

LEAD THE CHARGE: GUIDING YOUR TEAM TO HHVBP EXCELLENCE IN 2026



Tennessee Association
for Home Care

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Melinda A. Gaboury, COS-C

MELINDA A. GABOURY, WITH MORE THAN 34 YEARS IN HOME CARE, HAS OVER 24 YEARS OF EXECUTIVE SPEAKING AND EDUCATING EXPERIENCE, INCLUDING EXTENSIVE DAY TO DAY INTERACTION WITH HOME CARE AND HOSPICE PROFESSIONALS. SHE ROUTINELY CONDUCTS HOME CARE AND HOSPICE REIMBURSEMENT WORKSHOPS AND SPEAKS AT STATE ASSOCIATION MEETINGS THROUGHOUT THE COUNTRY. MELINDA HAS PROFOUND EXPERIENCE IN MEDICARE PDGM TRAINING, BILLING, COLLECTIONS, CASE-MIX CALCULATIONS, CHART REVIEWS AND DUE DILIGENCE. UPIC, RA, ADR & TPE APPEALS WITH ALL MEDICARE MACS HAVE BECOME THE FOREFRONT OF MELINDA'S CURRENT IMPACT ON THE INDUSTRY. SHE IS CURRENTLY SERVING AS CHAIR OF THE THE ALLIANCE/HHFMA ADVISORY BOARD AND WORK GROUP AND IS SERVING ON THE BOARD OF THE HOME CARE ASSOCIATION OF FLORIDA AND THE TENNESSEE ASSOCIATION FOR HOME CARE. MELINDA IS ALSO THE AUTHOR OF THE HOME HEALTH OASIS GUIDE TO OASIS-E AND HOME HEALTH BILLING ANSWERS, 2025.

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LEARNING OUTCOMES

Upon completing this session, participants will be able to:

- Identify Changes in the Home Health VBP Model for 2026
- Outline the structure of the newly added VBP Items
- Analyze the agency's results from reports
- Detail Best Practices for Improving Scores in HHVBP



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Performance Feedback Reports: Timeline

Report Title (Month Issued)	OASIS-based Measures	Claims-based and HHCAHPS Survey-based Measures
April 2026 IPR	12 months ending 12/31/2025	12 months ending 9/30/2025
July 2026 IPR	12 months ending 3/31/2026	12 months ending 12/31/2025
October 2026 IPR	12 months ending 6/30/2026	12 months ending 3/31/2026
January 2027 IPR	12 months ending 9/30/2026	12 months ending 6/30/2026
April 2027 IPR	12 months ending 12/31/2026	12 months ending 9/30/2026
July 2027 IPR	12 months ending 3/31/2027	12 months ending 12/31/2026
Annual TPS and Payment Adjustment Report (Preview version, Aug 2027)	12 months ending 12/31/2026	12 months ending 12/31/2026



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ACHIEVEMENT

Achievement Points

Measure	Performance Year Data Period [a] (12-Month End Date)	Your HHA's Performance Year Measure Value [b]	Your Cohort's Achievement Threshold [c]	Your Cohort's Benchmark [d]	Your HHA's Achievement Points [e]	Maximum Possible Achievement Points
OASIS-based Measures						
Discharge Function (DC Function)	06-30-2025	48.120	62.350	83.179	0.000	10.000
Improvement in Dyspnea	06-30-2025	94.452	89.672	99.422	4.903	10.000
Improvement in Management of Oral Medications	06-30-2025	91.534	85.175	98.746	4.686	10.000
Claims-based Measures						
Discharge to Community – Post Acute Care (DTC-PAC)	03-31-2025	89.079	85.161	95.089	3.946	10.000
Potentially Preventable Hospitalizations (PPH)	03-31-2025	12.145	10.003	6.302	0.000	10.000
HHCAHPS Survey-based Measures						
Care of Patients	03-31-2025	85.107	89.507	94.585	0.000	10.000
Communications Between Providers and Patients	03-31-2025	86.054	86.821	93.192	0.000	10.000
Specific Care Issues	03-31-2025	61.448	82.373	91.297	0.000	10.000
Overall Rating of Home Health Care	03-31-2025	82.659	86.328	94.687	0.000	10.000
Willingness to Recommend the Agency	03-31-2025	78.246	80.226	91.391	0.000	10.000



