

CAHPS® Hospice Survey

CAHPS Hospice Survey Vendor Training September 2025

CAHPS® Hospice Survey

Welcome

CAHPS® Hospice Survey

Training Presentation Overview

In today's CAHPS Hospice Survey Vendor Training, we will:

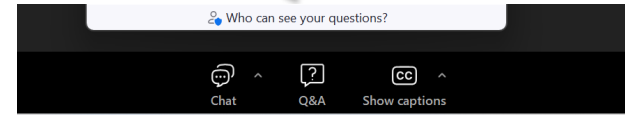
- Provide an overview of the CAHPS Hospice Survey
- Review changes to public reporting of CAHPS Hospice Survey data
- Review changes to the CAHPS Hospice Survey questions, implementation protocol and timeline, and modes of survey administration
- Discuss sampling, data coding, data submission, and data quality checks
- Discuss Oversight Activities, Exception Request, and Discrepancy Report processes
- Administer the post-training quiz and evaluation

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Online Question Submission (1 of 2) Illustration 1

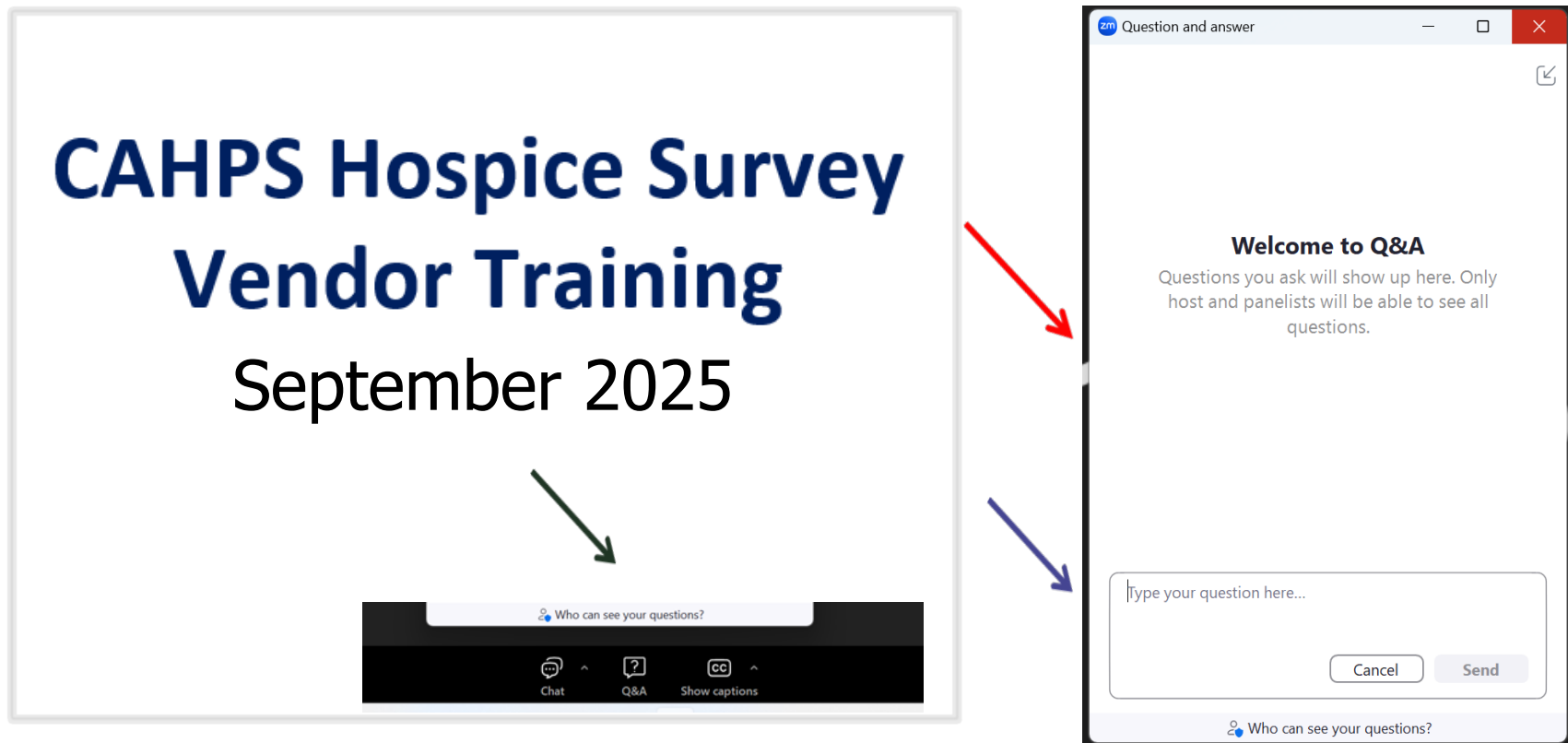
CAHPS Hospice Survey Vendor Training September 2025

Q&A Button



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Online Question Submission (2 of 2) Illustration 2



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Quiz and Evaluation Submission Illustration 3

A polling window will appear.

Quiz and Evaluation

▼ Polling

Quiz_FIN...

Icons: Print, Copy, Paste, Edit, Delete, Up, Down

Poll Questions:

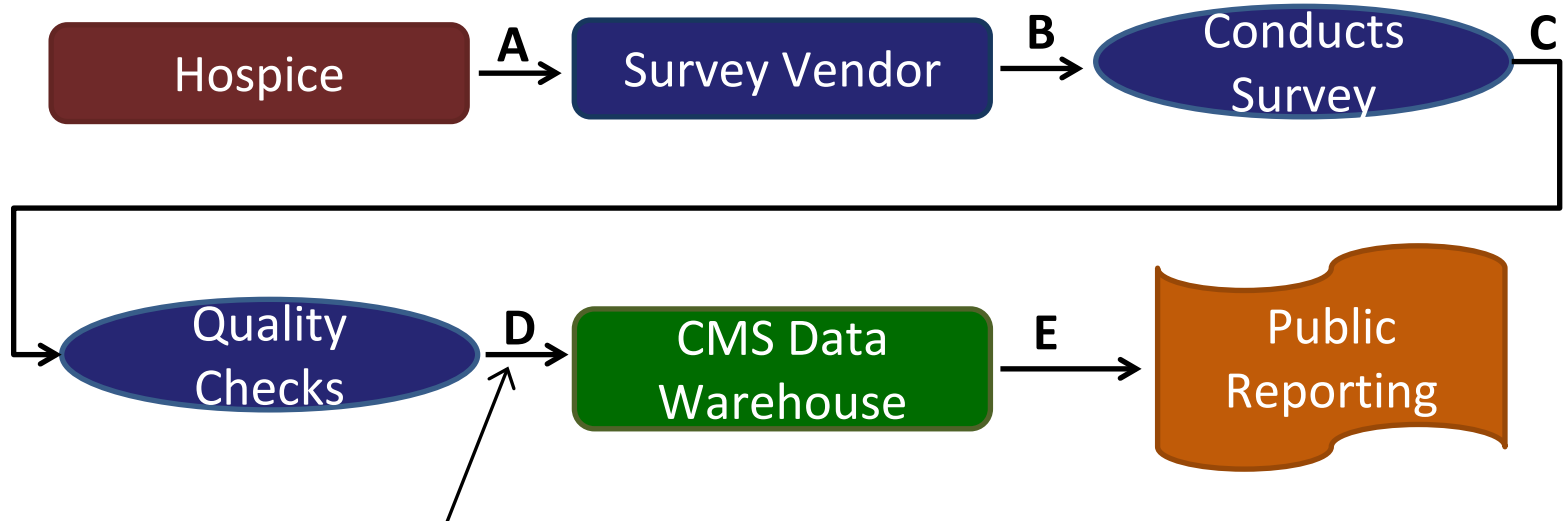
1. Survey Vendor Organization
2. Enter the code word that was provided during the CAHPS Hospice Survey Update Training:
3. When should survey vendors check their Data Warehouse folders to confirm that they have been authorized by a hospice?
 - ☐ A. When they are getting ready to submit the quarterly data
 - ☐ B. Before they start data collection for a quarter

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CAHPS Hospice Survey Introduction and Overview

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CAHPS Hospice Survey Process



Successful submission to the Data Warehouse is how hospice compliance is measured

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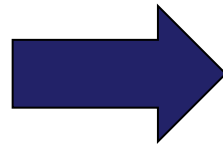
CMS Hospice Quality Reporting Program (HQRP)

- CAHPS Hospice Survey is a component
- HQRP information
 - www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/
- Impacts Medicare payments
- Goals
 - Improve transparency through public reporting on www.medicare.gov
 - Create incentives for quality improvement

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Everybody Take Note!

