



# **CMS HOSPICE QUALITY REPORTING PROGRAM FORUM**

## ***Introduction to HOPE***

***December 12, 2024***



# AGENDA

- What is the Hospice Outcomes and Patient Evaluation (HOPE)?
- Overview of HOPE
- iQIES
- Summary
- Resources
- Q&A



# ACRONYMS IN THIS PRESENTATION

- CMS – Centers for Medicare & Medicaid Services
- HARP - Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) account.
- HIS – Hospice Item Set
- HOPE – Hospice Outcomes and Patient Evaluation
- HQRP – Hospice Quality Reporting Program
- HUV – HOPE Update Visit
- PSO – Provider Security Official
- iQIES – Internet Quality Improvement & Evaluation System (iQIES)
- QM – Quality Measure
- SFV – Symptom Follow-up Visit



# 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.



# WHAT IS HOPE?

- The **Hospice Outcomes & Patient Evaluation, or HOPE version 1.00** is a new standardized patient level data collection tool.
- HOPE replaces the Hospice Item Set (HIS).
- HOPE will provide **assessment-based quality data** to enhance the HQRP.
- Hospices will begin collecting HOPE on **October 1, 2025**.

# WHY DID CMS CREATE HOPE?

- The primary objectives of HOPE v1.00 are to provide CMS with quality data to:
  - Enhance the HQRP through standardized data collection.
  - Support survey and certification processes.
  - Inform future payment and quality improvement refinements.

# OVERVIEW OF HOPE v1.00



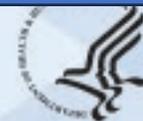
# CHANGES FROM HIS TO HOPE

- HOPE v1.00 contains 45 unique items
- This is an increase from the 32 items in the current HIS
  - 24 are original HIS items.
  - 6 HIS items were modified or changed in some way.
  - 2 Items have been removed.
    - A1000. Race- has been replaced with new Race & Ethnicity items
    - A0245. Date Initial Nursing Assessment Completed
- **New timepoints** called the HOPE Update Visits (HUVs).

# SECTIONS IN HOPE

- Section A: Administrative Information (*new items*)
- Section F: Preferences (unchanged)
- Section I: Active Diagnoses (*expanded list + co-morbidities*)
- Section J: Health Conditions (*new items*)
- Section M: Skin Conditions (*all new*)
- Section N: Medications (unchanged)
- Section Z: Record Administration (*1 new item*)

For details, please review the HOPE Guidance Manual v1.0 on the HOPE webpage.



# WHO COMPLETES THE HOPE TOOL?

- Some HOPE data elements are to be collected during routine clinical assessment visits, while other data may be extracted from the clinical record by hospice staff (including volunteers, contractors, and affiliates).
- HOPE may be completed by any appropriate hospice staff member, based on the data being collected, such as the registered nurse (RN) for HOPE items requiring a skilled nursing assessment.
- A Licensed Practical Nurse (LPN) or Licensed Vocational Nurse (LVN) may complete the nursing in-person follow-up visit.
- Per the hospice CoPs, (See 418.114 Conditions of Participation), it is at the discretion of the hospice to determine who can accurately complete HOPE.



# THE HOPE TIMEPOINTS- DEFINITIONS

Timepoint	Admission	HOPE Update Visit 1 (HUV1)	HOPE Update Visit 2 (HUV2)	Discharge
<b>Definition</b>	Collected as part of the comprehensive assessment of the patient.	Collected via an <b>in-person visit</b> to inform updates to the plan of care.	Collected via an <b>in-person visit</b> to inform updates to the plan of care.	Collected at Discharge for any reason listed in A2115.
<b>Timeframe</b>	No later than five calendar days after the effective date of the hospice election.	HUV1 is required <b>on or between days six and 15</b> of the hospice stay.	HUV2 is required <b>on or between days 16 and 30</b> after the hospice election.	At the time of discharge.



