Hospice
Quality Reporting Program Provider Training

Hospice Quality Reporting Program (HQRP) Data Submission and Requirements

Presenters:

Brenda Karkos, M.S.N./M.B.A., R.N., CHPN, Nurse Researcher/Associate, Abt Associates

Julie Ellingson, R.N., Senior Program Manager, Telligen

Acronyms in This Presentation

- Annual Payment Update (APU)
- Centers for Medicare & Medicaid Services (CMS)
- Certification and Survey Provider Enhanced Reports (CASPER)
- Consumer Assessment of Healthcare Providers and Systems (CAHPS)
- Hospice Item Set (HIS)
- Hospice Quality Reporting Program (HQRP)
- Provider Threshold Report (PTR)
- Quality Improvement and Evaluation System (QIES)
- QIES Technical Support Office (QTSO)
- Quality Measure (QM)
- Quality Reporting Program (QRP)

Housekeeping

- This webinar is being recorded.

- Please click on the settings button near the top of your screen to enable closed captioning.

- If you have a question at any point throughout today's presentation, please enter it in the chat panel.
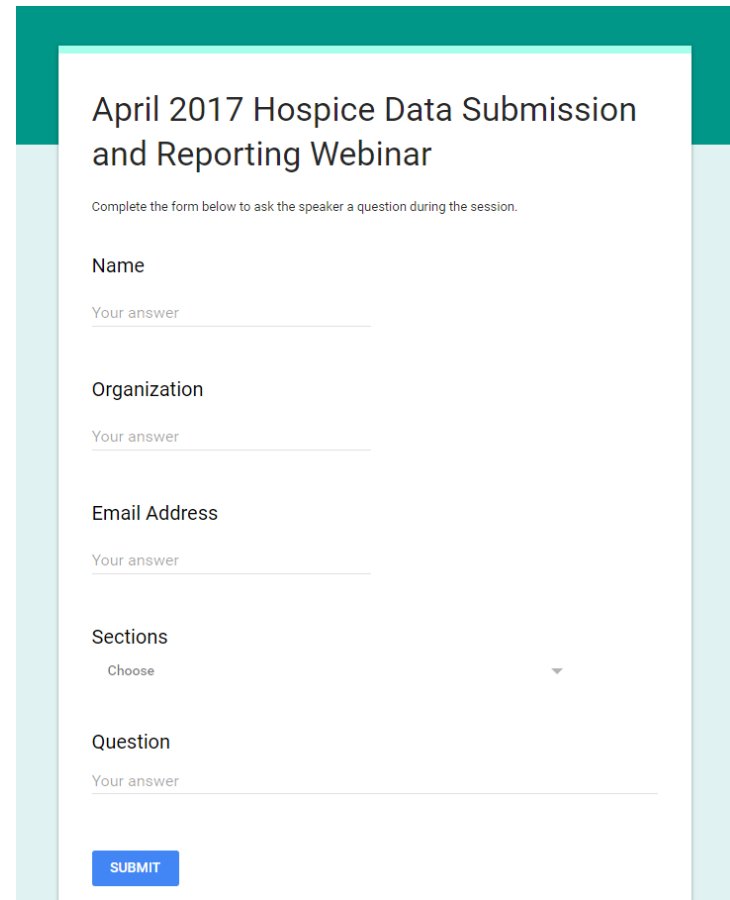
HOSPICE
QUALITY REPORTING PROGRAM

Polling Question

How many people (including yourself) are participating in this webinar together?

A. Just me—I am the only one participating

B. Two people

C. Three or four people

D. Five or more people

HOSPICE
QUALITY REPORTING PROGRAM

Electronic Question Submission

1. Visit https://goo.gl/forms/E8hCiCk1XXdXZNMw2.

2. Enter your full name, organization, and email address.

April 2017 Hospice Data Submission and Reporting Webinar

Complete the form below to ask the speaker a question during the session.