CAHPS Hospice
Survey compliance
in CY 2026



Affects
FY 2028 APU

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Participation Exemption for Size

- Some hospices may be exempted from participation for a given APU period based on their size
 - For the CY 2026 data collection period, Medicare-certified hospices that have served fewer than 50 survey-eligible decedents/caregivers in the period from January 1, 2025 through December 31, 2025 can apply for an exemption from CAHPS Hospice Survey CY 2026 data collection and submission requirements
 - The Participation Exemption for Size Form must be submitted online at www.hospicecahpssurvey.org
 - The 2026 Participation Exemption for Size Form must be received by December 31, 2026
 - The Participation Exemption for Size Form must be submitted every year the hospice plans to be considered for the exemption

*Note: For multiple hospice programs sharing one CCN, the survey-eligible decedent/caregiver count is the total from **all** programs*

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Participation Exemption for Newness

- The exemption for newness is based on how recently the hospice received its CCN
- The criterion for this exemption is that the hospice must have received its CCN on or after the first day of the measurement year for the CAHPS Hospice Survey
 - EXAMPLE: For the CY 2026, hospices who received their CCN on or after January 1, 2026 are eligible for the one-time exemption for newness
- Hospices that receive the exemption for newness are required to begin participating the first month of the following calendar year
 - EXAMPLE: For the CY 2026, hospices who received their CCN any time in 2026 are required to participate beginning with January 2027 decedents
- Hospices eligible for this exemption will be identified by CMS. There is no form for hospices to submit.

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Data Collection and Submission Timeline 2025-2026

Month of Death	Survey Field Period Begins	Data Submission to the CAHPS Hospice Survey Data Warehouse
April 2025	July 1, 2025	November 12, 2025
May 2025	August 1, 2025	
June 2025	September 1, 2025	
July 2025	October 1, 2025	February 11, 2026
August 2025	November 1, 2025	
September 2025	December 1, 2025	
October 2025	January 1, 2026	May 13, 2026
November 2025	February 1, 2026	
December 2025	March 1, 2026	
January 2026	April 1, 2026	August 12, 2026
February 2026	May 1, 2026	
March 2026	June 1, 2026	

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Important Points to Remember

- Assure that hospice clients have submitted a Survey Vendor Authorization Form **prior to the submission** of the hospice's data to the Data Warehouse
 - Direct the hospice to the CAHPS Hospice Survey Website for the current form
 - This form may be submitted up to the data submission deadline for each quarter
 - Hospices are still encouraged to submit their forms 90 days prior to the Data Submission Deadline
 - Check your list of authorized hospices **before** submitting data
- Submit data to the CAHPS Hospice Survey Data Warehouse early
- Data cannot be submitted without an authorization form
 - **This may result in an APU failure for the hospice**

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Use of the CAHPS Hospice Survey (1 of 2)

- The CAHPS Hospice Survey and the questions that comprise it are in the public domain
 - Can be used for non-CAHPS Hospice Survey eligible decedents/caregivers, etc.
 - When used in an **unofficial** capacity:
 - The OMB Paperwork Reduction Act language must **not** be used
 - All references to “CAHPS Hospice Survey” and “CMS” must be **removed**

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Use of the CAHPS Hospice Survey (2 of 2)

- CAHPS Hospice Survey results are **not** intended to be used for marketing or promotional activities
 - Only the CAHPS Hospice Survey scores that are published on the Care Compare tool are the “official” scores
 - Scores derived from any other source are “unofficial” and should be labeled as such

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CAHPS Hospice Survey Important Reminders and Updates

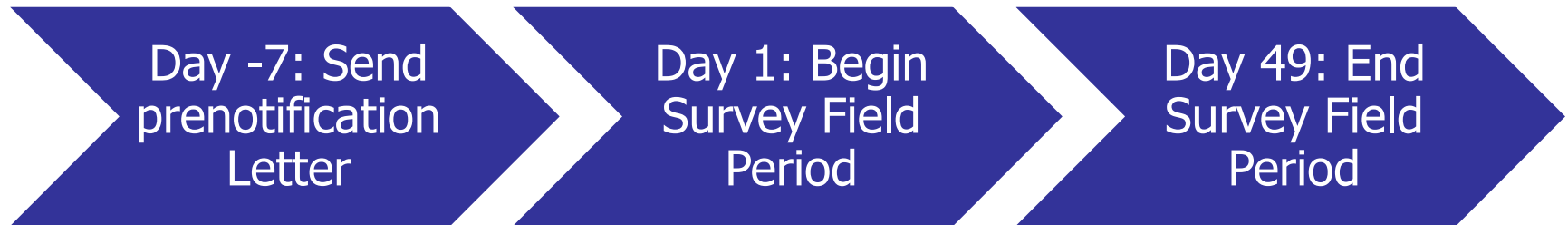
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Review of the Revised Survey and Administration Procedures

- Revised survey is shorter than the previous survey
- Simplified survey cover letters and phone introduction
- Prenotification letter for **all survey modes**
- Survey field period of 49 days for **all survey modes**
- Addition of Web Mail mode
- Availability of materials in all approved languages for all modes
- Optional Informational Flyer for hospices to inform caregivers about the CAHPS Hospice Survey

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Survey Administration Timeline: All Modes



Example: July 2025 Decedents



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Reminder: Survey Vendors Must Check Decedents/Caregivers Lists and Follow-up with Hospices

- Contact hospice clients **before** data collection begins:
 - If sample frame counts do not reconcile, OR
 - If there is incorrectly formatted data, OR
 - If there is missing data (e.g., caregiver contact information)
 - Caregiver names are valid even if the first name is one initial
- Submit a Discrepancy Report if the hospice does not respond to ongoing follow-up regarding counts

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Reminder: Late Survey Administration

- If survey administration is not initiated within the first 7 calendar days of the month
 - Survey administration may begin from the 8th to the 10th of the month without requesting prior approval from CMS
 - After the 10th of the month, approval must be requested from CMS before the survey can be administered
 - A Discrepancy Report **must** be submitted if survey administration:
 - begins after the 7th of the month or
 - does not occur for any month
- This guidance applies to all survey modes

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Reminder: Supplemental Questions

- May add up to 15 supplemental questions after the Core questions (Q1 – Q31) or at the end of all the CAHPS Hospice Survey questions
 - Questions removed from the previous CAHPS Hospice Survey are included in Appendix M (Examples of Supplemental Questions) in QAG V12.0
- Count submitted to Warehouse must be the number of supplemental questions included in that decedent/caregiver's survey
 - This may differ across cases from a single CCN
 - For example, if specific questions are included only for veterans, then those cases would have a different count than non-veteran cases

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Reminder: Survey Vendor Analysis of CAHPS Hospice Survey Data

- Must communicate to hospices that the survey vendor scores are not official CMS scores and should **only** be used for quality improvement purposes
 - Each page of the report provided to hospices must contain the following statement:
 - “This report has been produced by [Survey Vendor] and does not represent official CAHPS Hospice Survey results.”
- Survey Vendors are encouraged to apply case mix and mode adjustments to unofficial scores reported to hospices, so the scores are comparable with the official CAHPS Hospice Survey results

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Decedent/Caregiver Administrative Record *Beginning with XML V12.0*

- `<number-survey-attempts-telephone>` must be submitted for ALL cases whose `<survey-mode>` is “2 – Phone only” or “3 – Mail Phone”
 - This indicates the number of telephone attempts made during the survey administration period
 - If `<survey-mode>` is “1 – Mail Only” or “4 – Web Mail”, code 88

0 – No Attempts
1 – First Telephone Attempt
2 – Second Telephone Attempt
3 – Third Telephone Attempt
4 – Fourth Telephone Attempt
5 – Fifth Telephone Attempt
88 – Not Applicable

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Important Points to Remember

- QAG V12.0 will supersede all previous materials beginning with January 2026 (Q1 2026) decedents
- Note there are clarifications to XML variables used for the Web Mail mode
- Public reporting changes will begin with the May 2026 Care Compare refresh

Public Reporting and Analysis of CAHPS Hospice Survey Data

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Overview

- This section describes the procedures for public reporting before and after the Q2 2025 introduction of a revised version of the CAHPS Hospice Survey and updated survey administration protocols (including the new Web Mail mode)
- There will be no changes to public reporting until the May 2026 Care Compare refresh

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New and Modified Quality Measures on Revised Survey Instrument

- A new composite measure of Care Preferences
 - Composed of two new survey items
- A substantially revised Getting Hospice Care Training measure
 - Conceptually similar but uses one item instead of several items
- A slightly revised Hospice Team Communication measure
 - Removes one item and makes slight wording changes

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Revised Quality Measures

Measures	Differences between Original and Revised	Qs on Revised Survey
Communication with Family	Dropped “confusing or contradictory info” item, updated item wording	Q6, 8, 9, 15, 25
Getting Timely Help	Updated item wording	Q5, 7
Treating Patient with Respect	Updated item wording	Q10, 11
Emotional and Spiritual Support	Updated item wording	Q27, 28, 29
Help for Pain and Symptoms	No change	Q17, 19, 21, 23
Care Preferences	New measure/items	Q12, 13
Training Family to Care for Patient	Consolidated several items into a single-item measure	Q24
Rating of this Hospice	Updated item wording	Q30
Willing to Recommend this Hospice	No change	Q31

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Timeline for Changes to Data Reporting

Refresh	Survey Versions Used	Details
Present – February 2026	Only Original Survey	<ul style="list-style-type: none">No changes to reporting of the 8 measures on the original survey
May 2026 – November 2027	Original and Revised Survey	<ul style="list-style-type: none">New Care Preferences measure and substantially revised Getting Hospice Care Training measure are not publicly reportedScores for the other 7 measures calculated by combining scores from quarters using the original and revised survey<ul style="list-style-type: none">Star Rating based on those 7 measures
February 2028 – Onward	Only Revised Survey	<ul style="list-style-type: none">Scores for all 9 measures are calculated using data from the revised survey and are publicly reported<ul style="list-style-type: none">Star Rating based on 9 measures

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Official Measure Scores and Star Ratings are Published on Care Compare

- Available at:
<https://www.medicare.gov/care-compare/>
 - Downloadable database containing CAHPS Hospice Survey results by CCN also available
- In August 2025, scores were reported for 3,109 hospices, based on 638,982 survey responses
 - These hospices cared for 96% of all 2023 Medicare decedents

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Measure Scores are Updated Quarterly Using 8 Rolling Quarters of Data

- Top-box scores are reported for hospices with at least 30 completed surveys during the reporting period
- Each hospice's scores are displayed with national and state averages

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Public Reporting Periods

Reporting Period (Dates of Death) for CAHPS Hospice Survey Measure Scores	Provider Preview Period*	Care Compare Refresh Dates*
Q1 2023 – Q4 2024	August/September 2025	November 2025
Q2 2023 – Q1 2025	November/December 2025	February 2026
Q3 2023 – Q2 2025	February/March 2026	May 2026
Q4 2023 – Q3 2025	May/June 2026	August 2026


*Exact dates will be announced by CMS


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Care Compare


Find & compare
providers near you.





