

GETTING STARTED WITH THE HHCAHPS SURVEY: HHA RESPONSIBILITIES, HOW TO PARTICIPATE, AND HHCAHPS PARTICIPATION REQUIREMENTS FOR THE APU

The purpose of this document is to summarize the responsibilities of Medicare-certified home health agencies (HHAs) participating in the Home Health Care CAHPS (HHCAHPS) Survey. The information in this document:

- describes HHA responsibilities once their participation in HHCAHPS has begun;
- lists the steps that HHAs must take before beginning their participation in the HHCAHPS Survey; and
- explains the calendar year (CY) 2026 Annual Payment Update (APU) requirements.

Home Health Agency Responsibilities

It is the responsibility of all Medicare-certified HHAs to participate every month in the HHCAHPS Survey to obtain the full APU from the Centers for Medicare & Medicaid Services (CMS). There are only two scenarios under which a Medicare-certified HHA can be exempted from participation in the HHCAHPS Survey. These scenarios are described below:

- If an HHA received Medicare certification from CMS after the cutoff date for a given APU period, that HHA is considered too new to participate in the upcoming APU. This is a one-time exemption only, and HHAs do not need to apply for it. Medicare certification eligibility cutoff dates and the period that each APU covers are provided in the Home Health Prospective Payment System (HH PPS) Final Rule. The most recently published Rule is the HH PPS Final Rule for CY 2024, which was published in the Federal Register on November 13, 2023. A link to the Final Rule is available at <https://homehealthcahps.org>. More information about the APU Reference Periods is available in the “Annual Payment Update Requirements” section of this document.
- If an HHA was certified before the cutoff date specified in the HH PPS Rule, that HHA may only receive an exemption if it served 59 or fewer survey-eligible patients during the 12-month Reference Period that the APU covers. To request an exemption, an HHA must submit a Participation Exemption Request (PER) form for that APU period. The PER form is available and must be submitted online at <https://homehealthcahps.org>. HHAs must submit a PER form every year that they believe they qualify for and would like to seek an exemption from participating in the HHCAHPS Survey for each APU period. There is a deadline each year for submitting a PER form. There is information about the APU Reference Periods and PER form deadlines in the “Annual Payment Update Requirements” section of this document.

If an HHA is participating in HHCAHPS, these are the HHA responsibilities:

- Register for login credentials on <https://homehealthcahps.org> and monitor the website for updates throughout the year.
- Contract with an approved HHCAHPS survey vendor to conduct its survey.
- Authorize (on <https://homehealthcahps.org>) the contracted survey vendor to collect and submit HHCAHPS Survey data to the HHCAHPS Data Center on the agency's behalf.
- Work with its approved vendor to determine a date each month by which the vendor will need the monthly patient information file for sampling and fielding the HHCAHPS Survey.
- By the agreed-upon date each month, compile and deliver to the survey vendor a complete and accurate list of patients (i.e., the monthly patient information file) and information that will enable the vendor to administer the HHCAHPS Survey.
- Review survey data submission reports from its survey vendor (on <https://homehealthcahps.org>) to ensure that the survey vendor has submitted data to the HHCAHPS Data Center on time and without data problems.
- Recommendation: We strongly suggest that HHAs agree on data submission dates with their vendors that are well in advance of the final deadline each quarter. There are no extensions given if a vendor does not successfully submit the HHA's data by each deadline. HHAs will have more time to fix problems if their vendors try to submit data well before the deadline than if the deadline is fast approaching.
- Review HHCAHPS Survey results prior to public reporting.
- Avoid influencing patients in any way about how to answer the HHCAHPS Survey. For example, HHAs may not hand out any information to patients about how to answer the survey. (Please refer to the section about Communications with Patients About the HHCAHPS Survey in Chapter III of the *Home Health Care CAHPS Survey Protocols and Guidelines Manual* available on <https://homehealthcahps.org>.)
- Understand the APU, including how it corresponds to the HHCAHPS Survey participation periods and key deadline dates. Again, information about APU Periods and Medicare certification eligibility cutoff dates is provided in the HH PPS Final Rule for each calendar year.

Getting Started on HHCAHPS (Steps to Take Before Participation)

Each HHA must complete the following tasks before beginning its participation in the HHCAHPS Survey.

1. Contract with an approved HHCAHPS Survey vendor to administer the HHCAHPS Survey and submit HHCAHPS Survey data to the HHCAHPS Data Center on the HHA's behalf.
2. Complete the registration process to access the private links on <https://homehealthcahps.org>.
3. Authorize an HHCAHPS Survey vendor on <https://homehealthcahps.org> to collect and submit HHCAHPS Survey data to the HHCAHPS Data Center.