Name

Your answer
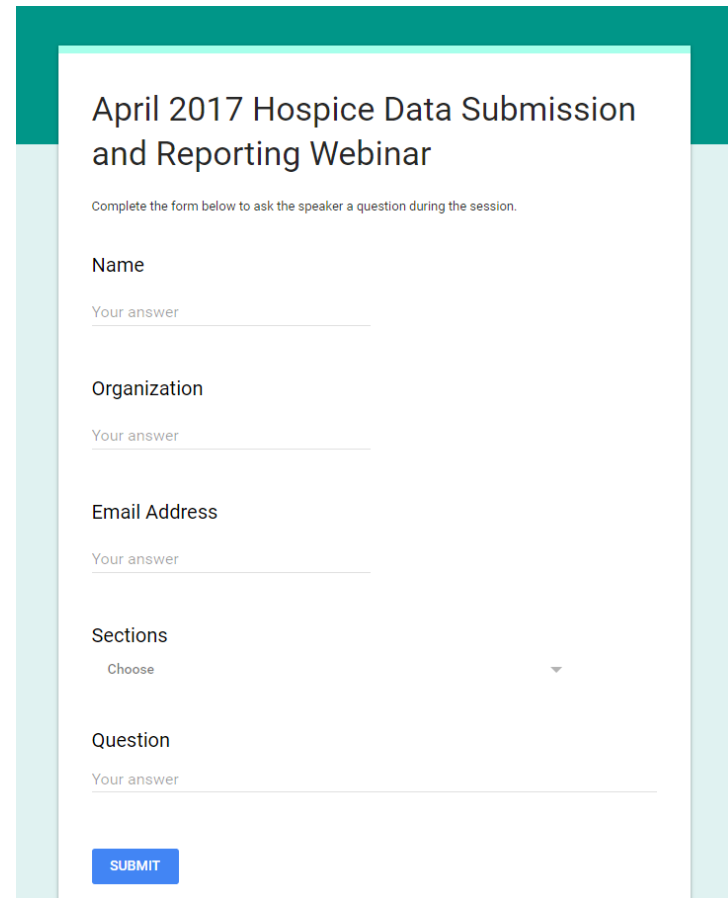
Organization
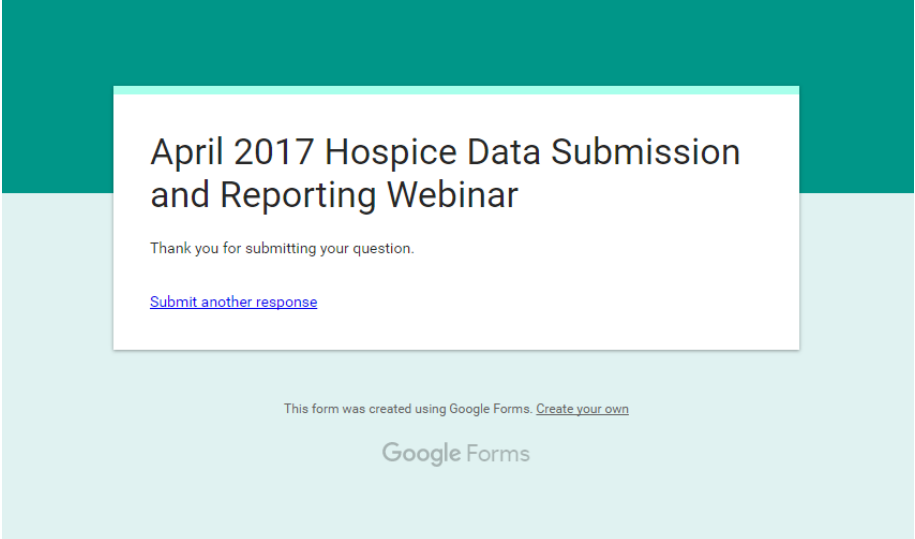
Your answer

Email Address

Your answer

Sections

Choose

Question

Your answer

SUBMIT

HOSPICE
QUALITY REPORTING PROGRAM

Electronic Question Submission

3. Using the dropdown menu, choose the section to which your question refers.

4. Type your questions and click "SUBMIT" to send your question to the presenter.

Electronic Question Submission

5. You may ask another question by clicking "Submit another response" after the page refreshes.

April 2017 Hospice Data Submission and Reporting Webinar

Thank you for submitting your question.

Submit another response

This form was created using Google Forms. Create your own

Google Forms

Objectives

- Upon completion of the training, participants will be able to:
    - Summarize the Hospice Quality Reporting Program (HQRP) submission requirements.
    - Explain the hospice information that will be publicly reported in 2017.
    - Describe the three new hospice reports and the information they contain.
    - Explain how to locate the three new reports.

Objectives

- You will also be able to:
  - Demonstrate how to investigate patient and agency-level information included in the three new hospice reports using other Certification and Survey Provider Enhanced Reports (CASPER).
  - Discuss additional CASPER reports available to hospice providers.
  - Locate resources available to support providers with using the new reports, including who to contact with questions/concerns.

What is the HQRP?

- The HQRP promotes the delivery of person-centered, high-quality, and safe care by hospices.

- CMS has adopted measures that were recommended by multi-stakeholder organizations and developed with the input of providers, payers, and other stakeholders.

HOSPICE
QUALITY REPORTING PROGRAM

HQRP Requirements

- Currently, there are two requirements for the HQRP:

  - Hospice Item Set (HIS).
  - Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey.

- All Medicare-certified hospice providers must comply with these two reporting requirements.

HQRP Compliance and the Annual Payment Update (APU)

- It is the act of submitting data that determines compliance with HQRP requirements.

- Hospice providers that fail to comply with the HQRP requirements will have their market basket update (also known as the Annual Payment Update, or APU) reduced by 2 percentage points.

HOSPICE QUALITY REPORTING PROGRAM

HIS Submission Requirements

- All Medicare-certified hospice providers are required to submit:
  - HIS-Admission records.
  - HIS-Discharge records.
- HIS data are collected and submitted on all patient admissions, regardless of the payer, patient's age, or location of the receipt of hospice services.

