



Hospice Quality Reporting Program (HQRP) Quick Reference Guide

This document is for HQRP data impacting FY2023 payment updates and all subsequent years.

The Hospice QRP creates hospice quality reporting requirements, as established under section 1814(i)(5) of the Social Security Act (SSA). 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 via the Quality Improvement Evaluation System (QIES) through the Assessment Submission and Processing (ASAP) system.

In addition, 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.

The HQRP also includes administrative data (Medicare claims). The FY 2022 Final Rule added administrative data to the HQRP, and these are used to calculate two claims-based measures (Hospice Visits in Last Days of Life (HVLDDL) and Hospice Care Index (HCI)). Since CMS obtains this data through the claims submitted by hospice providers, hospices with claims are 100% compliant with this requirement.

If the required quality data is not reported by each designated submission deadline, the hospice will be subject to a percentage point reduction in their Annual Payment Update (APU). Beginning in FY2024, the APU penalty for hospices will increase from two (2) to four (4) percentage points.

Frequently Asked Questions

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

The data submission deadlines for *CAHPS® Hospice Survey data* are the second Wednesday of the month for the months of February, May, August, and November. It is important for hospices to submit their patient counts to their selected vendor monthly. Approved CAHPS vendors submit data on behalf of their client hospices on or before that date. Late data is not accepted. 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](#). For FY2022 and all subsequent fiscal years, the HIS threshold is 90%. This means 90% of all HIS assessments must be submitted within 30 days of the event date (admission or discharge).

Q: How do I verify my submissions?

One of the best methods to monitor successful HIS submission is through Final Validation Reports. Instructions on reports for validating HIS are available on the [iQIES portal](#).

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.

Exemption requests must be submitted on an annual basis.

Q: How do I submit the data for the claims-based measures?

The data source for the claims-based measures will be Medicare claims data that are already collected and submitted to CMS. There is no additional submission requirement for administrative data (Medicare claims).

Help Desk Assistance

iqies@cms.hhs.gov or 1-877-201-4721 (iQIES Help Desk)

For questions about HIS submission reports and CASPER reports.

HospiceQualityQuestions@cms.hhs.gov (Quality Help Desk)

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

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 (Public Reporting Help Desk)

For questions related to public reporting of quality data.

hospicecahpsurvey@hsag.com (CAHPS® Hospice Survey Help Desk) For information about the CAHPS® Hospice Survey.

Helpful Links

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

[HQRP 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 \(HIS\) webpage](#)— Resource containing the HIS Manual, HIS for admission and discharge, and information on final validation reports.

[HQRP Training and Education Library](#)— Links to past in-person and online training as well as information on upcoming trainings.

[Current Measures](#)— Details on the current quality measures for the QRP and the link to the HQRP QM User's Manual v4.00 is in the Downloads section.

[iQIES Portal](#)— Provides numerous resources related to Hospice reporting, including news on report availability, manuals, and training.