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IMPROVEMENT

Improvement Points

Measure	Performance Year Data Period [a] (12-Month End Date)	Baseline Year Data Period [b] (12-Month End Date)	Your HHA's Performance Year Measure Value [c]	Your HHA's Improvement Threshold [d]	Your Cohort's Benchmark [e]	Your HHA's Improvement Points [f]	Maximum Possible Improvement Points
OASIS-based Measures							
Discharge Function (DC Function)	06-30-2025	12-31-2023	48.120	65.710	83.179	0.000	9.000
Improvement in Dyspnea	06-30-2025	12-31-2023	94.452	83.989	99.422	6.102	9.000
Improvement in Management of Oral Medications	06-30-2025	12-31-2023	91.534	84.337	98.746	4.495	9.000
Claims-based Measures							
Discharge to Community – Post Acute Care (DTC-PAC)	03-31-2025	12-31-2023	89.079	92.106	95.089	0.000	9.000
Potentially Preventable Hospitalizations (PPH)	03-31-2025	12-31-2023	12.145	8.313	6.302	0.000	9.000
HHCAHPS Survey-based Measures							
Care of Patients	03-31-2025	12-31-2023	85.107	84.268	94.585	0.732	9.000
Communications Between Providers and Patients	03-31-2025	12-31-2023	86.054	85.424	93.192	0.730	9.000
Specific Care Issues	03-31-2025	12-31-2023	61.448	77.006	91.297	0.000	9.000
Overall Rating of Home Health Care	03-31-2025	12-31-2023	82.659	77.696	94.687	2.629	9.000
Willingness to Recommend the Agency	03-31-2025	12-31-2023	78.246	71.548	91.391	3.038	9.000



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CARE POINTS

Care Points

Measure	Sufficient Data for Measure Inclusion?	Your HHA's Achievement Points	Your HHA's Improvement Points	Your HHA's Care Points [a]	Your HHA's Percentile Ranking Within Your HHA's Cohort [b]
OASIS-based Measures					
Discharge Function (DC Function)	Yes	0.000	0.000	0.000	<25
Improvement in Dyspnea	Yes	4.903	6.102	6.102	50-74
Improvement in Management of Oral Medications	Yes	4.686	4.495	4.686	50-74
Claims-based Measures					
Discharge to Community – Post Acute Care (DTC-PAC)	Yes	3.946	0.000	3.946	50-74
Potentially Preventable Hospitalizations (PPH)	Yes	0.000	0.000	0.000	<25
HHCAHPS Survey-based Measures					
Care of Patients	Yes	0.000	0.732	0.732	25-49
Communications Between Providers and Patients	Yes	0.000	0.730	0.730	25-49
Specific Care Issues	Yes	0.000	0.000	0.000	<25
Overall Rating of Home Health Care	Yes	0.000	2.629	2.629	50-74
Willingness to Recommend the Agency	Yes	0.000	3.038	3.038	50-74
Number of Measures Included	10		Summed Care Points:	21.863	25-49



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Measure Scorecard

Measure	Your HHA's Care Points	Maximum Possible Points	Measure Weight [a]	Your HHA's Weighted Measure Points [b]
OASIS-based Measures				
Discharge Function (DC Function)	6.318	10.000	20.000	12.636
Improvement in Dyspnea	3.051	10.000	6.000	1.831
Improvement in Management of Oral Medications	4.970	10.000	9.000	4.473
Sum of OASIS-based Measures	14.339	30.000	35.000	18.940
Claims-based Measures				
Discharge to Community – Post Acute Care (DTC-PAC)	0.000	10.000	9.000	0.000
Potentially Preventable Hospitalizations (PPH)	0.000	10.000	26.000	0.000
Sum of Claims-based Measures	0.000	20.000	35.000	0.000
HHCAHPS Survey-based Measures				
Care of Patients	3.121	10.000	6.000	1.873
Communications Between Providers and Patients	4.577	10.000	6.000	2.746
Specific Care Issues	0.000	10.000	6.000	0.000
Overall Rating of Home Health Care	2.188	10.000	6.000	1.313
Willingness to Recommend the Agency	2.277	10.000	6.000	1.366
Sum of HHCAHPS Survey-based Measures	12.163	50.000	30.000	7.298
Sum of All Measures	26.502	100.000	100.000	26.237

Total Performance Score (TPS)	
Number of Measures Included	10
Your HHA's Summed Care Points	26.502
Your HHA's Interim TPS	26.237
Percentile Ranking within Your HHA's Cohort [c]	25-49



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PERCENTILE RANKINGS

TPS Statistics for Your HHA's Cohort	
Number of HHAs in Your HHA's Cohort	6,661
25th Percentile	19.053
50th Percentile	30.523
75th Percentile	42.567
99th Percentile	74.321



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2025 ANNUAL PERFORMANCE REPORT (2024 DATA)