Two Data Sets:
HIS-Admission and HIS-Discharge

HIS-Admission
Section A: Administrative Information
Section F: Preferences
Section I: Active Diagnoses
Section J: Health Conditions
Section N: Medications
Section Z: Record Administration

HIS-Discharge
Section A: Administrative Information
Section O: Service Utilization
Section Z: Record Administration

HOSPICE
QUALITY REPORTING PROGRAM

Polling Question

How many days does a hospice have after a patient is admitted to submit the Admission-HIS data?

    A. 14 days

    B. 10 days

    C. 30 days

    D. 90 days

HOSPICE
QUALITY REPORTING PROGRAM

HIS Submission Requirements

Reporting Year	Includes HIS Records From	Submission Threshold
FY 2018	1/1/16–12/31/16	70%
FY 2019	1/1/17–12/31/17	80%
FY 2020 and beyond	1/1/18–12/31/18 and beyond	90%

CAHPS Hospice Survey

- The CAHPS Hospice Survey measures the experiences that patients and their caregivers have with hospice care.

- National implementation of the CAHPS Hospice Survey began January 1, 2015.

- The goals of the survey are to:

  – Produce comparable data on patients' and caregivers' perspectives of care.

  – Create incentives for hospices to improve the quality of care through the public reporting of survey results.

  – Hold hospice providers accountable by informing the public about their quality of care.

Hospice CAHPS Exemption

- In general, all Medicare-certified hospices must participate in the CAHPS Hospice Survey in order to receive their full APU.

- Hospices that are too small or too new are exempted from participation.

- See http://www.hospicecahpssurvey.org for more information.

- For technical assistance, contact the CAHPS Hospice Survey Project Team at hospicecahpssurvey@HCQIS.org or (844) 472-4621.

For More Information

- Hospices may submit questions related to the extensions or exemptions requirements to the following email address: HospiceQRPReconsiderations@cms.hhs.gov.

- CMS' Hospice Quality Reporting web page is: https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/index.html.

Hospice Submission User's Guide

- The Hospice Submission User's Guide is available for download at the following location:
  - https://www.qtso.com/hospicetrain.html

- Hospice Quality Reporting Program Provider Training, May 2016:
  - https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Downloads/Hospice_Webinar_May_2016.pdf.

Requirements to Make Hospice Quality Data Publicly Available

- The Affordable Care Act requires that:
  - The Secretary is to report Quality Measures (QMs) that relate to hospice care provided by hospice programs on a CMS website.
- The Hospice Compare website will include:
  - HIS-based measure results.
  - Results of the CAHPS Hospice Survey.
- CMS anticipates that public reporting will begin in late summer 2017.

HOSPICE
QUALITY REPORTING PROGRAM

Hospice Quality Reporting

CASPER Reporting

Quality Measure (QM) Reports → **Provider Preview Reports** → **Compare**

Confidential Reporting

Public Reporting

Provider Final Validation Reports

Provider Threshold Reports (PTR)

Compliance
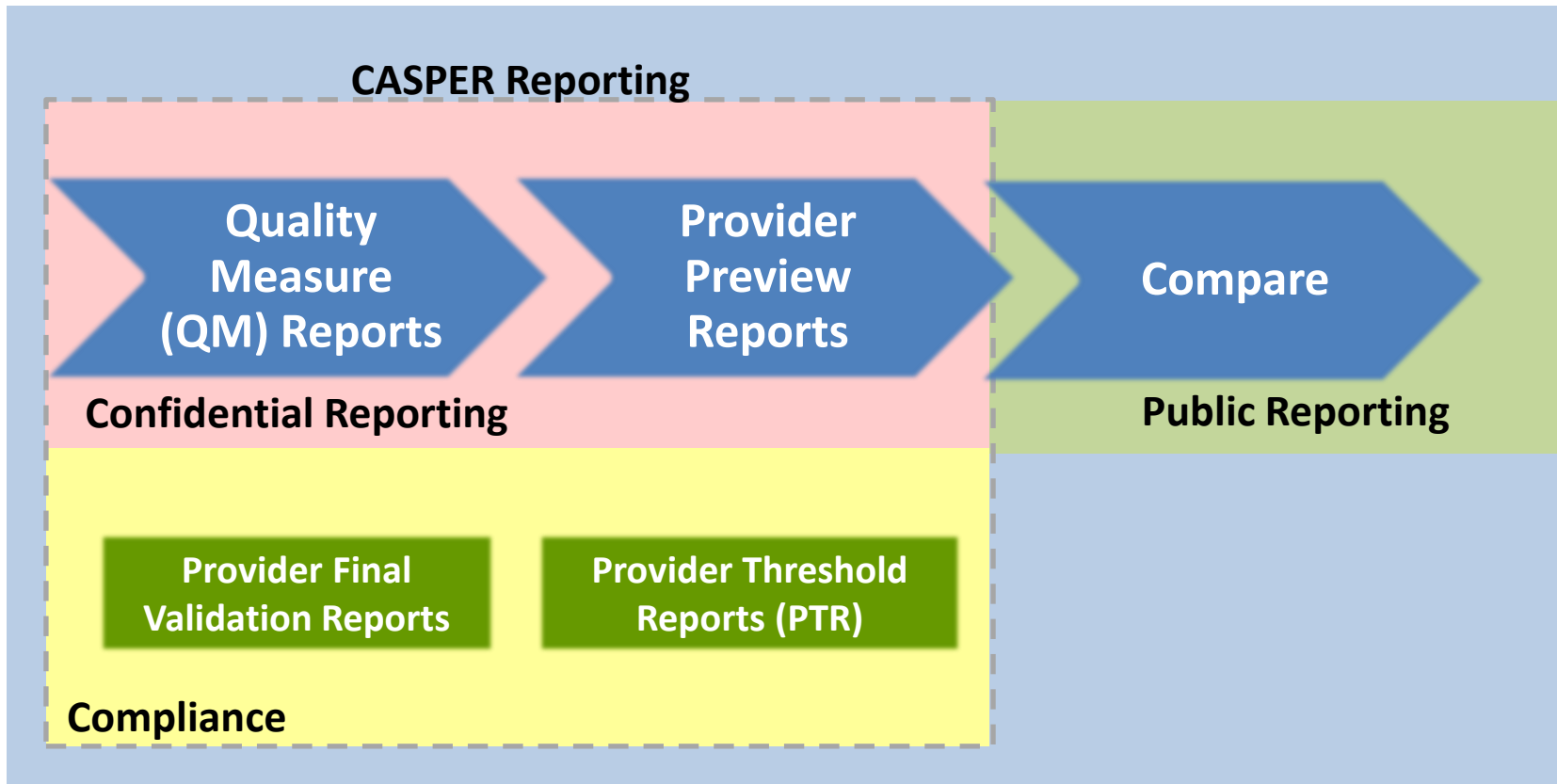
Public Reporting of Hospice Quality Data

