

## Hospice Outreach Email – March 2021

### Anticipated Distribution Date

On or after March 22, 2021

### Email Subject

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

**Good morning/afternoon!**

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

**Most of all, know that we at CMS greatly value all that you do every day to care for hospice patients, their families, caregivers and loved ones and send our warmest regards especially now during this 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 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 Website](#).

Hospices are encouraged to review the [HQRP COVID-19 PHE Tip Sheet](#). This tip sheet provides practical guidance to address hospice quality data submissions for July 1, 2020 through December 31, 2020 and beyond since the temporary HQRP exemptions from the COVID-19 PHE ended June 30, 2020.

### **Hospice Quality Reporting Reminder**

For hospices to meet the HQRP requirements, BOTH Hospice Item Set (HIS) and the CAHPS® Hospice Survey requirements must be submitted timely each year. Data from CY 2021 impacts your Annual Payment Update (APU) in FY 2023. To ensure your hospice achieves its full APU, please be sure to meet the quality reporting requirements:

- **For HIS:** The threshold for HIS is 90%. This means that 90% of all HIS assessments must be submitted and accepted within 30 days of the admission or discharge date. For HIS, the quarters are based on submission of HIS admission or discharge assessments.
- **For 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, 2021 through December 31, 2021, inclusive.
- 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](#).

**Hospice Compare Updates**

Please note: public reporting of hospices' data has been frozen due to the temporary exemption to the HQRP data submission requirements in responding to the COVID-19 Public Health Emergency (PHE). Data will remain frozen through the November 2021 refresh. No Provider Preview Reports will be issued for those refreshes that continue to display the constant or frozen data. For additional information on COVID-19 PHE data exemption, please refer to the [HQRP COVID-19 Public Reporting \(PR\) Tip Sheet](#).

For more information on these measures relating to public reporting, please visit the [Public Reporting: Background and Announcements webpage](#) and click on the Fact Sheet or Q&A document in the Downloads box. To track key dates related to public reporting, please visit the [Key Dates for Providers webpage](#).

**HIS Updates**

The HIS-Paperwork Reduction Act (PRA) package received Office of Management and Budget (OMB) approved on February 16, 2021. The HIS Manual V3.00 is final. At this time, providers should only be submitting HIS V3.00. Please continue to monitor the [HQRP Spotlight and Announcements webpage](#) for updates.

With OMB's approval of the HIS-PRA, the Hospice Visits in the Last Days of Life (HVLDDL) claims-based measure replaces the information previously collected in Section O of the HIS-Discharge. This is a re-specified, claims-based version of the Hospice Visits when Death is Imminent (HVWDII) measure pair. Per the measure specifications, HVLDDL indicates the hospice provider's proportion of patients who have received visits from a registered nurse or medical social worker (non-telephonically) on at least two out of the final three days of the patient's life.

For more information on this change, please review the [HIS Manual v 2.01](#).

This new measure is expected to be publicly reported in spring 2022 and discussed in future rulemaking.

**HOPE Tool Update**

CMS is developing a new patient assessment tool to be proposed in future rulemaking. The hospice patient assessment instrument is identified as the Hospice Outcomes & Patient Evaluation (HOPE).

There are four phases of HOPE testing: cognitive, pilot, alpha and beta testing.

As of the end of January 2021, HOPE completed alpha testing and that data is being analyzed to prepare for beta or national testing that is expected to begin later in 2021. Please visit the [HOPE webpage](#) for updates.

**CAHPS® Hospice Survey Update**

The CAHPS Hospice Survey is continuing to collect data normally. Data submission deadlines for the CAHPS Data Warehouse are the second Wednesday of the month in February, May,

August, and November. Please make sure to provide your vendor with your patient/caregiver lists in a timely manner in order to meet the requirements for the HQRP.

Swingtech is contracted by CMS to provide outreach and share important reminders with providers for the IRF, LTCH, SNF, and Hospice Quality Reporting Programs.

Thank you,  
The Swingtech Help Desk Team  
*Work performed under CMS Contract # 75FCMC19C0039*

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