

Hospice

Quality Reporting Program Provider Training



Hospice Quality Reporting Program (HQRP) Data Submission Requirements

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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.



Polling Question

How many people (including yourself) are participating 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



Objectives

Upon completion of the training participants will:

- Articulate CMS' data submission requirements for the Hospice Quality Reporting Program (HQRP) and the consequences of failing to meet the requirements.
- Describe the Certification And Survey Provider Enhanced Reports (CASPER) reports available to Hospice providers and how to locate them.
- Discuss how to interpret Final Validation Reports (FVRs).



Objectives (cont.)

Upon completion of the training participants will be able to:

- Identify the actions required regarding error messages received in the FVRs.
- Locate resources available to support providers with data submission and interpreting the FVRs.



HIS Submission Requirements

- All Medicare-certified Hospice providers must comply with two reporting requirements:
 - Hospice Item Set (HIS).
 - Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®).
- All Medicare-certified Hospice providers are required to submit HIS-Admission and HIS-Discharge records on all patient admissions and discharges at their Hospice.



HIS Submission Requirements (cont.)

- Hospices submit HIS data to CMS through the Quality Improvement and Evaluation System (QIES) Assessment Submission and Processing (ASAP) system.



HIS Submission Requirements (cont.)

- All HIS Records must be successfully accepted by the QIES ASAP system within 30 calendar days of the event date (patient's admission or discharge).
- HIS Records SUBMITTED does not mean that the HIS Records are ACCEPTED!!



Submission Timing for HIS Records

- For HIS-Admission records (A0250 = 01), the Submission Date may be no later than 30 calendar days from the Admission Date (A0220).
- For HIS-Discharge records (A0250 = 09), the Submission Date may be no later than 30 calendar days from the Discharge Date (A0270).



HQRP Requirements

- Hospice providers that fail to comply with the quality data submissions requirements will have their market basket update (also known as the Annual Payment Update, or APU) reduced by two percentage points.
- HQRP is currently “pay-for-reporting.”



HQRP Requirements (cont.)

- The HIS reporting cycle spans three years.
- For example, the fiscal year (FY) 2018 Reporting Year consists of data collection and submission in calendar year 2016, compliance determinations in 2017, and payment impact for the FY 2018 APU.
- Thus, a provider's APU would be decreased in FY 2018 if they fail to meet HIS submission requirements between January 1 and December 31, 2016.



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	90%



HIS Submission Threshold Calculation

% of HIS Records Submitted on Time =

The number of HIS records in the numerator divided by the number of HIS records in the denominator, multiplied by 100, rounded to the nearest whole number.



HIS Submission Threshold Calculation (cont.)

Numerator

**Records from denominator
successfully submitted within the 30-
day submission deadline**

=

Denominator

**Successfully submitted HIS-Admission
and HIS-Discharge records with a
target date during the reporting period
(1/1–12/31)**

Example

Hospice Agency A cared for 150 patients during calendar year 2016. Of the 300 Admission and Discharge HIS records they submitted, 250 were submitted on time.

- Numerator = 250.
- Denominator = 300.
- Compliance rate = $250/300$ or 83%.



Check Your Understanding

Hospice Agency B cared for 100 patients during calendar year 2016. They submitted HIS records for all patients but only 95 HIS-Admission records and 80 HIS-Discharge records were on time. What is the denominator?

- A. 100
- B. 200
- C. 175
- D. 190



Extensions/Exemptions

- Hospices may request an extension or exemption from data reporting in the event of extraordinary circumstances beyond their control.
- Requests will not be granted for vendor failures, fatal error messages or staff error.
- Requests must be submitted in writing via email to the HQRP mailbox within 30 calendar days.



Hospice CAHPS

- 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 providers' quality of care.



Hospice CAHPS (cont.)

- To comply with FY 2018 APU, Hospices are required to collect data using the CAHPS Hospice Survey on a monthly basis beginning January 1, 2016, through December 31, 2016.
- Hospices must use a CMS-approved third party vendor.
- Hospices are responsible for making sure the vendor is submitting data in a timely manner.



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.



Submitting HIS Records

- To submit records into the QIES ASAP system, Hospice providers need:
 - CMSNet User ID and password.
 - Juniper software installed.
 - QIES User ID and password.
 - HIS record in the proper electronic file format.



Hospice Submission User's Guide

- The Hospice Submission User's Guide is available for download in the following locations:
 - Welcome to the CMS QIES Systems for Providers Web page.
 - Hospice User Guides & Training page on the QTSO Web site
<https://www.qtso.com/hospicetrain.html>



**You've Submitted
the HIS Records!**

**Now
What????**

Final Validation Reports

HIS Records SUBMITTED does not mean
that the HIS Records are ACCEPTED!!

That is where the Final Validation Reports
(FVRs) come in!



Locating the Hospice FVRs

- The FVR is available in the Validation Report folder in the CASPER Reporting application.
- A link to the CASPER Reporting application is available on the Welcome to the CMS QIES Systems for Providers Web page.