- A CMS Hospice Compare website, which will provide valuable information regarding the quality delivered by Medicare-certified hospice agencies throughout the Nation, is currently in the planning stages.

- Consumers will be able to search for:
  - All Medicare-approved hospice providers serving their city or ZIP Code.
  - Provider quality information:
    - HIS-based quality measure results.
    - CAHPS Hospice Survey results.

HOSPICE
QUALITY REPORTING PROGRAM

Public Reporting of Hospice Quality Data

- Individual scores for each of the seven QMs will be publicly available.

- Hospices with a QM denominator size of fewer than 20 patient stays (based on 12 rolling months of data) will not have the QM score publicly displayed, since a score on the basis of small denominator size may not be reliable.

- CMS will continue to monitor QM performance and reportability and will adjust public reporting methodology in the future, if needed.

Seven NQF-Endorsed Quality Measures Collected via the HIS

1. Treatment Preferences (NQF #1641)
2. Beliefs/Values Addressed (If Desired by the Patient) (modified NQF #1647)
3. Pain Screening (NQF #1634)
4. Pain Assessment (NQF #1637)
5. Dyspnea Screening (NQF #1639)
6. Dyspnea Treatment (NQF #1638)
7. Patient Treated with an Opioid who are Given a Bowel Regimen (NQF #1617)

