



## The Hospice Quality Reporting Program (HQRP)

### **Current Measures**

This document contains the details for the measures that are calculated using Hospice Outcomes and Patient Evaluation (HOPE) (from Hospice Item Set (HIS) until September 30, 2025), the administrative data (claims), and Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey. Please refer the current HQRP Quality Measure (QM) Specifications User's Manual for more information. Since FY 2022, the HQRP has included four measures: Hospice and Palliative Care Composite Process Measure: Comprehensive Assessment at Admission (CBE #3235); Hospice Visits in the Last Days of Life (CBE #3645); Hospice Care Index (CMIT #328); and CAHPS® Hospice Survey (CBE #2651). This document details these four measures.

**Quality Measure Calculated using HOPE** (from Hospice Item Set (HIS) data through September 30, 2025)

**Hospice and Palliative Care Composite Process Measure – Comprehensive Assessment at Admission (CBE #3235)** (based on seven care processes).

<p><b>Measure Description:</b></p>	<p>The Comprehensive Assessment at Admission (CBE #3235) captures, in a single measure, the proportion of patients for whom the hospice performed all seven care processes, as applicable.</p> <ol style="list-style-type: none"> <li>1. Beliefs/values addressed (if desired by the patient)</li> <li>2. Treatment preferences</li> <li>3. Pain screening</li> <li>4. Pain assessment</li> <li>5. Dyspnea treatment</li> <li>6. Dyspnea screening</li> <li>7. Patients treated with an opioid who are given a bowel regimen</li> </ol>
<p><b>Numerator Statement:</b></p>	<p>All patient stays from the denominator who meet the numerator criteria for the individual components applicable to the patient.</p>
<p><b>Denominator Statement:</b></p>	<p>All patient stays, except for those with exclusions.</p>
<p><b>Denominator Exclusions:</b></p>	<p>Patient stays are excluded from the denominator if they are under 18 years of age.</p>

<b>Measure Type:</b>	Process
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List and description of the 7 care processes used to calculate the Comprehensive Assessment at Admission (CBE #3235):

<b>HOPE Component Measure</b>	<b>Description</b>
Beliefs/Values Addressed (if desired by the patient)	Percentage of patient stays with documentation of a discussion of spiritual/religious concerns or documentation that the patient and/or caregiver did not want to discuss spiritual/religious concerns.
Treatment Preferences	Percentage of patient stays with chart documentation that the hospice discussed (or attempted to discuss) preferences for life sustaining treatments.
Pain Screening	Percentage of patient stays during which the patient was screened for pain during the initial nursing assessment.
Pain Assessment	Percentage of patient stays during which the patient screened positive for pain and received a comprehensive assessment of pain within 1 day of the screening.
Dyspnea Screening	Percentage of patient stays during which the patient was screened for dyspnea during the initial nursing assessment.
Dyspnea Treatment	Percentage of patient stays during which the patient screened positive for dyspnea and received treatment within 1 day of the screening.
Patients Treated with an Opioid who are Given a Bowel Regimen	Percentage of patient stays treated with an opioid that are offered/prescribed a bowel regimen or documentation of why this was not needed.

Visit the [CMS HQR website](#) and the Downloads section of the [Current Measures](#) page for more information about this measure and the 7 individual component measures:

- For calculation of the 7 individual measures, review the current HQR QM Specifications User’s Manual.
- For background and methodology about CBE #3235, see the Hospice Comprehensive Assessment QM Background and Methodology Fact Sheet (PDF).