Questions and Answers About Getting Started

The following 9 questions and answers are provided to clarify some of the steps in getting started with participation in the HHCAHPS Survey.

1. Where do I find a list of the approved HHCAHPS survey vendors?

Answer: A list of the approved HHCAHPS survey vendors is available at the following link:

<https://homehealthcahps.org/GeneralInformation/ApprovedSurveyVendors.aspx>.

2. Why do I need to register for login credentials on <https://homehealthcahps.org>?

Answer: The official site, <https://homehealthcahps.org>, has links that are available to the general public and also private, secured links. The private links are accessible only to HHAs that have been issued user credentials by the HHCAHPS Survey Coordination Team. Each agency will need to access the private links on <https://homehealthcahps.org> for certain functions, including completing the online form to authorize a vendor to submit HHCAHPS data on the HHA's behalf, to view the contracted survey vendor's Data Submission Reports, and to "preview" the agency's HHCAHPS Survey results before they are publicly reported on Medicare's Care Compare at <https://www.medicare.gov/care-compare/>.

3. How do I register as the HHCAHPS Survey Administrator to access the private links for my agency on <https://homehealthcahps.org>?

Answer: This is a two-step process. First, create a user account on the HHCAHPS website by completing the online registration form linked below: <https://homehealthcahps.org/ForHHAs/RegisterforLoginCredentials.aspx>. Once the credentials registration form is submitted, the user will receive a confirmation email with the registered username included.

Next, register your agency's CMS Certification Number(s) by completing the online Register CCNs form that can be accessed by clicking on the "Register CCNs" link in the For HHAs menu once logged in. After the CCN registration is submitted, you will receive a confirmation email that you have successfully registered as the HHCAHPS Survey Administrator for the CCN(s) you entered.

4. My agency has 10 CMS Certification Numbers (CCNs, formerly known as the Medicare Provider ID numbers). Do I have to register each of these CCNs?

Answer: Each HHA with a unique CCN will need to designate an agency employee as its HHCAHPS Survey Administrator, who will be responsible for authorizing access to the private links on <https://homehealthcahps.org> for other agency personnel. All communications from the HHCAHPS Survey Coordination Team will be sent to the person designated as the Survey Administrator. An HHA has to register all of its HHCAHPS-relevant CCNs; however, an HHA can designate a different person for each of its CCNs, or one person can be designated as the Survey Administrator for all of the CCNs.

5. Why do HHAs have to authorize an approved HHCAHPS Survey vendor?

Answer: This is for the security of your agency's data. This information reflects your agency's performance, and we want to be sure the data submitted come from the vendor your agency hired, not someone else. The HHCAHPS Data Center will not accept HHCAHPS Survey data unless the HHA has authorized the survey vendor to collect and submit HHCAHPS Survey data on its behalf. If a survey vendor attempts to submit data and the HHA did not authorize the vendor, the data will not be accepted. An HHA can only authorize one survey vendor at a time. It is important that HHAs authorize a vendor as soon as possible after contracting with an HHCAHPS Survey vendor so that the vendor will not have any problems submitting the data to the Data Center.

6. How do I authorize a survey vendor?

Answer: Your agency can only authorize your contracted vendor online at the HHCAHPS website. To authorize a survey vendor, you must have already completed the online registration steps to access the private links on the HHCAHPS website (see Steps 2 and 3 under "Getting Started"). Log onto <https://homehealthcahps.org> and click on the "Authorize a Vendor" link, which is under the "For HHAs" tab. The system will bring up the Authorize a Vendor online form; follow the steps that appear at the top of that online form.

7. When completing the online Authorize a Vendor Form, what date should I enter as the Start Date?

Answer: If your agency is starting participation for the first time for the CY 2026 APU, you must start data collection in April 2024. Select 4/1/2024, as your start date. Do not enter an end date. The following table illustrates the month (and year) that you should enter as the start date for data collection:

If your vendor starts collecting data in these months	Start Date	Quarter
January, February, March	January 1, (Year)	First Quarter
April, May, June	April 1, (Year)	Second Quarter
July, August, September	July 1, (Year)	Third Quarter
October, November, December	October 1, (Year)	Fourth Quarter

8. Why should I monitor data submission reports from my survey vendor to the HHCAHPS Data Center?

Answer: Your agency should monitor data submission reports to ensure that your vendor has successfully uploaded your survey results to the HHCAHPS Data Center before the data submission deadline.