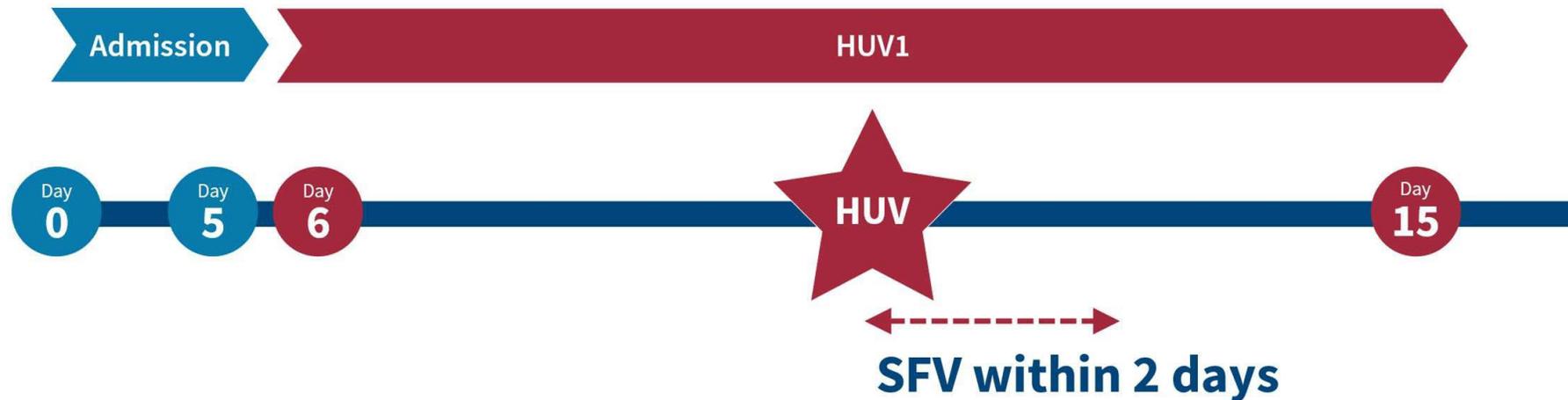
# HOPE TIMEPOINTS

## HOPE Data Collection Timepoints

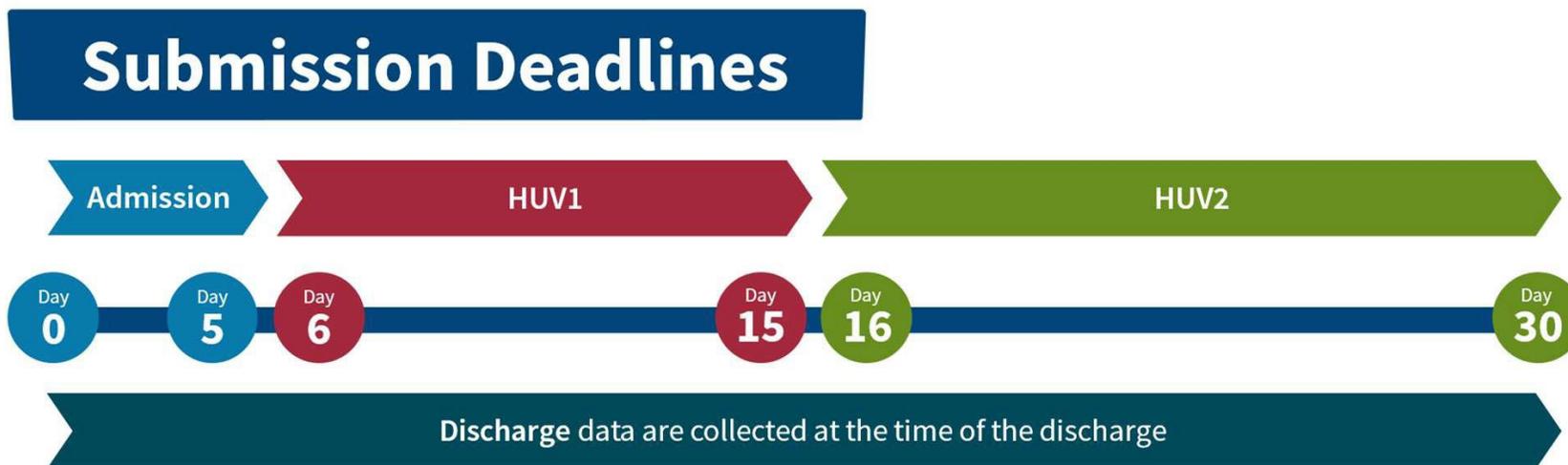


# HOPE TIMEPOINTS & THE SYMPTOM FOLLOW-UP VISIT (SFV)

## Example



# HOPE SUBMISSION DEADLINES



**30**  
days

from the Admission Date  
from HUV completion  
from the Discharge Date



# HQRP QMs SUPPORTED BY HOPE

- **October 1, 2025**
  - Hospice and Palliative Care Composite Process Measure – Comprehensive Assessment at Admission (CBE #3235).
- **Fall 2027:**
  - Timely Follow-up for Pain Impact (**new**).
  - Timely Follow-up for Non-Pain Symptom Impact (**new**).