Performance Year	CY 2024
Maximum Payment Adjustment Percentage	5.000%
Payment Adjustment Application Year	CY 2026
Your HHA's Final TPS-Adjusted Payment Percentage	0.070%

Annual Payment Adjustment Calculation

	(C1)	Step 1 (C2)	Step 2 (C3)	Step 3 (C4)	Step 4 (C5)	Step 5 (C6)	Step 6 (C7)	Step 7 (C8)
	Total Performance Score (TPS)	Prior Year Payment	Unadjusted Payment Amount 5% x (C2)	TPS-Adjusted Payment Amount (C1/100) x (C3)	Linear Exchange Function (LEF) Ratio Total (C3)/Total (C4)	Final TPS-Adjusted Payment Amount (C4) x (C5)	TPS-Adjusted Payment Percentage (C6)/(C2)	Final TPS-Adjusted Payment Percentage (C7) - 5%
Your HHA:	32.473	\$476,806	\$23,840	\$7,742	3.123	\$24,175	5.070%	0.070%
Your HHA's Cohort (all HHAs):	32.233	\$16,124,213,204	\$806,210,660	\$258,179,738	3.123	\$806,210,639	5.000%	-

The all HHAs TPS above is the AVERAGE TPS for the entire cohort!
This is DIFFERENT than the percentile rankings!



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FINAL ACHIEVEMENT THRESHOLDS 2022

Final Achievement Thresholds and Benchmarks

Measure	Data Period [b] (12-Month End Date)	Achievement Threshold [c]		Benchmark [c]	
		Smaller-volume Cohort	Larger-volume Cohort	Smaller-volume Cohort	Larger-volume Cohort
OASIS-based Measures					
Discharged to Community	12-31-2022	66.012	72.652	88.914	84.249
Improvement in Dyspnea	12-31-2022	74.818	86.305	99.991	98.512
Improvement in Management of Oral Medications	12-31-2022	68.978	80.990	99.409	97.899
Total Normalized Composite (TNC) Change in Mobility	12-31-2022	0.605	0.744	0.987	1.011
Total Normalized Composite (TNC) Change in Self-Care	12-31-2022	1.726	2.123	2.773	2.733
Claims-based Measures					
Acute Care Hospitalizations	12-31-2022	12.011	13.907	4.869	7.773
Emergency Department Use Without Hospitalization	12-31-2022	8.327	11.782	1.245	4.689
HHCAHPS Survey-based Measures					
Care of Patients	12-31-2022	-	89.254	-	94.448
Communications Between Providers and Patients	12-31-2022	-	86.626	-	93.036
Specific Care Issues	12-31-2022	-	82.048	-	91.198
Overall Rating of Home Health Care	12-31-2022	-	85.941	-	94.337
Willingness to Recommend the Agency	12-31-2022	-	79.986	-	91.202



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FINAL ACHIEVEMENT THRESHOLDS 2023

CY 2025 Measure Set: Final Achievement Thresholds and Benchmarks

Measure	Data Period [b]	Achievement Threshold [c]		Benchmark [c]	
		Smaller-volume Cohort	Larger-volume Cohort	Smaller-volume Cohort	Larger-volume Cohort
OASIS-based Measures					
Discharge Function (DC Function)	12-31-2023	51.355	62.350	91.426	83.179
Improvement in Dyspnea	12-31-2023	83.260	89.672	100.000	99.422
Improvement in Management of Oral Medications	12-31-2023	73.666	85.175	99.997	98.746
Claims-based Measures					
Discharge to Community – Post Acute Care (DTC-PAC)	12-31-2023	75.665	85.161	93.536	95.089
Potentially Preventable Hospitalizations (PPH)	12-31-2023	10.066	10.003	7.565	6.302
HHCAHPS Survey-based Measures					
Care of Patients	12-31-2023	-	89.507	-	94.585
Communications Between Providers and Patients	12-31-2023	-	86.821	-	93.192
Specific Care Issues	12-31-2023	-	82.373	-	91.297
Overall Rating of Home Health Care	12-31-2023	-	86.328	-	94.687
Willingness to Recommend the Agency	12-31-2023	-	80.226	-	91.391



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M1800 ITEMS ADDED 2026

Data Sources - This QM is calculated using data from OASIS:

M1810 Upper Body Dressing, M1820 Lower Body, M1830 Bathing

- M1700 Cognitive Functioning
- M1710 When Confused
- M1720 When Anxious
- M2420 Discharge Disposition
- M0100 Reason for Assessment



HOW AM I DOING ON M1800 ITEMS?