Locating the Hospice FVRs (cont.)

- Validation Report (VR) folder is named:
[State Code] Hospice [Facility ID] VR.
 - **State Code:** Your Hospice provider's 2-character State code.
 - **Hospice:** Hospice is the provider type.
 - **Facility ID:** CMS-assigned facility ID used for submitting HIS records.
 - **VR:** Validation Report.
- Example: NY Hospice 987654 VR.



Locating the Hospice FVRs (cont.)

- Select the VR folder name and a list of ASAP system-generated FVR displays.
- Refer to initial confirmation page for the Submission ID of the HIS record file to locate the corresponding report link.



Locating the Hospice FVRs (cont.)

FVRs are labeled as:

[Submission Date & Time].[Submission ID]

- Example FVR name: 07012015153029.789541.
- Interpreted as:
 - 07012015: Submission date (07/01/2015).
 - 153029: Submission time (3:30:29 p.m.).
 - 789541: Submission ID.



Check Your Understanding

FVR name 03052016141529.768904 is referencing a file submitted on what date?

- A. May 3, 2016
- B. March 5, 2016
- C. January 1, 2016
- D. None of the above



FVR Example

CMS Submission Report Hospice Final Validation Report

Submission Date/Time: 08/08/2015 18:27:25
Submission ID: 227291

Submitter User ID: TEST SUBMITTER
Submission File Name: 20150808 File.zip
Submission File Status: Completed
Processing Completion Date/Time: 08/08/2015 18:31:39

FAC_ID: 123456
Provider Name: BEST HOME CARE & HOSPICE
Provider CCN: 991506
State Code: ND

Records Processed: 1
Records Accepted: 0
Records Rejected: 1
Duplicate Records: 0
Records Submitted without
Provider Authority: 0
Total # of Messages: 1

Record: 1 Rejected

Name (A0500C, A): PATIENT,TEST Birth Date (A0900): 10/20/1932
SSN (A0600A): XXXXXXXXX Gender (A0800): F
Patient ID: 98154

Target Date: 08/10/2015 Type of Record (A0050): NEW RECORD
HIS_ID: 1409914 Reason for Record (A0250): 09
XML File Name: SL_TC57064_Step 5_HD Pre-processing
errors.xml

HIS Item(s): Target Date, Submission Date
Data Submitted: 08/10/2015, 08/08/2015
Message Number: -923 FATAL
Message: Invalid Target Date: The calculated
target date is greater than the
submission date.

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



Hospice Final Validation Report Header Information

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- Submission information.
- Provider information.
- Processing information.



Hospice Final Validation Report

Record Information

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Data Submitted: Target Date, Submission Date
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Message: Invalid Target Date: The calculated
target date is greater than the
submission date.

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

- Record information.
- Patient information.
- Record details.



Hospice Final Validation Report

Error Message Details

- **HIS Item(s):**
 - List of items to which the error message pertains.
- **Data Submitted:**
 - Lists the submitted values of the items listed in the HIS Item(s) list.
- **Message Number:**
 - Displays the unique message number and type of message (fatal/warning).
- **Message:**
 - Displays the text of the message.



Hospice Final Validation Report

- Review each FVR to determine the status of each record included in the submission file.
- Records with a Rejected status:
 - Contain one or more fatal errors and were not saved into the QIES ASAP system.
 - Fatal errors should be corrected and the record should be resubmitted to the QIES ASAP system.
- Records with an Accepted status are saved into the QIES ASAP system, even if there are warning messages associated with them.



Hospice Final Validation Report (cont.)

- The FVR is automatically deleted from the VR folder after 60 days.
- Print or save the FVR prior to the system deletion.
- Should FVR be deleted before it is saved or printed, providers can request it in the CASPER Reporting application.



Hospice Final Validation Report (cont.)

- If a system-generated Hospice FVR is not created for a submission, there was a severe error with the ZIP file or the files contained within the ZIP file.
- To identify the errors that were encountered, request the Hospice Submitter FVR, a user-requested report available in the CASPER Reporting application.
- Hospice Submitter FVR can only be requested by the user that submitted the file of HIS records.



Hospice Final Validation Report (cont.)

- If you have questions about accessing or interpreting the Hospice Final Validation Report:
 - Refer to the CASPER Reporting User's Guide.
 - Contact the QTSO Help Desk at (877) 201-4721 or by email at Help@qtso.com.



Additional CASPER Reports

- HIS Record Error Detail by Provider.
- HIS Record Errors by Field by Provider.
- HIS Records with Error Number XXXXX.
- Hospice Admissions.
- Hospice Discharges.
- Hospice Error Number Summary by Provider by Vendor.



Additional CASPER Reports (cont.)

- Hospice Item Set Print.
- Hospice Item Set Submission Statistics by Provider.
- Hospice Item Sets Submitted.
- Hospice Roster.
- Hospice Submitter Final Validation Report.





