Getting Started with Hospice Quality Measure Reports in iQIES

This fact sheet contains information about the two Quality Measure (QM) reports available to hospice providers in iQIES. Additionally, this fact sheet includes one potential model hospices could employ to use the QM reports for quality improvement.

I. Understanding the Hospice Quality Measure Reports in iQIES

Two Confidential Provider Feedback Reports are available in the iQIES reporting application: **Hospice-Level Quality Measure Report** and **Hospice Patient Stay-Level Quality Measure Report**. These two reports fall under the class of iQIES reports known as "QM reports." The iQIES QM reports are on-demand and are intended to provide hospice providers with feedback on their quality measure scores, helping them to improve the quality of care delivered. The information available in these reports is for internal purposes only and is not for public display.

- **The Hospice-Level QM Report** includes the Hospice and Palliative Care Composite Process Measure: Comprehensive Assessment at Admission (Consensus-Based Entity (CBE) #3235), Hospice Visits in the Last Days of Life (HVLDL-CBE #3645), and Hospice Care Index (HCI – CMIT #328) measure scores. The report includes hospice specific scores, national and state averages. Details of the seven component process measures are included for the Comprehensive Assessment at Admission Measure, as well as the details for the 10 individual HCI indicators.

- **The Hospice Patient-Level QM Report** identifies each patient with qualifying HOPE (formerly HIS) records used to calculate the hospice-level quality measure values for a select period. The report displays each patient's name and indicates how/if the patient's assessment affected the hospice's quality measures. The details of the seven component process measures are also included at the patient level for the Comprehensive Assessment at Admission Measure. Claims-based measures are not included in these reports.

What measures are reported and how are these data collected?

The Hospice Quality Reporting Program (HQRP) was established under Section 1814(i)(5) of the Social Security Act. Since 2014, Medicare-certified hospice providers have been required to submit assessment-based records for all patient admissions. As of October 1, 2025, hospices were required to submit a HOPE Admission record for all patient admissions, up to two HOPE Update Visit (HUV) records, and a HOPE Discharge record for a patient's subsequent discharge. Hospices are required to submit the appropriate HOPE records for each patient admitted to hospice, regardless of the patient's payer source, age, or location where hospice services are received. All HOPE data to CMS is now submitted through the Internet Quality Improvement and Evaluation System (iQIES).

HOPE data is used to calculate one HQRP process measure, and administrative data (Medicare claims) are used to calculate two claims-based quality measures *(**see Table 1**)*.

Currently, three of the four HQRP quality measures are reported on the Hospice Quality Measure Reports in iQIES. The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey measure, CBE # 2651[1] is not included in these QM reports.

Table 1. Quality Measures Reported on QM Reports in iQIES

Measure Title (CBE ID)	Measure Description
Comprehensive Assessment at Admission (CBE #3235)	The percentage of hospice stays during which patients received a comprehensive patient assessment at hospice admission.
Hospice Visits in the Last Days of Life (HVLDL) (CBE #3645)	A claims-based measure indicating visits in the last 3 days of life.
Hospice Care Index (HCI) (CMIT #328)	A single score measure that combines the results of 10 claims-based indicators.

Table 2. Future HOPE Quality Measures to be Added*

Timely Follow-up for Pain Impact * (CMIT #01795-02-C-HQR)	The percent of hospice patient assessments that have a symptom follow-up visit within two calendar days after pain impact was initially assessed as moderate or severe.
Timely Follow-up for Non-Pain Symptom Impact* (CMIT #01796-01-C-HQR)	The percent of hospice patient assessments that have a symptom follow-up visit within two calendar days after non-pain symptom impact was initially assessed as moderate or severe.

*HOPE data is currently being collected for two new HOPE process measures that will eventually be added to the QM reports, no sooner than fall of 2027.

Hospice-Level Quality Measure Report

This report enables hospice providers to review their QM scores at the hospice-level and compare their organization's overall performance to their state and national average scores.

- Use as a quality improvement tool:
  - Hospice providers can identify which QMs they perform well on and which they might develop quality improvement interventions to improve performance.
  - QM results can be trended by comparing QM scores and percentiles across multiple reporting periods. Trending QM scores enables hospice providers to monitor the progress of their quality improvement interventions.
  - For the Comprehensive Assessment at Admission, providers can trend consecutive quarters, while for the claims-based measures, providers can trend by the eight quarters (2 years) of data.

[1] For information about the CAHPS® Hospice Survey, a description of the survey, its measures, and requirements visit the survey webpage, www.hospicecahpssurvey.org.

- Understanding data calculations:
    - For the Comprehensive Assessment at Admission, the data are calculated monthly, approximately mid-month. Any assessments submitted after the calculation date will be included in the next monthly calculation. The *"Data was calculated on"* date shows you the most recent calculation date.
    - For claims-based measure scores, the data is updated annually in November.