Compare Websites
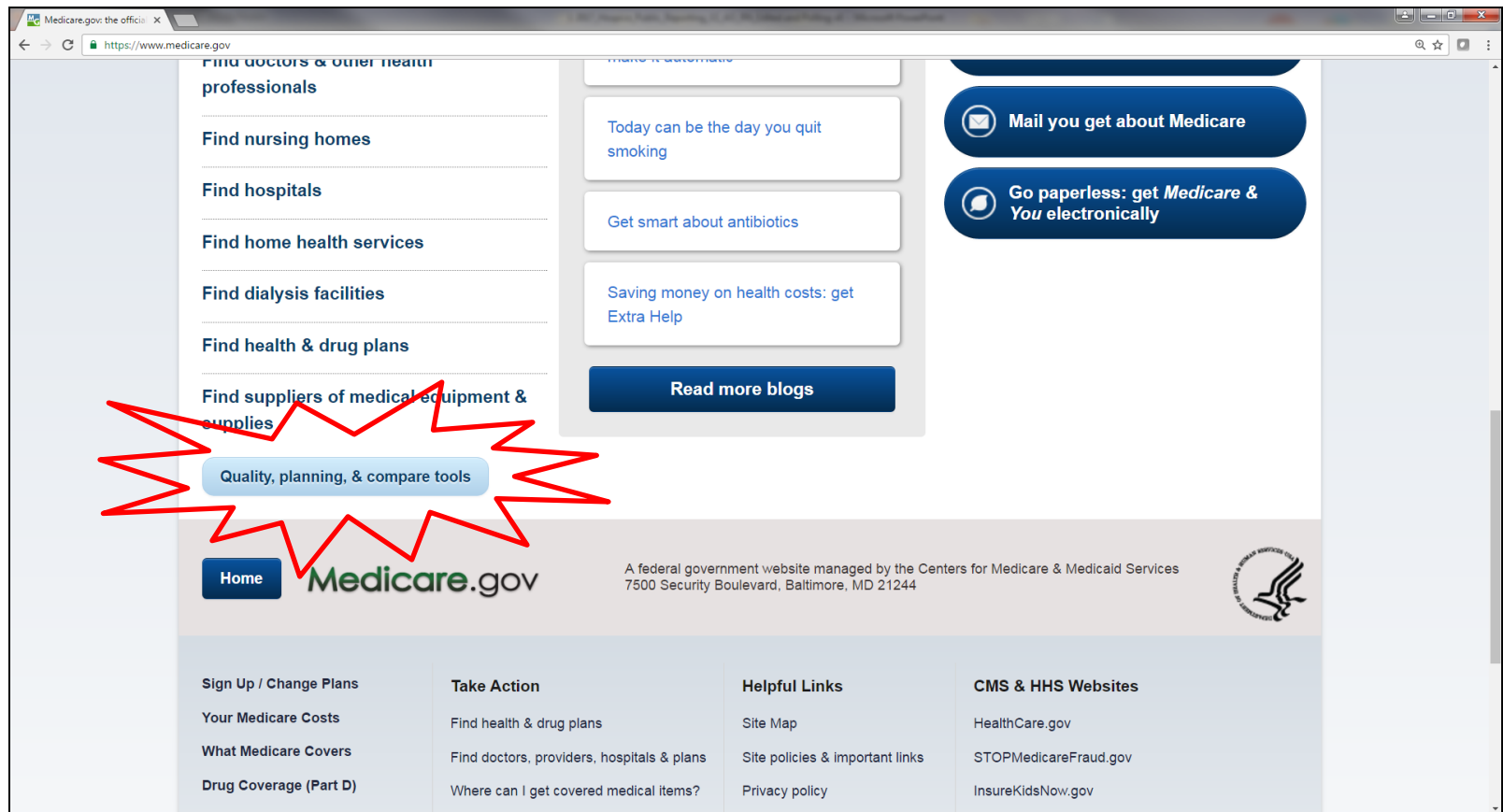
Hospice Quality Reporting

- Like other CMS Compare websites the Hospice Compare website will, in time, feature a quality rating system.

Currently Available on Data.Medicare.gov

- A list of all Medicare-certified hospice agencies.
  - The list includes addresses, phone numbers, and dates of original CMS certification, as well as additional demographic data for each agency.

HOSPICE
QUALITY REPORTING PROGRAM

Compare Websites

- Compare Websites are:
  - Available via the "Quality, planning, & compare tools" button on https://www.Medicare.gov/.
  - Linked from https://Data.Medicare.gov/.

HOSPICE
QUALITY REPORTING PROGRAM

Live Demonstration

Julie Ellingson

Telligen

Hospice Timeliness Compliance Threshold Report

- User-requested, on-demand report in CASPER "Hospice Provider" report category.

- Provides the % of HIS records submitted within the 30-day submission deadline, per fiscal year.

- Includes total # submitted, total # submitted on time, and % submitted on time.

- Identifies, for the selected fiscal year, the required percentage that must be submitted on time to avoid the 2-percentage-point reduction in APU.

- 70 percent for FY 2018, 80 percent for FY 2019, 90 percent for FY 2020 and beyond.

HOSPICE
QUALITY REPORTING PROGRAM

Hospice Provider Report Category

CASPER Reports

Logout | Folders | MyLibrary | Reports | Queue | Options | Maint | Home

Report Categories

Hospice Provider
Hospice Quality Reporting Program

Hospice Provider

HIS Record Error Detail by Provider	• Error Detail by Provider
HIS Record Errors by Field by Provider	• Errors by Field by Provider
HIS Records with Error Number XXXXX	• Records with Error Number XXXXX
Hospice Admissions	• Admissions
Hospice Discharges	• Discharges
Hospice Error Number Summary by Provider by Vendor	• Error Number Summary by Provider by Vendor
Hospice Final Validation	• Hospice Final Validation
Hospice Item Set Print	• Item Set Print
Hospice Item Set Submission Statistics by Provider	• Submission Statistics by Provider
Hospice Item Sets Submitted	• Item Sets Submitted
Hospice Roster	• Roster
Hospice Submitter Final Validation	• Submitter Final Validation
Hospice Timeliness Compliance Threshold Report	• Timeliness Compliance Threshold Report

Pages [1]

Enter Criteria To Search For A Report:
(Hint: Leave blank to list all reports)   [   ] Search

Do not use the browser back button. To make changes to the data or navigate between pages, use the links provided in the application.

HQRP Data Submission and Reporting

33

HOSPICE
QUALITY REPORTING
PROGRAM

Hospice Timeliness Compliance Threshold Report Submit Page

My Inbox

Hospice Timeliness Compliance Threshold Report

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

CASPER Report
FY2018 Hospice Timeliness Compliance Threshold Report

CCN: 123456
FAC ID: 123456
Provider Name: GREAT HOSPICE
Provider City/State: ANYWHERE, IA

# of HIS Records Submitted: 67

# of HIS Records Submitted on Time: 46

% of HIS Records Submitted on Time: 69%*

---

*Per requirements set forth by CMS, 70% of all required HIS records must be submitted within the 30 day submission deadline to avoid the 2 percentage point reduction in the FY 2018 APU. Score calculations do not include extensions or exemptions.

