Hospice CAHPS Frequently Asked Questions

Q: What is the Hospice CAHPS survey?
A: The Centers of Medicare & Medicaid Service (CMS) has developed a standard survey to be administered post-death to family caregivers that will assess patient and family experiences with hospice care. The survey is one of a family of surveys within the Consumer Assessment of Healthcare Providers and Systems (CAHPS).

Q: Who will receive the Hospice CAHPS survey?
A: The survey will treat the patient and family as the unit of care and will be a post-death survey directed at the patient’s informal caregiver, 3 months after the patient’s death.

Q: What does the survey measure?
A: The Hospice CAHPS survey released on July 29, 2014 is comprised of 47 standard questions.

2 Global Measures
- Overall Rating
- Likelihood to Recommend

9 Domain Measures
- Hospice Team Communication (5 questions)
- Getting Timely Care (2 questions)
- Treating Family Member with Respect (2 questions)
- Providing Emotional Support (2 questions)
- Getting Help for Symptoms (4 questions)
- Support for Religious and Spiritual Beliefs (1 question)
- Information Continuity (1 question)
- Understanding the Side Effects of Pain Medication (1 question)
- Getting Hospice Care Training (Home Setting of Care Only) (4 questions)

Q: Who is required to participate in the Hospice CAHPS survey?
A: Medicare-certified hospices with 50 or more annual decedents will be required to contract with an approved vendor to administer the survey and to provide data to the vendor on a monthly basis.

- Hospices with 50-699 annual deaths will survey all decedents with an annual survey return goal of 21 – 300. Those with 700 or more annual decedents can use a random sample, with an annual survey return goal of 300.
- Exclusion criteria includes:
  - Decedents under the age of 18 at the time of death
  - Decedent lived less than 48 hours after admission to hospice care
  - Decedent had no primary caregiver listed
  - Decedent’s primary caregiver had a foreign address
  - The decedent patient or primary caregiver were on a “no publicity” list.

Exemptions:
- The hospice must have served fewer than 50 decedents/caregivers annually
- Based on how recently the hospice received its CCN, also known as the Medicare Provider Number. (i.e., for CY2015, hospices who received their CCN on or after 1-1-15 are eligible for a one-time exemption for newness)
Q: What is the timeline for Hospice CAHPS?
A: The timeline for Hospice CAHPS is listed below. It begins with a required dry run. Hospices are required to participate in at least one month of the CMS required Dry Run for Hospice CAHPS.

<table>
<thead>
<tr>
<th>Month of Death</th>
<th>Survey Administration</th>
<th>Survey Period</th>
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<tbody>
<tr>
<td>January 2015</td>
<td>April 1, 2015</td>
<td>Dry Run</td>
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<tr>
<td>February 2015</td>
<td>May 2015</td>
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<td>March 2015</td>
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<td>October 2015</td>
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<tr>
<td>November 2015</td>
<td>February 2016</td>
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<tr>
<td>December 2015</td>
<td>March 2016</td>
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Q: By what date does a hospice provider need to select a CAHPS vendor?:
A: Unlike other CAHPS programs, CMS has not identified a particular date for hospice providers to contract with or authorize a vendor. Below is a table, based on Press Ganey recommended deadlines and experience with other CAHPS programs, which outlines contract, survey, and transmission authorization deadlines.

<table>
<thead>
<tr>
<th>Month of Death</th>
<th>Press Ganey Contract Deadlines</th>
<th>Survey Administration</th>
<th>Client Completes Authorization for Data Transmission</th>
</tr>
</thead>
<tbody>
<tr>
<td>January 2015</td>
<td>January 30, 2015</td>
<td>April 1-7, 2015</td>
<td>May 1, 2015</td>
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<tr>
<td>February 2015</td>
<td>February 27, 2015</td>
<td>May 1-7, 2015</td>
<td>May 1, 2015</td>
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<tr>
<td>March 2015</td>
<td>March 31, 2015</td>
<td>June 1-7, 2015</td>
<td>May 1, 2015</td>
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Q: How often will the Hospice CAHPS survey be conducted?
A: Similar to Hospital CAHPS and Home Health CAHPS, the Hospice CAHPS survey will be conducted on an ongoing (monthly) basis.

Q: What are the approved survey modes for Hospice CAHPS?
A: CMS has approved the use of mail, phone and mail followed by phone. Press Ganey will offer mail or phone methodologies.

Q: Is Hospice CAHPS a pay for reporting or pay for performance program?
A: The Hospice CAHPS survey is a pay for reporting program, meaning the submission of required data by specified deadlines determines compliance. If a hospice agency fails to meet the requirements they will receive a two percentage point reduction in their annual payment update.
Q: How will the scores be reported?
A: Press Ganey anticipates that the scores will be posted publicly. However, CMS has not indicated the details of the reporting program, (i.e. formats, timelines, etc.). Press Ganey will update our Hospice clients once CMS releases more information.

Q: Does my Hospice organization need to use a vendor to complete the survey administration?
A: Yes. Hospices must designate a certified vendor to complete the Hospice CAHPS survey administration. CMS is contracting with vendors to administer and collect data for the CAHPS survey. Effective October 17, 2014, Press Ganey is a CMS approved vendor for the Hospice CAHPS survey and is eligible to execute contracts with hospice agencies.

Disclaimer: Information and timelines presented herein are based solely upon Press Ganey’s experience with other CAHPS initiatives and our interpretation of CMS rulemaking and policy statements. The information presented herein does not reflect the views or policies of CMS or any other governmental agency. Official CMS policy is distributed as part of their normal rulemaking process. Information regarding the use of a visit-specific survey for targeted performance improvement is Press Ganey’s recommendation based on our experience and expertise. The information herein does not represent the views or policies of CMS or any other governmental agency.