Getting Started with the Hospice Quality Reporting Program

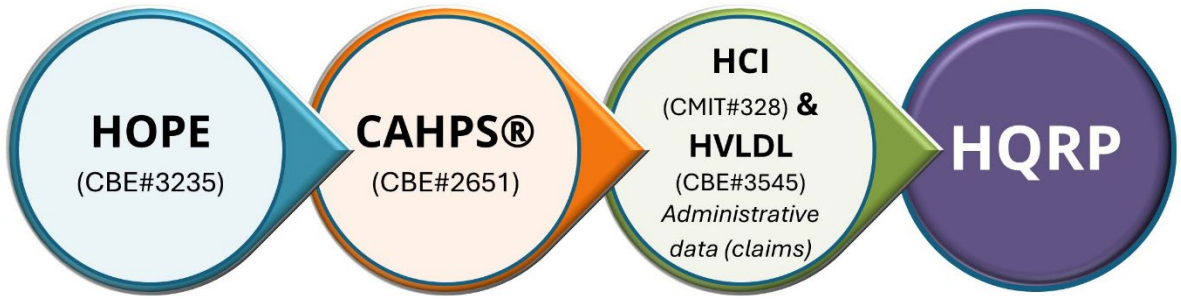
This document provides detailed information on the requirements of the Hospice Quality Reporting Program (HQRP). It is designed especially for new hospice providers and staff and provides details about the background of each requirement, data submission deadlines, possible exemptions, tips for compliance, and links to useful resources, including Help Desks.

The HQRP promotes the delivery of person-centered, high-quality, and safe care by hospice providers. Currently, the HQRP uses three data sources to calculate Quality Measures (QMs):

1. Hospice data collection tool: The new Hospice Outcomes and Patient Evaluation (HOPE) which began on October 1, 2025 (formerly the Hospice Item Set (HIS) until September 30, 2025).
2. Consumer Assessment of Healthcare Providers and Systems® (CAHPS®) Hospice Survey, and
3. Administrative Data (Claims).*

*The data source for the claims-based measures are extracted from Medicare claims that are already collected and submitted to CMS.

Currently, there are four (QMs) associated with the HQRP: one from HOPE (formerly HIS) data, two from Medicare claims (Hospice Visits in the Last Days of Life (HVLDL) (CBE #3645), and the Hospice Care Index (HCI) (CMIT #328), and one from the CAHPS® Hospice Survey. In the Fall of 2027, two new process measures will be added to the HQRP using HOPE data.



Updated – January 2026

The HQRP was established under section 1814(i)(5) of the Social Security Act (SSA). Data collection of the Hospice Item Set (HIS) began on July 1, 2014. In the FY2025 Hospice Final Rule, the Centers for Medicare & Medicaid Services (CMS) finalized a new standardized patient-level data collection tool, HOPE. Data collection using the HIS ended on September 30, 2025. The HOPE tool is a modification and functional replacement for the HIS beginning on October 1, 2025. To comply with the HQRP, hospices must meet the individual requirements of HOPE and CAHPS®, and the submission of administrative data via Medicare claims. Individual compliance requirements for HOPE and CAHPS® are discussed in greater detail below. Since administrative data are collected from claims, hospices are automatically considered 100% compliant with this requirement.

The SSA also directed the Secretary to reduce the market basket update (known as the Annual Payment Update, or APU) for any hospice that does not comply with the quality data reporting requirements for that fiscal year (FY). Beginning with the data collected in calendar year (CY) 2022, FY 2024 APU and for each subsequent year, the reduction was increased from 2 to 4 percentage points for hospices that do not comply with the HQRP for each corresponding CY.

The CMS HQRP website is the official website of the HQRP. Hospices should bookmark this website and check it often for updates.

Section 1: HOPE

Who is required to submit data? Since July 1, 2014, all Medicare-certified hospice providers must submit data for quality measures to CMS. For all hospice patients discharged on or before September 30, 2025, completion and submission of both the HIS Admission and Discharge records are required. As of October 1, 2025, HOPE data replaced HIS data. HOPE data, including the HOPE-Admission, Hope Update Visits (HUVs), if applicable, and HOPE-Discharge records are required for all patient admissions to hospice.

