2026 CAHPS Hospice Survey Update Training Q&A
October 1, 2026

Question #	Question/Response
1	**Question:** Is the final Star Rating based on a rolling 8 quarters of data or is it an average of each new 2 quarters that get added on? As in is it an average of 24 months or an average of ((Q4+Q1) + (Q2 +Q3) + (Q4 + Q1) + (Q2 +Q3))/ 4?
	Response: While the star ratings are updated every six months (i.e., every two quarters), the scores used to calculate the Family Caregiver Survey Rating for a hospice are from the eight applicable quarters of data.
2	**Question:** The information on slide 22 is confusing: It indicates Consent to Share question is not required by CMS to share identifiable caregiver responses, but the next bullet indicates vendors cannot share identifiable information. A subsequent bullet indicates that responses that could identify a decedent/caregiver case can only be shared with management. Could you please clarify, possibly providing specific examples, for what can and cannot be shared with the hospice?
	Response: Thank you for the question. CMS is reviewing the guidance on sharing identifiable information and will issue a Technical Correction in the near future.
3	**Question:** Can you confirm if hospices can use a Consent to Share question in their supplemental question set? If not, could you clarify why reporting restrictions for Hospice CAHPS are more restrictive than HHCAHPS, where the patient is still alive and receiving care from the agency?
	Response: Please see above; CMS will issue new guidance on the Consent to Share question in a Technical Correction in the near future.
4	**Question:** The new restriction prohibiting vendors from identifying the patient/caregiver is a significant change and will significantly impact hospice provider's existing QAPI efforts. Can you please provide rationale for this change that can be shared with hospice agencies?
	Response: Please see above; Please see above; CMS will issue new guidance on the Consent to Share question in a Technical Correction in the near future.

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5	**Question:** You mentioned having two days to return calls from respondents. Can you please, remind me what slide that was from? Thank you.
	Response: We noted that customer support calls that are recorded or if somebody calls in and talks to a customer support staff member and the call wasn't able to be resolved at that time, then there is a two-business day return recommendation to have that call taken care of. That information is on slide 58, but the guidance is in QAG V13.0 on page 19 where it talks about customer support requirements.
6	**Question:** When a refusal is received after the prenotification letter is sent, but before a survey is administered, it was mentioned that the refusal disposition code would be submitted and number of attempts should be 0 (not 88). If the hospice is contracted for web mail mode, what should be submitted for: # attempts web # attempts mail
	Response: The "number-survey-attempts-mail" and "number-survey-attempts-web" should both be "0" if the caregiver is found to be ineligible or refuses prior to the mailing of the survey, in response to the prenotification letter.
7*	**Question:** Slide 116 indicates a discrepancy report is required when there are continued patterns of missing or incorrect data from hospices such as missing decedent primary diagnosis code. Could you clarify how frequently a discrepancy report would need to be submitted for ongoing issues that are not resolved?
	Response: Thank you for the question. CMS is reviewing the discrepancy report process and will issue a Technical Correction on this in the near future.
8*	**Question:** We have been instructed that as a CAHPS Hospice Survey vendor, we must submit Discrepancy Reports when a single record is missing one or more required fields. Could you clarify if this requirement is for specific required fields? Slide 49 indicates that mode should be considered when determining completeness. Since email addresses are required for web mail mode, does this indicate that vendors must submit a discrepancy report when one or more email address is missing? Is there a threshold or percent of all records that would trigger a discrepancy report when email addresses are missing?
	Response: Thank you for the question. CMS is reviewing the discrepancy report process and will issue a Technical Correction in the near future.

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9	**Question:** Early in the training it was stated that for small hospices, exemption would be identified by CMS and a form no longer exists or is needed. Later, Marc stated that a hospice could request exemption and do so by completing the form. Please clarify.
	Response: You might be confusing the exemption for newness, for which there is no form to submit and CMS will identify the eligible hospices, with the exemption for size, for which there is a form that needs to be submitted every year.
10*	**Question:** We have clients who contract for both HH and Hospice CAHPS survey administration. We have already received questions, could you provide guidance for how to answer questions about why they can't include a Consent to Share question so that hospice caregivers can choose if they want to have their name associated with their responses?
	Response: Please see above; CMS will issue new guidance on the Consent to Share question in a Technical Correction in the near future.

* This question was not answered during the Q&A session.