

CAHPS Hospice Survey Quality Assurance Guidelines Version 8.0

Summary of Updates and Emphasis

This document is a reference tool that highlights the major changes from the *CAHPS Hospice Survey Quality Assurance Guidelines Version 7.0 to 8.0*. This document is not a substitute for reviewing the *CAHPS Hospice Survey Quality Assurance Guidelines V8.0* in its entirety. The *CAHPS Hospice Survey Quality Assurance Guidelines V8.0* manual is effective upon its release in September 2021. General formatting and minor wording revisions have occurred throughout the manual and are not included in this change matrix. Please contact the CAHPS Hospice Survey Project Team for any specific questions.

QAG Section	Summary of Key Changes in V8.0
Chapters	
Miscellaneous	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Revised V7.0 to V8.0 ○ Revised dates as necessary (e.g., 2020 to 2021) ○ Minor formatting and wording revisions throughout the manual ○ Updated references to appendices as needed ○ References to XML File Specification V7.0 have been updated to XML File Specification V8.0 ○ Updated reference of Hospice Compare to Care Compare on Medicare.gov
II. Introduction and Overview	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated the Office of Management and Budget (OMB) section ○ Updated the National Quality Forum (NQF) section ○ Updated the Mode Experiment section ○ Updated the section regarding the public reporting of CAHPS Hospice Survey results ○ Updated the Care Compare Refresh Date Timeline table ○ Added a section regarding CAHPS Hospice Survey Star Ratings ○ Removed the former composite measure labels ○ Updated CAHPS Hospice Survey Development and National Implementation Timeline ○ Updated Data Collection and Submission Timeline
III. Program Requirements	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified that a hospice must ensure that counts provided to their survey vendor are accurate ○ Clarified that survey vendors should routinely monitor their customer support line ○ Added that survey vendors are encouraged to apply case mix and mode adjustments to unofficial scores reported to hospices
IV. Communications and Technical Support	No revisions

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V. Sampling Protocol	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified the total decedent count as the number of all decedents served in the month ○ Clarified that the primary informal caregiver did not need to be physically present during the decedent’s hospice care ○ Added that a non-familial paid caregiver cannot be a primary informal caregiver ○ Added the caregiver relationship “9 – Paid caregiver” ○ Added the paid caregiver to the ineligible criteria ○ Added random, unique, de-identified number assignment information • Emphasis: <ul style="list-style-type: none"> ○ Clarified that survey vendors must follow-up with the hospice to confirm the counts are accurate ○ Clarified that the caregiver relationship of “8 - No caregiver of record” must be used to identify decedents who have no caregiver of record ○ Clarified the “Final Survey Status” assignment for records with missing or incomplete decedent or caregiver names or addresses and/or telephone numbers
VI. Mail Only Survey Administration	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated the OMB expiration date to December 31, 2023 ○ Clarified that the mail questionnaire may include the specific hospice inpatient unit, acute care hospital, or nursing home facility ○ Clarified that the cover letter may include the specific hospice inpatient unit, acute care hospital, or nursing home facility ○ Clarified that if a first wave returned blank questionnaire does not indicate that the case is a refusal, ineligible, or otherwise final, the second wave must be mailed ○ Clarified that for Question 43 if the respondent writes Caucasian, the response is coded “1 – White” ○ Added that survey vendors must notify the CAHPS Hospice Survey Team within 24 hours upon discovery of a data breach that potentially affects CAHPS Hospice Survey administration within their organization or at a client hospice • Emphasis <ul style="list-style-type: none"> ○ Clarified that the check for the accuracy of sampled caregivers’ contact information include a check to ensure that the name corresponds to the address provided by the hospice ○ Clarified that HIPAA training for staff be provided prior to providing access to decedent/caregiver PHI and PII
VII. Telephone Only Survey Administration	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Added that survey vendors must notify the CAHPS Hospice Survey Team within 24 hours upon discovery of a data breach that potentially affects CAHPS Hospice Survey administration within their organization or at a client hospice • Emphasis <ul style="list-style-type: none"> ○ Clarified that HIPAA training for staff be provided prior to providing access to decedent/caregiver PHI and PII

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VIII. Mixed Mode Survey Administration	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated the OMB expiration date to December 31, 2023 ○ Clarified that the mail questionnaire may include the specific hospice inpatient unit, acute care hospital, or nursing home facility ○ Clarified that the cover letter may include the specific hospice inpatient unit, acute care hospital, or nursing home facility ○ Clarified that if a first wave returned blank questionnaire does not indicate that the case is a refusal, ineligible, or otherwise final, the telephone protocol must be followed ○ Clarified that for Question 43 if the respondent writes Caucasian, the response is coded “1 – White” ○ Added that survey vendors must notify the CAHPS Hospice Survey Team within 24 hours upon discovery of a data breach that potentially affects CAHPS Hospice Survey administration within their organization or at a client hospice • Emphasis <ul style="list-style-type: none"> ○ Clarified that the check for the accuracy of sampled caregivers’ contact information include a check to ensure that the name corresponds to the address provided by the hospice ○ Clarified that HIPAA training for staff be provided prior to providing access to decedent/caregiver PHI and PII
IX. Data Coding and Data File Preparation	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified the random, unique, de-identified number assignment information ○ Clarified that files must be encrypted prior to submission to the CAHPS Hospice Survey Data Warehouse ○ Clarified that a Hospice Record must not be uploaded for a CCN/month if confirmation of zero eligible decedents in the month is not received from the hospice ○ Clarified that the “number-survey-attempts-telephone” field must be coded for “3 – Mixed Mode” ○ Added that the “number-survey-attempts-telephone” may be “0” for “3 – Mixed Mode” if the survey was completed by mail ○ Clarified the criteria for the “Final Survey Status” code of “3 – Ineligible: Not in Eligible Population” ○ Clarified the criteria for the “Final Survey Status” code of “10 – Non-response: Bad/No Address” ○ Clarified the criteria for the “Final Survey Status” code of “11 – Non-response: Bad/No Telephone Number” • Emphasis <ul style="list-style-type: none"> ○ Added that if the “total decedents” count minus the number of “no publicity” decedents/caregivers does not equal the number of records submitted by the hospice and the survey vendor has been unsuccessful in resolving the counts with the hospice, a Discrepancy Report must be submitted ○ Clarified the “Final Survey Status” code “3 - Ineligible: Not in Eligible Population” for when a caregiver name is completely missing

