AXXESS Hospice

Hospice VBID: Networking to Build a Stronger Future

As a part of the larger Centers for Medicare and Medicaid Services (CMS) Medicare Advantage Value-Based Insurance Design Model (VBID), the Hospice VBID Benefit component has been extended through 2030. As the model continues to grow and evolve, so must hospice providers that wish to thrive and grow in the markets that they serve. With each passing year, the VBID model continues to allow participating Medicare Advantage Organizations (MAOs) more control over which hospice providers their members can use when they become hospice eligible. Understanding these restrictions today will help organizations plan for tomorrow.

Transitional Concurrent Care

Fundamental to the model's goal of facilitating the transition from curative to supportive and palliative care, the provision of transitional care requires the hospice, other care providers and the MAO to carefully track and report expenditures related to the transitional care provided for enrollees. For this reason, transitional care is limited to enrollees that are receiving hospice care from an in-network provider. When collaborating with an MAO to provide transitional concurrent care, according to CMS, it is a best practice to amend the election statement to include information about what clinically-appropriate transitional care services may be provided and any cost that may be incurred by these services.

Supplemental Benefits

Designed to provide relief and to maintain the overall function of the hospice patient, supplemental benefits extend beyond the traditional Medicare Part A Hospice benefit. Supplemental benefits may include but are not limited to: adult day care services, meals, transportation and caregiver support extending beyond the traditional Medicare Part A Hospice benefit. CMS may permit participating MAOs to limit supplemental benefits to in-network providers to allow for uniformity in the management of hospice supplemental benefits. Hospice organizations should consider if and how they can support the provision of supplemental benefits as a part of contracting with a MAO. Use caution to ensure that the supplemental benefits offered are not outside of the scope of practice for the hospice or its employees.

Strengthening Relationships

Since the introduction of hospice into the VBID model, MAOs have been building and strengthening relationships with hospice organizations providing care in which the MAO is contracted. Beginning in 2026, these relationships will serve as the springboard for the MAOs to restrict hospice enrollee admissions to organizations that are in-network.

Innovative Partnerships

To meet the requirements of the model, participating MAOs must have administrative processes in place to ensure that hospice claims are processed in a timely manner, including Notices of Election, Notices of Termination/Revocation related to hospice coverage, as well as ensuring timely and accurate payments to hospice providers.

Personnel and sufficient systems to:

- Financial
- Communication
- Furnishing of services
- Quality improvement program

MAOs and hospices have flexibility to determine and develop administrative functionalities that better serve both parties. For example, transmitting the NOEs and NOTRs may be submitted through a partnership clearinghouse, by fax or mail depending on what best meets the needs of the hospice and MAO, while also meeting the requirements for the MAOs participating in the model.

About The Author

Zaundra Ellis is the Vice President of Hospice Professional Services for Axxess. She leverages her many years of expertise in the hospice industry to create a software solution that is easy to use and allows clients to be clinically, administratively and financially compliant. Prior to joining Axxess, Zaundra served as the Executive Director for Kindred Hospice and Heart to Heart hospice organizations across Texas. In this role, she oversaw a hospice house, created and implemented a companywide QAPI program for an organization that served more than 2,500 patients, and used her experience to create operations thatimproved compliance and maximized reimbursements.

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