HOSPICE
QUALITY REPORTING PROGRAM

HIS Records With Error Number XXXXX Report

- User-requested, on-demand report in CASPER "Hospice Provider" report category.

- Provides, for up to five specified error numbers, a list of HIS records submitted with those errors.

- Run report for errors -3034a and -3034b to determine list of HIS records submitted late.

- Assists you in researching cause of late submissions.

HOSPICE
QUALITY REPORTING PROGRAM

HIS Records With Error Number XXXXX Report

CASPER Report
(IA) HIS Records with Error Number -3034a, -3034b
from 01/01/2016 thru 12/31/2016

CCN: 123456
Provider Name: GREAT HOSPICE
Provider City: ANYWHERE

Error Number: -3034a

Error Message: Record Submitted Late: If A0250 is equal to 01 (Admission), then Submission Date minus A0220 (Admission Date) should be less than or equal to 30 days.

Submission Date	Last Name	First Name	HIS ID	HIS Item(s)	Submitted Data
04/29/2016	GRACE	GRACE	4705639	A0250, Submission Date, A0220	01, 04/29/2016, 03/26/2016
04/29/2016	CONTRARY	MARY	4705654	A0250, Submission Date, A0220	01, 04/29/2016, 03/25/2016
04/29/2016	PATIENT	LONELY	4705655	A0250, Submission Date, A0220	01, 04/29/2016, 03/20/2016
04/29/2016	SEVEN	PATIENT	4705656	A0250, Submission Date, A0220	01, 04/29/2016, 03/27/2016
04/29/2016	SIX	PATIENT	4705653	A0250, Submission Date, A0220	01, 04/29/2016, 03/22/2016
04/29/2016	CONTRARY	MARY	4705657	A0250, Submission Date, A0220	01, 04/29/2016, 03/25/2016
04/29/2016	FIVE	PATIENT	4705660	A0250, Submission Date, A0220	01, 04/29/2016, 03/08/2016
04/29/2016	FOUR	PATIENT	4705661	A0250, Submission Date, A0220	01, 04/29/2016, 03/07/2016
05/05/2016	BIRD	TWEETIE	4705675	A0250, Submission Date, A0220	01, 05/05/2016, 03/07/2016
05/05/2016	DOG	KITTY	4705678	A0250, Submission Date, A0220	01, 05/05/2016, 03/03/2016
05/05/2016	DOLL	BARBIE	4705676	A0250, Submission Date, A0220	01, 05/05/2016, 03/23/2016
05/05/2016	MUFFETT	MISSY	4705680	A0250, Submission Date, A0220	01, 05/05/2016, 03/07/2016

This report may contain privacy protected data and should not be released to the public.

HOSPICE
QUALITY REPORTING PROGRAM

Hospice-Level Quality Measure Report

- User-requested, on-demand report in CASPER "Hospice Quality Reporting Program" report category.

- Provides the hospice-level quality measure values for the HIS-based measures for the requested report period.

- Includes, per measure, the Numerator, Denominator, Hospice Observed Percent, Comparison Group National Average, and Comparison Group National Percentile.

Hospice Quality Reporting Program Report Category

Hospice-Level Quality Measure Report Submit Page

My Inbox

Hospice-Level Quality Measure Report

CASPER Report
Hospice-Level Quality Measure Report

Facility ID: 123456
CCN: 123456
Hospice Name: GREAT HOSPICE
City/State: ANYWHERE, IA

Report Period: 01/01/2016 - 12/31/2016
Data was calculated on: 02/15/2017
Comparison Group Period: 01/01/2016 - 12/31/2016
Report Run Date: 02/20/2017
Report Version Number: 1.00

Table Legend
N/A: Not Available
Dash (-): A dash represents a value that could not be computed

Measure Name (NQF ID)	CMS Measure ID	Numerator	Denominator	Hospice Observed Percent	Comparison Group National Average	Comparison Group National Percentile
Treatment Preferences (NQF #1641)	H001.01	17	17	100.0%	98.5%	100
Beliefs/Values (NQF #1647)	H002.01	17	17	100.0%	93.4%	100
Pain Screening (NQF #1634)	H003.01	16	17	94.1%	94.0%	29
Pain Assessment (NQF #1637)	H004.01	4	15	26.7%	76.5%	6
Dyspnea Screening (NQF #1639)	H005.01	17	17	100.0%	97.6%	100
Dyspnea Treatment (NQF #1638)	H006.01	11	11	100.0%	94.7%	100
Bowel Regimen (NQF #1617)	H007.01	16	16	100.0%	94.1%	100

This report may contain privacy protected data and should not be released to the public.
Any alteration to this report is strictly prohibited.

Hospice Patient Stay-Level Quality Measure Report

- User-requested, on-demand report in CASPER's "Hospice Quality Reporting Program" report category.