Calendar Year 2026 Annual Payment Update Requirements

The APU determines your agency’s payment from Medicare. Each APU references a year. That referenced APU year is the year in which your agency’s Medicare payments will be affected by participation in (or exemption from) the HHCAHPS Survey. For example, the APU for 2026 affects the Medicare payments your agency receives in 2026. The CY 2026 APU year does NOT refer to the annual period when your agency collects HHCAHPS data, which is April 2024 through March 2025.

There are several types of dates and ranges that are important for each APU and HHCAHPS Survey participation period.

Data Collection Period. The first important date range for each APU is the HHCAHPS Survey Data Collection Period. This is the period during which your agency must collect monthly HHCAHPS survey data to qualify for full payment for the APU. For example, to qualify for full payment of the CY 2026 APU your agency must start data collection in April 2024.

If your vendor starts collecting your agency’s HHCAHPS Survey data in May 2024 or later, your agency will not be in full compliance with the requirement to collect monthly HHCAHPS data for the CY 2026 APU, and your agency will risk a 2% reduction in your Medicare payments.

Table 1 shows the start and end dates for the HHCAHPS Survey Data Collection Period for the

CY 2026 APU. It also shows the Reference Period, which is explained in the paragraph that follows.

Table 1. Key Date Ranges for HHCAHPS Participation for the CY 2026 APU

For APU 2026	Start Date	End Date
HHCAHPS Survey Data Collection Period	April 1, 2024	March 31, 2025
Reference Period	April 1, 2023	March 31, 2024

Reference Period. Another important date range for each APU is the Reference Period. This is the period you must consider when determining whether your agency qualifies for an exemption from participation in HHCAHPS because of the number of patients it serves. **Table 1** shows the Reference Period associated with the CY 2026 APU. If your agency had 59 or fewer survey-eligible patients during the Reference Period, your HHA is eligible for an exemption. To receive the exemption, your HHA must apply for it by completing an online CY 2026 APU PER form on <https://homehealthcahps.org>. Your agency must reapply for an exemption for each new CY APU for which it is eligible, and your agency must apply for the exemption before the deadline. The deadline for the CY 2026 APU exemption is shown in **Table 2**.

Table 2. Exemption Cutoff Date and Deadline Date for the CY 2026 APU

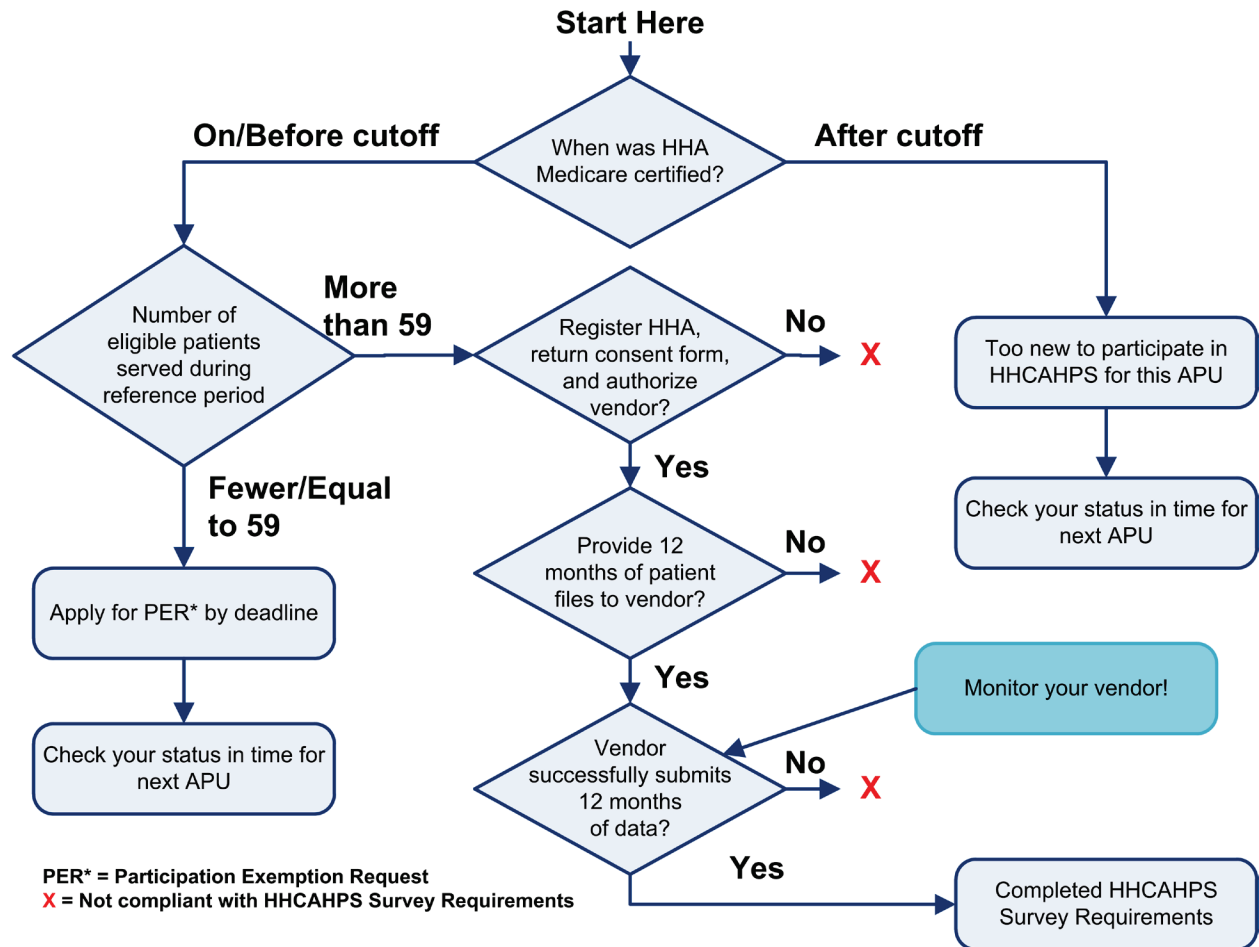
Cutoff Date/Deadline	Description	Date
CMS Medicare Certification Cutoff Date	If your HHA received Medicare Certification on or after this date, your HHA is too new to participate for the CY 2026 APU	April 1, 2024
HHCAHPS Survey Exemption Deadline	If your HHA served 59 or fewer survey eligible patients during the Reference Period in Table 1 , complete a CY 2026 APU PER form by this date	March 31, 2025