 Not sure what type of provider you need?
[Learn more about the types of providers.](#)


 Welcome


 Doctors & clinicians


 Hospitals


 Nursing homes including rehab services

 Home health services

 Hospice care

 Inpatient rehabilitation facilities

 Long-term care hospitals

 Dialysis facilities


Find hospice care near me

Find Medicare-certified hospices that serve your area and compare them based on the quality of care they provide. Hospice provides care and support for people who are terminally ill.

MY LOCATION *

NAME OF AGENCY (optional)

[Show past search results](#)

[Find out what's new](#) 

Looking for medical supplies and equipment? [Visit the Supplier Directory](#)

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Footnotes

- Footnotes indicate:
 - The reason a hospice does not have measure scores or a Star Rating displayed
 - Any issues identified with the hospice's measure scores
- The footnotes for measure scores are:
 6. Number of cases is too small to report
 7. Results are based on a shorter time period than required
 8. Data were suppressed by CMS
 9. Discrepancies in the data collection process (reported by survey vendors to CMS)
 10. None of the required data were submitted for this reporting period
 11. Results are not available for this reporting period
- The footnote for Star Ratings is:
 15. Number of cases is too small to report Star Ratings

NOTE: No changes for revised survey / new mode

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Top-Box Scores

- Top-box scores reflect the proportion of respondents who gave the most positive response(s)
 - **“Always”** when response options are Never, Sometimes, Usually, or Always*
 - **“Yes, definitely”** when response options are Yes, definitely; Yes, somewhat; or No
 - **“Right amount”** when response options are Too little, Right amount, or Too much
 - **“Definitely yes”** when response options are Definitely no, Probably no, Probably yes, Definitely yes
 - **9 or 10** when response options are 0 to 10

**The only exception is Q10 on the original survey: “While your family member was in hospice care, how often did anyone from the hospice team give you confusing or contradictory information about your family member’s condition or care?,” where the top-box response is “Never”*

NOTE: No changes for revised survey / new mode

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Steps in Calculating Top-Box Measure Scores

- Calculate unadjusted top-box scores for each item by assigning “100” if the most positive response category is selected and “0” otherwise
- Adjust top-box item scores for mode
- Create hospice-level scores
 - Adjust for case mix
 - Calculate composite measure scores by averaging the adjusted scores for each item in the measure

NOTE: No changes for revised survey / new mode

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Mode and Case-Mix Adjustment

- Purpose
 - Differences in hospice scores should reflect only differences in quality
 - Adjustments permit valid comparison of all hospices
- Adjusted results “level the playing field”
 - CMS adjusts for factors not reflecting hospice performance
 - Mode of survey administration (mail only, phone only, mail phone, web mail [starting with the revised survey])
 - Case-mix (decedent and caregiver characteristics)

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Mode Adjustment

- Accounts for the effect of mode of survey administration (Mail Only, Phone Only, Mail Phone, Web Mail [starting with the revised survey]) on how caregivers respond to the survey
- Updated mode adjustments for the revised survey reflect the addition of the new Web Mail mode, new survey items, and results of a more recent mode experiment

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Updates to Mode Adjustment

- The reference mode was changed to Mail Only to reflect that the vast majority of CAHPS Hospice Surveys are conducted in that mode

Survey Version	Mode Adjustments from...	Reference Mode
Original	2015 mode experiment	Phone Only
Revised	2021 mode experiment	Mail Only

Web Mail mode adjustments will be applied for hospices administering in Web Mail mode with valid email addresses for at least 20% of sampled caregivers.

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Mode Adjustment Example

- Example: Hospice uses Phone Only mode on the Revised Survey

Raw Top-Box Score on Willing to Recommend this Hospice	90.00
Phone Only Mode Adjustment for Willing to Recommend this Hospice for the Revised Survey (reference mode: Mail Only)	+0.20
Mode-Adjusted Top-Box Score	90.20

- Mode adjustments for the original and revised surveys are available on the CAHPS Hospice Survey Website

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Case-Mix Adjustment

- Accounts for effect of decedent/caregiver characteristics on how caregivers respond to the survey
- Case-mix adjuster variables are the same for the original and revised surveys
 - Decedent age, payer for hospice care, primary diagnosis*, length of final episode of hospice care*
 - Caregiver (respondent) education, language*, and relationship to decedent
 - Response percentile (calculated by ranking lag time)*
- Case-mix adjustments updated with each quarterly data refresh on the CAHPS Hospice Survey Website

** Revised survey uses updated subcategories for these variables*

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To Approximate CMS Official Scores, Use Data Provided on Survey Website

- Let y be the mode-adjusted hospice mean of an item that composes a CAHPS Hospice Survey measure
- Let n be the number of adjustments from the '*Top-box Adjustors*' or '*Bottom-box Adjustors*' tab for all rows other than reference categories.
- Let m_1 - m_n be the national means for the CMA variables (*National Means tab*)
- Let h_1 - h_n be the CMA variable means for the hospice in question (in the same form as *National Means tab*)
- Let a_1 - a_n be the corresponding adjustments (*Top-Box and Bottom-Box Adjustors tabs*)
- The case-mix and mode-adjusted hospice score y' for the item is:

$$y' = y + a_1(h_1 - m_1) + a_2(h_2 - m_2) + \dots + a_n(h_n - m_n)$$

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National Means and Top-Box Adjustments are Posted Quarterly on the Survey Website

<https://hospicecahpssurvey.org/en/public-reporting/scoring-and-analysis/>

Scoring and Analysis

Care Compare Reporting Updates

CAHPS Hospice Survey Response Rate for the November 2025 Update of Care Compare (posted on 08/20/2025)

The CAHPS Hospice Survey response rate for the Quarter 1 2023 - Quarter 4 2024 public reporting period is 28%.

For details regarding the formula that CMS uses to calculate the survey response rate, please see the CAHPS Hospice Survey [Quality Assurance Guidelines](#).

Case-Mix Adjustments for CAHPS Hospice Survey Measures for the November 2025 Update of Care Compare (posted on 08/20/2025)

Click [here](#) to view or download the document that describes how a survey vendor or hospice can closely approximate the effect of case-mix adjustment on CAHPS Hospice Survey results using publicly reported adjusters and national means.

Click [here](#) to download adjusters and means for the Quarter 1 2023 - Quarter 4 2024 public reporting period.

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Case-Mix Adjustment Example

For example:

- The mode-adjusted hospice top-box mean of the Willing to Recommend this Hospice single-item measure is 90.20
- The national mean for Decedent Age 18-54 is 2.0% (0.02)
- The hospice mean for Decedent Age 18-54 is 6.0% (0.06)
- The Top-Box Adjustor for Decedent Age 18-54 for Willing to Recommend this Hospice is -0.50

The case-mix and mode-adjusted hospice score for Willing to Recommend this Hospice =

$$90.20 + (-0.50[0.06-0.02]) + a_2(h_2-m_2) + \dots + a_n(h_n-m_n)$$

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Star Ratings are Updated Every Other Quarter

- The overall CAHPS Hospice Survey Star Rating is referred to as the Family Caregiver Survey Rating
 - Hospices must have a minimum of 75 completed surveys over 8 quarters to be assigned a Star Rating
 - Hospices that do not meet this minimum receive a footnote explaining why they do not have a Star Rating

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Family Caregiver Survey Rating is Calculated by Averaging Individual Measure Star Ratings

- For each hospice, CMS averages the Star Ratings for each of the individual survey measures with a weight of $\frac{1}{2}$ for each of the 2 global rating measures and a weight of 1 for all other included measures
 - Between the May 2026 and November 2027 refreshes, the Family Caregiver Survey Rating Summary Star Rating will be based on 7 measures
 - Starting with the February 2028 refresh (when 8 quarters of data will be available from the revised survey), the Family Caregiver Survey Rating will be based on 9 measures
 - Includes new Care Preferences measure and substantially revised Getting Hospice Care Training measure

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More Information about Calculating Measure Scores and Star Ratings is Available on the Survey Website

- Measure scores

<https://www.hospicecahpssurvey.org/en/public-reporting/scoring-and-analysis/>

- Steps in scoring for the original and revised surveys
- Case-mix adjustment
- National and state distributions

