

Hospice Quality Reporting Program

Quarterly Updates for October – December 2022

This document provides Hospice Quality Reporting Program (HQRP)-related updates on events and guidance from the 4th Quarter of 2022 (October 2022 – December 2022) and prepares for the 1st Quarter of 2023 (January 2023 – March 2023).

Contents

Tips of the Quarter.....	1
Section 1: HQRP Updates.....	1
Section 2: HOPE Updates.....	2
Section 3: Public Reporting Updates.....	2
Section 4: Other Updates, Announcements, and Resources.....	3
Section 5: What’s New in the 1 st Quarter of 2023.....	3
Section 6: Questions and Answers.....	4

Tips of the Quarter

Discontinuation of Annual APU List

As of October 2022, CMS is no longer posting the annual list of hospices who are compliant with the HQRP requirements for the previous fiscal year. ONLY letters of Non-compliance will be sent to the hospices who have not met the HQRP requirements for the previous calendar year and are thus subject to the 4% APU penalty for the respective fiscal year. These letters are sent by the MAC and are also placed in a hospice’s CASPER folder.

Section 1: HQRP Updates

HQRP Compliance Reminders

- **General Requirements:** HQRP data collection requirements for both the Hospice Item Set (HIS) and CAHPS® Hospice Survey are defined for the **Calendar Year (CY): January 1-December 31**. To comply with the HQRP, each CY hospices must submit and ensure acceptance of at least 90% of all required Hospice Item Set (HIS) records by the 30-day submission deadline and participate monthly with the CAHPS® Hospice Survey by utilizing a CMS-approved third-party vendor, in accordance with HQRP requirements. Since administrative data is collected from claims, hospices with claims data are 100% compliant with the HCI and HVLDL claims-based measure submission requirements.
- **Payment** is impacted during the corresponding **Fiscal Year (FY): October 1-September 30**. Hospices are subject to a payment reduction in their annual payment update (APU) if they fail to

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comply with the HQRP requirements. Beginning in FY 2024 (CY 2022 data) the APU penalty will increase from 2% to 4%.

Section 2: HOPE Updates

HOPE Development Process

HOPE Information Gathering	HOPE Testing	HOPE Rulemaking	HOPE Implementation	HOPE Quality Measures
				

CMS and their contractor, Abt Associates, continue testing the draft standardized patient assessment tool for the HQRP, called Hospice Outcomes & Patient Evaluation (HOPE). Additional information about HOPE is available on the [HOPE](#) webpage.

HOPE Beta Test assessment data collection is now complete. Through Spring 2023, the Beta Test Team will analyze all of the data and feedback collected from the hospice teams to inform decisions for the final version of the HOPE assessment and the implementation of HOPE. We thank all hospices participating in the beta test for their outstanding efforts!

The development of HOPE is an important part of the Meaningful Measures initiative to improve outcomes for patients, their families, caregivers, and providers while also reducing burden on providers and clinicians. The HOPE assessment is important for developing a set of hospice quality measures, including outcome measures that reflect the needs of patients, their families, and caregivers throughout the hospice stay.

Section 3: Public Reporting Updates

The section below includes key public reporting dates. Providers should review the timeline to ensure they are familiar with these important upcoming public reporting dates, and refer to the [Public Reporting: Key Dates for Providers](#) webpage on the HQRP website for more information.

February 2023 Care Compare Refresh

The next Care Compare Refresh will take place in February 2023. This Refresh will include:

- HIS quality measure results from Quarter 2 2021 – Quarter 1 2022.
- CAHPS® Hospice Survey data reflecting Q4 2019 and Q3 2020 – Q1 2022, for updating Star Ratings and measure scores.
- Claims-based measure results reflecting Q3 2019 – Q4 2019 and Q3 2020 – Q4 2021.

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Because the new claims-based HVLDL and HCI measures were added to Care Compare in the August Refresh, the November Refresh will not update the claims-based measures as previously planned. The next update of the claims-based measures will occur in November 2023.

The Provider Preview Reports were issued on November 9, 2022. Providers have 30 days to review their quality measure results in CASPER prior to the February 2023 Care Compare refresh, when this data will be publicly displayed. Although the actual “preview period” is 30 days, the reports will continue to be available for another 30 days, or a total of 60 days. CMS encourages providers to download and save their Hospice Provider Preview Reports for future reference, as they will no longer be available in CASPER after this 60-day period.