## **Quality Measures Calculated Using Medicare Claims**

## Hospice Visits in Last Days of Life (HVLDDL) (CBE #3645)

<b>Measure Description:</b>	<p>The HVLDDL measure assesses hospice staff visits to patients at the end of life. This measure is constructed from Medicare hospice claims records. It indicates the hospice provider's proportion of patients who have received in-person visits from a registered nurse or medical social worker on at least two out of the final three days of the patient's life.</p> <p>Note: The last three days are defined as: (Day 1) the day of death, (Day 2) the day prior to death, and (Day 3) the day two days prior to death.</p>
<b>Numerator Statement:</b>	<p>The number of patient stays in the denominator in which the patient and/or caregiver received in-person visits from registered nurses or medical social workers on at least two of the final three days of the patient's life, as captured by hospice claims records.</p> <p>Note: Any visits occurring after the time of the patient's death do not count towards the measure score.</p>
<b>Denominator Statement:</b>	<p>All hospice patient stays, except those meeting exclusion criteria as identified below.</p>

<p><b>Denominator Exclusions:</b></p>	<p>Patients are excluded from the denominator if:</p> <ul style="list-style-type: none"> <li>• They did not expire in hospice care as indicated by the reason for discharge</li> <li>• They received any continuous home care, respite care, or general inpatient care in the final three days of life</li> <li>• They were enrolled in hospice for fewer than three days</li> </ul> <p>Note: HVLDL looks at visits in the last three days of life; patients must receive hospice services for at least three days to be included in the measure.</p>
<p><b>Measure Type:</b></p>	<p>Process</p>

## Hospice Care Index (HCI) (CMIT #328)

<b>Measure Description:</b>	<p>The Hospice Care Index (HCI) captures care processes occurring throughout the hospice stay, between admission and discharge. The HCI is a single measure comprising of ten indicators calculated from Medicare claims data. The indicators included in the HCI are listed below this table.</p> <p>The index design of the HCI simultaneously monitors all ten indicators. Collectively these indicators represent different aspects of hospice service and thereby characterize hospices comprehensively, rather than on just a single care dimension. Each indicator equally affects the single HCI score, reflecting the equal importance of each aspect of care delivered from admission to discharge.</p>
<b>Numerator Statement:</b>	<p>The HCI does not have a traditional numerator statement. Instead, a hospice is awarded a point for meeting each criterion for each of the ten claims-based indicators. The sum of the points earned from meeting the criterion of each individual indicator results in the hospice's HCI score. HCI scores can range from 0 to a perfect 10.</p>
<b>Denominator Statement:</b>	<p>The HCI does not have a traditional denominator. The HCI score is calculated as the total number of points earned across ten indicators (hospices earn a point on an indicator when their indicator scores meet the criterion for the given indicator). The potential range of scores is from 0 to 10.</p>

<b>Denominator Exclusions:</b>	Hospices with fewer than 20 discharges in the two pooled years of data are not assigned a calculated index score per the convention of CMS's quality reporting program (requiring sufficient data available to calculate reliable scores for publicly displayed measures).
<b>Measure Type:</b>	Process

### HCI Indicators: Description and Criteria for Each of the 10 Indicators

HCI Indicator	Description	Index Earned Point Criteria
Continuous Home Care (CHC) or General Inpatient (GIP) Provided	The percentage of hospice service days that were provided at the Continuous Home Care (CHC) or General Inpatient (GIP) level of care.	Hospice Score Above 0%
Gaps in Skilled Nursing Visits	The percentage of hospice elections, of at least 30 days, where the patient experienced at least one gap between nursing visits exceeding 7 days.	Below 90 Percentile Rank
Early Live Discharges	The percentage of all live discharges from hospice occurring within the first 7 days after hospice admission.	Below 90 Percentile Rank
Late Live Discharges	The percentage of all live discharges from hospice occurring on or after 180 days after hospice admission.	Below 90 Percentile Rank
Burdensome Transitions (Type 1) Live Discharges from Hospice Followed by Hospitalization and Subsequent Hospice Readmission	The percentage of all live discharges from hospice that were followed by hospitalization within two days, and followed by hospice readmission within two days of hospital discharge.	Below 90 Percentile Rank

