



# **CMS HOSPICE QUALITY REPORTING PROGRAM FORUM**

***FY 2025 Hospice Final  
Rule's HQRP Policies***

***August 21, 2024***



# AGENDA

- FY25 Hospice Final Rule's HQRP final policies
- Resources
- Q&A



# ACRONYMS IN THIS PRESENTATION

- CAHPS® – Consumer Assessment of Healthcare Providers and Systems
- CMS – Centers for Medicare & Medicaid Services
- HIS – Hospice Item Set
- HCI – Hospice Care Index
- HQRP – Hospice Quality Reporting Program
- HVLDL – Hospice Visits in the Last Days of Life
- HOPE – Hospice Outcomes and Patient Evaluation
- QM – Quality Measure
- TEP – Technical Expert Panel



# DISCLAIMER

- This presentation was current at the time it was published or uploaded onto the web. Medicare policy is subject to change, so links to the Hospice Quality Reporting Program (HQRP) and other related web pages have been provided as supplemental resources for your reference.
- This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. This presentation may contain references or links to statutes, regulations, or other policy materials. The intent of the information provided is to be a general summary and not to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.



# **FY25 HOSPICE FINAL RULE'S HQRP FINAL POLICIES**



# FY 2025 FINAL RULE – HQRP RELATED SECTIONS

- We finalized the following:
  - **Two (2) new quality measures**
  - **A new data collection instrument** called Hospice Outcomes and Patient Evaluation (HOPE).
  - Updates on Health Equity activities, future quality measures, and public reporting requirements.
  - **Changes** to the Hospice Consumer Assessment of Healthcare Providers and Systems Survey (**CAHPS® Hospice Survey**).
- We **requested information** regarding potential social determinants of health (SDOH) data elements.



# FINALIZED TWO NEW QUALITY MEASURES

- Add two (2) new HOPE-based measures:
  - **Timely Follow-up for Pain Impact**
  - **Timely Follow-up for Non-Pain Symptom Impact**
- Publicly report the new HOPE-based measures no earlier than FY 2028.



# TIMELY FOLLOW-UP FOR PAIN IMPACT

- The percent of hospice patient assessments who have a **symptom follow-up visit within 2 days** when pain impact was initially assessed as moderate or severe.

# TIMELY FOLLOW-UP FOR NON-PAIN SYMPTOM IMPACT

- The percent of hospice patient assessments that have a **symptom follow-up visit within 2 days** when non-pain symptom impact was initially assessed as moderate or severe.

# FINALIZED HOSPICE OUTCOMES AND PATIENT EVALUATION (HOPE)

- CMS will adopt a new standardized patient level data collection tool, the **Hospice Outcomes & Patient Evaluation, or HOPE v1.00**.
- HOPE is a modification of, and **replacement** for the Hospice Item Set (HIS).
- Hospices will begin collecting HOPE on or after **October 1, 2025**.



# HOSPICE OUTCOMES AND PATIENT EVALUATION (HOPE) GOAL

Our primary objectives for HOPE are:

- Provide **quality data** for the HQRP requirements through **standardized data collection**.
- Support survey and certification processes.
- Provide additional **clinical data** that could **inform future payment and quality improvement refinements**.



# FINALIZED CHANGES FROM HIS TO HOPE

- **New data collection timepoints**, the HOPE Update Visits (HUVs)
  - Up to 2 HUVs are required, depending on length of stay.
- **Modifications to some HIS items** for HOPE to increase specificity (e.g., diagnoses, race items).
- **New or expanded domains**
  - Sociodemographic (updated)
  - Living Arrangements
  - Availability of Assistance
  - Diagnoses (expanded)
  - Symptom Impact Assessment
  - Imminent death
  - Skin



# QUALITY MEASURE DEVELOPMENT

- CMS continues to consider developing hybrid QMs that could be calculated from multiple data sources.
- CMS intends to develop additional HOPE-based QMs.

# HEALTH EQUITY: REQUEST FOR INFORMATION

- Solicited stakeholder input on **Social Determinants of Health (SDOH) data items which may be suitable for hospice**, within four domains:
  - **Housing Instability**
  - **Food Insecurity**
  - **Utility Challenges**
  - **Transportation Challenges**
- Potential data items were selected from existing tools.

# FINALIZE CAHPS® HOSPICE SURVEY CHANGES

- Add a **web-mail mode** to the Survey.
- **Shorten and simplify** the Survey.
- **Modify survey administration protocols** to include a prenotification letter and extended field period.
- Add new, two-item **Care Preferences measure**.
- **Revise** the existing **Hospice Team Communication** measure and the existing **Getting Hospice Care Training** measure.
- **Remove 3 nursing home items** and add survey items impacted by other changes in the Rule.



# FORM, MANNER, AND TIMING OF QUALITY MEASURE DATA SUBMISSION

- We finalized that hospices will **begin collecting and submitting HOPE data as of October 1, 2025.**
- Hospices must submit at least 90% of all HOPE assessments records to CMS on time (by the submission deadlines) to avoid the 4% APU payment penalty.
- CMS will retire the Hospice Abstraction Reporting Tool (HART), and hospices will need to select a private vendor to submit HOPE data.



# RESOURCES

- CMS HQRP Main Page: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/index>.
- HOPE Page: <https://www.cms.gov/medicare/quality/hospice/hope>
- Hospice Center: <https://www.cms.gov/medicare/enrollment-renewal/providers-suppliers/hospice-center>
- HQRP Help Desk: [HospiceQualityQuestions@cms.hhs.gov](mailto:HospiceQualityQuestions@cms.hhs.gov)



# RESOURCES *(CONTINUED)*

- HQRP Provider and Stakeholder Engagement:  
<https://www.cms.gov/medicare/quality/hospice/provider-and-stakeholder-engagement>
- HQRP Training: Training and Education Library:  
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/Hospice-Quality-Reporting-Training-Training-and-Education-Library>



# Q&A



# THANK YOU

