

Hospice Quality Reporting Program

Quarterly Updates for October-December 2019

This document provides Hospice Quality Reporting Program (HQRP)-related updates on events and guidance from the 4th Quarter of 2019 (October – December 2019).

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Tip of the Quarter



- Data collection for both HIS and CAHPS® Hospice Survey data begins January 1, 2020 to comply with the Hospice Quality Reporting Program (HQRP) Requirements.
- During the Calendar Year (CY), hospices must submit and have accepted their HIS and CAHPS® Hospice Survey data.
- Payment is impacted during the Fiscal Year (FY). Hospices are subject to a 2% reduction in their APU for failure to meet the requirements for HIS and/or CAHPS® Hospice survey.
- NOTE: HIS and CAHPS® have separate requirements for HQRP compliance. Hospices must be compliant with both HIS and CAHPS® in the CY to be compliant with HQRP and to receive full APU each FY. For CY 2020 HIS and CAHPS® Hospice Survey data submissions’ compliances will impact payment in FY 2022.

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Section 1: What You May Have Missed Last Quarter

Updates and Announcements

Data Correction Deadline replaces “Freeze Dates”

Beginning with the November 2019 Hospice Compare refresh, providers need to submit all HIS modification, or inactivation records, prior to the 4.5 month data correction deadline for modifications to be reflected in the corresponding HIS Provider Preview Report and in Hospice Compare refreshes.

This means that providers have 4.5 months following the end of each calendar year (CY) quarter to review and correct their HIS records with target dates (i.e. the patient’s admission or discharge date) in that quarter for public reporting. Specifically, each data correction deadline will occur on the 15th of the CY month that is approximately 4.5 months after the end of each CY quarter. After the 4.5 month data correction deadline has passed, HIS data from the previous calendar quarter will be permanently frozen for the purposes of public reporting. Updates made after the 4.5 month correction deadline will not appear in any Hospice Compare refresh. This policy is based on the record-level, not the patient-stay-level, meaning a patient’s Hospice Item Set (HIS)-Admission and HIS-Discharge records may have different data correction deadlines. Therefore, we encourage providers to review their HIS records early and often to help identify any errors in submitted data; **providers should not wait until the patient has been discharged to review admission data because at that point, it may be too late to correct any errors in the admission record.**

For more information see the “Policy Update: 4.5 Month Data Correction Deadline for Public Reporting” in the download section of the Public Reporting: Key Dates for Providers at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Public-Reporting-Key-Dates-for-Providers.html>.

Fiscal Year Annual Payment Update (APU)

The FY 2020 payment updates for HIS and CAHPS® data went into effect on October 1st, 2019 and reflect meeting the Hospice QRP Requirements based on CY 2018. Data collected during CY 2019 impacts the FY 2021 APU. The upcoming data collection year, CY 2020, starts with January 1, 2020 through December 31, 2020 and will impact the FY 2022 APU.

Hospices must submit their CY data timely for both HIS and CAHPS® or be subject to a 2% reduction in their Fiscal Year Annual Payment Update (APU).

To keep informed about compliance with the HQRP Requirements read the [Hospice Final Rules](#), materials offered on the [Best Practices webpage](#), [Training and Education webpage](#), and [Reconsideration webpage](#).

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Reporting Requirement	Sample for FY 2021 APU Determinations	Compliance Criteria
HIS	HIS records with a target date 1/1/19 – 12/31/19	At least 90% of all HIS records must be submitted and accepted by QIES ASAP within 30 days of the target date for the record.
CAHPS®	Patient decedents 1/1/19 – 12/31/19	Vendor submits data quarterly – each submission must be complete (have 3 months' worth of data) and must be submitted and accepted by the quarterly deadlines (second Wednesday of February, May, August, and November).

Hospice Quality Reporting Program (HQRP) Forum

On December 4, 2019, CMS hosted a Hospice Quality Reporting Program (HQRP) Forum that provided updates on the development of a new patient assessment tool called Hospice Outcomes & Patient Evaluation (HOPE). The HQRP Forum replaces the quarterly Special Open Door Forums CMS has hosted in the past. The December HQRP Forum included updates on HOPE development including the focus group and cognitive testing findings as well as some key takeaways from the some EHR vendor listening sessions that were conducted in October 2019. Materials from the HQRP Forum including the slides can be found on the HOPE page of the HQRP website: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/HOPE>.