Burdensome Transitions (Type 2) Live Discharges from Hospice Followed by Hospitalization with the Patient Dying in the Hospital	The percentage of all live discharges from hospice that were followed by hospitalization within two days, and where the patient also died during the inpatient hospitalization stay.	Below 90 Percentile Rank
Per-beneficiary Medicare Spending	Average per-beneficiary Medicare payments (in U.S. dollars): the total number of payments Medicare paid to hospice providers divided by the total number of hospice beneficiaries served.	Below 90 Percentile Rank
Skilled Nursing Care Minutes per Routine Home Care (RHC) Day	Average total skilled nurse minutes provided by hospices on all Routine Home Care (RHC) service days: the total number of skilled nurse minutes provided by the hospice on all RHC service days divided by the total number of RHC days the hospice serviced.	Above 10 Percentile Rank
Skilled Nursing Minutes on Weekends	The percentage of skilled nurse visit minutes that occurred on Saturdays and Sundays out of all skilled nurse visits provided by the hospice during RHC service days.	Above 10 Percentile Rank
Visits Near Death	The percentage of beneficiaries receiving at least one visit by a skilled nurse or social worker during the last three days of the patient's life (a visit on the date of death, the date prior to the date of death, or two days prior to the date of death).	Above 10 Percentile Rank

**The points earned on each indicator are summed to result in the single HCI**

**Observed Score.** For more information on the 10 HCI indicator measures and how they are calculated, please refer to the current HQRP QM Specifications User's Manual located in the Downloads section of the [Current Measures](#) page.

## Measures calculated from the CAHPS® Hospice Survey

The original CAHPS Hospice survey was used to calculate eight publicly reported CAHPS Hospice Survey quality measures. A revised version of the CAHPS Hospice Survey was introduced beginning with Q2 2025 decedents. The revised survey introduces one new measure (Care Preferences), substantially revises one original measure (Getting Hospice Care Training), drops one question from one original measure (Hospice Team Communication), and simplifies and updates wording.

All CAHPS® Hospice Survey measures are endorsed under CBE #2651. Unless otherwise indicated below, all measures have the following numerator statement, denominator statement, exclusions, and measure type:

<b>Numerator Statement:</b>	CAHPS® Hospice Survey measures are calculated using top-box scoring. The top-box score refers to the percentage of caregiver respondents that give the most positive response (e.g., “Yes, definitely” in response to a question with the response options “Yes, definitely,” “Yes, somewhat,” and “No,” where “Yes, definitely” is the most positive response). Top-box scores for each survey question are adjusted for mode of survey administration and case mix.
<b>Denominator Statement:</b>	The top-box denominator is the number of respondents who answer at least one question in a measure.

<b>Exclusions:</b>	<p>The hospice patient is still alive.</p> <p>The decedent’s age at death was less than 18 years.</p> <p>The decedent died within 48 hours of his/her last admission to hospice care.</p> <p>The decedent had no caregiver of record, or a caregiver of record who is a nonfamilial legal guardian.</p> <p>The decedent’s caregiver of record does not have a U.S. or U.S. Territory home address.</p> <p>The decedent or caregiver requested that they not be contacted (i.e., by signing a no publicity request while under the care of hospice or otherwise directly requesting not to be contacted).</p> <p>The caregiver is institutionalized, has mental/physical incapacity, has a language barrier, or is deceased.</p> <p>The caregiver reports on the survey that he or she “never” oversaw or took part in the decedent’s hospice care.</p>
<b>Measure Type:</b>	Outcome

Descriptions of each measure, as well as measure-specific denominator specifications, where applicable, are provided below. Details on how CAHPS® Hospice Survey measures are scored can be found at: <https://hospicecahpsurvey.org/en/scoring-and-analysis/>.

