

## Hospice Outreach Email – Dec 2022

### Email Subject

Hospice Quality Reporting Program (HQRP) – Important Reminders and Updates

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#### Tips of the Quarter

We would like to remind hospices that 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. If you have further questions regarding your compliance, please email [ORPHelp@swingtech.com](mailto:ORPHelp@swingtech.com) for assistance.

**Welcome!****FY 2024 Hospice Quality Reporting Reminder**

**Hospice Calendar Year (CY) 2022 data, starting on January 1, 2022, impacts Fiscal Year (FY) 2024 payments, starting on October 1, 2023---Be ready to meet the full Annual Payment Update (APU) and avoid the 4% payment reduction increase.**

Beginning with FY 2024, the payment penalty increases to 4% for hospices not meeting the HQRP Requirements. To ensure hospices achieve the full APU, be certain to **meet the quality reporting requirements:**

- **Hospice Item Set (HIS):** The threshold for HIS is 90%. This means that 90% of all HIS assessments must be submitted to and accepted by CMS within 30 days of the admission or discharge date. For HIS assessments, the quarters are based on the submission of HIS admission or discharge assessments.
- **Consumer Assessments of Healthcare Providers and Systems (CAHPS®):** All Medicare-certified hospices that are required to conduct the CAHPS Hospice Survey must contract with an approved CAHPS Hospice Survey vendor and conduct the survey for 12 months in each calendar year. For more information about the requirements for the CAHPS Hospice Survey, please visit the survey website: [www.hospicecahpsurvey.org](http://www.hospicecahpsurvey.org). For CAHPS, the data collection quarters are based on patient deaths, January 1, 2022, through December 31, 2022, inclusive.
- **Claims:** Administrative data are collected from claims, and hospices are considered automatically 100% compliant with submission of this data.
- For more information on the HQRP and achieving compliance, refer to the [Getting Started with the Hospice Quality Reporting Program](#) tip sheet and other useful documents under the [Best Practices](#) webpage, or [Training and Education Library](#) webpage.

**COVID-19 Public Health Emergency (PHE) Updates:**

Most of all, know that we at the Centers for Medicare & Medicaid Services (CMS) value all that you do every day to care for patients receiving hospice services, their families, caregivers and loved ones during the COVID-19 PHE.

CMS actions in response to COVID-19 PHE are part of the ongoing White House Task Force efforts. To keep up with the important work that the Task Force is doing in response to COVID-19 PHE, visit [www.coronavirus.gov](http://www.coronavirus.gov).

For a complete and updated list of CMS actions and other information specific to CMS, please visit the [Current Emergencies](#) webpage.

**Provider-initiated requests for exemption or extension for extraordinary circumstances:** If a hospice experiences an extraordinary circumstance, it can initiate a request for extension or exemption. *Requests must be initiated within 90 days of the extraordinary circumstances event* and must be sent to CMS via email following the instructions provided on the [Extension and Exemption Requests](#) webpage.

## **HQRP Updates**

### **Reminder of Updated Hospice Resource Documents Available on the HQRP Webpages,**

- **Fiscal Year (FY) 2023 Hospice Payment Rate Update Final Rule (CMS-1773-F)**

For the Hospice Quality Reporting Program, the final rule provides an update on the development of a patient assessment instrument, titled Hospice Outcomes and Patient Evaluation (HOPE). This includes an update on the beta testing and derivatives that will be achieved during this phase of testing, such as burden estimates and timepoints for collection, as well as additional outreach efforts that will be conducted during and after beta testing and during our planned adoption process. CMS also discusses potential future quality measures within the HQRP based on HOPE and administrative data, including HOPE-based process measures and hybrid quality measures, which could be based upon multiple sources that include HOPE, claims and other data sources. CMS appreciates the public comments we received on these updates.

This rule provides an update on testing conducted for the CAHPS Hospice Survey, which is used to collect data on experiences of hospice care from primary caregivers of hospice patients. In particular, CMS is providing an update on a survey-mode experiment whose goal was to test the effect of adding a web-based mode to the CAHPS Hospice Survey.

In this final rule, we note our appreciation of public comments we received on our request for information on a number of questions related to improving health equity in hospices and on a potential future structural measure under consideration for the HQRP. Public input is very valuable for the continuing development of CMS' health equity quality measurement efforts and broader commitment to health equity; a key pillar of our strategic vision as further described here, <https://www.cms.gov/files/document/health-equity-fact-sheet.pdf>.

