problems with walking or balance?

# Key Takeaways: Reducing the Risk of Falling

- What type of tool(s)/EMR build are you using to ask patient about falls, or difficulty with balance or walking? Can it be streamlined to address all PF measures?
- Are you assessing medications/conditions (hearing/vision or chronic pain) that increase falls risk?
- Do you ask how/if fear of falling/balance interferes with daily routines and prevents them from meeting their activity/exercise goals?
- Do you discuss options/treatments to meet patient's goals for activities despite fear of falling:
  - PT, exercise, balance activities (tai chi or yoga) so that they can engage in activities they enjoy
  - DME options (cane, walker, safety bars/rails)

**CHOICE Care Management is available to help with PT/OT referrals, education on falls preventions tips (non-slip footwear/bathroom/shower transfers), coordination of home safety reviews for throw rugs, clutter etc., and to ensure DME needs are met.**



# Summary

- The Medicare Health Outcomes Survey (HOS) is conducted between July and November (currently in the field).
- Measures how Medicare Advantage members assess their own physical and mental health over a two-year period.
- CHOICE uses the HOS findings to identify areas to:
  - Improve the quality of our members' care
  - Identify areas for provider education and engagement

**Thank You**

**Reminder: It's flu season!**

**CHOICE Care Management can assist with  
scheduling vaccinations**





# CHOICE Provider Education Contacts

- Risk + Quality topics webinar registrations
- Individual practice education on your topic choice
- Information on individual practice gaps in care reports or EMR data sharing

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# Visit the VNSNY CHOICE Provider Website!

[vnsnychoice.org/for-health-professionals-overview](https://vnsnychoice.org/for-health-professionals-overview)

- Guideline and Policy Updates
- Provider Toolkit
- Claims, Billing, and Payments
- Credentialing

**Link to telehealth coding guidance:**

[www.vnsnychoice.org/wp-content/uploads/2020/09/CHOICE-Quality-HEDIS-Telehealth-Updates.pdf](https://www.vnsnychoice.org/wp-content/uploads/2020/09/CHOICE-Quality-HEDIS-Telehealth-Updates.pdf)

# References and Resources

## CMS References

### Centers for Medicare & Medicaid Services (CMS) Risk Adjustment

- [www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors](http://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Risk-Adjustors)

### Medicare Managed Care Manual 100-16, Chapter 7 – Risk Adjustment

- [www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/mc86c07.pdf](http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/mc86c07.pdf)

### Customer Service and Support Center (CSSC) Operations- Risk Adjustment Processing System

- [www.csscooperations.com/internet/csscw3.nsf/T/Encounter%20and%20Risk%20Adjustment%20Program%20\(Part%20C\)](http://www.csscooperations.com/internet/csscw3.nsf/T/Encounter%20and%20Risk%20Adjustment%20Program%20(Part%20C))

## Risk Adjustment Resources

### ICD-10-CM Official Guidelines for Coding and Reporting

- [www.cms.gov/files/document/2021-coding-guidelines-updated-12162020.pdf](http://www.cms.gov/files/document/2021-coding-guidelines-updated-12162020.pdf)

### ICD10 HCC Model Mappings

- [www.cms.gov/medicarehealth-plansmedicareadvtspecratestatsrisk-adjustors/2021-model-softwareicd-10-mappings](http://www.cms.gov/medicarehealth-plansmedicareadvtspecratestatsrisk-adjustors/2021-model-softwareicd-10-mappings)

# Appendix

## Additional HOS Questions:

Maintaining Mental Health

Maintaining Physical Health

**\*Note:** these HOS questions are not reported STARS Measures in CY 2021 or CY 2022.

# HOS Question:

## Physical and Emotional Health vs. Last Year

**Compared to one year ago, how would you rate your physical health in general:**

- Much better
- Slightly better
- About the same
- Slightly worse
- Much worse

**Compared to one year ago, how would you rate your emotional problems (such as feeling anxious, depressed or irritable), in general now:**

- Much better
- Slightly better
- About the same
- Slightly worse
- Much worse



# HOS Question: Improving or Maintaining Physical Health

The following items are about activities you might do during a typical day.

- Does your health now limit you in these activities? If so, how much?
  - Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf
  - Climbing several flights of stairs

# HOS Question:

## Improving or Maintaining Physical Health (cont.)

- During the past 4 weeks, how much of the time has your physical health interfered with your social activities (like visiting with friends, relatives, etc.)?
- During the past 4 weeks, how much did pain interfere with your normal work or activities?
- During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health?
  - Accomplished less than you would like as a result of your physical health?
  - Were limited in the kind of work or other activities as a result of your physical health?

# HOS Question:

## Improving or Maintaining Mental Health

- Compared to one year ago, how would you rate your emotional problems (such as feeling anxious, depressed, or irritable) in general now?
  
- How much of the time during the past 4 weeks:
  - Have you felt calm and peaceful?
  - Did you have a lot of energy?
  - Have you felt downhearted and blue?
  
- During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities (socializing) as a result of any emotional problems (such as feeling depressed or anxious)?
  - Accomplished less than you would like as a result of any emotional problems
  - Didn't do work or other activities as carefully as usual as a result of any emotional problems