If you have any feedback and/or questions on HOPE or related topics, please email: HospiceAssessment@cms.hhs.gov.

Technical Expert Panel (TEP) Convened for Quality Measures

Abt Associates, as the HQRP measure development contractor, convened a group of stakeholders and subject matter experts to contribute direction and technical input on instrument and measure development and implementation. The TEP nomination period was held August 30th, 2019 to September 30th, 2019 and was posted on the [Provider Engagement webpage of the HQRP website](#). Abt Associates held the first in-person TEP on November 6 & 7, which is composed of 11 participants, representing a wide range of hospice stakeholders including providers, caregivers, IT, researchers, and quality improvement experts. The goal of the TEP is to provide input on the HOPE assessment instrument and corresponding quality measures for hospice care. A report documenting the proceedings of this meeting will be available on the HQRP website in early CY 2020.

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Frequently Asked Questions on the Hospice Outcomes & Patient Evaluation (HOPE) and “HOPE Fundamentals” Available

CMS has posted two documents that articulate key information about efforts to develop a new patient assessment tool for hospice to be proposed in future rulemaking. The Frequently Asked Questions (FAQ) document responds to common questions about patient assessment tools and the HOPE. The other document, called “HOPE Fundamentals,” highlights differences between the Hospice Item Set (HIS) and what CMS currently expects of the HOPE. These documents are now available in the Downloads section of the HOPE page at

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/HOPE.html>

Recruitment Announcement – Alpha Test for the Hospice Outcomes & Patient Evaluation (HOPE) Assessment Instrument

Abt Associates is currently recruiting hospice providers to participate in a field test (called an alpha test) of the new hospice patient assessment instrument, titled Hospice Outcomes & Patient Evaluation (HOPE). Data collection is anticipated to begin in late spring 2020.

The detailed recruitment announcement with additional information about the alpha test is available on CMS’s Hospice QRP Provider Engagement Opportunities webpage, at this link: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-QRP-Provider-Engagement-Opportunities.html>

Those interested in participating, please follow the survey link <https://www.surveymzmo.com/s3/5311824/HOPE-Alpha-Test-Application> to complete the HOPE alpha test interest form.

Recruitment begins 11/22/2019 and ends 2/21/2020. We will notify each applicant on or about 3/5/2020 whether they have or have not been selected to participate in the HOPE alpha test.

We are seeking a representative group of hospices, with a range of characteristics, including ownership (profit, nonprofit); and rurality (urban, rural, both). Our goal is to include hospices that provide care for a wide range of patient populations, including people with cancer and non-cancer diagnoses, for example.

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Educational Trainings Released Last Quarter

The Hospice QRP website includes an Education and Training Library webpage full of great educational and training opportunities. Please check-out this webpage for useful materials and pre-recorded trainings. <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-Quality-Reporting-Training-Training-and-Education-Library.html>

The Hospice Quality Reporting Program Compliance Tip Sheet

The Hospice Quality Reporting Program (HQRP): Compliance Tip Sheet provides hospice agencies new to the HQRP with an overview of the basic requirements providers must meet in order to achieve a full Annual Payment Update (APU). The HQRP Compliance Tip Sheet also contains links to numerous resources available to assist providers in meeting those requirements. The document is available here: [Hospice Quality Reporting Program Compliance Tip Sheet \(PDF\)](#)

Success with the HQRP: Putting the Pieces Together to Meet Compliance -- Resources Included

CMS hosted a webinar for Medicare-certified hospice providers to provide an overview on Hospice Quality Reporting Program (HQRP) requirements.

During this webinar, CMS subject matter experts provided information on the following topics:

- Hospice Item Set (HIS) reporting requirements;
- HQRP compliance cycle;
- How to achieve hospice compliance;
- CAHPS® survey requirements; and
- How to switch CAHPS® survey research vendors.

