

2018 Hospice QRP Spotlight & Announcements

March 02, 2018

Hospice Provider Preview Reports Now Available

Hospice provider preview reports and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® provider preview reports are now available. These are two separate reports available in your Certification and Survey Provider Enhanced Reports (CASPER) folder.

Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from Quarter 3- 2016 to Quarter 2-2017 and their facility-level CAHPS® survey results from Quarter 3, 2015 to Quarter 2, 2017.

Providers have 30-days to review their HIS and CAHPS® results (March 1, 2018 through March 30, 2018).

For more information on how to access these reports, view the [Public Reporting: Background and Announcements](#) webpage.

February 23, 2018

Hurricane Nate - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs to acute care hospitals, inpatient psychiatric facilities, skilled nursing facilities, home health agencies, hospices, inpatient rehabilitation facilities, long-term care hospitals, renal dialysis facilities, ambulatory surgical centers as well as Merit-Based Incentive Payment System (MIPS) eligible clinicians located in areas affected by Hurricane Nate. These healthcare providers and suppliers will be granted exceptions without having to submit a request if they are located in one of the counties listed in the memo posted on [February 8, 2018](#), all of which have been designated by the [Federal Emergency Management Agency \(FEMA\)](#) as a major disaster county.

The scope and duration of the exception under each Medicare quality reporting program is described in the memo as well, however, all of the exceptions are being granted to assist these providers while they direct their resources toward caring for their patients and repairing structural damages to facilities.

If FEMA expands the current disaster declaration to include additional counties, CMS will update this memo to expand the list of providers eligible to receive an exception without submitting a request.

In addition, CMS will continue to monitor the situation and adjust exempted reporting periods and submission deadlines accordingly.

Additional details and materials are available on the [CMS Hurricanes](#) webpage. Please check back frequently for updates.

February 22, 2018

California Wildfires - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

The Centers for Medicare & Medicaid Services (CMS) is granting exceptions under certain Medicare quality reporting and value-based purchasing programs to acute care hospitals, inpatient psychiatric facilities, skilled nursing facilities, home health agencies, hospices, inpatient rehabilitation facilities, long-term care hospitals, renal dialysis facilities, ambulatory surgical centers as well as Merit-Based Incentive Payment System (MIPS) eligible clinicians located in areas affected by the California wildfires (FEMA [DR-4353](#)). These healthcare providers and suppliers will be granted exceptions without having to submit a request if they are located in one of the California counties listed in the memo posted on [February 8, 2018](#), all of which have been designated by the [Federal Emergency Management Agency \(FEMA\)](#) as a major disaster county.

The scope and duration of the exception under each Medicare quality reporting program is described in the memo as well, however, all of the exceptions are being granted to assist these providers while they direct their resources toward caring for their patients and repairing structural damages to facilities.

If FEMA expands the current disaster declaration to include additional counties, CMS will update this memo to expand the list of providers eligible to receive an exception without submitting a request.

In addition, CMS will continue to monitor the situation and adjust exempted reporting periods and submission deadlines accordingly.

Additional details and materials are available on the [CMS Wildfires](#) webpage. Please check back frequently for updates.

February 21, 2018

CMS Launches Public Reporting of CAHPS® Hospice Survey Results

CMS announces the initial publication of results from the CAHPS® Hospice Survey on Hospice Compare. Hospice Compare is a user-friendly web tool found at <https://www.medicare.gov/hospicecompare/>. It provides information to help patients, their families, caregivers, and providers make more informed decisions about choosing a hospice. Hospice Compare allows users to select up to three hospices at a time to compare the clinical quality of care provided and patient experiences with these hospices.

Survey results are published for all Medicare-certified hospices that had at least 30 completed surveys during the eight quarters from Quarter 2, 2015 (April 1, 2015) through Quarter 1, 2017 (March 31, 2017). In addition to the survey results, the Hospice Compare site provides a variety of other data about the quality of hospice care, including the Hospice Item Set (HIS).

CMS works diligently to make healthcare quality information more transparent and understandable for consumers and is committed to helping individuals make informed healthcare decisions for themselves and their families based on objective measures of quality.

February 21, 2018

Hospice Compare Quarterly Refresh Available

The February 2017 quarterly Hospice Compare refresh based on patient stays discharged for Q2 2016 – Q1 2017 is now available. Visit [Hospice Compare](#) to view the data.

