



COVID-19 Public Reporting Tip Sheet

The purpose of the tip sheet is to help providers understand the Centers for Medicare & Medicaid Services’ (CMS) public reporting strategy for the HQRP to account for CMS quality data submissions that were optional and exempted from public reporting during Q4 of calendar year 2019 and Q1 and Q2 of 2020 due to the COVID-19 public health emergency (PHE). The impact on CMS’ Hospice Compare website refreshes will also be outlined. This tip sheet serves as a companion document to the [HQRP COVID-19 PHE Tip Sheet](#) published in July 2020, which provides practical guidance to address hospice quality data submissions after July 1, 2020, once the temporary HQRP exemptions from the COVID-19 PHE ended.



HQRP and Public Reporting on Hospice Compare

The HQRP was established under Section 1814(i) (5) of the Social Security Act, which requires the Secretary to publicly report, on a CMS website, quality measures that relate to the care provided by hospice programs across the country. Currently, the Hospice Compare website reports on the results of the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey of the family experience of care and two quality measures based data collected on the Hospice Item Set (HIS):

- Hospice Visits When Death Is Imminent Measure
- Comprehensive Assessment Measure

Temporary HQRP Exemptions Due to the COVID-19 PHE

The CMS [March 27, 2020 Medicare Learning Network \(MLN\) memo](#) provided temporary exemptions to the HQRP data submission requirements due to the COVID-19 PHE. CMS made data submissions optional or temporarily exempted providers from the submission of the CAHPS® Hospice Survey and HIS assessment and discharge data for the quarters in Figure 1.

Figure 1. Quarters for Which Data Are Optional or Exempted

Quarter	CAHPS® and HIS Data Submission
October 1, 2019–December 31, 2019 (Q4 2019)	Optional
January 1, 2020–March 31, 2020 (Q1 2020)	Exempted
April 1, 2020–June 30, 2020 (Q2 2020)	Exempted

These exemptions to the HQRP data submission requirements ended **on June 30, 2020**.

Impact of Data Exemptions on Public Reporting

In the March 27, 2020, Medicare Learning Network (MLN) memo, CMS indicated that data submission for Q4 2019 was optional and that any data submitted would be used for reporting purposes. Since data submissions for Q4 2019 meet public reporting standards, these data will be included in measure calculations for the Hospice Compare site refresh scheduled for November 2020.

The exempted data for Q1 2020 and Q2 2020 will impact what is displayed on Hospice Compare; therefore, CMS developed a plan to accommodate the exempted two quarters of data that also takes providers into consideration.

CMS Strategy for Exempted Data

The affected Compare site refreshes that were scheduled to include CY 2020 COVID-19 exempted data (Q1 2020 and Q2 2020) include:

- February 2021
- May 2021
- August 2021
- November 2021

For these refreshes, CMS will hold the data constant (i.e., *freeze the data*). This means that following the November 2020 refresh, the data publicly reported will be the same data as the November 2020 data. Stated another way, the publicly reported data will be frozen through the November 2021 refresh.

After the November 2021 refresh, CMS plans to resume public reporting. Figure 2 provides a summary.

Figure 2. Summary of Data Refreshes

Quarter Refresh	Hospice Compare HIS- Assessment Based Measures	Hospice Compare CAHPS®
November 2020	Normal refresh (includes Q4 2019 data)	Normal refresh (includes Q4 2019 data)
February 2021	Freeze	Freeze
May 2021	Freeze	Freeze
August 2021	Freeze	Freeze
November 2021	Freeze	Freeze
February 2022	Public reporting resumes*	Public reporting resumes*
May 2022	Normal refresh	Public reporting resumes*
August 2022	Normal refresh	Public reporting resumes*
November 2022	Normal refresh	Public reporting resumes*
February 2023	Normal refresh	Public reporting resumes*
May 2023	Normal refresh	Normal refresh

*To account for missing PHE-exempted data (Q1 2020 and Q2 2020) when public reporting resumes, any potential change in measure calculation methodology will be subject to notice-and-comment rulemaking.

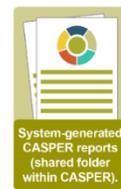


Provider Reports

How will the data freeze affect provider reports?

- **Provider Preview Reports:**

- The purpose of these reports is to give providers the opportunity to preview their HIS quality measure results and Hospice CAHPS® survey results prior to public display on Hospice Compare.
- Subsequent to the November 2020 refresh, CMS will not issue provider preview reports for those refreshes that continue to display the constant or frozen data.



Covers HIS data from specific time points.



Issued at specific times, for 30-day preview periods.