**Communication with Family**

<b>Measure Description:</b>	<p>Multi-item measure that assesses how often family caregivers reported that the hospice team:</p> <ul style="list-style-type: none"> <li>• Kept them informed about when they would arrive to care for their family member</li> <li>• Explained things in a way that was easy to understand</li> <li>• They listened carefully to them when they talked about problems with their family member’s hospice care</li> <li>• Kept them informed about their family member’s condition</li> <li>• Listened carefully to them</li> <li>• Gave them confusing or contradictory information about their family member’s condition or care (original survey only; this item was removed from the revised survey)</li> </ul>
<b>Additional Denominator Specifications:</b>	None.
<b>Getting Timely Help</b>	
<b>Measure Description:</b>	<p>Multi-item measure that assesses how often family caregivers reported that:</p> <ul style="list-style-type: none"> <li>• They got help as soon as they needed it, when they asked the hospice team for help</li> <li>• They got the help they needed from the hospice team during evenings, weekends, or holidays</li> </ul>
<b>Additional Denominator Specifications:</b>	None.

## Treating Patient with Respect

<b>Measure Description:</b>	<p>Multi-item measure that assesses how often family caregivers reported that:</p> <ul style="list-style-type: none"> <li>• The hospice team treated their family member with dignity and respect</li> <li>• They felt that the hospice team really cared about their family member</li> </ul>
<b>Additional Denominator Specifications:</b>	<p>None.</p>

## Emotional and Spiritual Support

<b>Measure Description:</b>	<p>Multi-item measure that assesses how much of the following family caregivers reported:</p> <ul style="list-style-type: none"> <li>• Emotional support from the hospice team while their family member was in hospice care</li> <li>• Emotional support from the hospice team in the weeks after their family member died</li> <li>• Support from the hospice team for their religious or spiritual beliefs</li> </ul>
<b>Additional Denominator Specifications:</b>	<p>Those who answer “Too much” are not included in measure scoring.</p>

## Help For Pain and Symptoms

<b>Measure Description:</b>	Multi-item measure that assesses whether family caregivers reported that their family member got as much help with pain as needed, and how often their family member got needed help for: <ul style="list-style-type: none"> <li>• Trouble breathing</li> <li>• Trouble with constipation</li> <li>• Feelings of anxiety or sadness</li> </ul>
<b>Additional Denominator Specifications:</b>	None.
<b>Care Preferences</b> (new in the revised survey)	
<b>Measure Description:</b>	Multi-item measure that assesses whether family caregivers reported that the hospice team: <ul style="list-style-type: none"> <li>• Provided care that respected their family member’s wishes</li> <li>• Made an effort to listen to the things that mattered most to them or their family member.</li> </ul>
<b>Additional Denominator Specifications:</b>	None.
<b>Training Family to Care For Patient</b>	

<p><b>Measure Description:</b></p>	<p>In the original version of the survey, this is a multi-item measure that assesses whether family caregivers reported the hospice team gave them the training they needed about:</p> <ul style="list-style-type: none"> <li>• Side effects to watch for from pain medicine</li> <li>• If and when to give more pain medicine</li> <li>• How to help if their family member had trouble breathing</li> <li>• How to help if their family member became restless or agitated.</li> </ul> <p>In the revised survey, this is an individual survey item that assesses whether family caregivers reported that the hospice team taught them how to care for their family member, including how to care for family members who need pain medicine, have trouble breathing, are restless or agitated, or have other care needs.</p>
<p><b>Additional Denominator Specifications:</b></p>	<p>For both the original and revised survey, scores are calculated only among those respondents who indicate that their family member received hospice care at home or in an assisted living facility.</p> <p>For the revised survey, those who answer “I did not need this teaching” are not included in measure scoring.</p>
<p><b>Rating of This Hospice</b></p>	
<p><b>Measure Description:</b></p>	<p>Individual survey item that assesses how often family caregivers rated their family member’s hospice care a “9” or “10” on a scale from 0 (worst possible) to 10 (best possible)</p>

<b>Additional Denominator Specifications:</b>	None.
<b>Willing to Recommend This Hospice</b>	
<b>Measure Description:</b>	Individual survey item that assesses how likely family caregivers reported they would be to recommend the hospice to other friends or family
<b>Additional Denominator Specifications:</b>	None.