How should I prepare to submit data?

To submit HOPE data, at least one Provider Security Official (PSO) from your hospice needs to be selected and registered for an iQIES Provider Security Official role. The PSO is responsible for approving all other IQIES roles for employees in the hospice. CMS strongly recommends that each hospice provider have more than one PSO.

Please note that failure to obtain access to iQIES will impact your ability to submit HOPE records. For information and instructions to register for a PSO iQIES account, please visit: https://qtso.cms.gov/news-and-updates/iqies-hope-assessment-submission-and-reporting-launch-and-provider-security.

Applicable Patients:

HOPE data are collected and submitted on all patient admissions, regardless of the payer, patient's age, or location of the receipt of hospice services. For **all** patients admitted on or after October 1, 2025, **only** HOPE records will be accepted by CMS.

New Hospice Providers: There are two considerations – when to begin submitting HOPE data and when you may be subject to the APU penalty for non-compliance.

1. **When to begin HOPE data submission:** New hospice providers must submit HOPE data (HOPE-Admission, HUV(s), and HOPE-Discharge records) for all patient admissions on or after the date in their CMS Certification Number (CCN) notification letterhead.
2. **APU determination:** If a hospice is found to be non-compliant, the hospice will need to follow the reconsideration process and attach the CCN notification letter and any other relevant documents to support their new status. Any new hospice with a CCN notification letter dated on or after November 1st in a CY will **not** be subject to the 4 percentage-point APU reduction (for the corresponding FY) **for that first year only**.

HOPE Data Collection: HOPE data collection consists of collecting real-time patient-level data or abstracting data from patient clinical records to complete HOPE items. To ensure successful HOPE data collection, hospices should review materials available on the CMS HQRP website, including:

- The HOPE Guidance Manual, which provides instructions for item completion, clinical examples for each item, and is available on the HOPE webpage.
- HOPE training, available on the HQRP Training and Education Library webpage.

For questions about HOPE data collection processes, contact the Hospice Quality Help Desk at HospiceQualityQuestions@cms.hhs.gov.

HOPE Data Submission: HOPE data must be submitted to CMS in the proper electronic file format (XML) via the Internet Quality Improvement and Evaluation System (iQIES). As of October 1, 2025, hospices will be required to select a private vendor, if they do not already have one.

- Hospice providers will need to use a vendor or 3rd party to encode their HOPE assessments.
- Providers can choose to submit the records themselves or arrange with a 3rd party to submit via iQIES on their behalf. Regardless of how Hospices submit their data, the data submission specifications must be followed. Please refer to the HOPE Technical Information webpage to download the latest version.
- To submit HOPE data to iQIES, hospices need to register for an account in iQIES and request a user role via their hospice's PSO.
- New hospices should begin this process as soon as possible.

For questions about registering for User IDs or iQIES, contact the iQIES Service Center by email at iqies@cms.hhs.gov, or call (877) 201-4721 or (800) 339-9313 (Monday–Friday from 8:00 AM – 8:00 PM ET).

Ensuring Successful Data Submission: After each data submission to iQIES, providers MUST verify that the data submitted were **ACCEPTED,** meaning that the records were saved in the system.

Details on how to successfully submit and confirm HOPE submissions can be found on the QTSO.cms.gov website in the reference manual entitled HOPE: Assessment Management Manual for Assessment Submitter: hospice-providers Reference & Manuals | QIES Technical Support Office.

Data Submission Deadlines: HOPE data are submitted on a rolling basis; all HOPE records (Admission, HUV(s), and Discharge) must be **SUBMITTED to iQIES** and **ACCEPTED** no later than 30 calendar days after the Admission Date (A0220), the HUV completion date (Z0350), and the Discharge Date (A0270). Per the HOPE: Assessment Management Manual for Assessment Submitter reference manual, *"submission dates and times are Eastern time zone for all submissions."*

HOPE Compliance: HOPE compliance is based on the timeliness of data submission. To be compliant, **hospices must submit at least 90% of their HOPE records per the 30-day submission deadline specified above or be subjected to the APU penalty for that corresponding FY.**

Determinations of timeliness compliance are made based on records with a target date within the appropriate CY (Jan 1 – Dec 31). For example, for the FY 2028 APU reporting year, hospices must submit a minimum of 90% of records with a target date within the reporting period (e.g., HOPE records with a target date of 1/1/26 – 12/31/26) on time.

