

## Hospice Quality Reporting Program (QRP) Quick Reference Guide

The Hospice QRP creates hospice quality reporting requirements, as mandated by Section 3004(a) of the Patient Protection and Affordable Care Act (ACA) of 2010. Each year, by October 1, CMS publishes the quality measures a hospice must report.

Hospices must submit required Hospice Item Set (HIS) data to CMS. The HIS includes HIS-Admission and HIS-Discharge records. The HIS data must be transmitted to CMS through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES).

In addition to the HIS data, hospices are required to participate in the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey. The CAHPS® Hospice Survey was designed to measure and assess the experiences of patients who died while receiving hospice care, as well as the experiences of their informal primary caregivers.

If the required quality data is not reported by each designated submission deadline, the hospice will be subject to a two (2) percentage point reduction in their Annual Payment Update (APU).

### Frequently Asked Questions

*Q: What are the data submission deadlines for CAHPS® Hospice Survey data?*

Hospices are required to participate in the CAHPS® Hospice Survey on an ongoing monthly basis. Data collection for sampled decedents/caregivers must be initiated two months following the month of patient death. More information is available on the [official CAHPS® Hospice Survey website](#).

*Q: What are the data submission deadlines for HIS data?*

The submission deadline for HIS records is 30 days from the event date (admission or discharge). More information is available in the Timeliness Compliance Threshold Fact Sheet, available in the Downloads box on the [CMS Hospice Item Set \(HIS\) web page](#).

*Q: How do I verify my submissions?*

CMS provides multiple reports and tools that Hospices are encouraged to utilize in order to monitor compliance with the requirements of the Hospice Quality Reporting Program. One of the best methods to monitor successful HIS submission is through Final Validation Reports. Instructions are available in the [CASPER Reporting User's Guide, Section 3](#). Also available within the Hospice Provider report category in the [CASPER Reporting application of the QIES ASAP](#) system is the Hospice Timeliness Compliance Report. This report displays a provider level percentage of Hospice Item Set (HIS) records that had been submitted successfully to CMS. For FY2020, the APU timeliness threshold is 90%.

A hospice and its vendors can monitor CAHPS® Hospice Survey data submissions through reports posted to the CAHPS® Hospice Survey Data Warehouse. These reports are available by 5:00 PM Eastern Time on the next business day after submission. More detail on the [CAHPS® Hospice Survey](#), including podcasts about data submission and other key items, can be found in the [Information for Hospices](#) section of the [CAHPS® Hospice Survey](#) website.

CMS provides multiple educational resources and training opportunities on [the Hospice Quality Reporting Program](#) and [CAHPS® Hospice Survey](#) websites to help providers be successful.

*Q: How do I submit a CAHPS® Hospice Survey size exemption request?*

In order to file a size exemption request, go to the [CAHPS® Hospice Survey Participation Exemption for Size web page](#). There is more information on the page and a form to fill out and submit online.

## Help Desk Assistance

[Help@qtso.com](mailto:Help@qtso.com) or 1-877-201-4721 (QIES Help Desk)

For questions about HIS submission reports and CASPER reports.

[HospiceQualityQuestions@cms.hhs.gov](mailto:HospiceQualityQuestions@cms.hhs.gov) (Quality Help Desk)

For questions about quality reporting requirements, quality measures, and reporting deadlines.

[HospiceQRPreconsiderations@cms.hhs.gov](mailto:HospiceQRPreconsiderations@cms.hhs.gov) (APU/Reconsiderations Help Desk)

For requesting reconsideration for a determination of non-compliance with hospice quality reporting

[HospicePRquestions@cms.hhs.gov](mailto:HospicePRquestions@cms.hhs.gov) (Public Reporting Help Desk)

For questions related to public reporting of quality data.

[hospicecahpsurvey@HCQIS.org](mailto:hospicecahpsurvey@HCQIS.org) (CAHPS® Hospice Survey Help Desk)

For information about the CAHPS® Hospice Survey.

[CAHPSHospicetechsupport@rand.org](mailto:CAHPSHospicetechsupport@rand.org) (CAHPS® Hospice Survey Data Warehouse support)

For questions about data submission, data submission reports, and access to the CAHPS® Hospice Survey Data Warehouse.

## Helpful Links

[Post-Acute Care \(PAC\) Listserv](#) — Sign up for the official CMS PAC listserv to receive important QRP updates.

[Hospice QRP Requirements and Best Practices](#) — CMS resource containing information about the quality measures, provider compliance, and best practice methodology.

[CAHPS® Hospice Survey Website](#) — the official website for information on the CAHPS® Hospice Survey, including current measures and size exemption forms.

[Hospice Item Set \(HIS\) Information](#) — Resource containing the HIS Manual, HIS for admission and discharge, and information on final validation reports.

[Hospice Quality Reporting Training](#) — Links to past in-person and online training as well as information on upcoming trainings.

[HIS Current Measures](#) — Details on the Hospice Item Set (HIS) measures for the QRP.