Allows providers to preview final QM results before public display on Hospice Compare.

- **Review and Correct Report:**

- The purpose of this report is for providers to have access to quality measure data prior to the data correction deadline for public reporting. It includes data from the most current quarter “open” for data correction and data from the previous three quarters “closed” for data correction (frozen data).
- There will be no data available (open) to correct for Q1 2020 and Q2 2020.

- **HQRP Quality Measure (QM) Reports:**

- These reports give you confidential feedback on your agency’s performance. You can run these for any reporting period of your choice and they can include a full year of data if you request. They include both the patient-level data and the hospice-level data.
- Providers will be able to confidentially review any data from Q1 and Q2 2020 that they chose to submit.

Note: Post July 1, 2020, correction and submission deadlines will revert to their normal schedule. Data displays and correction/submission deadlines will apply for Q3 2020 and beyond, as detailed in Figure 3.

Figure 3. Data Correction and Submission Deadlines

Quarter	Correction/Submission Deadline
Q3 2020	February 15, 2021
Q4 2020	May 17, 2021
Q1 2021	August 16, 2021

When will the data return to expected quarters of data displayed?

The Hospice Compare site data will go back to its expected quarters of data displayed in May 2022 for HIS and May 2023 for CAHPS®.

Data Submission After July 1, 2020 – Refresher

Please refer to the HQRP COVID-19 PHE Tip Sheet for more details.

Starting on July 1, 2020, hospices were to resume timely quality data collection and submission. There are two reporting requirements for the HQRP:



- HIS
- CAHPS® Hospice Survey

HIS

All new HIS admission records and any HIS discharge records occurring on or after July 1, 2020, should be submitted. This means that data submission must occur for all patients within 30 days of admission and discharge at least 90 percent of the time.

CAHPS®

The CAHPS® Hospice Survey resumed on July 1 with July decedents.

What data will be used for the HQRP?

Since Q1 and Q2 of 2020 (January 1–June 30, 2020) were exempted due to the COVID-19 PHE, the CY 2020 data used for meeting the HQRP requirements will only include July 1 through December 31, 2020. This means that even if you submit HIS and CAHPS® Hospice Survey data for Q1 and Q2 2020, we will not include any of those data for purposes of public reporting of quality measures or for calculating whether you met the HQRP requirements impacting FY 2022 payments.

How will new HIS submissions be impacted by data that were exempted due to the COVID-19 PHE?

- CMS is aware that some of the discharges submitted may not have a matching HIS admission record. This may cause a warning error during the submission process.
- CMS will make adjustments on their end to accommodate for any records with missing admissions.
- These mismatched sets of records will not be counted or included in your hospice data calculations for quality reporting.
- Mismatched sets of data will cause hospices to receive a warning, or error message on the final validation report (FVR).
- **Warning errors will not cause records to be rejected by the system.** You can ignore these warnings as data will still be accepted into the system as long as there were no other data issues that caused fatal warnings.

Error Number	Error Type	Error Description
909	Out of Sequence	Inconsistent Record Sequence: Under CMS sequencing guidelines, this type of record does not logically follow the type of record received prior to this one.

Despite this warning, data will still be accepted into the system. (no action is needed)



Resources

- **For the Interim Final Rule with Comment Period (IFC-1):**
<https://www.federalregister.gov/documents/2020/04/06/2020-06990/medicare-and-medicaid-programs-policy-and-regulatory-revisions-in-response-to-the-covid-19-public>.
- **For the Interim Final Rule with Comment Period released April 30, 2020, (IFC-2):**
<https://www.federalregister.gov/documents/2020/05/08/2020-09608/medicare-and-medicaid-programs-basic-health-program-and-exchanges-additional-policy-and-regulatory>.
- **For the CMS Medicare Learning Network memo released March 27, 2020:**
<https://www.cms.gov/files/document/guidance-memo-exceptions-and-extensions-quality-reporting-and-value-based-purchasing-programs.pdf>.
- **For program guidance and information about the CMS response to COVID-19:**
<https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>.
- **For program guidance, updates, and announcements regarding the Hospice QRP visit the Spotlight & Announcements web page:** <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Spotlight>.
- **For more information about public reporting for Hospice QRP visit:**
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Public-Reporting-Background-and-Announcements>.
- **For FY 2020 Hospice QRP reporting year requirements:** <https://www.cms.gov/files/document/hqrp-requirements-fy-2021-and-future-fy-reporting-yearsjan2020.pdf>.

Email questions to the Hospice Quality Help Desk:

HospiceQualityQuestions@cms.hhs.gov