The webinar pdf is available on the Education and Training Library and here: [November 14 Hospice Quality Reporting Program Webinar \(PDF\)](#)

Stay on Target with the Hospice Comprehensive Assessment Measure - One Pager

CMS posted a new one-pager outlining key information about the current Hospice Comprehensive Assessment measure. This one-pager includes an info-graphic visual intended to help hospice providers understand how the seven HIS measures contribute to the Hospice Comprehensive Assessment composite measure, including how to stay on target by completing all seven HIS measures for each patient. The document is now available in the Downloads section of the Current Measures page at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Current-Measures.html>

Section 2: What's Coming Up in the 1st Quarter of 2020

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Please keep informed by checking out the CMS website and signing up for the ListServes, ODF's, and MLN Weekly Newsletter on the HQRP website at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/index.html>

Home Health, Hospice & DME Open Door Forum Schedule (subject to change so please check the CMS ODF website):

- January 8, 2020

Hospice Quality Reporting Program (HQRP) Forum Schedule (subject to change so please check the CMS ODF website):

- April 22, 2020

Section 3: Previous and Upcoming Public Reporting Dates

The section below includes key public reporting dates for the previous and upcoming Quarters. Providers should review the timeline to ensure they are familiar with important upcoming public reporting dates, and refer to the Public Reporting: Key Dates for Providers webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Public-Reporting-Key-Dates-for-Providers.html> for more information.

Fourth Quarter 2019

Hospice Compare Refresh: November 2019

- HIS quality measures updated to reflect patient stays discharged in Q1 2018- Q4 2018
- CAHPS® Hospice Survey data updated to reflect quarters Q1 2017 – Q4 2018

Hospice Provider Preview Reports available: December 2, 2019

- HIS quality measure results from: Q2 2018 – Q1 2019
- Facility-level CAHPS® Hospice Survey results from quarter Q2 2017 – Q1 2019

Providers have 30-days to review their HIS and CAHPS® results (**December 2, 2019 through January 2, 2020**) prior to the **February 2020** Hospice Compare site refresh, during which this data will be publicly displayed.

Providers may request CMS review if they find denominator or other HIS quality metrics to be inaccurate, or if there are errors within the results from the CAHPS® Survey data. To request a review, providers should refer to the process outlined on the Public Reporting:

- HIS Preview Reports and Requests for CMS Review of HIS Data webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment->

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[Instruments/Hospice-Quality-Reporting/Public-Reporting-HIS-Preview-Reports-and-Requests-for-CMS-Review-of-HIS-Data.html](#) and;

- CAHPS® Preview Reports and Requests for CMS Review of CAHPS® Data webpage at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Public-Reporting-CAHPS-Preview-Reports-and-Requests-for-CMS-Review-of-CAHPS-Data.html>.

For more information on how to access these reports:

- HIS Preview Report Access Instructions at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Downloads/Hospice-Provider-Preview-Report-Access-Instructions.pdf>.
- If you have difficulty accessing your report after review of these instructions, please contact the Technical Help Desk E-mail: help@qtso.com. Phone: 1-877-201-4721 Hours: Monday-Friday 7:00 a.m. - 7:00 p.m. Central Time.
- Hospice CAHPS® Provider Preview Reports Access Instructions at <https://www.cms.gov/files/document/hospice-cahpsprovider-preview-report-access-instructions-final-12-1-17.pdf>
- Technical questions about the Hospice CAHPS® Survey should be directed to hospicecahpsurvey@HSAG.com or call toll free at 1-844-472-4621.

Upcoming Data Correction Deadlines for Public Reporting

Target Date of HIS Record: Quarter	Target Date of HIS Record: Dates	HIS Record Data Correction Deadline for Public Reporting (11:59:59 p.m. E.T.)
Quarter 3, 2019	(07/1/19–09/30/19)	February 15, 2020
Quarter 4, 2019	(10/1/19–12/31/19)	May 15, 2020

Section 4: Questions and Answers

Question 1: How are the HIS quality measure (QM) national average scores calculated on Hospice Compare?

Answer 1: The national average for each QM is comprised of the sum of all the hospices' percent value scores for that QM divided by the total number of hospices. All of the HIS-based QMs are rounded to one decimal. See the HQRP QM Users Manual in the downloads section of the Current Measures page on the HQRP website: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Current-Measures>.

Question 2: Where is the list of compliant hospices posted?

Answer 2: CMS posts a list of compliant providers on the CMS HQRP Requirements and Best Practices website annually, following each Fiscal Year (FY) payment determination.

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<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/HQRP-Requirements-and-Best-Practices.html>

Question 3: How do I request a username and/or password?

Answer 3: For questions regarding error messages or other technical questions, (registration for User IDs, technical training for data transmission, etc.) contact the Technical Help Desk E-mail: help@qtso.com Phone: 1-877-201-4721 Hours: Monday-Friday 7:00 a.m. - 7:00 p.m. Central.

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