- Star Ratings

<https://www.hospicecahpssurvey.org/en/public-reporting/star-ratings/>

- Frequently asked questions
- Technical specifications, including thresholds for star categories and average measure scores for each category
- National and state distributions

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Sampling Protocol

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Overview of Sampling Process

- There are no changes to the sampling process for QAG V12.0
- Hospices supply a monthly list of decedents/caregivers to their vendor
- Survey vendors
 - apply eligibility criteria to determine which decedents/caregivers remain in the sample frame
 - draw a random or census sample monthly from all decedents/caregivers who meet survey eligibility criteria for each contracted hospice

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Hospices Must Submit a List of Decedents/Caregivers to Their Survey Vendor Each Month

- Hospices should **not** apply eligibility criteria before sending list to vendor
 - *Decedents of all payer types are eligible*
 - Exclude patients whose **last admission** to hospice resulted in a live discharge
 - Include all decedents who died in the month, **except** those who request no contact (“no publicity”)

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Decedents/Caregivers with “No Publicity” Status

- This status is rare and unusual
- “No publicity” decedents/caregivers who **initiate or voluntarily** request at any time during their stay that the hospice:
 - 1) not reveal the patient’s identity; and/or
 - 2) not survey him or her
- Hospices must maintain documentation for “no publicity” requests
- Hospices **may not** ask patients/caregivers if they want to receive the survey

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Vendor Reviews Decedents/Caregivers List

- Perform checks of the decedents/caregivers lists and follow-up with hospices for discrepancies/issues
 - Review “no publicity” count for reasonableness (*should be rare*)
 - Compare count of total decedents minus “no publicity” count to number of decedent/caregiver cases submitted
 - **These numbers should match**
 - Document the number of unique decedent/caregiver records received
 - Review caregiver contact information for completeness
 - Consider mode of administration to determine what information is needed (e.g., caregiver email addresses are necessary if using the new Web Mail mode)

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Vendor Develops the Sample Frame *(1 of 2)*

- Apply the eligibility criteria to decedents/caregivers
- Remove ineligible decedents/caregivers
- Include all survey-eligible decedents/caregivers from the first through the last day of the month
- Include records with missing or incomplete decedent or caregiver names, addresses, email addresses, and/or phone numbers

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Vendor Develops the Sample Frame (2 of 2)

- De-duplicate the decedents/caregivers monthly file
- If eligibility status is uncertain, the case **must** be included in the sample frame
 - Exception: If any part (i.e., day, month, or year) of the decedent's date of death is missing, the case must **not** be included in the sample frame
- Assign a random, unique, de-identified number that is used to follow the record through the data collection process

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Survey Vendor Selects the Monthly Sample

- Hospices that are expected to have less than 700 eligible decedents/caregivers over the course of the calendar year **must survey all cases** (conduct a census)
 - Hospices with <50 survey-eligible decedents/caregivers during the prior calendar year can apply for an exemption
- Hospices that are expected to have 700+ eligible decedents/caregivers over the course of the calendar year **must survey at least 700 cases** using a simple random sampling procedure (all cases have equal probability)
 - A census or any number greater than or equal to 700 is allowed
 - If a sample greater than 700 is selected, then **all data** must be submitted to the CAHPS Hospice Survey Data Warehouse
- Sampling is based on the survey-eligible decedents/caregivers for a calendar **month**

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Survey Administration

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Approved Modes of Administration

- Mail Only mode
- Phone Only mode
- Mail Phone mode (previously Mixed Mode)
- Web Mail mode

*Additional requirements are included in QAG V12.0.
Vendors are required to review and follow **all**
requirements.*

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Prenotification Letter Requirements

- Required for all modes
- Sent 7 days prior to the start of survey field period
- Survey vendors must follow the guidelines when altering the text in the sample prenotification letter
- English must be the default language in the continental U.S. and Spanish must be the default language in Puerto Rico

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Prenotification Letter Quality Assurance

- During production of **prenotification letter**, survey vendors must:
 - Check that entire sample has been printed for each hospice client
 - Quality check at least 10% of printed materials
 - Smearing, fading, folded edges, and misalignment
 - Check a sample of mailings to ensure the printed letter is for the caregiver listed on the envelope
 - If letters are 2-sided, make sure both sides are for the same decedent/caregiver
 - Use commercial software or other means to update addresses provided by the hospice for sampled decedents/caregivers
 - Conduct seeded (embedded) mailings in all administered languages to survey vendor CAHPS Hospice Survey project staff on a minimum of a quarterly basis

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Customer Support Requirements

- Prenotification and survey cover letters must include toll-free customer support number for the survey vendor
- Customer support must be offered in all languages in which the survey vendor administers the survey
- Survey vendors must be ready to support calls from the deaf or the hearing impaired [teletypewriter (TTY or TTD) or Relay Service]

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49 Day Survey Field Period for All Modes

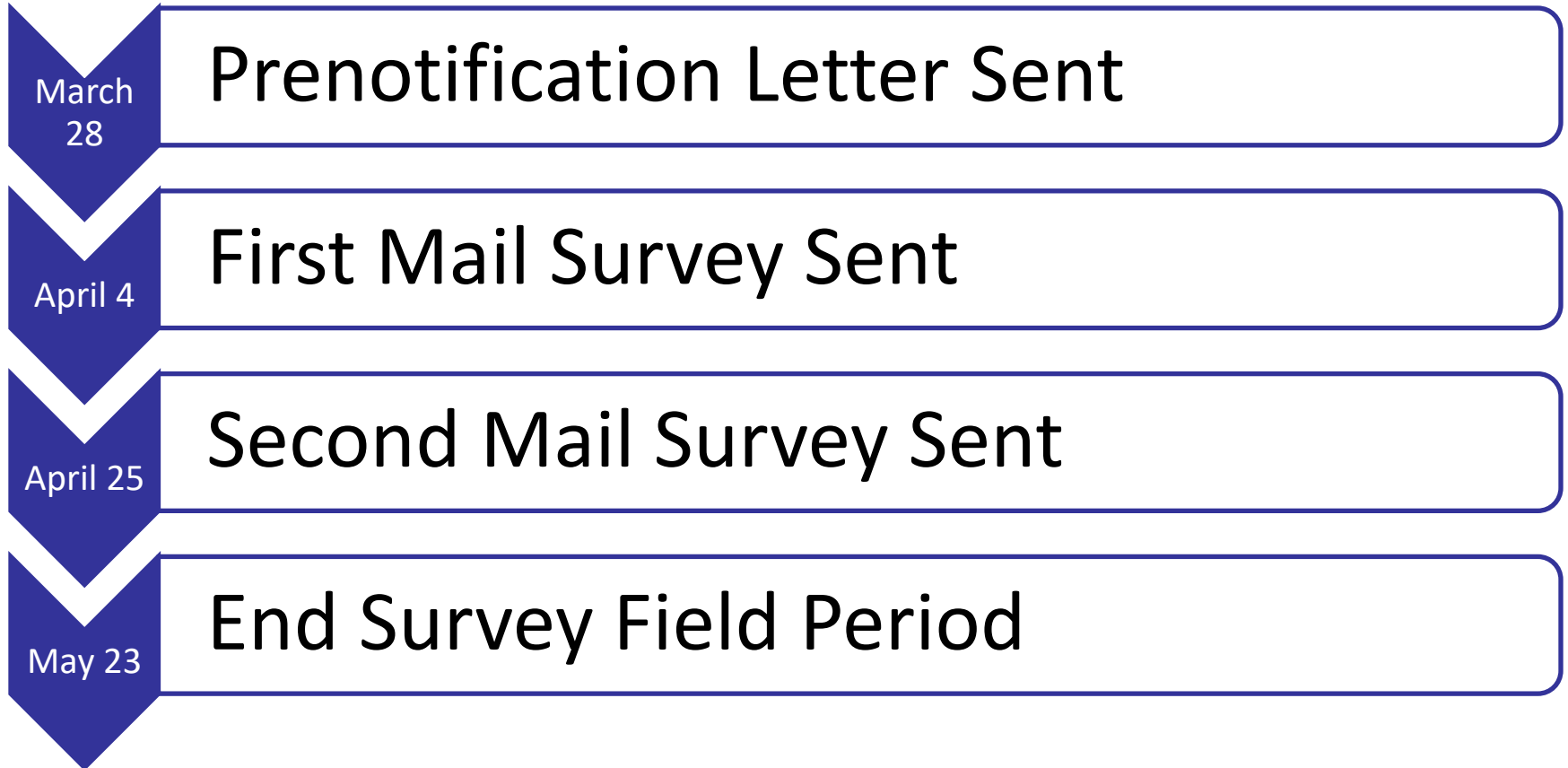
- Survey field period begins with the first survey administration attempt, 2 months after the month of patient death
 - The first survey administration attempt corresponds to the first mail survey, phone attempt, or email invitation, **not** the mailing of the pre-notification letter
 - The first survey administration attempt must occur within the first 7 calendar days of the month
- Data collection **must** be completed 7 weeks (49 calendar days) after survey field period begins

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Mail Only Mode

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Example for Mail Only Mode



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Reminders: Mail Only Mode (1 of 2)

- Check for accuracy of caregiver contact information
 - Have a process to identify addresses that are submitted with “unknown,” “don’t know,” etc. to attempt to update with the hospice
 - Check a few sampled decedent/caregiver records for file sorting errors
- Caregivers without valid mailing addresses
 - Must **not** be excluded from the sample
 - Survey vendors must **re-contact the hospice** to inquire about an address update for caregivers with no/incomplete mailing address
 - Survey vendors must use commercial software or other means to update addresses provided by the hospice for sampled decedents/caregivers

CAHPS® Hospice Survey

Reminders: Mail Only Mode (2 of 2)

- Letters must not include any promotional or marketing text or QR codes
- Follow-up survey cover letter may include “reply by date”
 - Placed above the salutation or in the fourth paragraph after the sentence, “After you have completed the survey, please return it in the enclosed pre-paid envelope.”