- Identifies each patient whose qualifying HIS record was included in the QM calculations for the selected report period.

- Includes, per patient per measure, whether the patient stay triggered the measure, did not trigger the measure, was excluded from the Denominator, or outcome was not available because the patient was either still active or the discharge record was missing.

HOSPICE
QUALITY REPORTING PROGRAM

Hospice Quality Reporting Program Report Category

Hospice Patient Stay-Level Quality Measure Report Submit Page

My Inbox

Hospice Patient Stay-Level Quality Measure Report

CASPER Report
Hospice Patient Stay-Level Quality Measure Report

Facility ID: 123456
CCN: 123456
Hospice Name: GREAT HOSPICE
City/State: ANYWHERE, IA

Report Period: 01/01/2016 - 12/31/2016
Data was calculated on: 02/15/2017
Report Run Date: 02/20/2017
Report Version Number: 1.00

Status Legend
b = not triggered
e = excluded from the QM denominator
X = triggered
c = admission date extracted from the discharge record because admission record is missing
N/A = not available because the patient stay is either active or the discharge record is missing

Patient Name	Patient ID	Admission Date	Discharge Date	Treatment Preferences	Beliefs/Values	Pain Screening	Pain Assessment	Dyspnea Screening	Dyspnea Treatment	Bowel Regimen	Quality Measure Count
BIRD, TWEETIE	11111111	03/07/2016	04/04/2016	X	X	X	b	X	X	X	6
BOOP, BETTY	22222222	04/06/2016	N/A	e	e	e	e	e	e	e	0
BOPPITY, BIPPITY	33333333	02/12/2016	N/A	e	e	e	e	e	e	e	0
BUNCH, BRADY	44444444	02/12/2016	N/A	e	e	e	e	e	e	e	0
CAR, RACE	55555555	01/12/2016	01/22/2016	X	X	X	X	X	e	X	6
CAT, TOM	66666666	04/15/2016 c	04/25/2016	e	e	e	e	e	e	e	0
CONTRARY, MARY	77777777	03/25/2016	N/A	e	e	e	e	e	e	e	0
CORDUROY, RED	88888888	12/21/2015	01/02/2016	X	X	X	X	X	e	X	6
COWBOY, IMA	99999999	02/23/2016	N/A	e	e	e	e	e	e	e	0
COYOTE, WHYLIE	12121212	04/01/2016	N/A	e	e	e	e	e	e	e	0
DALMATION, SPOT	23232323	02/24/2016	N/A	e	e	e	e	e	e	e	0
DOG, KITTY	34343434	03/03/2016	N/A	e	e	e	e	e	e	e	0

This report may contain privacy protected data and should not be released to the public.
Any alteration to this report is strictly prohibited.

HOSPICE
QUALITY REPORTING PROGRAM

Other Helpful CASPER Reports – Hospice Provider Report Category

- HIS Record Errors by Field by Provider Report

- Hospice Roster Report

HIS Record Errors by Field by Provider Report

- Shows, by error number, the number of HIS records where the error was encountered and the percent of HIS records with the error during the specified timeframe.

- Helps identify potential issues requiring further research, such as submission timeliness and HIS field inconsistencies.

HOSPICE
QUALITY REPORTING PROGRAM

HIS Record Errors by Field by Provider Report

CASPER Report

(IA) HIS Record Errors by Field by Provider
from 01/01/2016 thru 12/31/2016

CCN: 123456
Provider Name: GREAT HOSPICE
Provider City: ANYWHERE

Message Type: Fatal and Warning

Total HIS Records Submitted: 82

Error Num	Error Message	HIS Item(s)	Number of HIS Records	Percent of HIS Records
-3034a	Record Submitted Late: If A0250 is equal to 01 (Admission), then Submission Date minus A0220 (Admission Date) should be less than or equal to 30 days.	A0250, Submission Date, A0220	17	20.73
-915	Patient Information Mismatch: Submitted value(s) for the item(s) listed do not match the values in the QIES ASAP database. If the record was accepted, the patient information in the database was updated. Verify that the new information is correct.	Death Date	9	10.98
-3032a	Inconsistent Dates: The dates listed are inconsistent.	A0245, A0270, Z0500B, Submission Date	7	8.54
-3034b	Record Submitted Late: If A0250 is equal to 09 (Discharge), then Submission Date minus A0270 (Discharge Date) should be less than or equal to 30 days.	A0250, Submission Date, A0270	5	6.10
-903	Required Item Missing or Invalid: Based on the Hospice Item Set Data Specifications in effect on the target date of this record, this item is required.	A0500B	4	4.88
-915	Patient Information Mismatch: Submitted value(s) for the item(s) listed do not match the values in the QIES ASAP database. If the record was accepted, the patient information in the database was updated. Verify that the new information is correct.	Facility ID (FAC_ID)	4	4.88
-909	Inconsistent Record Sequence: Under CMS sequencing guidelines, this type of record does not logically follow the type of record received	Current Record, Prior Record: HOSPC_ASMT_ID	3	3.66

This report may contain privacy protected data and should not be released to the public.