The final rule displayed on July 27, 2022 at the *Federal Register's* Public Inspection Desk and will be available under "Special Filings," at <https://www.federalregister.gov/documents/2022/07/29/2022-16214/medicare-program-fy-2023-hospice-wage-index-and-payment-rate-update-and-hospice-quality-reporting>.

For further information, see the hospice webpage here: <http://www.cms.gov/Center/Provider- Type/Hospice-Center.html>.

- **CMS Hospice Quality Reporting Program September Forum**

The CMS Hospice Quality Reporting Program September Forum was held on September 28, 2022. In this webinar, CMS shared updates related to the Fiscal Year (FY) 2023 Hospice Final Rule, recent Public Reporting activity, and other updates related to HQRP.

Please visit the [Provider and Stakeholder Engagement](#) webpage for additional details, including the registration link.

CMS updated its webpages and documents. The updated documents include: *HQRP Requirements FY 2023 and Future FY Reporting Years* and the *HQRP Quick Reference Guide FY 2023*. Documents can be found in the **Downloads** section. The *Getting Started with the HQRP* document can be found in the **Toolkit** section of the [HQRP Requirements and Best Practices](#) webpage.

## **Public Reporting by Refresh Date**

### **November 23, 2022**

The most recent Care Compare Refresh occurred in November 2022. This refresh included:

- HIS quality measure results from Quarter 1 2021 – Quarter 4 2021
- CAHPS® Hospice Survey data reflecting Q2 2019 – Q4 2019 and Q3 2020 – Q3 2021; this includes survey measure results and an overall summary star rating for each hospice referred to as the Family Caregiver Survey Rating
- Claims-based measure results will still reflect Q3 2019 – Q4 2019 and Q3 2020 – Q4 2021

Because the new claims-based HVLDL and HCI measures were just added to Care Compare in the August Refresh, the November Refresh will not update the claims-based measures, as this data will not have changed significantly. The next update of the claims-based measures will occur in November 2023 and then annually each November.

### **November 9, 2022**

#### **NOW AVAILABLE IN QIES - Preview Reports for the February 2023 Refresh**

Providers can now access the latest Provider Preview Reports via the Certification and Survey Provider Enhanced Reports (CASPER) application. Once released in CASPER, providers will have 30 days during which to review their quality measure results. 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. The preview period for the latest Provider Preview Report lasts from November 9, 2022 to December 9, 2022. 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.

Learn more about the Provider Preview Report (HIS and Claims-based measures) [here](#) and about the CAHPS Preview Report [here](#). Hospice QRP Key Dates for Providers can be found [here](#). The 3<sup>rd</sup> Edition HQRP Public Reporting Tip Sheet is available [here \(PDF\)](#).

**An October 2022 off-cycle Care Compare refresh** is now available, which adds the [HQRP Explanatory Video](#) and [Hospice Care Index Measure \(or HCI\) Informational Video](#) to Care Compare.

## **Additional Updates**

### **CAHPS Hospice Survey Update**

The CAHPS Hospice Survey continues to collect data. Data submission deadlines for the CAHPS Data Warehouse are on the second Wednesday of the month in February, May, August, and November. Vendors must receive patient/caregiver lists timely to meet the requirements for the HQRP.

### **HOPE Update**

HOPE Beta Test assessment data collection is now complete, and we are beginning the analysis phase. We anticipate that the analysis phase will conclude in late spring 2023.

CMS thanks all participating hospices for their outstanding efforts and their contributions to the development of HOPE!

### **Training and Education and Provider, and Stakeholder Engagement**

CMS provides online education and training that is available 24/7, 365 days a year for convenient access on a variety of topics. Please check out the [HQRP Training and Education Library | CMS](#) and the [Provider and Stakeholder Engagement | CMS](#) webpages.

Please refer to the [Hospice QRP Announcements & Spotlight | CMS](#) for additional updates.

[Sign up for CMS Post-Acute Care Quality Reporting Updates](#)

Thank you,  
The Swingtech Help Desk Team

Swingtech is contracted by CMS to provide outreach and share important reminders with providers for the IRF, LTCH, SNF, and Hospice Quality Reporting Programs.  
*Work performed under CMS Contract # 75FCMC19C0039*