



PEPPER Sessions Chapter 5 Top Hospice

During this session, I'm going to review the hospice top terminal diagnoses report, as well as the hospice live discharges by type report. In the *Hospice PEPPER*, you will have two additional reports that are summarizing information for your hospice. The hospice top terminal diagnoses report identifies the top terminal clinical classification system, or CCS, diagnosis categories for beneficiaries that died or decedents for the most recent fiscal year. And it reports these decedent diagnoses in several terminal CCS diagnoses categories, which I've listed on this slide. So we have cancer, which summarizes the CCS categories 11 through 47. Circulatory heart disease, which is categories 96 through 108 and 114 through 121. Dementia, which is categories 653. Respiratory disease, categories 127 through 134. And stroke, categories 109 to 113. And in the PEPPER, we will identify for you the number of decedents for each of these categories, the proportion of total decedents, and the average length of stay for each of those categories for your hospice.

Now to calculate these statistics, we use the Clinical Classification System software to collapse the principle diagnosis code from the final claim into these general categories. And if you'd like more information on the CCS, you can find it at this link on the slide. I do want to stress that both this report as well as the live discharges by type report, these are supplemental reports. They don't have any bearing on your outlier status, or your risk for improper payment. We put them together as information that you might find useful in helping you to assess the statistics in your PEPPER. And you'll also see in your PEPPER a jurisdiction-level report that presents the same types of statistics for the MAC jurisdiction. And we also include in that report the average length of stay. So we'll look at that in just a moment.

We also include a live discharges by type report. And this report will identify the types of live discharges for the hospice over the most recent three fiscal years. So essentially, all three of the time periods included in the release of the PEPPER are summarized, rolled up for this live discharges by type report. And we'll identify for you the live discharges at your hospice in these five categories — no longer terminally ill, beneficiary revocation, instances where the beneficiary moved out of the service area, beneficiary transfers, and when the beneficiary was discharged for cause.

In this report, we identify the number for each of those categories, the proportion of all live discharges, and the average length of stay. We also include in this report the overall live discharge rate. And again, this is a supplemental report that doesn't have any bearing on risk status. And we also have a jurisdiction-level report that presents the same type of information for the MAC jurisdiction.

Let me go ahead and share a sample report. So this is from a *Hospice PEPPER*. And you will find this report on the hospice top terminal diagnoses tab within your PEPPER. So here you'll see it's titled hospice top terminal CCS diagnosis categories for the most recent fiscal year. And for each of these five categories, we identify the total number of decedents for each of those categories. And this is sorted in descending order on this variable.

We identify the proportion of decedents for each category to the total decedents, and also the average length of stay for each of the diagnosis categories. We have overall the top terminal CCS categories, and

then all CCS categories. And below here is some information that reminds you how we use the CCS to classify these categories, and that we use the CCS software to generate these statistics.

I also want to mention that these categories will display on this report as long as there are at least 11 beneficiaries or decedents in each category for the most recent fiscal year.

And we can click on the jurisdiction top terminal diagnoses tab. And here is where we find the jurisdiction-level information. It is presented in the same format as the hospice-specific report. We have added here the jurisdiction average length of stay. And we also include the national average length of stay.

We click on the hospice live discharges by type tab. This brings us to the hospice level report that, again, identifies the live discharges by type over the most recent three fiscal years. And so this particular hospice had what we call reportable data, count of 11 or more episodes for the most recent three fiscal years for three of these live discharge categories. You can see the total number of beneficiary episodes no longer terminally ill, the number that were revocations, and the number that were beneficiary transfers.

We then calculate the proportion of live discharge episodes that are comprised by each of those categories. And we calculate the average length of stay at the hospice for each of those categories. In this cell, you will find the overall live discharge rate. So this is the live discharge rate identifying the proportion of all episodes ending by death or alive that were discharged alive. So for this particular hospice overall, 11.5% is the average live discharge rate.

Below here is a note letting you know how we identify these live charges, as well as how we calculate the average length of stay. By dividing the total number of days beneficiaries receive service from the hospice by the total number of that type of live discharges.

And then if we click on the jurisdiction live discharge by type report, we can see the information at the jurisdiction level for the total number of episodes discharged alive for these categories. The proportion of live discharge episodes, the jurisdiction level average length of stay, and then we also include the national average length of stay. And this information might be helpful when comparing your statistics to the jurisdiction or national level statistics.