CAHPS® Hospice Survey

Quality Assurance: Mail Only Mode

- Vendors must monitor and provide oversight of staff, subcontractors, and other organizations, if applicable
- During mail production, survey vendors must check that the entire sample has been printed for each hospice client
 - Quality check at least 10% of printed materials
 - Check a sample of mailings for inclusion of all required materials (e.g., letters, questionnaire, and BRE)
 - Ensure all printed materials in the mailing packet are for the same unique identifier (caregiver)
- Survey vendors must conduct seeded (embedded) mailings in all administered languages to survey vendor CAHPS Hospice Survey project staff on a minimum of a quarterly basis

CAHPS® Hospice Survey

Phone Only Mode

CAHPS® Hospice Survey

Example for Phone Only Mode

March 28

Prenotification Letter Sent

April 4

First Call Made to This Caregiver

All cases must have the first call within the first 7 days

May 23

End Survey Field Period for This Caregiver

CAHPS® Hospice Survey

Reminders: Phone Only Mode *(1 of 2)*

- Check for accuracy and completeness of contact information
 - Confirm that caregiver mailing address **and** phone number have been provided
 - Check a few sampled decedent/caregiver records for file sorting errors
- Caregivers without valid mailing addresses or missing/incorrect phone numbers
 - Must **not** be excluded from the sample
 - Survey vendors **must re-contact the hospice** to inquire about address and/or phone updates for caregivers
 - Survey vendors must attempt to obtain updated addresses and phone numbers through commercial locating services, internet, or other means

CAHPS® Hospice Survey

Reminders: Phone Only Mode (2 of 2)

- Programming phone scripts
 - All punctuation for the question-and-answer categories must be programmed (e.g., commas, question marks)
 - Transitional statements and all probes specified in the phone script **must** be programmed
 - Default response options may not be programmed
 - Periodically review skip pattern logic and internal disposition codes for accuracy

CAHPS® Hospice Survey

Reminders: Phone Only Mode

Conducting Phone Attempts (1 of 2)

- A maximum of 5 phone attempts may be made
 - If the interviewer reaches a “screening” number (e.g., privacy screen such as Google assistant, privacy manager, phone intercept, or blocked call), count as one phone attempt
- Phone attempts should be made at various times of the day, on different days of the week, and in different weeks
- Call the caregiver’s primary and secondary numbers if provided by the hospice

CAHPS® Hospice Survey

Reminders: Phone Only Mode

Conducting Phone Attempts (2 of 2)

- Interviewers **must** confirm the identity of the caregiver using the full name prior to disclosing any identifiable information
- Proxy respondents within the same household are permissible
- If the caregiver is away temporarily, they must be contacted upon return, provided that it is within the data collection time period
 - If the caregiver will not be available during the survey field period, and no proxy is identified, the caregiver should not receive any further phone attempts

CAHPS® Hospice Survey

Quality Assurance: Phone Only Mode *(1 of 2)*

- During phone attempts, survey vendors must:
 - Update phone information
 - Check that entire sample has received phone attempts for each hospice client
 - Review call attempts to confirm 1st attempt within first 7 days of survey field period and that all applicable cases receive 5 attempts
 - Review scheduled call backs to ensure attempt is made at requested time
 - Check that data are being captured correctly

CAHPS® Hospice Survey

Quality Assurance: Phone Only Mode *(2 of 2)*

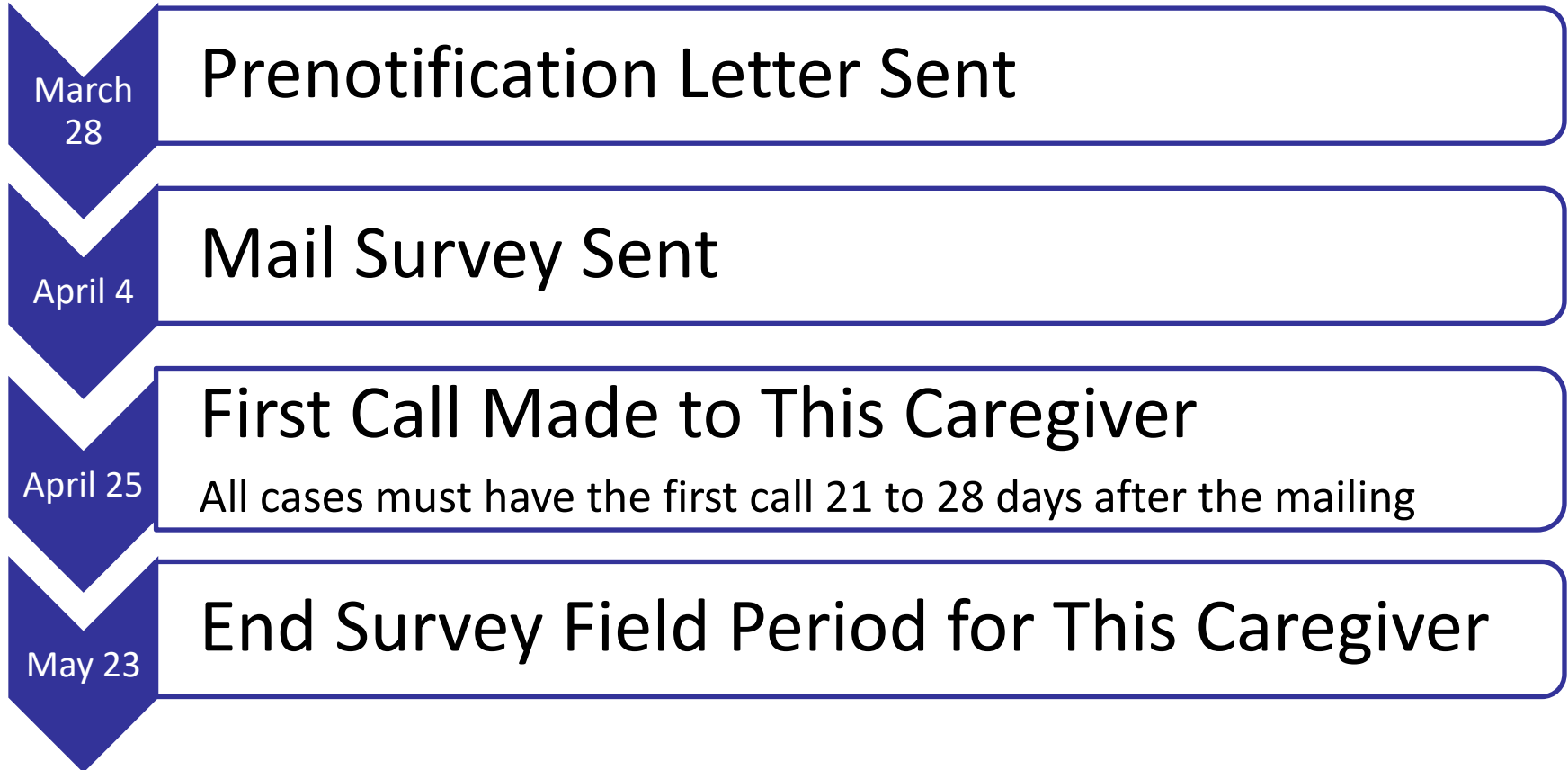
- During survey field period, survey vendors must:
 - Monitor and provide oversight of staff, subcontractors, and other organizations, if applicable
 - Conduct and document phone monitoring even if using a subcontractor
 - **Must** follow state regulations when monitoring and recording telephone calls
 - At least 10% of interviews, response coding, dispositions, and attempts **must be monitored** in all applicable languages through silent monitoring

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Mail Phone Mode (Formerly Mixed Mode)

CAHPS® Hospice Survey

Example for Mail Phone Mode



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Reminders: Mail Phone Mode

- For mail portion follow guidelines for Mail Only mode
 - Exception: Use one questionnaire mailing instead of two
- For phone portion follow guidelines for Phone Only mode
 - Exception: Initiate first telephone attempt for each non-respondent approximately 21 to 28 days after mailing the questionnaire
 - Mailings returned as undeliverable must be sent to the phone portion
- Quality Assurance must follow guidelines for both Mail Only and Phone Only modes

