

## Home Health Care CAHPS (HHCAHPS) Survey Participation Periods

<b>(A) Annual Payment Update (APU) Calendar Year</b>	<b>(B) Did the HHA Serve 60 or more survey-eligible patients during the 12-month period specified below?</b>	<b>(C) If the HHA served 60 or more survey-eligible patients during the 12-month period specified in Column B, to receive the annual payment update for a specific calendar year, the HHAs must administer the survey and submit an HHCAHPS data file for each month as noted below.</b>	<b>(D) If the HHA served 59 or fewer survey-eligible patients during the 12-month period specified in Column B, the HHA is eligible for an exemption from participating in the HHCAHPS Survey for the 12-month period specified in Column C. To receive an exemption, the HHA must submit a Participation Exemption Request Form by the date noted below.</b>
2018	April 1, 2015–March 31, 2016	April 2016–March 2017	March 31, 2017
2019	April 1, 2016–March 31, 2017	April 2017–March 2018	March 31, 2018
2020	April 1, 2017–March 31, 2018	April 2018–March 2019	March 31, 2019

1. Medicare-certified home health agencies (HHAs) that serve 59 or fewer survey-eligible patients during the 12-month period specified in Column B are eligible for an exemption from participating in the HHCAHPS Survey for the corresponding months shown in Column C.
2. HHAs that qualify for an exemption should note that the exemption for each annual payment update calendar year expires on March 31 of each year. Therefore to receive an exemption, a Participation Exemption Request Form must be submitted on an annual basis.
3. The Participation Exemption Request Form for the 2019 APU will be available on the HHCAHPS website at <https://homehealthcahps.org/> beginning on April 1, 2017.
4. Patient survey-eligible criteria are included in Chapter IV of the *HHCAHPS Protocols and Guidelines Manual*, which is available on the HHCAHPS website at <https://homehealthcahps.org/SurveyandProtocols/SurveyMaterials.aspx#catid1>.