



BACKGROUND ON

HOME HEALTH COMPARE

Home Health Compare is a quality measurement initiative spearheaded by the U.S. Department of Health and Human Services and its Centers for Medicare & Medicaid Services (CMS). The data relates only to Medicare-certified home health care providers.

Eleven quality measures are taken into account as a way to help consumers and their families choose the best home health agency for their needs. The information also allows agencies to examine their care outcomes based on state and national averages so they can target potential areas for improvement.

Newspapers around the country will list 3 of those 11 measures for a sampling of the approximately 7,000 Medicare-certified home health agencies. This national rollout follows an eight-state pilot program launched in April 2003 by CMS.

Regularly updated information will be easily accessible to consumers and their families by calling Medicare's toll-free help line at 1-800-633-4227, or by visiting the government's *Home Health Compare* website at <http://www.medicare.gov/HHCompare/Home.asp>.

The 11 quality measures include:

- Four measures related to mobility, such as getting better at walking, getting in and out of bed, getting to and from the toilet, and experiencing less pain when moving;
- Four measures related to meeting basic daily needs, such as getting better at dressing, getting better at bathing, maintaining bathing capability, and taking oral medications;
- Two measures related to medical emergencies, such as being admitted to the hospital and requiring unplanned medical care;
- One measure related to improvement in mental health status, such as being confused less often.

Quality measures used in the *Home Health Compare* are based on information collected from the CMS-mandated Outcome and Assessment Information Set (OASIS). OASIS data is collected by home health agencies at various points during care. The measures are risk adjusted for factor differences, such as home health agencies that admit more difficult and complex care patients. Adjusting for risk allows for a more accurate comparison.

As part of this effort, Medicare's Quality Improvement Organizations (QIO's) (formerly known as Peer Review Organizations) have been working with home health agencies to improve quality of care. QIO's will help consumers understand and effectively use *Home Health Compare* data. To locate each state's QIO, visit the American Health Quality Association at www.ahqa.org and click on the locator.