HOSPICE
QUALITY REPORTING PROGRAM

Hospice Roster Report

- Lists all patients on record for your hospice for whom the most recent accepted HIS record is not a discharge record (all active patients).

- Helps you verify that all of your current patients have had their appropriate HIS Admission record accepted, and that all discharged patients no longer display to verify that their discharge record has been submitted.

HOSPICE
QUALITY REPORTING PROGRAM

Hospice Roster Report

CASPER Report
(IA) Hospice Roster Report

Run Date: 02/20/2017
Page 1 of   1

CCN: 123456
Facility ID: 123456
Provider Name: GREAT HOSPICE
Provider City: ANYWHERE

Patient ID	Patient Name	SSN	DOB	Gender	Admission Date	Submission Date
22222222	BOOP, BETTY	999-99-9999	02/25/1944	F	04/06/2016	04/29/2016
33333333	BOPPITY, BIPPITY	999-99-9999	01/22/1926	M	02/12/2016	02/18/2016
44444444	BUNCH, BRADY	999-99-9999	04/15/1929	F	02/12/2016	02/18/2016
77777777	CONTRARY, MARY	999-99-9999	01/16/1926	F	03/25/2016	04/29/2016
88888888	CORDUROY, RED	999-99-9999	07/21/1942	M	02/23/2016	02/26/2016
12121212	COYOTE, WHYLIE	999-99-9999	07/07/1922	M	04/01/2016	05/10/2016
23232323	DALMATION, SPOT	999-99-9999	09/03/1935	M	02/24/2016	02/26/2016
34343434	DOG, KITTY	999-99-9999	08/20/1947	F	03/03/2016	05/05/2016
45454545	DOLL, BARBIE	999-99-9999	02/20/1931	F	03/23/2016	05/05/2016
56565656	DUCK, DAISY	999-99-9999	06/15/1922	F	04/01/2016	05/06/2016
67676767	EVERY, NONE	999-99-9999	08/20/1947	M	03/03/2016	05/10/2016
78787878	FROG, KERMIT	999-99-9999	10/15/1931	M	04/12/2016	05/09/2016
89898989	GRAPE, PURPLE	999-99-9999	01/11/1923	F	07/10/2014	07/15/2014
90909090	HOWSER, DOOGIE	999-99-9999	11/28/1933	M	07/14/2015	07/20/2015
11223344	IMPATIENT, THEODORE	999-99-9999	04/12/1927	M	04/15/2016	05/05/2016
22334455	KIDDING, JUST	999-99-9999	09/21/1942	F	02/17/2016	02/26/2016
33445566	LUCK, LADY	999-99-9999	08/31/1939	F	04/06/2016	05/05/2016
44556677	MAN, BASHFUL	999-99-9999	11/09/1930	M	04/08/2016	05/05/2016

This report may contain privacy protected data and should not be released to the public.

HOSPICE
QUALITY REPORTING
PROGRAM

Additional CASPER Reports

- For information about the status of select submission files:
  - Hospice Final Validation Report
  - Hospice Submitter Final Validation Report
  - Hospice Item Set Submission Statistics by Provider Report

- For details regarding patients who were admitted or discharged within a specific period:
  - Hospice Admissions
  - Hospice Discharges

Additional CASPER Reports

- For error details:
  - HIS Record Error Detail by Provider
  - Hospice Error Number Summary by Provider by Vendor

- For Hospice Item Set details:
  - Hospice Item Set Print
  - Hospice Item Sets Submitted

Polling Question

Which report provides detailed information about the status of select submission files?

A. Hospice Item Set Submission Statistics by Provider

B. Hospice Final Validation Report

C. Hospice Item Sets Submitted

D. HIS Record Error Detail by Provider

Polling Question

Which report provides the percent of HIS records submitted within the 30-day submission deadline, per fiscal year?

A. Hospice Item Set Submission Statistics by Provider

B. HIS Records With Error Number XXXXX Report

C. Hospice Timeliness Compliance Threshold Report

D. Hospice-Level Quality Measure Report

Resources

- CASPER Reporting Hospice Provider User's Guide:
  - https://www.qtso.com/hospicetrain.html
- QIES Technical Support Office (QTSO) Help Desk:
  - help@qtso.com
  - 1-877-201-4721

HOSPICE
QUALITY REPORTING PROGRAM

Resources

- HIS Technical Information portion of the CMS HQRP website:

  – https://www.cms.gov/medicare/quality-initiatives-patient-assessment-instruments/hospice-quality-reporting/his-technical-information.html

- Quality Help Desk:

  – HospiceQualityQuestions@cms.hhs.gov

HOSPICE QUALITY REPORTING PROGRAM

Resources

- Getting Started With Hospice CASPER Quality Measure Reports:
  - https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Downloads/Fact-Sheet_CASPER-QM-Reports.pdf

- Hospice (QRP) Quick Reference Guide:
  - https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Downloads/Hospice-QRP-Quick-Reference-Guide-February-2017.pdf

Questions and Answers