Section 4: Other Updates, Announcements, and Resources

To stay informed about compliance with HQRP Requirements, read the Hospice Final Rule and the materials offered on the [Hospice Center, HQRP Announcements and Spotlight](#) webpage, [HQRP Requirements and Best Practices](#) webpage, [Training and Education Library](#) webpage, and [Reconsideration Requests](#) webpage. To stay informed about HQRP updates, subscribe to the [Post-Acute Care listserv](#).

Educational Events and Trainings

Home Health & Hospice Health Equity Technical Expert Panel (TEP)

Abt Associates is convening a Technical Expert Panel for the Hospice Quality Reporting Program & Home Health QRP Health Equity Structural Composite Measure Development (Home Health & Hospice HE TEP). The TEP nomination period was July 15 – August 12, 2022. The TEP was composed of individuals with differing areas of expertise and perspectives, including patient advocates, clinical and administrative staff from home health and hospice providers, quality assurance specialists, and health equity experts. This diverse group of 15 stakeholders was charged with providing thoughtful input and direction on the development of a health equity measure concept to be used in both hospice and home health settings. The Home Health & Hospice HE TEP convened virtually on November 8, November 29, and December 5, 2022.

Section 5: What’s New in the 1st Quarter of 2023

For updates about new resources or changes to the schedule, please check out the CMS website and sign up for the post-acute care ListServ, ODFs, and the 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 Forums (ODFs)

The next ODFs for the HQRP are scheduled for the following dates at 2 PM EST:

- January 11, 2023
- February 23, 2023

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HQRP Forum – Spring 2023

In April 2023, CMS will hold an HQRP Forum providing updates regarding the FY 2024 Hospice Proposed Rule.

Section 6: Questions and Answers

Question 1: I am not sure if we have completely met the HQRP compliance threshold. How can I find out if our hospice will receive the 2% reduction that is in place for FY 2023?

Answer 1: CMS has a clear process for disseminating **letters of non-compliance**. Details about the process CMS follows can be found on the HQRP website on the [HQRP Reconsideration Request](#) page. The noncompliance letters are sent to each hospice by their MAC and another letter appears in your CASPER Folder. These letters explain the Reconsideration process. We suggest you check your folder for any letter of non-compliance if any was received. The information about the process can be found on the HQRP website Reconsideration webpage located at: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Reconsideration-Requests>. CMS **does not** send letters to those who have met compliance.

Resources about Timely Compliance can be found on the [CMS HQRP website](#) on the [Requirements and Best Practice](#) page. You may also find this document helpful: <https://www.cms.gov/files/document/timeliness-compliance-threshold-his-submissions-fact-sheetaugust2021.pdf>. We also suggest you check your Timeliness Compliance report regularly.

Question 2: Our hospice received a call from a caregiver reporting that the hospice patient did not seem to be breathing. Our on-call nurse made a visit to the home to assess the situation and determined, upon examination, that indeed the patient had expired. Does the time in the home prior to the actual pronouncement count as a visit for the Hospice Visits Last Days of Life (HVLDL) measure?

Answer 2: We suggest you refer to the HQRP Quality Measure Specifications: User’s Manual v1.01 which defines the steps to calculate the HVLDL visits (Pages 17 & 18). Post-mortem visits (signified by the “PM” modifier” are not counted towards the numerator). Any visit labeled as the PM visit would not be counted. The visit described would be the RN pronouncement visit, typically the PM visit.

You may also want to consult the Claims Manual at: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/clm104c11.pdf>.

Question 3: Our hospice is now serving Palliative Care patients. Do I need to submit and HIS Admission and Discharge for those patients?

Answer 3: Per the HIS Manual <https://www.cms.gov/files/document/his-manual-v300022321.pdf> page 1-6, the guidance is as follows.

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For the purposes of completing the HIS, a patient is considered admitted to a hospice if the following conditions are met:

1. There is a signed election statement (or other agreement for care for non-Medicare patients).
2. The patient did not expire before the effective date of the election or agreement for care.
3. The hospice made a visit in the setting where hospice services are to be initiated.

All three criteria listed above must be met for the patient to be considered admitted for the purposes of HIS reporting. Unless your palliative care patients are being admitted to hospice services, there is no requirement for HIS submission.