Hospice Outcomes and Patient Evaluation (HOPE) v1.01 to v1.02 Guidance Manual and Item Set Change Table Effective October 1, 2025

#	Section or Item Set(s) Affected	Section or Item / Text Affected	HOPE v1.01	HOPE v1.02	Rationale for Change / Comments
1.	i	Cover Pager	HOPE v1.01	HOPE – v1.02	Updated version number
2.	All	Footer	HOPE v1.01 Effective October 1, 2025	HOPE Guidance Manual – v1.02 Effective October 1, 2025	Updated footer to correct version number.
3.	Guidance Manual, Section J	J2053	SFV Symptom Impact item for follow-up of symptoms identified in a HOPE Admission or HUV may be conducted by either an RN or LPN/LVN. O This is not an assessment of the severity, intensity, frequency, or other characteristics of the symptoms listed, but the impact these symptoms have on the patient. For each symptom listed, enter one code that best describes how the patient has been affected. The clinician, based on the patient/caregiver interview, observation, and clinical judgment, determines	 SFV Symptom Impact item for follow- up of symptoms identified in a HOPE Admission or HUV may be conducted by either an RN or LPN/LVN. O This is not a determination of the severity, intensity, frequency, or other characteristics of the symptoms listed, but the impact these symptoms have on the patient. For each symptom listed, enter one code that best describes how the patient has been affected. The clinician, based on the patient/caregiver interview, observation, and/or clinical judgment, determines how 	Wording was adjusted to include observations for the SFV by an LPN/LVN to say: Changed sub-bullet #2 from This is not an assessment of, to "This is not a determination of" Bullet #3: added the word or to this phrase: "The clinician, based on the patient/caregiver interview, observation, and/or clinical judgment, determines"
			how each symptom has affected the patient.	each symptom has affected the patient.	
4.	Guidance Manual, Section J	J2053	Coding Tips • Symptom impact is coded based on the clinician's judgment after considering all the information provided by the patient, family/caregiver, and/or facility staff in addition to their own assessment.	• Symptom impact is coded based on the clinician's observations and/or clinical judgment after considering all the information provided by the patient, family/caregiver, and/or facility staff in addition to their own observations and/or clinical assessment.	Bullet #1: Wording was adjusted to include observations for the SFV by an LPN/LVN to say: observations and/or clinical judgment and observations and/or clinical assessment.

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5.	Guidance	J2053	Example Rationale	Example Rationale	Rationale phrasing adjusted to say:
	Manual,				
	Section J		Based on assessment, and/or observation,	Based on assessment, and/or observation,	"Based on assessment, and/or
			and interviewing the patient and caregiver, the nurse determined at the	and interviewing the patient and caregiver, the nurse determined at the SFV that the	observation, and interviewing the"
			SFV that the nausea was now well-controlled with the current medication	nausea was now well-controlled with the current medication and had no further effect	and
			and had no further effect on the patient.	on the patient. However, based on	"However, based on observation and/or
			However, based on observation and/or	observation and/or clinical judgment, the	clinical judgment, the nurse determined
			clinical judgment, the nurse determined	nurse determined that constipation was	that constipation was moderately
			that constipation was moderately	moderately affecting the patient.	affecting the patient."
			affecting the patient.		

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6.	Guidance	Item # J2052	J2052. Symptom Follow-up Visit (SFV)	J2052. Symptom Follow-up Visit (SFV)	added the word impact to the phrase
	Manual, Admission and HUV timepoints		(Complete only if previous response to J2051 Symptom Impact = 2. Moderate or 3. Severe)	(Complete only if previous response to J2051 Symptom Impact = 2. Moderate or 3. Severe)	"for any moderate or severe pain of non- pain symptom impact "
	·		An in-person Symptom Follow-up Visit (SFV) should occur within 2 calendar days as a follow-up for any moderate or severe	An in-person Symptom Follow-up Visit (SFV) should occur within 2 calendar days as a follow-up for any moderate or severe pain of	
			pain of non-pain symptom identified during Symptom impact assessment at Admission of HOPE Update Visit (HUV).	non-pain symptom impact identified during Symptom impact assessment at Admission of HOPE Update Visit (HUV).	
			 A. Was an in-person SFV completed? O. No — Skip to J2052C. Reason SRA Visit Not Completed. 1. Yes 	 A. Was an in-person SFV completed? O. No — Skip to J2052C. Reason SRA Visit Not Completed. 1. Yes 	
			B. Date of in-person SFV – Complete and	B. Date of in-person SFV – Complete and	
			skip to J2053, SFV Symptom Impact.	skip to J2053, SFV Symptom Impact.	
			Month () Day () Year ()	Month () Day () Year ()	
			C. Reason SFV Not Completed – Skip to M1190, Skin Conditions.	C. Reason SFV Not Completed – Skip to M1190, Skin Conditions.	
			1. Patient and/or caregiver declined an in-	1. Patient and/or caregiver declined an in-	
			person visit.	person visit.	
			2. Patient unavailable (e.g., in ED, hospital,	2. Patient unavailable (e.g., in ED, hospital,	
			travel outside of service area, expired).	travel outside of service area, expired).	
			3. Attempts to contact patient and/or	3. Attempts to contact patient and/or	
			caregiver were unsuccessful.	caregiver were unsuccessful.	
			9. None of the above.	9. None of the above.	

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7.	Guidance Manual, Admission and HUV timepoints	Item # J2053	Since the last Symptom Impact Since the last Symptom Impact assessment was completed, how has the patient been affected by each of the following symptoms? Base this on your clinical assessment (including input from patient and/caregiver). Symptoms may impact multiple patient activities including, but not limited to, sleep, concentration, day to day activities, or ability to interact with others. Coding: O. Not at all − symptom does not affect the patient, including symptoms well- controlled with current treatment 1. Slight 2. Moderate 3. Severe 9. Not applicable (the patient is not experiencing the symptom) Enter Code ↓ (for each) A. Pain B. Shortness of breath C. Anxiety D. Nausea E. Vomiting F. Diarrhea G. Constipation H. Agitation	J2053. SFV Symptom Impact Since the last Symptom Impact assessment was completed, how has the patient been affected by each of the following symptoms? Base this on your observations and/or clinical assessment (including input from patient and/caregiver). Symptoms may impact multiple patient activities including, but not limited to, sleep, concentration, day to day activities, or ability to interact with others. Coding: 0. Not at all − symptom does not affect the patient, including symptoms well-controlled with current treatment 1. Slight 2. Moderate 3. Severe 9. Not applicable (the patient is not experiencing the symptom) Enter Code ↓ (for each) A. Pain B. Shortness of breath C. Anxiety D. Nausea E. Vomiting F. Diarrhea G. Constipation H. Agitation	Adjusted the phrase to include observations and/or. "Base this on your observations and/or clinical assessment"