It is very important to note that these key dates and date ranges occur before 2026.

Why These Dates are Important. The CY 2026 APU starts April 1, 2024, as shown in **Table 1**. To successfully participate in HHCAHPS for the CY 2026 APU, an HHA must be ready to start collecting HHCAHPS data as of April 1, 2024.

Exhibit 1 presents a flowchart of the HHCAHPS Survey requirements.

Exhibit 1. HHCAHPS Survey Participation Requirements



HHA Responsibilities During HHCAHPS Survey Participation

After an HHA has completed the setup steps listed earlier in this document, the HHA's responsibilities after its contracted HHCAHPS survey vendor begins administering the HHCAHPS Survey are listed below.

1. Stay abreast of updated information about the HHCAHPS Survey by checking the announcements posted on the HHCAHPS website (<https://homehealthcahps.org/GeneralInformation/Announcements.aspx>) on a regular basis. We recommend that HHAs check the website for announcements at least twice each week.
2. Prepare and submit a monthly patient information file containing information needed for sampling and fielding the survey and for data analysis to your agency's contracted vendor by the date required by your contracted HHCAHPS Survey vendor. HHCAHPS Survey vendors will select a sample and initiate the survey for each sample month within 21 days after the close of each sample month. Refer to **Chapter IV** in the *HHCAHPS Survey Protocols and Guidelines Manual* for more information about the patient information that is required on each monthly patient information file.
3. Confirm that your HHCAHPS Survey vendor is submitting your agency's HHCAHPS Survey data to the HHCAHPS Data Center on or before the data submission deadline for that quarter. HHAs can access their Data Submission Reports on <https://homehealthcahps.org> under the "For HHAs" tab. The quarterly data submission deadlines are listed here: <https://homehealthcahps.org/Data-Submission/Data-Submission-Deadlines>. The Data Center will not accept data files after the data submission deadline has passed for a quarter. More information about how to view these reports can be found in the website document linked here: <https://homehealthcahps.org/Portals/0/HHAGuidanceforDataSubRept.pdf>.
4. Review publicly reported HHCAHPS Survey results each quarter for each CCN (HHA) for which you are responsible. Each HHA's results will be made available to the HHA to review on <https://homehealthcahps.org> before they are publicly reported on Medicare's Care Compare at <https://www.medicare.gov/care-compare/>. HHAs are responsible for reviewing their survey results and notifying the HHCAHPS Survey Coordination Team if they have questions, comments, or concerns about their reported results.