CAHPS® Hospice Survey

Reminders: Mail Phone Mode

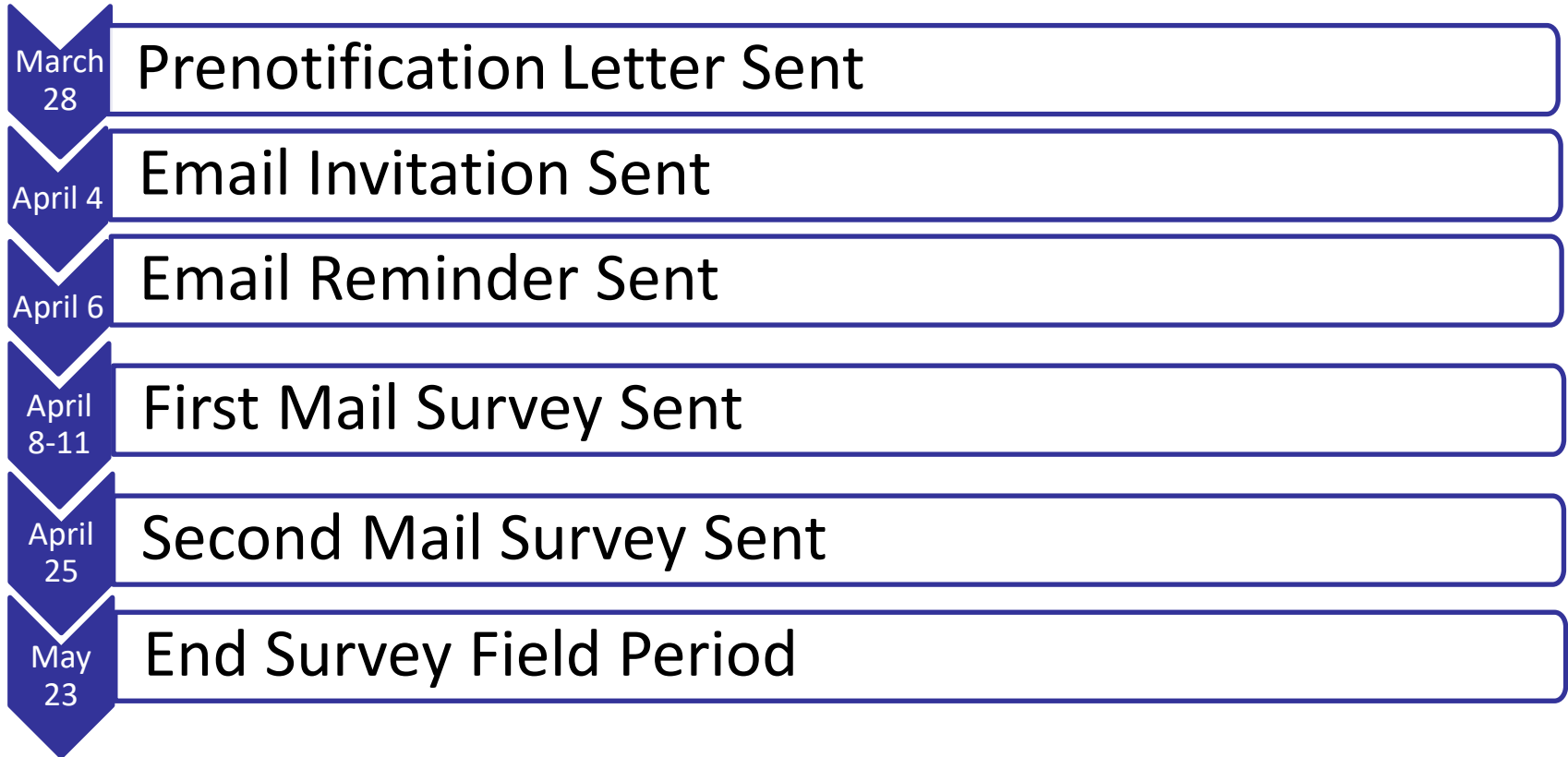
- Survey vendors **must** keep track of the mode and attempt in which each survey was completed (i.e., mail or phone)
 - For completed surveys, retain documentation in survey management system that the caregiver completed the survey in the **mail phase or phone phase** of the Mail Phone mode of survey administration, then
 - Assign the appropriate “Survey Completion Mode” and the “Number of Survey Attempts – Mail” or “Number of Survey Attempts – Phone” in which the final disposition was determined

CAHPS® Hospice Survey

Web Mail Mode

CAHPS® Hospice Survey

Example for Web Mail Mode



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Web Mail Mode

Obtaining Email Addresses

- Must **only** use email addresses provided by the hospice
 - Hospices must not exclude any available, valid caregiver email addresses from their sample file
- May use commercial software, email validation service provider, or other means to validate email addresses
 - Supplemental or adjunct services to find or replace email addresses provided by the hospice must not be used
- Emails without required components (i.e., a username followed by @ and a domain name) may be excluded from the web portion of administration

We strongly encourage vendors to administer the Web Mail mode only for hospices with a significant number of available caregiver email addresses

CAHPS® Hospice Survey

Follow Guidelines When Altering the Email Text

- Include the following wording:
 - Language indicating that answers may be shared with the hospice for the purposes of quality improvement
 - An explanation that participation in the survey is voluntary
 - Wording stating:
 - “Medicare uses your responses to this survey to improve hospice care and help others select a hospice.”
 - “If you’d like to see how your responses will be used, hospice ratings are posted online on Medicare’s Care Compare website.”

CAHPS® Hospice Survey

Web Mail Mode

Email Invitation and Reminder

- Cannot use a “No Reply” or “Do Not Reply” email address for sending the emails
- Must use a readable font (font size minimum of 12-point)
- Must use the signature block of the hospice Administrator or survey vendor Project Director
 - A general signature block that references a specific department or team at the hospice (e.g., “Sincerely, Quality Improvement Team, XYZ Hospice”) may be used
- Must include name of the sampled caregiver, decedent, and the hospice in the body of the email
- Must include an embedded hyperlink unique to each sampled caregiver to allow caregiver to access web survey

CAHPS® Hospice Survey

Web Mail Mode

Email Invitation and Reminder Unsubscribe

- An unsubscribe statement may be added to the email invitation
 - Removes the sampled caregiver from all remaining email invitations
- **Must not** remove the sampled caregiver from the mail phase
- Must include following language verbatim:
 - “If you prefer not to receive further emails asking you to take this survey about your family member’s hospice stay, please click Unsubscribe.”
- Should direct the caregiver to a new web page that must include the following language verbatim,
 - “We will remove you from future emails for this survey about your family member’s hospice stay.”
- Must be placed at the bottom of the email invitations, may appear in italics and appear smaller than the rest of the text of the email invitations

CAHPS® Hospice Survey

Web Mail Mode

Follow all Web System Requirements, including:

- Support URL that is a maximum of 25 characters
- Allow a web survey to be programmed to be 508 compliant
- Must **NOT** allow for advertisements to be embedded or displayed

CAHPS® Hospice Survey

Web Mail Mode: Mail Follow-up

- Vendors **must** send the 1st questionnaire 4-7 days after the email invitation, to all sampled caregivers who have not submitted the web survey
 - If a caregiver starts, but does not submit the web survey, a mail questionnaire **must** be sent
 - Sampled caregivers that do not have a valid email address **must** be sent the prenotification letter and the survey mailings at the same time as other cases in the sample month
- Approximately 21 days after the email invitation, a 2nd questionnaire **must** be sent to all sampled caregivers who did not submit the web survey or the 1st mailed questionnaire
- Cover letter and questionnaire requirements are the same as for Mail Only mode

CAHPS® Hospice Survey

Web Mail Mode

Tracking Completed Surveys

- Survey vendors **must** track the mode and attempt in which each survey was completed
 - Assign the appropriate “Survey Completion Mode” and the “Number of Survey Attempts – Email” or “Number of Survey Attempts – Mail” in which the final disposition was determined
 - If a caregiver **completes** multiple survey questionnaires or completes the web survey and the mail survey, use the first CAHPS Hospice Survey received
 - At the end of the survey field period, if the caregiver answered any of the web survey questions, but did not “submit” the web survey or return a mail survey, include the web survey responses in the XML file

CAHPS® Hospice Survey

Quality Assurance: Web Mail Mode

- For mail administration activities, survey vendors must follow the Mail Only mode quality control guidelines
- For web administration activities, survey vendors must provide detailed quality control procedures in their Quality Assurance Plan
- Review QAG V12.0 for all quality assurance requirements

CAHPS® Hospice Survey

Break

CAHPS® Hospice Survey

Data Coding and Data File Preparation

CAHPS® Hospice Survey

Timeline Reminder

- XML V11.0 began with Q2 2025 decedents
 - CAHPS Hospice Data Warehouse submission deadline in November 2025
- Vendors are encouraged to submit a test file using XML V11.0 to the Data Warehouse in September or October 2025, if not already complete
 - Submit data for April and/or May 2025 decedents
 - Do **not** wait until November to submit a file
- XML V12.0 begins with Q1 2026
 - January 2026 decedents
 - CAHPS Hospice Data Warehouse submission deadline in August 2026

CAHPS® Hospice Survey

Reminder: Updates beginning with XML V11.0

- Changes reflect the revised CAHPS Hospice Survey instrument and new Web Mail mode

Items removed

<h_confuse>
<painrx>
<painrxside>
<painrxwatch>
<painrxtrain>
<breathtrain>
<restless>
<restlesstrain>
<movetrain>
<receivednh>
<cooperatehnh>
<differhnh>