Performance Summary for TNC Change Measures [b]

Your HHA's count of eligible quality episodes [c]	173					
OASIS Item [d]	Changes in OASIS Item Responses between SOC/ROC and EOC as a Percent of Eligible Quality Episodes [e]					
	YOUR HHA			AVERAGE FOR YOUR HHA'S COHORT [f]		
	% No Change	% Positive Change	% Negative Change	% No Change	% Positive Change	% Negative Change
Total Normalized Composite (TNC) Change in Mobility						
M1840 Toilet Transferring (0-4)	24%	72%	4%	27%	72%	1%
M1850 Transferring (0-5)	18%	76%	5%	20%	79%	1%
M1860 Ambulation/Locomotion (0-6)	25%	69%	6%	19%	80%	1%
Total Normalized Composite (TNC) Change in Self-Care						
M1800 Grooming (0-3)	23%	75%	2%	18%	81%	1%
M1810 Ability to Dress Upper Body (0-3)	20%	78%	2%	17%	82%	1%
M1820 Ability to Dress Lower Body (0-3)	29%	69%	2%	18%	81%	1%
M1830 Bathing (0-6)	18%	78%	3%	15%	84%	1%
M1845 Toileting Hygiene (0-3)	21%	77%	2%	18%	81%	1%
M1870 Feeding or Eating (0-5)	46%	54%	1%	41%	58%	2%



MEDICARE SPENDING PER BENEFICIARY

The MSPB-PAC measure evaluates HH resource use relative to the resource use of the national median of all HH providers. Specifically, the measure assesses the Medicare spending performed by the HHA and other health care providers during an MSPB-PAC episode.

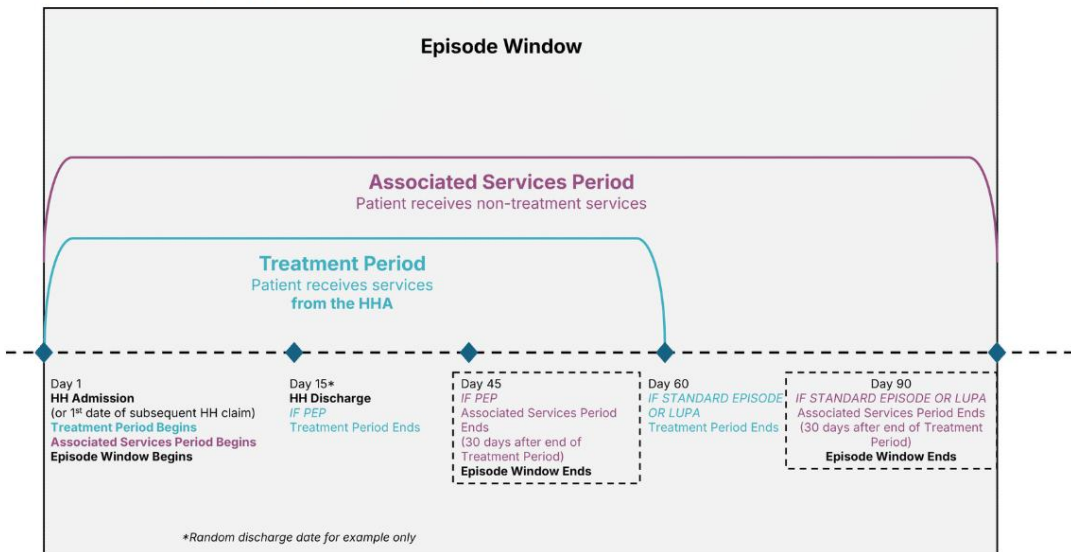
MSPB-PAC measure encourages improved coordination of care by holding HHAs accountable for Medicare resource use within an “episode of care” (episode). This episode includes the period when a patient is directly under an HHA’s care, as well as an associated services period, which ends 30 days after the last day of the episode’s treatment period that may reflect and be influenced by the services the agency provided. Evaluating resource use within an episode creates a continuum of accountability.

$$\frac{\text{MSPB-PAC Amount}_i}{\text{National Median MSPB-PAC Amount}}$$



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MSPB-PAC Example of Components



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MEDICARE SPENDING PER BENEFICIARY

An MSPB-PAC measure result of < 1 indicates that the agency's resource use is less than that of the national median for HHAs during the performance period.