For more information on HOPE timeliness requirements, please refer to the "*Hospice Timeliness Compliance Threshold: Fact Sheet*" located in the Downloads section of the HQRP Requirements and Best Practices webpage.

Section 2: Hospice CAHPS®

Who is required to submit data? All Medicare-certified hospices are required to submit Hospice CAHPS® data. However, there are two exemptions for Hospice CAHPS® reporting: a newness exemption and a size exemption.

- **Newness exemption:** Hospices that received their CCN on or after January 1st of the data collection year have a one-time exemption that will be automatically granted by CMS. No action is required from hospice providers to receive this exemption. We recommend that you keep the CMS letter informing you of the assignment of your CCN.
- **Size Exemption:** Applies to hospices with fewer than 50 survey-eligible decedents in the prior CY. This exemption is not automatically granted. To be eligible for the exemption, hospices must complete the *Participation Exemption for Size Form* **annually** by the size exemption form deadline. The *Participation Exemption For Size Form* and process is available by selecting the Participation Exemption for Size tile in the center left of the CAHPS® Hospice Survey website.

Data Collection and Submission: Eligible hospices must contract with a CMS-approved vendor to conduct their CAHPS® surveys and submit their CAHPS® data. CAHPS® data is submitted by your vendor to the CAHPS® data warehouse.

- A list of CMS-approved survey vendors can be found by selecting the List of Approved Survey Vendors tile in the center of the CAHPS® Hospice Survey website.
- After contracting with an approved survey vendor, the hospice will need to complete and submit a *CAHPS® Hospice Survey Vendor Authorization Form*. To view or download this form, go to the CAHPS® Hospice Survey webpage and select the Survey Vendor Authorization Form tile in the center left of the webpage.
- Hospices need to submit a list of decedents/caregivers to their survey vendor on a monthly basis.

Data Submission Deadlines: Your vendor must submit data quarterly. The deadlines for quarterly submissions are the second Wednesday of February, May, August, and November.

Ensuring Successful Data Submission: Maintain close contact with your vendor to ensure it is meeting quarterly deadlines and to ensure data submitted by the vendor has been **ACCEPTED** by CMS.

- Contact your vendor to ensure it is submitting data in ample time to meet the quarterly deadlines. We cannot accept late submissions.
- Sign up for a user account in the CAHPS® Hospice Survey Data Warehouse from the Forms webpage to monitor your vendor's actions and ensure submitted data have been accepted.

CAHPS® Compliance: CAHPS® compliance is determined based on whether your vendor successfully submits CAHPS® Hospice Survey data for all 12 months of the data collection year. The data collection year runs from January through December. Data must be submitted quarterly to the CAHPS® data warehouse, by the quarterly deadline. This means:

- Each quarterly submission must be complete (i.e., have 3 months or 1 quarter worth of data)
- Each quarterly submission must be **SUBMITTED AND ACCEPTED** by the quarterly data submission deadline.

CAHPS® Resources:

- For more information about the CAHPS® Hospice Survey and technical assistance, please contact the CAHPS® Hospice Survey Project Team by email at hospicecahpssurvey@hsag.com or call 1-844-472-4621.
- For data submission issues and use of the CAHPS® Hospice Survey Data Warehouse, please contact cahpshospicetechsupport@rand.org or call 1-703-413-1100 ext. 5599.
- To communicate with CMS staff about implementation issues, please contact: hospicesurvey@cms.hhs.gov.
- For training regarding key items related to the CAHPS® Hospice Survey, please go to the CAHPS® Hospice Survey website and select the Podcasts tile in the center right of the webpage.