

February 21, 2024

TO: NHPCO Provider and State Members
FROM: NHPCO Quality Team
RE: Care Compare February 2024 Refresh

Summary at a Glance

Publicly reported hospice quality data have been refreshed on [Care Compare](#). Quality measures updated with the February 2024 refresh include:

- Hospice Item Set Comprehensive Assessment Measure
- CAHPS® Hospice Survey Family Caregiver Experience
- CAHPS® Star Ratings

Claims-based measures (Hospice Care Index and Hospice Visits in Last Days of Life) were not updated with this refresh.

In addition, [provider preview reports](#) for the May 2024 Care Compare refresh were made available in the Certification and Survey Provider Enhanced Reports (CASPER) application on February 14, 2024, and will be available until March 16, 2024.

Providers should verify that their publicly reported demographic data, such as address, telephone number, and ownership status, are correct on Care Compare. Procedures for requesting corrections to demographic data are described in this Alert.

Care Compare is a website published by the Centers for Medicare and Medicaid Services (CMS) that allows members of the public to search for and compare healthcare providers, including hospice agencies. Quality data is collected from hospice claims, patient assessments, and caregiver satisfaction surveys and is publicly reported on a quarterly, biannual, or annual basis. Additional resources are included at the end of this Alert.

The following measures are published and available for public review and comparison, and details about data reporting periods and public reporting thresholds for each measure can be found below:

Hospice Item Set (HIS) Comprehensive Assessment Measure at Admission

- The HIS Comprehensive Assessment Measure at Admission is an NQF endorsed measure (NQF #3235) that captures the proportion of patients for whom the hospice performed seven care processes upon admission to hospice.
- The care processes captured in the HIS Comprehensive Assessment at Admission include:
 - Beliefs/Values Addressed (if desired by the patient)
 - Treatment Preferences
 - Pain Screening
 - Pain Assessment
 - Dyspnea Treatment
 - Dyspnea Screening

- Patients Treated with an Opioid who are Given a Bowel Regimen
- Hospices must have at least 20 patients in the denominator (i.e., 20 hospice admissions by patients at least 18 years of age) during the reporting period for measure scores to be publicly reported. Hospices that do not meet this threshold will have measure scores suppressed. Publicly reported HIS data updates quarterly.¹
- The February 2024 refresh includes HIS data from Quarter 2 of 2022 through Quarter 1 of 2023.
- The national average score for the HIS Comprehensive Assessment Measure at Admission as of the February 2024 refresh is 91.6%.
- Additional HIS Comprehensive Assessment Measure Resources:
 - [CMS HQRP Hospice Item Set](#)
 - [Hospice Comprehensive Assessment QM Background and Methodology Fact Sheet](#) (Jan 2024)

Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey Family Experience Data

- The CAHPS® Hospice Survey is a national survey of family members or friends who cared for a patient who died in hospice care. The CAHPS® survey is administered by hospice organizations via third-party vendors to caregivers after the death of their loved one.
- CAHPS Hospice Survey measure scores are calculated across eight rolling quarters and are published quarterly for all hospices with 30 or more completed surveys over the reporting period.¹
- The February 2024 refresh includes CAHPS® data from Quarter 2 of 2021 through Quarter 1 of 2023.
- Additional CAHPS® Resources:
 - [CAHPS® Hospice Survey webpage](#)
 - [CMS Hospice Quality Reporting Program \(HQRP\) CAHPS Hospice Survey](#)
 - [CAHPS® Hospice Survey Care Compare Data Refresh Schedule](#)

Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Star Ratings

- Hospices with 75 or more completed CAHPS surveys over the eight-quarter reporting period will receive a Star Rating on Care Compare. Prior to public reporting, CAHPS Hospice Survey results are adjusted for effects of mode of survey administration and case mix. Details with overview of the purpose, timeline, and methods as well as national and state Star Rating distribution reports can be found on the Hospice CAHPS survey website, linked below.
- Star Ratings were updated with the February 2024 refresh and include data from Quarter 2 of 2021 through Quarter 1 of 2023.
- Per the [***Distribution of Family Caregiver Survey Rating Summary Stars, Nationally and by State Reporting period: April 1, 2021 – March 31, 2023***](#)
 - A total of 2,024 hospices were assigned a star rating. Eighty-seven percent of Medicare decedents who received hospice care in 2022 were in hospices that were assigned a star rating.
 - Distribution of Family Caregiver Survey Rating Summary Stars Across All U.S. Hospices Eligible for a Star Rating:
 - 1 star – 2%
 - 2 stars – 12%
 - 3 stars – 34%
 - 4 stars – 39%
 - 5 stars – 13%
- Additional Star Rating Resources:
 - [CAHPS Hospice Survey Star Ratings](#)
 - Includes national and state distribution reports and star rating calculation methods

Hospice Care Index (HCI)

