

# Public Reporting: Background and Announcements (archived)

Now available! Our new **Provider Data Catalog** makes it easier for you to search & download our publicly reported data. We've also improved **Medicare's compare sites**.

## Background:

The Hospice Quality Reporting Program (HQRP) consists of two components, the Hospice Item Set (HIS) and the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey.

The HQRP was established under section 1814(i)(5) of the Social Security Act. The Act also requires the Secretary to publicly report, on a CMS website, quality measures that relate to the care provided by hospice programs across the country.

HQRP = HIS + CAHPS®

**HIS:** The seven (7) National Quality Forum (NQF) - endorsed Hospice Item Set (HIS) quality measures initially displayed on Hospice Compare are:

- Hospice and Palliative Care- Treatment Preferences - NQF #1641
- Hospice and Palliative Care- Beliefs/Values Addressed- NQF #1647
- Hospice and Palliative Care- Pain Screening- NQF #1634
- Hospice and Palliative Care- Pain Assessment- NQF #1637
- Hospice and Palliative Care- Dyspnea Screening- NQF #1639
- Hospice and Palliative Care- Dyspnea Treatment- NQF #1638
- Hospice and Palliative Care- Patients treated with opioids who are given a bowel regimen- NQF #1617

**CAHPS® Hospice Survey:** The Consumer Assessment of Healthcare Providers & Systems (CAHPS®) Hospice survey is a survey of the primary informal caregivers, usually family members, who cared for a patient who died under hospice care. The survey is conducted on a monthly basis; family and friends are contacted at least two months after the patient's death. Hospice Compare displays survey results for eight CAHPS® measures.

- Communication with family
- Getting timely help
- Treating patient with respect
- Emotional and spiritual support
- Help for pain and symptoms
- Training family to care for patient
- Rating of this hospice
- Willing to recommend this hospice

Eligible hospice providers are required to contract with an approved survey vendor to collect CAHPS® Hospice Survey data on their behalf. The vendor submits survey results to the CAHPS® Hospice Survey Data Warehouse on a quarterly basis on the second Wednesday of the months of February, May, August and November. More details about the measures, survey implementation, and the questionnaire can be found at [www.hospicecahpsurvey.org](http://www.hospicecahpsurvey.org).

## Hospice Compare

Hospice Compare is the vehicle by which CMS publicly displays hospice data. [Hospice Compare](#) was launched on August 16, 2017. The goal of Hospice Compare is to help consumers compare hospice providers on their performance and assist consumers in making decisions that are right for them. Providers can start a conversation with their patients and family members about how the new Hospice Compare website impacts them by:

- Explaining that the Hospice Compare website provides a snapshot of the quality of care a hospice offers;
- Encouraging patients and their family members to review quality ratings; and
- Helping to strengthen patients and family members' ability to make the best decisions for their care.

## Resources:

**Hospice Quality Help Desk:** [HospiceQualityQuestions@cms.hhs.gov](mailto:HospiceQualityQuestions@cms.hhs.gov) - All questions related to HIS quality measures including HIS quality reporting questions, Hospice Compare, and HIS Provider Preview Reports.

**CAHPS® Hospice Survey Technical Assistance:** [hospicecahpsurvey@HCQIS.org](mailto:hospicecahpsurvey@HCQIS.org) or 1-844-472-4621 - All technical questions about the Hospice CAHPS® Survey.

**Requests for CMS Review of HIS Data:** [HospicePRquestions@cms.hhs.gov](mailto:HospicePRquestions@cms.hhs.gov) - All requests for CMS to review HIS Provider Preview Report data can only be submitted here during the 30-day preview period. For more information, visit the [Hospice Quality Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage.

**Requests for CMS Review of CAHPS® Hospice Survey Data:** [hospicecahpsurvey@HCQIS.org](mailto:hospicecahpsurvey@HCQIS.org) - All requests for CMS to review CAHPS Hospice Survey Preview Report data can only be submitted here during the 30-day preview period. For more information, visit the [Hospice Quality Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage.