Items added

<wishes>
<mattered>
<teach>
<email-status>
<number-survey-attempts-web>

Items with new values

<survey-mode>
<survey-completion-mode>

CAHPS® Hospice Survey

Reminder: Hospice Record

- All hospices should have a Hospice Record for every decedent month (three per quarter)
 - Survey vendors **must** submit monthly Hospice Records for all hospices, even those with zero survey-eligible decedents/caregivers in a month
 - The hospice must confirm in writing that it had zero eligible cases during the month
 - If no written confirmation of zero survey-eligible decedents/caregivers is received from the hospice, a Discrepancy Report must be submitted and **no** Hospice Record may be submitted for the month

CAHPS® Hospice Survey

Hospice Record Updates Beginning with XML V11.0

- A code added to <survey-mode> to indicate new Web Mail mode of administration
 - New value of “4 -Web Mail”

1 – Mail Only
2 – Phone Only
3 – Mail Phone
4 – Web Mail
8 – Not Applicable (no decedents in the sampled month)

CAHPS® Hospice Survey

Decedent/Caregiver Administrative Record

Reminders beginning with XML V11.0 (1 of 4)

- New variable *<email-status>*
 - Indicates if a caregiver email address was provided
 - For Web Mail cases, must code 1 or 2
 - For Mail Only, Phone Only, or Mail Phone modes, code 88

1 – Yes

2 – No

88 – Not Applicable

CAHPS® Hospice Survey

Decedent/Caregiver Administrative Record

Reminders beginning with XML V11.0 (2 of 4)

- New variable *<number-survey-attempts-web>*
 - Used for Web Mail cases only; otherwise, code 88
 - Indicates whether a submitted web survey came from the email invitation or reminder
 - Only submitted for cases whose *<survey-completion-mode>* is **3 – Web Mail Mode – web**
 - Web survey system must capture this information
 - If *<survey-completion-mode>* is **4 – Web Mail Mode – mail**, code 88
 - For Mail Only, Phone Only, or Mail Phone modes, code 88

1 – Email invitation
2 – Email reminder
88 – Not Applicable

CAHPS® Hospice Survey

Decedent/Caregiver Administrative Record

Reminders beginning with XML V11.0 (3 of 4)

- New values for *<survey-completion-mode>*
 - Used for both Web Mail and Mail Phone cases
 - For Mail Only or Phone Only, code 88

1 – Mail Phone Mode – mail

2 – Mail Phone Mode – phone

3 – Web Mail Mode – web

4 – Web Mail Mode – mail

88 – Not Applicable

CAHPS® Hospice Survey

Decedent/Caregiver Administrative Record

Reminders beginning with XML V11.0 (4 of 4)

- *<number-survey-attempts-mail>* is submitted for cases whose *<survey-completion-mode>* is 4 – *Web Mail Mode – mail* or 1 – *Mail Only*
 - Indicates the mail attempt that corresponds to the determination of final survey status
 - If *<survey-completion-mode>* is 3 – *Web Mail Mode – web*, code 88
 - For Phone Only or Mail Phone Mode, code 88

1 – First Wave Mailing

2 – Second Wave Mailing

88 – Not Applicable

CAHPS® Hospice Survey

Reminder: Survey Results Record

- Survey vendors **MUST** submit a Survey Results Record for every decedent/caregiver who has a final disposition of:
 - “1 – Completed Survey,”
 - “6 – Ineligible: Never Involved in Decedent Care,” or
 - “7 – Non-response: Break-off/Partial Complete”
- Survey vendors may omit the Survey Results Record for all other dispositions
- Each field requires a valid value for submission
 - May include “M – Missing/Don’t Know” and “88 – Not Applicable”

CAHPS® Hospice Survey

Reminder: Assigning Survey Disposition Code 12 *12: Non-response: Incomplete Caregiver Name*

- If caregiver name is **completely missing** from the hospice file **and** “Caregiver Relationship to the Decedent” is **not coded** by the hospice as “8 – No caregiver of record,” the case must be included in the sample frame
 - Survey vendor must re-contact the hospice to inquire about receiving a caregiver name
 - If the caregiver name is completely missing after re-contacting the hospice, the final survey status is coded “12 – Non-response: Incomplete Caregiver Name”
- Caregivers with an incomplete name (missing first or last name) must be coded “12 – Non-response: Incomplete Caregiver Name”

CAHPS® Hospice Survey

Reminder: No Caregiver of Record

- Decedents with no caregiver are identified by the Caregiver Relationship “8 = No Caregiver of Record”
 - If a hospice learns that the decedent’s only caregiver is under the age of 18, the case should be coded as “8 = No Caregiver of Record” and submitted in the sample file to the vendor
- Cases where **the hospice has indicated in their sample file** that there is a caregiver relationship of “8 – No Caregiver of Record” should be coded as an ineligible case

Otherwise:

- Even if a caregiver name is **completely** missing, the final survey status should be “12 Non-response: Incomplete Caregiver Name”

CAHPS® Hospice Survey

New Ineligible Criteria

- If a caregiver is on the vendor's Do Not Call List, they are ineligible for sampling
 - These should be included in the count of the total number of ineligible decedents/caregivers

CAHPS® Hospice Survey

Data Submission

CAHPS® Hospice Survey

Data Submission Beginning Q2 2025

- The revised CAHPS Hospice Survey is administered beginning with Q2 2025 decedents
- Data that are submitted must follow the XML File Specification or be rejected from the CAHPS Hospice Survey Data Warehouse
 - XML File Specification V11.0 will be used with Q2 2025 through Q4 2025 decedents
 - XML File Specification V12.0 will be used starting with Q1 2026 (January 2026) decedents

CAHPS® Hospice Survey

Reminder: File Submission

- Submission files should include **all required elements** as specified in the QAG version corresponding to the quarter of data submission
 - Review new data elements related to Web Mail mode, new questions, and updates to question response categories
 - Review **timeline** for implementation of XML changes
- Ensure that data files are submitted and accepted by the deadline
 - Note that the quarterly data submission deadline is 8:00 PM Eastern Time

CAHPS® Hospice Survey

Data Submission Reports

- Four CAHPS Hospice Survey Data Submission Reports are accessible by hospices and survey vendors
- A fifth report, Hospices Not Authorized, is posted only if a vendor submits a file with unauthorized CCNs, and is not available to hospices
- Edits have been made to correspond to XML V11.0 changes

CAHPS® Hospice Survey

Data Submission Detail Report (Part I)

- Indicates whether file can be decrypted and all required data elements are included
- Added details about file naming convention

TestVendor-Hospice File - TestVenndor-Hospice.11032025.1.xml File Validation Checks		12:04 Friday, May 30, 2025	1
CHECK	message		
File encryption check	File TestVenndor-Hospice.11032025.1.xml.pgp sucessfully de-crypted		
Check file naming convention	The file name of TestVenndor-Hospice.11032025.1.xml is not correctly formatted		
Check file naming convention	Per Quality Assurance Guidelines, the file name should follow this convention: TestVendor-Hospice.mmddyy.submission#.xml where "mmddyy" is the date of submission and "submission#" is the submission number for that date		
XML Validation	XML contains all required data elements		

CAHPS® Hospice Survey

Data Submission Detail Report (Part II)

- Checks if all values are within the allowable range

Data Submission Detail Report for TestVendor-Hospice
Submission TestVendor-Hospice.110125.1

File ID	Upload Date	Data Value Checks Status
TestVendor-Hospice.110125.1	11/01/2025	Rejected

- Top section indicates if the file was accepted or rejected
- Added corresponding month for all error details

Error Detail: Decedent-Level Data

CCN	Decedent Caregiver ID	Month	QUESTION_PRINT	Content of Submitted Field	Valid Values
999999	292896963	4	EMAIL_STATUS	4	1, 2, 88
999999	292896963	4	NUMBER_SURVEY_ATTEMPTS_WEB	3	1, 2, 88

CAHPS® Hospice Survey

Review and Correction Report

Frequencies of all categorical values: Decedent-Level Data

The FREQ Procedure

Decedent sex				
sex	Frequency	Percent	Cumulative Frequency	Cumulative Percent
1: Male	3	25.00	3	25.00
2: Female	9	75.00	12	100.00

Indicator for whether decedent is Hispanic				
decedent_hispanic	Frequency	Percent	Cumulative Frequency	Cumulative Percent
1: Hispanic	2	16.67	2	16.67
2: Non-Hispanic	5	41.67	7	58.33
M: Missing	5	41.67	12	100.00

- Contains frequencies for each variable included in the XML file

CAHPS® Hospice Survey

Survey Status Summary Report

Survey Status Summary Report for TestVendor-Hospice Submission TestVenndor-Hospice.11032025.1						
Month of Death	CCN	Hospice Record Accepted	Sample Size	Decedent Caregiver Administrative-Level Records	Valid Final Survey Status Codes (1-16)	Completed Surveys
04/2025	000000	yes	9	3	3	2
	999999	yes	9	3	3	2
Month Total			18	6	6	4
05/2025	000000	no	-			
	999999	no	-			
Month Total			-	0	0	0
06/2025	000000	no	-			
	999999	no	-			
Month Total			-	0	0	0
FILE TOTAL			18	6	6	4

- Contains the details about the number of cases that were sampled and completed and whether a Hospice Record was accepted for each CCN/month

CAHPS® Hospice Survey

Hospices Not Authorized Report

- Contains a list of any CCNs included in the XML file that have not authorized the survey vendor for that quarter
 - A Vendor Authorization Form must be received before CCNs can be submitted by a survey vendor