Live Demonstration

Julie Ellingson
Telligen



Validation of Records and Files

- Three overarching processes:
 - Initial submission confirmation.
 - Validation and editing.
 - Storage to the QIES ASAP system.



Initial Submission Confirmation

- For each file submitted, the submitter will receive an online confirmation that the file was received for processing and editing by the QIES ASAP system.
- Providers should print and maintain a copy of this confirmation.



Validation and Editing

- **Fatal File Errors:** The file is rejected by the QIES ASAP system if the file structure does not meet these requirements.
- Examples of fatal file errors:
 - The file is not a ZIP file.
 - The records in the ZIP file cannot be extracted.
 - The file cannot be read.
- Files that are rejected must be corrected and resubmitted.

Validation and Editing (cont.)

- **Fatal Record Errors:** The individual HIS record is rejected by the QIES ASAP system.
- Examples:
 - Out-of-range responses.
 - Inconsistent relationships between items.
- Rejected records must be corrected and resubmitted.



Validation and Editing (cont.)

- **Warnings (Non-Fatal Errors):** Warnings include missing or questionable data of a non-critical nature or item consistency errors of a non-critical nature.
- Examples:
 - Timing errors.
 - Record sequencing errors.
- The provider must evaluate each warning to identify necessary corrective actions.



Storage to the QIES ASAP System

- If there are any fatal record errors, the record will be rejected and not stored in the QIES ASAP system.
- If there are no fatal record errors, the record is stored in the QIES ASAP system, even if the record has warnings.
- **Remember: Providers must evaluate warnings and take necessary corrective actions!**

Correcting Errors in HIS Records

- HIS records that have not yet been accepted in the QIES ASAP system include:
 - Records that have been submitted and rejected.
 - Records that have not been submitted at all.
- Correct any errors and submit or resubmit the record to the QIES ASAP system.



Correcting Errors in HIS Records (cont.)

- An error identified in an accepted HIS record must be corrected.
- If records have been accepted into the QIES ASAP system, there are two processes that can be used to address errors in them:
 - Modification Request (A0050 = 2).
 - Inactivation Request (A0050 = 3).



Modification Request

- A Modification Request record (A0050 = 2) is used when a HIS record is accepted into the QIES ASAP system, but the information in the record contains clinical or non-key demographic errors.
- Cannot modify:
 - Record event identifiers.
 - Patient identifiers.



Modification Process

- QIES System will attempt to locate the record.
- If found, the system will replace the prior erroneous record in the QIES ASAP database.
- Erroneous record is stored in an archive file within the QIES ASAP database.
- If not found, a fatal error is reported on the FVR.

Inactivation Request

An Inactivation Request record (A0050 = 3) must be used when a record has been accepted into the QIES ASAP system but the corresponding event did not occur and when one or more of the event identifiers or patient identifiers is found to be in error.



Inactivation Request (cont.)

- Record event identifiers:
 - Admission Date.
 - Reason for Record.
 - Discharge Date.
- Patient identifiers:
 - First Name.
 - Last Name.
 - Social Security Number (SSN).
 - Gender.
 - Birth Date.



Inactivation Request (cont.)

- Values on the Inactivation Request record must match the erroneous record.
- Complete a new HIS record.

Inactivation Request (cont.)

- QIES System will attempt to locate the record.
- If found, the erroneous record is stored in an archive within the QIES ASAP database.
- If not found, the Inactivation Request will be rejected and a fatal error will be reported on the FVR.



Special Manual Record Deletion Request

- A Manual Record Deletion Request must be performed when the record has the wrong State code (STATE_CD) and/or facility ID (FAC_ID) in the control items.
- If this occurs, contact the QTSO Help Desk at Help@qtso.com or (877) 201-4721.



Check Your Understanding

- While reviewing a patient's HIS-Admission record prior to submission, you note that A0220, Admission Date, is incorrect. What is the correct action to take?
 - A. Modify the assessment and resubmit it
 - B. Inactivate the assessment and submit a new record
 - C. Correct the item and submit the record



Check Your Understanding

- While completing a HIS-Discharge, you note that J0900D, Type of standardized pain tool used, was erroneously coded as “2” rather than “1” on the HIS-Admission record that was submitted two months ago. What is the correct action to take?
 - A. No action should be taken, corrections must be made within 30 days
 - B. Modify the HIS-Admission record
 - C. Inactivate the HIS-Admission record



Wrap Up and Questions

- CMS' data submission requirements for the HQRP.
- Available CASPER reports and how to locate them.
- How to interpret FVRs.
- Actions taken to address error messages.
- Resources to help you successfully meet HIS submission requirements.



Resources

- Hospice User Guides and Training:
 - <https://www.qtso.com/hospicetrain.html>.
- Welcome to the CMS QIES Systems for Providers Web page.
- Hospice Quality Reporting:
 - <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/index.html>.
- Quality Help Desk:
 - HospiceQualityQuestions@cms.hhs.gov.
- Technical Help Desk:
 - Help@qtso.com or (877) 201-4721.