Full QM specifications are available on  
CMS' HQRP Current Measures webpage.



# iQIES



# THE TRANSITION TO iQIES

- CMS' Internet Quality Improvement & Evaluation System (iQIES) will replace QIES and CASPER in 2025.
- Hospices will transition to iQIES with the launch of HOPE, beginning **October 1, 2025**.
  - Four of the 5 Post-Acute Care patient assessments already submit via iQIES.
- CMS' free HART tool will be retired.
- Hospice providers will need to select a private vendor to complete and submit HOPE data.
  - Providers can choose to submit the records themselves or arrange with a 3rd party to submit on their behalf.

# iQIES – What’s Different?

- Only one log in, CMSNet goes away.
- iQIES access is not limited to just 2 users.
- Step 1: All hospice users need a HARP user ID
  - **HARP** = Health Care Quality Information Systems (HCQIS) Access Roles and Profile (HARP) account.
- Once obtained, they will access iQIES to request a specific role to access the functionality in IQIES

\* A CMS approved **Provider Security Official (PSO)** is responsible to approve all users for their hospice (e.g., third parties and vendors).



# iQIES – What’s Different? (cont.)

- Step 2: PSO.
  - **CMS approves the first PSO for each hospice.**
  - Hospices appoint **at least one** PSO.
  - CMS recommends two PSOs.
  - The PSO must be in place prior to any other user obtaining their iQIES role.

Information about the process and timeline for onboarding hospice PSOs will be released in summer 2025.

# iQIES – WHAT STAYS THE SAME?

- The hospice workflow:
  - Hospices will continue to assess patients, code the HOPE tool, and submit an XML file.
  - Access to reports in iQIES:
    - Some will be automatically generated and placed in your folders.
    - Others can be run on an ad hoc basis.
    - Detailed information about the reports available with the migration of submissions into iQIES will be distributed later.
- CMS will continue to provide a validation utility tool (VUT), for vendors and third parties to check their software.

# SUMMARY



# SUMMARY

- **HOPE data collection begins on October 1, 2025**
- Many original HIS Items are included in HOPE and can be collected the same way you do now.
- New items designed for HOPE shall be collected in real time during the routine nursing assessment visit.
- There are four timepoints for data collection: the Admission, two HOPE Update Visits, and Discharge.

# SUMMARY (CONT.)

- Symptom Follow-up Visits (SFVs) are included as part of the Admission or HUV timepoints.
- The SFV, if deemed necessary, may be completed by the RN or an LPN/LVN.
- Submission deadlines remain unchanged, but now include the HUV timepoints:
  - 30 days from the target date (admission or discharge).
  - 30 days from the completion of the HUV.

# 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>.
- HQRP Current Measures: <https://www.cms.gov/medicare/quality/hospice/current-measures>.
- FY2025 Hospice Final Rule: [Hospice Final Rule: Hospice Regulations and Notices | CMS](#).



# RESOURCES (CONT.1)

- The CMS Hospice Special Focus Program mailbox: [CMS\\_hospicesfp@cms.hhs.gov](mailto:CMS_hospicesfp@cms.hhs.gov).
- CMS SFP website: <https://www.cms.gov/medicare/health-safety-standards/certification-compliance/hospice-special-focus-program>.
- The Hospice Medicare Conditions of Participation (CoPs): <https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-B/part-418>.
- HQRP Requirements and Best Practices page: <https://www.cms.gov/medicare/quality/hospice/hqrp-requirements-and-best-practices>.



# RESOURCES (CONT. 2)

- General Technical Help Desk: [iqies@cms.hhs.gov](mailto:iqies@cms.hhs.gov).
- To Access iQIES training videos, visit the QIES Technical Support Office (QTSO) website: <https://qtso.cms.gov/training-materials/iqies-training-videos>.



# RESOURCES (CONT. 3)

- 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>
- HQRP Provider and Stakeholder Engagement: <https://www.cms.gov/medicare/quality/hospice/provider-and-stakeholder-engagement>
- Hospice Quality Help Desk: [HospiceQualityQuestions@cms.hhs.gov](mailto:HospiceQualityQuestions@cms.hhs.gov)





# Q&A

- **Use the Chat feature to submit your questions today!** If we don't answer your question today, CMS will review it following the session and it may be included in a future FAQ.
- You can also submit questions to the HQRP Help Desk: [HospiceQualityQuestions@cms.hhs.gov](mailto:HospiceQualityQuestions@cms.hhs.gov).



# THANK YOU