- *Note: HCI data was not updated with the February 2024 Care Compare refresh. Care Compare currently includes HCI data from Quarter 1 of 2021 through Quarter 4 of 2022. Publicly reported HCI data will refresh annually, with the next anticipated refresh in November 2024.*
- The HCI is a single Medicare claims-based measure that captures care processes occurring throughout the hospice stay, between admission and discharge. Although the HCI is a single measure, it captures data from ten individual indicators. Each indicator has equal weight and hospices earn a point for each indicator in which they score above a national performance threshold, for a total possible HCI score between 0 and 10. August 2022 was the inaugural month for public reporting of the Hospice Care Index.
- The ten individual indicators captured in the Hospice Care Index include:
 - Continuous Home Care (CHC) or General Inpatient (GIP) Provided
 - Gaps in Skilled Nursing Visits
 - Early Live Discharges
 - Late Live Discharges
 - Burdensome Transitions (Type 1) – Live Discharges from Hospice Followed by Hospitalization and Subsequent Hospice Readmission
 - Burdensome Transitions (Type 2) – Live Discharges from Hospice Followed by Hospitalization with the Patient Dying in the Hospital
 - Per-beneficiary Medicare Spending
 - Skilled Nursing Care Minutes per Routine Home Care (RHC) Day
 - Skilled Nursing Minutes on Weekends
 - Visits Near Death
- Hospices must have at least 20 claims with dates ending during the reporting period for the HCI overall measure score to be publicly reported. Hospices that do not meet this threshold will have the HCI overall measure score suppressed. Publicly reported HCI data refreshes annually.
- The national average score for the Hospice Care Index as of the most recent update with the November 2023 refresh is 8.8.
- Additional HCI Resources:
 - [CMS HCI Informational Video](#)
 - [Abt Associates. Hospice Care Index Technical Report](#)
 - [Calculating and Reporting Claims-Based Measures within the Hospice Quality Reporting Program Questions and Answers](#)

Hospice Visits in the Last Days of Life (HVLDL)

- *Note: HVLDL data was not updated with the February 2024 Care Compare refresh. Care Compare currently includes HVLDL data from Quarter 1 of 2021 through Quarter 4 of 2022. Publicly reported HVLDL data will refresh annually, with the next anticipated refresh in November 2024.*
- HVLDL measures the proportion of hospice patients who received in-person visits from a registered nurse or a medical social worker on at least two of the final three days of life. The August 2022 refresh was the inaugural month for public reporting of HVLDL, which replaced public reporting of Hospice Visits When Death is Imminent (HVWDII). HVLDL was endorsed by the National Quality Forum (NQF) as NQF #3645 on July 26, 2022.
- Hospices must have at least 20 patients in the denominator (i.e., 20 hospice discharges to death with enrollment of at least three days, and without any continuous home care, respite care, or general inpatient care in the final three days of life) during the reporting period for measure scores to be publicly reported. Hospices that do not meet this threshold will have measure scores suppressed. Publicly reported HVLDL data refreshes annually.¹

- The national average score for Hospice Visits in the Last Days of Life as of the most recent update with the November 2024 refresh is 47.9%.
- Additional HVLDL Resources:
 - [HQRP Hospice Visits in Last Days of Life \(HVLDL\) Measure Specifications](#)
 - [Calculating and Reporting Claims-Based Measures within the Hospice Quality Reporting Program Questions and Answers](#)

Requesting Corrections to Demographic Data

Incorrect demographic information posted on Care Compare, such as name, address, and ownership status, may be updated upon provider request. However, these updates are not made in real time and may take up to six months to occur. Hospice providers are responsible for ensuring that their demographic data are accurate and updated in both iQIES and the Medicare Provider Enrollment, Chain, and Ownership System (PECOS).

To request a demographic correction on Care Compare, hospices should follow the steps outlined below:

1. Complete form CMS-855A in [PECOS](#) with the updated demographic information.
2. Contact your Medicare Administrative Contractor (MAC) to request to send the updated 855A form to your State Agency with a request to update the demographic data in iQIES.

Providers must complete both steps of the update process to ensure that their demographic data are up to date. NHPCO members who have requested demographic corrections are encouraged to contact quality@nhpco.org to provide details of the request for tracking and process improvement purposes.

For more information, visit [How to Update Hospice Demographic Data](#) on the CMS HQRP webpage.

Additional NHPCO Resources

NHPCO has developed the *Charting a Course to Quality* toolkit as a resource to assist member organizations in navigating the Hospice Quality Reporting Program and discussing publicly reported quality measures with patients, families, and community stakeholders. *Charting a Course to Quality: Comprehensive HQRP Resource Guide* provides step-by-step guidance to Hospice organizations on how to incorporate robust processes to collect, submit, and monitor performance on the required HQRP measures into their quality and performance improvement programs. *Charting a Course to Quality: A Consumer Guide to Publicly Reported Hospice Quality Measures* provides consumers with an easy-to-understand overview of the hospice quality measures found on Care Compare. Members can download these guides from the [NHPCO Quality Resources](#) page.

Additional HQRP Resources

- [CMS HQRP QM User's Manual V1.01](#) (Aug 2022)
- [CMS Hospice Quality Reporting Program](#) (HQRP)
- [CMS HQRP Current Measures](#)
- [CMS HQRP Public Reporting: Key Dates for Providers](#)
- [CMS HQRP Announcements and Spotlight](#)
- [CMS. Calculating and Reporting Claims-Based Measures within the HQRP](#)
- [CMS Open Door Forum Podcast and Transcripts](#)
- [CMS Hospice Quality Reporting Program \(HQRP\) Informational Video](#)

Please reach out to quality@nhpco.org with any questions.

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