Note: *For more information on how the numerator and denominator are determined and how quality measures are calculated, see the HQRP QM Users Manual available in the Downloads section on the Current Measures webpage. The link is provided in Resources section below.*

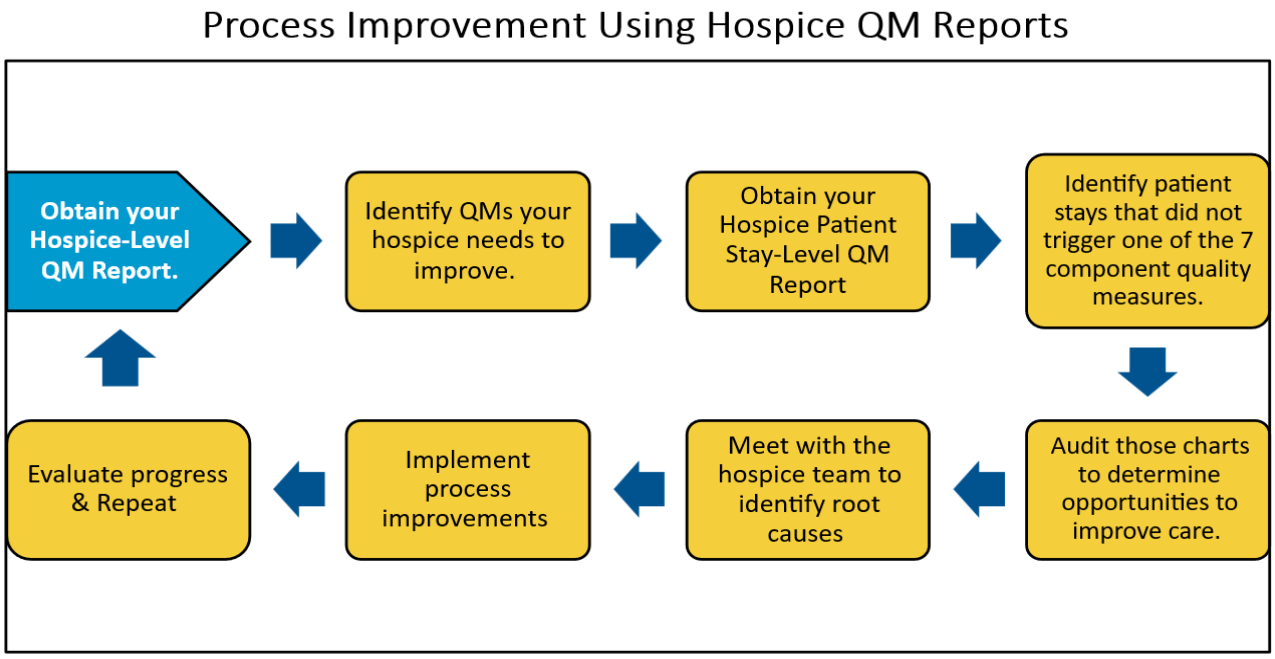
Hospice Patient Stay-Level Quality Measure Report

This report enables hospice providers to review the quality measure outcomes for the Comprehensive Assessment at Admission for all patient stays during the reporting period. The report shows which patient stays triggered each quality measure.

- As a companion report to the Hospice-Level Quality Measure Report, this report drills down to patient-stay level information for each of the seven component quality measures that comprise the Comprehensive Assessment at Admission.
- Use as a quality improvement tool:
    - This report can assist a hospice to review the individual components for the Comprehensive Assessment at Admission measure, should results on the Hospice-Level Quality Measure Report be less favorable than anticipated. Providers can quickly assess which patient stays contributed to the unfavorable results. Hospices can then implement process improvements to address the issues identified.
    - Quality of care concerns for specific patient populations can also be assessed (e.g., based upon length of stay). For example, to look at short stay patients, a hospice provider could review cases in which the admission and discharge date were within the same month and year. It can then be determined which patients did not achieve three or more of the component process measures. Thus, the hospice could decide whether there are general quality of care concerns for patients with a short length of stay.
    - Missing records: This report indicates when a HOPE admission record was not submitted with a corresponding HOPE discharge record (Type 2 Stay). This information could assist a provider to identify when a missing admission record should be submitted to the iQIES system. A link to the HOPE Manual is provided in the Resources section below.
- Claims-based measures are not included in this report.

II. Sample Process for Using the Measure Reports for Quality Improvement

1) Obtain your Hospice-Level QM Report.
2) Use this report to identify which QMs need improvement.
3) Obtain the Hospice Patient Stay-Level QM Report for the same report period that was selected for the Hospice-Level QM Report to analyze the details for the Comprehensive Assessment at Admission.
4) Analyze your Hospice Patient Stay-Level QM Report.
5) Identify a sample of patient stays that did not trigger (i.e., did not meet the numerator criteria) for one of the seven component quality measures for the Comprehensive Assessment at Admission. This may reflect opportunities for quality improvement.
6) Audit the medical records for those patient stays that did not trigger the measure. This will help to determine where the opportunities are to improve care and where a defined care process may not have been followed.
7) Meet with your hospice team to identify root causes. Ask why these care processes were not followed? This may require looking beyond chart data.
   a) For example, if all patient stays in a poor-performing component measure were found to be under the care of one nurse, explore with the nurse why this occurred and why sub-optimal care may have been delivered.
   b) In cases where excellent care was identified (patient stays triggered the measure), explore with the hospice team how those processes could be replicated.
8) Implement process improvements related to the findings of the chart audits.
9) Repeat this cycle regularly to drive quality improvement



III. Resources Available to Hospice Providers

- To access CMS' HQRP website visit the main page at Hospice Quality Reporting Program | CMS.
- For iQIES Reports Training Materials refer to the iQIES Reference & Manuals | QIES Technical Support Office section on the QIES Technical Support Office (QTSO) website.
- For Training on all topics related to the HQRP, including how to use provider reports, visit the HQRP Training and Education Library.
- For additional resource documents related to reports, visit the Requirements and Best Practices | CMS webpage.
- To access the HOPE Guidance Manual and the items sets, visit the HOPE | CMS webpage
- For HOPE technical information, data submission specifications, and updates visit the HOPE Technical Information webpage.
- For information on the hospice quality measures (QMs) and measure calculation specifications, review the current HQRP QM User's Manual located in the Downloads section of the Current Measures webpage.

IV. Help Desk Resources