



Hospice Timeliness Compliance Threshold Report: Fact Sheet

This fact sheet outlines the timeliness compliance threshold for hospices, including Hospice Outcomes and Patient Evaluation (HOPE) submissions, details the algorithm for calculation, and explains the associated Internet Quality Improvement & Evaluation System (iQIES) report.

Summary of Hospice Timeliness Compliance Threshold Report

CMS finalized a timeliness compliance threshold for hospice data submissions and the algorithm for calculating the timeliness compliance threshold in the Fiscal Year (FY) 2016 Hospice Wage Index final rule ([80 FR 47142](#)). This threshold was increased to 90% beginning with the FY 2020 Annual Payment Update (APU) determination.

In order to avoid a penalty (the percentage point reduction) in their APU, hospices are required to submit 90 percent of all required records within 30 days of the event or completion date. This means that the patient's admission, Hospice Update Visit (HUV), and discharge records will be analyzed for timeliness, and a minimum of 90 percent of those records must be accepted into iQIES by the 30-day submission deadline to meet the APU compliance requirements.

- Effective with the FY 2022 Final Rule, beginning with the FY 2024 APU and for each subsequent year, the reduction increased from 2 to 4-percentage points for hospices who do not comply with the HQRP requirements for a given reporting period.
- The requirements for HOPE submissions were finalized in the FY 2025 Hospice Wage Index final rule ([89 FR 64202](#)).
 - With the implementation of HOPE on October 1, 2025, these required records now include all HOPE records (admission, discharge and based on the patient's length of stay up to two HOPE Update Visit (HUV) timepoints). HOPE records with target dates* during the calendar year (CY) reporting period (January 1st – December 31st) must be submitted and accepted within the 30-day submission deadlines to avoid the 4-percentage point reduction. HOPE assessments are submitted into the Internet Quality Improvement & Evaluation System (iQIES).

- Hospices must meet all Hospice Quality Reporting Program (HQRP) requirements to avoid the APU reduction. Please refer to the [HQRP Requirements and Best Practices](#) page for details.

Note: This compliance threshold is related to the submission deadline for HOPE records.

Recommended completion goals are not considered in the timeliness compliance threshold.

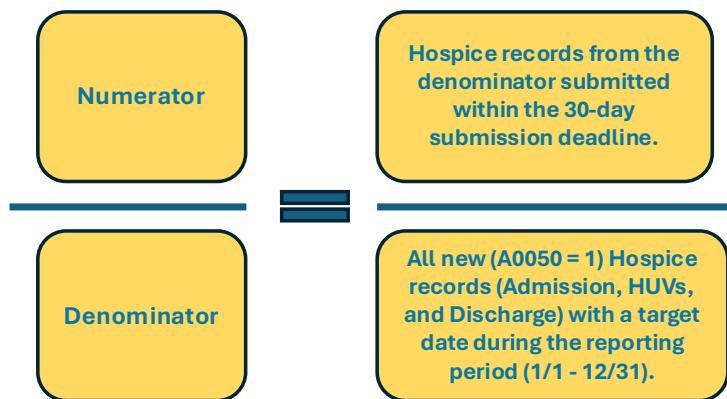
*** Target dates:** For Admission and Discharge, this is A0220- Admission Date and A0270-Discharge Date. For each HUV submission, this is Z0350-Date Assessment was Completed.

Calculation Algorithm for the Timeliness Compliance Threshold

Hospice records submitted for patient admissions, HUVs, and discharges with a target date during the CY reporting period (January 1st – December 31st) are included in the denominator of the compliance threshold calculation. The numerator includes any records from the denominator that were submitted within the 30-day submission deadline.**

*** Due to the 30-day submission deadline, the CMS system waits until January 31st each year to run the prior year's annual data summary of hospice submissions by provider.*

Figure 1. Calculation Algorithm for the Timeliness Compliance Threshold



The Hospice Timeliness Compliance Threshold Report

What is the Hospice Timeliness Compliance Threshold Report?

This is an on-demand report that allows **providers** to check their preliminary compliance with the 90% threshold. In the system, providers will select the appropriate APU FY from the FY dropdown list. For example, for reports run for FY2028 will reflect timely submission success for records with Target Dates in CY 2026.

Specifically, this report will display:

- Provider identification and data collection time period information
- # of Hospice Records Submitted
- # of Hospice Records Submitted and Accepted within 30 days
- % of Hospice Records Submitted and Accepted within 30 days
- Did Provider Meet the 90% Compliance Threshold (Yes/No)

Note: The system only includes the current and prior FY options in the dropdown. There is no access to historical CY/FY data.

How is the report accessed?

Access to the iQIES reports is based upon the user's iQIES role. Users will log in to iQIES at <https://iqies.cms.gov/> with their Healthcare Quality Information System (HCQIS) Access Roles and Profile (HARP) login credentials. Refer to iQIES Onboarding Guide for further information, if necessary. Contact the Provider Security Official (PSO) for your organization or the iQIES Service Center for issues relating to access and permissions.

The reports application within iQIES enables hospice providers with iQIES permissions to connect electronically and view the many available reports, including the **Hospice Timeliness Compliance Threshold Report**. Other reports can help hospice providers monitor the submission and acceptance status of records in addition to identifying errors in need of correction.

Which records are included?

Records included are those that have been **submitted to and accepted** by iQIES within the 30-day submission deadline.

The report includes **the first submission** of all new/original records (A0050 = 1) for the CY starting on January 1st through December 31 depending upon the date on which the provider runs the report. All new hospice records (A0050 = 1) that have been **submitted to and accepted** by iQIES with a target date during the reporting period are included. For the FY 2028 APU year, this would be January 1, 2026, through December 31, 2026, depending upon the date on which the provider runs the report.

Example: On August 18, 2026, the hospice provider selects “FY 2028” from the drop-down list and runs the **Hospice Timeliness Compliance Threshold Report**.

This report will contain all HOPE records (A0050 = 1) that have been submitted **to** and accepted by iQIES with target dates from January 1, 2026, through August 18, 2026 (the date on which the report was run).

*Adjustments for hospices granted extensions/exemptions or those made through modification or inactivation requests are not reflected in the report.

For more information about:

- iQIES Reports, access the iQIES Reports Training Materials section on the QIES Technical Support Office (QTSO) website (<https://qtso.cms.gov/software/iqies/reference-manuals>) to locate the files below:
- CMS iQIES Reports User Manual: this manual provides detailed information about the functionality of the iQIES reporting system.
- CMS iQIES Reports Guide: Hospice: this guide contains detailed information about the Hospice Provider Reports in iQIES.
- Technical assistance regarding HOPE submissions, error messages, or reports, contact the **iQIES Service Center** via email iqies@cms.hhs.gov or call at 1-877-201-4721 or 1-800-339-9313.
- The HQRP requirements, visit the [HQRP Requirements and Best Practices](#) webpage.
- General HQRP questions, contact the Hospice Quality Help Desk at HospiceQualityQuestions@cms.hhs.gov.
- Submitting a reconsideration request or to ask other related questions, contact the Reconsideration Help Desk at HospiceQRPReconsiderations@cms.hhs.gov.
- Trainings related to the HQRP, HOPE, and Data Submissions and Reports visit CMS' [HQRP Training and Education Library](#) webpage.