Public Reporting of the *Hospice Visits when Death is Imminent* Measure Pair  
(3-day and 7-day Measures)

The Centers for Medicare & Medicaid Services (CMS) tested the reliability, validity, and potential to publicly report a pair of quality measures related to hospice professionals’ visits to hospice facilities when patient death is imminent. CMS plans to begin displaying the first measure—which covers the last three days of a hospice patient’s life—on Hospice Compare in summer 2019, but will further test the second measure—which focuses on the last seven days of life—before any future display on Hospice Compare.

**Overview & Summary**

*Hospice Visits when Death is Imminent* is a pair of CMS hospice quality measures that assess hospice staff visits to patients at the end of life over three or seven days.

- The first measure assesses the percentage of patients who receive at least one visit from a registered nurse, physician, nurse practitioner, or physician assistant in the **last three days of life**.
- The second measure (Measure 2) assesses the percentage of patients receiving at least two visits from a medical social worker, chaplain or spiritual counselor, licensed practical nurse, or hospice aide in the **last seven days of life**.

CMS has decided not to publish Measure 2, the seven-day measure, in summer 2019 to allow further testing to determine if changes to the measure or how it would be displayed on Hospice Compare are needed. Additional testing will help ensure the measure’s accuracy and reliability as an indicator of provider quality. CMS will not post data for this measure, including each hospice’s performance as well as the national rate, while conducting more testing. The decision not to publicly report the seven-day measure at this time has no impact on other Hospice Quality Reporting Program (HQRP) measures.

**Next Steps**

Following the additional testing currently underway, CMS will inform hospice providers regarding any future plans to publicly report Measure 2 via routine channels of communication (CMS.gov website announcements, listserv notices, Medicare Learning Network announcements, Open Door Forums, etc.).

CMS will only publicly report quality measures that meet our standards of reliability, validity, and reportability. If the additional testing for the seven-day *Hospice Visits when Death is Imminent* measure concludes that the measure, as currently specified, should not be publicly reported, CMS will consider how best to proceed with this measure.
**Data Collection Requirements**

The seven-day *Hospice Visits when Death is Imminent* measure is calculated using items O5010, O5020 and O5030 from the Hospice Item Set (HIS) V2.00.0. Because the measure is not being removed from the HQRP at this time, providers are still required to complete these items accurately and completely, and submit HIS records to CMS in a timely manner regardless of the decision to not publicly report the measure at this time.

CMS requires provider reporting of these items because they are also used to calculate the three-day *Hospice Visits when Death is Imminent* measure, which will be published on Hospice Compare in summer 2019. The agency also requires collection of these data to complete additional testing and to make a determination about the public reporting of the seven-day *Hospice Visits when Death is Imminent* measure. As a result, hospices do not need to change data collection practices and can continue to complete HIS-Admission and HIS-Discharge records as usual.

**Certification and Survey Provider Enhanced Reporting (CASPER) Quality Measure (QM) Reports and Provider Preview Reports**

The seven-day *Hospice Visits when Death is Imminent* measure will be reported on providers’ Certification and Survey Provider Enhanced Reporting (CASPER QM) Reports, although it will not be publicly reported on Hospice Compare at this time. CASPER QM Reports are available at the facility and patient levels, and are intended for providers’ internal use to aid hospices in quality-improvement efforts. Although the measure will not be publicly displayed at this time, CMS believes that it is important for providers to internally review and be informed by these data, to ensure that they are providing their patients and caregivers the support they need in the patients’ last days of life.