**Sign up for Hospice QRP updates today!**

## Updates:

**March 12, 2020**

### **Hospice Provider Preview Reports Now Available**

Hospice provider preview reports and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey ® provider preview reports have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from **Quarter 3, 2018 to Quarter 2, 2019** and their facility-level CAHPS® survey results from **Quarter 3, 2017 to Quarter 2, 2019**.

Providers have 30-days to review their HIS and CAHPS® results (**March 12, 2020 through April 13, 2020**) prior to the **May 2020** Hospice Compare site refresh, during which this data will be publicly displayed.

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions \(PDF\)](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

**December 26, 2019**

### **Hospice Provider Preview Reports Now Available**

Hospice provider preview reports and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey ® provider preview reports have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from **Quarter 2, 2018 to Quarter 1, 2019** and their facility-level CAHPS® survey results from **Quarter 2, 2017 to Quarter 1, 2019**.

Providers have 30-days to review their HIS and CAHPS® results (**December 16, 2019 through January 15, 2020**) prior to the **February 2020** Hospice Compare site refresh, during which this data will be publicly displayed.

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions \(PDF\)](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

**September 11, 2019**

### **Hospice Provider Preview Reports Now Available**

Hospice provider preview reports and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey ® provider preview reports have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from **Quarter 4, 2017 to Quarter 3, 2018** and their facility-level CAHPS® survey results from **Quarter 4, 2016 to Quarter 3, 2018**.

Providers have 30-days to review their HIS and CAHPS® results (**September 11, 2019 through October 11, 2019**) prior to the **November 2019** Hospice Compare site refresh, during which this data will be publicly displayed.

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions \(PDF\)](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

**August 15, 2019**

### **Hospice Compare Quarterly Refresh Available**

The August 2019 quarterly Hospice Compare refresh of quality data is now available. It is based on Hospice Item Set (HIS) quality measure results from data collected Q4 2017-Q3 2018 and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® results reported Q4 2016 – Q3 2018.

Beginning with the August 2019 refresh, Hospice Compare will include hospice provider performance scores on the *Hospice Visits when Death is Imminent* three-day measure, which 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**. CMS has decided not to publish Measure 2, the seven-day measure, at this time 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.

We invite you to visit [Hospice Compare](#) to view the data.

For additional information on the *Hospice Visits when Death is Imminent* measures, we invite you to view the associated Fact Sheet and Q & A documents, which are posted on this webpage below, under the **Downloads** section.

**May 30, 2019**

### **Hospice Provider Preview Reports Now Available**

Hospice provider preview reports and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® provider preview reports have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from **Quarter 4, 2017 to Quarter 3, 2018** and their facility-level CAHPS® survey results from **Quarter 4, 2016 to Quarter 3, 2018**. Specifically, the following 9 HIS quality measures will be included:

1. Hospice and Palliative Care Composite Process Measure – Comprehensive Assessment at Admission (NQF #3235)
2. Patients Treated with an Opioid who are Given a Bowel Regimen (NQF #1617)
3. Pain Screening (NQF #1634)
4. Pain Assessment (NQF #1637)
5. Dyspnea Screening (NQF #1639)
6. Dyspnea Treatment (NQF #1638)
7. Treatment Preferences (NQF #1641)
8. Beliefs/Values Addressed (if desired by the patient) (NQF #1647)
9. Hospice Visits when Death is Imminent – **NEW!**
1. Measure 1: Percentage of patients receiving at least one visit from registered nurses, physicians, nurse practitioners, or physician assistants in the last 3 days of life. As announced in April, CMS will not publish Hospice Visits when Death is Imminent Measure 2: *Percentage of patients receiving at least two visits from medical social workers, chaplains or spiritual counselors, licensed practical nurses or hospice aides in the last 7 days of life*, 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.
2. Providers have 30-days to review their HIS and CAHPS® results (**May 30, 2019 through July 1, 2019**) prior to the **August 2019** Hospice Compare site refresh, during which this data will be publicly displayed.

