

Hospice Outreach Email – September 2019

Distribution Date

September 18, 2019

Email Subject

Hospice Quality Reporting Program (HQRP) – Important Updates

Email Content

Good morning/afternoon,

Hospice Quality Reporting Program (HQRP) Update

To ensure your hospice achieves its full APU, please continue to meet the hospice quality reporting requirements for both HIS and CAHPS® Hospice Survey data (HQRP = HIS + CAHPS). **While HIS has separate requirements from CAHPS®, both require data to be submitted for the calendar year.**

- **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. The 90% threshold began with calendar year 2018 (FY2020) data and must be met for all subsequent calendar years.
- **For CAHPS:** All Medicare-certified hospices are required to conduct the CAHPS® Hospice Survey unless they qualify for an exemption for size or newness. Hospices 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](#).

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](#) and related educational trainings found on the [Training and Education Library webpage](#).

Hospice Compare Updates

On August 15, 2019, the Hospice Compare website quarterly refresh included the addition of a new measure for public reporting: provider performance scores on the *Hospice Visits when Death is Imminent* three-day measure. The measure assesses the percentage of patients who receive at least one visit from a registered nurse, physician, nurse practitioner, or physician assistant in the last three days of life.

As announced earlier this year, CMS has decided not to publish the seven-day *Hospice Visits when Death is Imminent* measure, at this time to allow further testing to determine changes to the measure or how it would be displayed on Hospice Compare. The decision not to publicly report the seven-day measure at this time has no impact on other Hospice Quality Reporting Program (HQRP) measures. Further updates will be provided sub-regulatory.

Hospice Compare refreshes occur quarterly with the next one in November 2019.

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 [Public Reporting: Key Dates webpage](#).

Education/Training Updates

A summary of upcoming trainings and new resources are included below.

- A Special Open Door Forum series on the Hospice Outcomes & Patient Evaluation (HOPE) Tool was held on September 12, 2019 from 2:00-3:00 pm ET and another is scheduled for December 4, 2019 from 2:00-3:00 pm ET.
- The post-training materials for the Hospice Quality Reporting Program: Review and Correct Report Overview Webinar are now available.
- Two new web-based courses that provide an overview of the HQRP have been made available. These courses include Introduction to the Hospice Quality Reporting Program and HQRP Data Submission Requirements and Reports.

To access information on upcoming trainings, please visit the [Spotlight & Announcements webpage](#).

To access past trainings, please visit the [Training and Education Library webpage](#).

Thank you,
The CORMAC Help Desk Team

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

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Work performed under CMS Contract # HHSM-500-2015-00309C.