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X. Data Submission	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified that the Data Warehouse is closed the week following each data submission deadline ○ Clarified that the CAHPS Hospice Survey Data Coordination Team will send a confirmation email to the hospice and add the hospice to the list of hospices authorizing the survey vendor posted in the survey vendor's Data Warehouse folder ○ Updated the dates in the Survey Vendor Authorization Deadline table • Emphasis: <ul style="list-style-type: none"> ○ Clarified that the entire CAHPS Hospice Survey Authorization Form must be completed, including the calendar quarter the survey vendor will begin collecting and submitting data for the hospice ○ Clarified that survey vendors are encouraged to periodically update their encryption software
XI. Oversight Activities	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified that the Project Director/Project Manager at a minimum must participate during the site visit
XII. Data Reporting	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated the Public Reporting Provider Preview Period and Refresh Date table ○ Clarified that no data updates will be publicly reported for the November 2021 refresh and there will be no provider preview reports for this period ○ Clarified that publicly reported data are frozen in 2021 ○ Added information regarding CAHPS Hospice Survey Star Ratings
XIII. Exception Request Process	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified that Exception Requests will be limited to a two-year approval timeframe unless otherwise specified ○ Clarified that approved Exception Requests may only be implemented at the beginning of a quarter unless otherwise specified ○ Clarified that an Exception Request must be filed for the use of survey materials that do not align with the examples provided in the CAHPS Hospice Survey Quality Assurance Guidelines V8.0
XIV. Discrepancy Report Process	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Clarified that the patient month(s) of death that are affected must be clearly stated within the Discrepancy Report
XV. Data Quality Checks	No revisions
Appendices	
Appendix A Minimum Business Requirements	No revisions

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Appendix B Survey Vendor Authorization Form	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated dates in the Survey Vendor Authorization Form ○ Clarified that the individual who completes the form for the hospice will be considered the CAHPS Hospice Survey Administrator for that hospice ○ Clarified that hospices may also designate an additional individual within the hospice organization to serve as the main point of contact with the CAHPS Hospice Survey Project Team ○ Clarified that the completed form should be sent to the address provided ○ Clarified that vendors are notified of hospices that have authorized them for data collection ○ Clarified that vendors cannot submit data for hospices that have not authorized them ○ Updated Survey Vendor Authorization Deadline table
Appendix C Data Warehouse Access Form for Vendors and Hospices	No revisions
Appendix D Sample File Layout	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Added Caregiver Relationship “9 – Paid caregiver (non-familial)”
Appendix E XML File Layout Version 8.0	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Revised dates as necessary (e.g., 2020 to 2021) ○ Added <ineligible-presample> “non-familial paid caregiver” ○ Added <caregiver-relationship> “9 – Paid caregiver (non-familial)” ○ Added <number-survey-attempts-telephone> “0 - No Attempts”
Appendix F Interviewing Guidelines for Telephone Surveys	No revisions
Appendix G Frequently Asked Questions for Customer Support	No revisions
Appendix H Model Quality Assurance Plan	No revisions
Appendix I Exception Request Form	No revisions

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Appendix J Discrepancy Report Form	No revisions
Appendix K Participation Exemption for Size Form	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated dates within the form
Appendix L Attestation Statement	No revisions
Appendix M Examples of Additional Supplemental Questions for Survey Vendor Use	No revisions
Appendix N Mail Survey Materials (English)	No revisions
Appendix O Mail Survey Materials (Spanish)	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Minor translation updates
Appendix P Mail Survey Materials (Traditional Chinese)	No revisions
Appendix Q Mail Survey Materials (Simplified Chinese)	No revisions
Appendix R Mail Survey Materials (Russian)	No revisions
Appendix S Mail Survey Materials (Portuguese)	No revisions

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Appendix T Mail Survey Materials (Vietnamese)	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Minor translation updates in skip pattern text
Appendix U Mail Survey Materials (Polish)	No revisions
Appendix V Mail Survey Materials (Korean)	No revisions
Appendix W Telephone Script (English)	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated Initiating Contact with a Proxy Respondent responses ○ Clarified Mailed response for Mixed Mode ○ Added Mailed – Telephone Only Mode response ○ Added additional text in Q41_Intro ○ Added additional text in the END closing text
Appendix X Telephone Script (Spanish)	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated Initiating Contact with a Proxy Respondent responses ○ Clarified Mailed response for Mixed Mode ○ Added Mailed – Telephone Only Mode response ○ Added additional text in Q41_Intro ○ Added additional text in the END closing text
Appendix Y Telephone Script (Russian)	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Updated Initiating Contact with a Proxy Respondent responses ○ Clarified Mailed response for Mixed Mode ○ Added Mailed – Telephone Only Mode response ○ Added additional text in Q41_Intro ○ Added additional text in the END closing text