3.

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions \(PDF\)](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

**May 23, 2019**

### **Hospice Compare Quarterly Refresh Available**

The May 2019 quarterly Hospice Compare refresh of quality data is now available. It is based on Hospice Item Set (HIS) quality measure results from data collected Q3 2017 – Q2 2018 and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® results reported Q3 2016 – Q2 2018.

Beginning with the May 2019 refresh, Hospice Compare will include information on hospice characteristics to complement the quality and patient experience metrics already available. This information will further empower Hospice Compare users to engage in meaningful conversations with their providers and to help make informed decisions about selecting a hospice. Empowering consumers with useful information is one way CMS works to ensure safety and quality in the healthcare system. In addition, in May 2019, CMS is updating the Zip code database powering Hospice Compare's search function, helping to ensure accurate search results.

For more information please see the "Hospice Compare May 2019 Refresh Fact Sheet" and the "Hospice Compare May 2019 Refresh Question & Answer" in the Downloads section of the [Public Reporting: Background and Announcements](#) webpage.

Please visit [Hospice Compare](#) to view the new and updated quality data.

**April 01, 2019**

### **Update to Public Reporting of the Hospice Visits when Death is Imminent Measure Pair**

The Hospice Visits when Death is Imminent measure pair assesses whether a hospice patient and caregiver's needs were addressed by hospice staff in the last three and seven days of life. The three-day Hospice Visits when Death is Imminent measure will be publicly reported on Hospice Compare in summer 2019, as planned. The seven-day Hospice Visits when Death is Imminent measure will not be publicly reported at this time because it did not currently meet readiness standards for public reporting. Additional time will allow further testing to determine if changes to this measure or how it would be displayed on Hospice Compare are needed, and to ensure the measure's accuracy and reliability as an indicator of provider quality.

For more information please see the "Public Reporting of the Hospice Visits when Death is Imminent Measure Pair Fact Sheet" in the Downloads section of this webpage below.

**March 1, 2019**

### **Hospice Provider Preview Reports Now Available**

Hospice provider preview reports and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® provider preview reports have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from Quarter 3, 2017 to Quarter 2, 2018 and their facility-level CAHPS® survey results from Quarter 3, 2016 to Quarter 2, 2018.

Providers have 30-days to review their HIS and CAHPS® results (March 1, 2019 through March 31, 2019) prior to the May 2019 Hospice Compare site refresh, during which this data will be publicly displayed.

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions \(PDF\)](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

## **February 21, 2019**

### **Hospice Compare Quarterly Refresh Available**

The February 2019 quarterly Hospice Compare refresh of quality data is now available. It is based on Hospice Item Set (HIS) quality measure results from data collected Q2 2017 – Q1 2018 and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® results reported Q2 2016 – Q1 2018.

Please visit the [Hospice Compare](#) website to view the new and updated quality data.

## **December 4, 2018**

### **Hospice Compare Quarterly Refresh Available**

The December 2018 quarterly Hospice Compare refresh of quality data is now available. It is based on Hospice Item Set (HIS) quality measure results from data collected Q1 2017 – Q4 2017 and Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey® results reported Q1 2016 – Q4 2017. We invite you to visit [Hospice Compare](#) to view the data.

In addition to the Hospice QRP measures that are currently displayed on Hospice Compare, the following new quality measure will be displayed with data collected Q2 2017 – Q4 2017:

- Hospice and Palliative Care Composite Process Measure – Comprehensive Assessment at Admission (NQF #3235)

For additional information, we invite you to view the new [Hospice Comprehensive Assessment Measure Fact Sheet \(PDF\)](#) and [External Questions and Answers Documents \(PDF\)](#), which are available under the Downloads section of this webpage below. Please visit the [Hospice Compare](#) website to view the new and updated quality

## **September 5, 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 have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from Quarter 1- 2017 to Quarter 4-2017 and their facility-level CAHPS® survey results from Quarter 1, 2016 to Quarter 4, 2017.