Vendor	
File - TestVendor-Hospice.110125.1.xml	
***** Hospices (CCNs) Not Authorized with Vendor *****	
Obs	provider_id
1	000000
2	999999

CAHPS® Hospice Survey

Data Quality Checks

CAHPS® Hospice Survey

Overview

- Survey vendors must implement quality assurance processes to verify the integrity of the collected and submitted CAHPS Hospice Survey data
- Quality check activities must be performed by a different staff member than the individual who originally performed the specific project task(s)
 - Do **NOT** rely on programming alone to complete tasks
 - Have staff complete manual review of samples and XML files
- Quality checks must be operationalized for all of the key components or steps of survey administration and data processing

CAHPS® Hospice Survey

Validate Changes to Code or Processes

- Survey vendors must have procedures in place to review any changes to code or processing steps
 - Save original code/documents for reference
 - Document changes thoroughly (e.g., what, when, why, who, how)
 - Have at least one other different team member verify the new code
 - Verify that no errors or unintended changes have been made
 - Conduct comparison of old and new data, reviewing even elements that were **not expected** to change

CAHPS® Hospice Survey

Verify Accuracy of Data Processing Activities

- Survey vendors should implement data quality checks to verify protocols have been followed, including:
 - Verify that every decedent/caregiver has equal chance of being sampled
 - Evaluate frequency of break-off surveys and/or unanswered questions, and investigate possible causes
 - Review CAHPS Hospice Survey Data Submission Reports to confirm data submission activity (verify results are as expected)
 - Review quarterly submission results from the Review and Correction Report to confirm a match with frequency tables completed during previous quality check activities

CAHPS® Hospice Survey

Create Traceable Data File Trail

- Guidelines for survey vendors:
 - Preserve a copy of every file received in original form and leave unchanged
 - Record general summary information such as total number of decedent/caregiver cases, survey-eligible size, decedent month, etc.
 - Institute version controls for datasets, reports, software code, and programs

CAHPS® Hospice Survey

Data Quality Checks

- Maintain monthly and quarterly documentation for all hospices, including but not limited to:
 - Total counts from hospices, number of records received, number of eligible and ineligible (pre- and post-sample) cases, sample size, numbers of each “Final Survey Status” code, and response rate
- Create frequency and distribution tables for all decedent/caregiver administrative and survey response variables
 - Compare counts across months and quarters for trends
 - Investigate any unexpected variations, unusual counts, or percentages

CAHPS® Hospice Survey

New Data Checks to Consider

- If <survey-mode> is “4 – Web Mail”:
 - <email-status> must equal “1 – Yes” or “2 – No”
- If <survey-completion-mode> is “3 – Web Mail Mode – web”:
 - <number-survey-attempts-web> must equal “1 – Email invitation” or “2 – Email reminder”
- If <survey-mode> is “3 – Mail Phone”:
 - <number-survey-attempts-telephone> should not be “88 – Not Applicable”

CAHPS® Hospice Survey

When Reviewing Data Files, Survey Vendors Should:

- Follow up with hospice clients
 - when there are unusual or unexpected changes from month to month
 - when there are notable changes in the counts of total decedents/caregivers and eligible decedents/caregivers
 - if <total-decedents> minus <no- publicity> does not equal <records-received>
 - If the decedent race variable as submitted by hospices does not appear to be correct
- Verify that survey completion mode, number of attempts, and email status all make sense relative to survey-mode

CAHPS® Hospice Survey

Review of XML Data Files

- Verify that ALL required data elements are included in the XML file
- Verify that ALL decedent/caregiver records for the month are included in the XML file
- Verify that ALL data for each decedent/caregiver record are included in the XML file
- Make sure variables in the XML file have the correct codes and are in the correct order
 - Prior to preparing data files for submission to the Data Warehouse, run frequency/percentage tables for all survey variables stored for a given hospice and month

CAHPS® Hospice Survey

Perform Additional XML File Quality Checks

- Prior to submitting XML files to the Data Warehouse, survey vendors should **minimally**:
 - Confirm Hospice Record for each applicable month for each hospice
 - Verify correct calculation of sample size, ineligible pre- and post-sample
 - Review a subset of administrative data in XML file to the **original** decedents/caregivers list
 - Validate survey vendor-assigned decedent/caregiver administrative fields, such as “Final Survey Status” codes, lag time, and supplemental question count
 - Review survey response results against original returned survey or recorded interview/database
 - Check skip pattern coding

Oversight Activities, Exception Request, and Discrepancy Report Processes

CAHPS® Hospice Survey

Oversight Activities

- Review of survey materials
 - Submit materials in ALL languages that vendors plan to use
 - **Due date of 11/21/2025**
 - Mail materials (questionnaires, letters, and outgoing/return envelopes)
 - Phone materials (prenotification letter, CATI screenshots)
 - Web materials (email samples and web survey links)
- Review of Quality Assurance Plan (QAP)
 - Follows the QAP specifications provided in Appendix H
 - **Notify CMS of any changes in ownership or key personnel**
 - **Reminder:** QAPs must be updated after training and will be requested in advance of a site visit
- Submit via the CAHPS Hospice Survey Technical Assistance email: hospicecahpssurvey@hsag.com

CAHPS® Hospice Survey

Exception Request (1 of 2)

- For consideration of:
 - Requests for conducting business and data collection operations remotely
 - Alternative strategies not identified in the CAHPS Hospice Survey Quality Assurance Guidelines V12.0 manual
 - The use of survey materials that do not align with the examples provided
 - No alternative modes of survey administration will be permitted other than those prescribed for the survey (Mail Only, Phone Only, Mail Phone and Web Mail mode)
- **Survey vendors must:**
 - Submit an Exception Request Form on behalf of hospice client(s)
 - Provide sufficient detail and clearly defined timeframes
 - Not implement prior to receiving approval from the CAHPS Hospice Survey Project Team

CAHPS® Hospice Survey

Exception Request (2 of 2)

- Requests are assessed for the methodological soundness of the proposed alternatives and compliance with data security requirements
- Survey vendors will be notified as to the outcome of the review
 - If approved, implement at the beginning of a quarter unless otherwise specified
 - Exceptions are limited to a two-year approval timeline
 - If the Exception is not approved, an explanation will be provided
 - Survey vendors have five business days from the date of the denial notification email to submit an appeal
- Any approved Exception Request must be thoroughly discussed in the QAP

CAHPS® Hospice Survey

Discrepancy Report *(1 of 2)*

- Required for any discrepancy or variation in following standard protocols during survey administration
- Complete and submit online **immediately** upon discovery through the CAHPS Hospice Survey Website
 - Provide sufficient detail
 - “Unknown” or zero cases affected are NOT acceptable values in final Discrepancy Report that is submitted
 - Provide information regarding the decedent months that are affected by the discrepancy(ies)
 - The patient month(s) of death that are affected must be clearly stated

CAHPS® Hospice Survey

Discrepancy Report (2 of 2)

- Examples of Discrepancy Reports include:
 - Survey administration outside fielding period (early or late)
 - Eligible cases that are excluded from the sample frame
 - Ineligible cases that are included in the sample frame
 - Survey administration errors (such as missing questions)
 - Data discrepancies (such as incorrectly coded survey responses or calculated lag time)
 - Patterns of missing or incorrect data from hospices that continue despite attempts by the survey vendor to rectify
 - Include date(s) of communication with hospice to obtain this information

CAHPS® Hospice Survey

Discrepancy Report Review Process

- Notification of the outcome of the review may not be forthcoming until all the data for the affected reporting period(s) have been submitted and reviewed
 - Email notification will be distributed to the survey vendor submitting the Discrepancy Report Form once the outcome of the review has been determined
 - A footnote may be applied to publicly reported CAHPS Hospice Survey results to indicate that these results are derived from data whose collection or processing varied from established CAHPS Hospice Survey protocols
- Hospices are encouraged to contact their survey vendor to inquire about the outcome of the review

CAHPS® Hospice Survey

Questions?

Wrap-up and Next Steps

CAHPS® Hospice Survey

Wrap Up and Next Steps *(cont'd)*

- Deadlines survey vendors must meet
 - Samples of CAHPS Hospice Survey materials due by:
11/21/2025
 - English mail materials (questionnaires, letters, and outgoing/return envelopes)
 - English phone materials (prenotification letter, CATI screenshots including skip pattern logic)
 - English web materials (email samples, screen shots, and web survey links)
 - Quarter 2 2025 decedent data due by **8:00 PM Eastern Time 11/12/2025**
 - CAHPS Hospice Survey Attestation Statement due by **12/05/2025**

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Wrap-up and Next Steps

- Post-training Survey Vendor Quiz
 - One quiz per survey vendor
 - Immediately upon conclusion of training
 - Accessible via Webinar for 20 minutes
- Feedback on training
 - Follows post-training quiz
 - Accessible via Webinar for 15 minutes
- Survey vendor notification
 - CMS follow-up regarding survey vendor quiz by **10/7/2025**

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Technical Assistance Contact Information

- For additional information and technical assistance:
 - via email at hospicecahpssurvey@hsag.com
 - via telephone at 1-844-472-4621
- For CAHPS Hospice Survey Data Warehouse or data submission issues:
 - via email at cahpshospicetechsupport@rand.org
 - via telephone at 1-703-413-1100, extension 5599
- To communicate with CMS:
 - via email at hospicesurvey@cms.hhs.gov

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Quiz and Evaluation