The following services are **excluded** from the episode from both the treatment and associated services period:

- Planned hospital admissions
- Routine management of certain preexisting chronic conditions (e.g., dialysis for end-stage renal disease, enzyme treatments for genetic conditions, treatment for preexisting cancers, and treatment for organ transplants)
- Some routine screening and health care maintenance (e.g., colonoscopy and mammograms)
- Immune modulating medications (e.g., immunosuppressants for organ transplant or rheumatoid arthritis)



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TABLE 34--CY 2025 AND ~~PROPOSED~~ INDIVIDUAL MEASURE WEIGHTS AND CATEGORY WEIGHTS FOR THE EXPANDED HHVBP MODEL

Measure	CY 2025 Measure Weights		Proposed Measure Weights	
	Larger-Volume Cohort	Smaller-Volume Cohort	Larger-Volume Cohort	Smaller-Volume Cohort
Improvement in Dyspnea	6.00%	8.57%	7.00%	8.75%
Improvement in Management of Oral Medications	9.00%	12.86%	11.00%	13.75%
Discharge Function Score (DC Function)	20.00%	28.57%	15.00%	18.75%
Improvement in Bathing	-	-	3.50%	4.38%
Improvement in Upper Body Dressing	-	-	1.75%	2.19%
Improvement in Lower Body Dressing	-	-	1.75%	2.19%
Sum of OASIS-based Measures	35.00%	50.00%	40.00%	50.00%
Home Health within-stay Potentially Preventable Hospitalization (PPH)	26.00%	37.14%	15.00%	18.75%
Discharge to Community – Post Acute Care (DTC-PAC)	9.00%	12.86%	15.00%	18.75%
Medicare Spending Per Beneficiary- Post-Acute Care (MSPB-PAC)	-	-	10.00%	12.50%
Sum of Claims-based measures	35.00%	50.00%	40.00%	50.00%
Care of Patients	6.00%	0.00%	-	-
Communication Between Providers and Patients	6.00%	0.00%	-	-
Specific Care Issues	6.00%	0.00%	-	-
Overall Rating of Home Health Care	6.00%	0.00%	10.00%	0.00%
Willingness to Recommend the Agency	6.00%	0.00%	10.00%	0.00%
Sum of HHCAHPS Survey-based measures	30.00%	0.00%	20.00%	0.00%
Sum of All Measures	100.00%	100.00%	100.00%	100.00%



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OASIS & HHVBP

Exhibit 6. Payers Included in the Expanded HHVBP Model

Measure Category	Payer			
	Medicare FFS	Medicare Advantage	Medicaid FFS	Medicaid Managed Care
OASIS-based*	X	X	X	X
Claims-based	X			
HHCAHPS Survey-based	X	X	X	X

*Although HHAs are required to collect and submit OASIS data on all patients, regardless of payer effective 7/1/2025 (with a voluntary phase-in period of 1/1/2025 – 6/30/2025), the OASIS-based quality measures in the expanded HHVBP Model will continue to report only data for Medicare FFS, Medicare Advantage (Medicare managed care), Medicaid, and Medicaid managed care. CMS will monitor the all-payer OASIS data and will notify providers when decisions are made for future uses for quality or payment purposes, including if, when or how non-Medicare/non-Medicaid OASIS data will be used for the expanded HHVBP Model.



IMPROVING HHVBP RESULTS

Tip #1: Define HHVBP Goals, Expectations and Responsibilities

Define your expectations for staff members and set goals based on the measures. Incorporate these measures into score cards and utilize new industry benchmarks to measure your progress. This can be done for the HHCAHPS Star Rating as well

Tip #2: Utilize a Team Approach

Assign a team/individual to oversee the HHVBP program. The team/individual is responsible for assessing staff education needs, facilitating staff training and instituting a culture within your organization that focuses on patient outcomes.

This person should be the one or assigns someone to conducts surveys of your own, follow up with patients and caregivers after complaints, etc.

Tip #3: Educate ALL Staff

Educate the entire agency, especially field staff teams, on the HHCAHPS survey and reports, and all other measures your agency is struggling with. Make sure they understand what the patient is being asked to rate and incorporate actual survey language into their daily communications with patients.



IMPROVING HHVBP RESULTS

Tip #4: Educate Patients/Caregivers - HHCAHPS

Advise patients that they may receive a HHCAHPS survey in the mail. Tell them that you value their feedback and cite examples of how your agency has utilized patient feedback in the past to improve quality of care to patients.

Tip #5: Evaluate Policies & Procedures

Evaluate how your current policies and procedures relate to your results on the HHVBP measures. Create or refine policies to address needed improvements and raise HHVBP scores.

Examples might include: Policy changes that fit specific HHCAHPS issues, Developing a strict policy on how and when complaint calls are handled, Enhancing greatly the OASIS Quality Review Process

Tip #6: Keep Track of Reported Scores

Utilize HHCAHPS Star Ratings & HHVBP Scores to focus on your publicly reported scores, and continually strive to improve these scores.





Have any questions?

Scan the QR Code to
schedule a call!

***Thank You for
Participating!***

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