Providers have 30-days to review their HIS and CAHPS® results (September 5, 2018 through October 5, 2018).

The update includes one additional process measure for hospices:

- Hospice and Palliative Care Composite Process Measure – Comprehensive Assessment at Admission (NQF #3235) For more information on how to access these reports, view the [HIS Preview Report Access Instructions](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).
- Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

**June 1, 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 have been updated and are now available. These two separate reports are available in your Certification and Survey Provider Enhanced Reports (CASPER) non-validation reports folder. Hospice providers are encouraged to review their Hospice Item Set (HIS) quality measure results from Quarter 4- 2016 to Quarter 3-2017 and their facility-level CAHPS® survey results from Quarter 4, 2015 to Quarter 3, 2017.

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

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

**May 16, 2018**

## Hospice Compare Quarterly Refresh Available

The May 2018 quarterly Hospice Compare refresh is now available. It is based on Hospice Item Set (HIS) quality measure results from data collected Q3 2016 – Q2 2017 and on Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey ® results reported Q3 2015 – Q2 2017. We invite you to visit [Hospice Compare](#) to view the data.

**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).*

Should a provider believe the denominator or other HIS quality metric to be inaccurate or if there are errors within the results from the CAHPS® Survey data, a provider may request CMS review. Providers must adhere to the process outlined on the [Public Reporting: HIS Preview Reports and Requests for CMS Review of HIS Data](#) webpage and the [Public Reporting: CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data](#) webpage.

For more information on how to access these reports, view the [HIS Preview Report Access Instructions \(PDF\)](#) and the [Hospice CAHPS® Provider Preview Reports Access Instructions](#).

**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.

**December 21, 2017**

### **New Guidance on How to Update Demographic Data**

The demographic data displayed on the Provider Preview Reports and on [Hospice Compare](#) is generated from information stored in the Automated Survey Processing Environment (ASPEN) system.

If inaccurate demographic data is included on the Preview Report or on Hospice Compare, Hospices need to contact their [Medicare Administrative Contractor](#) (MAC) for assistance. When requesting updates to your demographic data, it is important to specify that you want your data within the ASPEN system updated, instead of referring to your data on the Hospice Compare site.

View the How to Update Demographic Data 12-21-17 PDF in the downloads for further information.

Please note- updates to Hospice Provider demographic information do not happen in real time and can take up to 6-months to appear on Hospice Compare.

**November 28, 2017**

### **Hospice Compare Search Function Alert**

CMS is aware that the location search on [Hospice Compare](#) may return incorrect results. As a result, we have provided a message on the home page of Hospice Compare informing users that when searching by location, the list of agencies provided may not serve the zip code, city, or state they entered. The message also recommends that consumers call hospice providers to confirm their service areas. We are currently working to improve the search functionality and will update the website as soon as possible. We appreciate your patience while we work to enhance the end users' experience with Hospice Compare. Please continue to monitor this webpage for updates.

**October 03, 2017**

### **Hospice Compare Fact Sheet Now Available**

**A new Hospice Compare fact sheet is now available in the downloads section below.** This fact sheet contains information related to [Hospice Compare](#) and how the site can serve as a resource to providers in understanding their current quality ratings. The fact sheet also suggest approaches to communicating with patients and family members about how the Compare site can inform their decision making process.

[Hospice Public Reporting Archives](#)

## **Downloads**

- [Hospice Visits when Death is Imminent Measure Pair Questions and Answers \(PDF\)](#)
- [Public Reporting of the Hospice Visits when Death is Imminent Measure Pair Fact Sheet \(PDF\)](#)
- [CMS Hospice Public Reporting and Preview Reports\\_Final- April 2017 \(1\).pdf \(PDF\)](#)