February 14, 2018

HIS Freeze Date: February 15

The freeze date for submitting corrections/modifications to the Hospice Item Set (HIS) for the May 2018 Hospice Compare refresh is February 15, 2018. The May refresh will include HIS data from Q3 2016 to Q2 2017 and CAHPS data from Q3 2015- Q2 2017. Please note, CAHPS dates refer to patients' dates of death.

All records, need to be submitted and accepted by the Quality Improvement and Evaluation System (QIES) Assessment Submission and Processing (ASAP) system by 11:59:59 p.m. E.D.T. 2/15/18 to be reflected in the Hospice Provider Preview Report that will be available on March 1, 2018.

CMS has noticed an increase in the number of modifications/corrections and inactivation of HIS assessment data following the release of the Hospice Provider Preview Reports. As a friendly reminder, it is the provider's responsibility to ensure that records are complete and accurate prior to submission to the QIES ASAP system.

For more information about the freeze date, preview reports, and **key public reporting dates for providers**, please see the [Public Reporting: Key Dates for Providers](#) webpage.

February 14, 2018

Hospice Quality Measure Reports Available

The Hospice and Palliative Care Composite Process Measure: Comprehensive Assessment at Admission (referred to as The Hospice Comprehensive Assessment Measure) has been added to providers' Hospice-Level and Patient Stay-Level CASPER QM Reports.

We previously notified Hospices that the Hospice-Level and Hospice Patient Stay-Level Quality Measure reports available in the CASPER Reporting application would be unavailable beginning February 6, 2018 while updates were being made to the reports.

Please note, only patient stays with admission dates on or after 4/1/17 can be included in the Hospice Comprehensive Assessment Measure's calculation.

Section 4 of the CASPER Reporting Hospice Provider User's Guide has been updated to reflect the changes in these reports. For more information about the CASPER QM Reports, please see the CASPER QM Reports Fact Sheet in the Downloads section of the HQRP [Requirements and Best Practices](#) webpage.

February 07, 2018

Hospice Quality Measure Report Updates

Earlier this week, Hospice providers were notified via the QIES Technical Support Office (QTSO) website that updates are being made to the Hospice-Level and Hospice Patient Stay-Level Quality Measure reports within the Certification and Survey Provider Enhanced Reports (CASPER) application, and that the reports were anticipated to be available on February 6, 2018. The reports will be made available soon.

As a reminder, these reports will contain the new **NQF #3235 Hospice and Palliative Care Composite Process Measure – Comprehensive Assessment at Admission**. Section 4 of the CASPER Reporting Hospice Provider User's Guide will be updated to reflect the changes in these reports.

We will send follow-up announcements when the reports are ready.

We thank you for your support. If you have questions concerning this information, please contact the QTSO Help Desk at help@qtso.com or 1 (877) 201-4721.

February 01, 2018

HQRP Fiscal Year 2020 Requirements Fact Sheet Now Available

This fact sheet outlines specific compliance requirements for Hospice Item Set (HIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS®) for the Fiscal Year 2020 reporting year (data collection period 1/1/18 -12/31/18), to support providers in compliance with HQRP requirements.

View the FY 20 HQRP Requirements document in the Downloads section of the [HQRP Requirements and Best Practices](#) webpage.

February 01, 2018

HQRP Quarterly Update document for the Fourth Quarter of 2017 Now Available

The HQRP Quarterly Update features frequently asked questions that were received by the Hospice Quality Help Desk during the fourth quarter of 2017, as well as general HQRP updates and events from the fourth quarter, and upcoming events in the first quarter of 2018.

View the HQRP Quarterly Update – 4th Quarter 2017 document in the Downloads section of the [HQRP Requirements and Best Practices](#) webpage.

January 19, 2018

Version 2.00 of HQRP QM User's Manual now available for Download

Version 2.00 of the HQRP QM User's Manual is now available for download in PDF format on the Current Measures webpage. The measure specifications for the Hospice and Palliative Care Composite Process Measure: Comprehensive Assessment at Admission (NQF #3235) are included in this new version.

To download the HQRP QM User's Manual V2.00, please refer to the Downloads section of the [HQRP Current Measures](#) webpage.