

# **Home Health Care CAHPS® Survey Vendor Update Webinar Training Session**

**January 2025**



# Training Session Logistics

## Welcome

- Please remain connected to both the web and phone/VOIP to receive credit for attending today's session.
- Please contact our Webinar Event Specialist, Shane Hamstra, for technical assistance issues at: [shamstra@rti.org](mailto:shamstra@rti.org).
- You can submit questions via the Q&A feature or click on the "raise hand" icon to ask your question live.

# Training Session Overview

## Topics

- HHCAHPS Survey Participation Requirements and Updates
- Protocols and Guidelines Manual, v. 17 Updates
- Vendor Oversight Highlights and Reminders
- Maximizing Response and Survey Quality
- Reporting Reminders for Vendors
- HHCAHPS Resources to Share with HHA Clients
- HHCAHPS Data of Interest
- Revised HHCAHPS Survey: Next Steps

# **HHCAHPS Survey Participation Requirements/Updates**

# Requirements for the CY 2025 Home Health Annual Payment Update (HH APU)

## CY 2025 HH APU

- For the CY 2025 Home Health Annual Payment Update (HH APU), HHAs needed to report HHCAHPS Survey data from April 2023 through March 2024, and OASIS data and administrative data from July 2023 through June 2024.
- HHAs were required to participate in HHCAHPS for the CY 2025 HH APU if they had a total of 60 or more HHCAHPS eligible patients from April 2022 through March 2023.
- If HHAs had 59 or fewer patients from April 2022 through March 2023, then HHAs should have completed a CY 2025 HH APU Participation Exemption Request form for the HHCAHPS Survey.

# Requirements for the CY 2026 Home Health Annual Payment Update (HH APU)

## CY 2026 HH APU

- For the CY 2026 HH APU, HHAs need to report HHCAHPS Survey data from April 2024 through March 2025, and OASIS data and administrative data from July 2024 through June 2025.
- HHAs are required to participate in HHCAHPS for the CY 2026 HH APU if they had a total of 60 or more HHCAHPS eligible patients from April 2023 through March 2024.
- If HHAs had 59 or fewer patients, then HHAs should complete a CY 2026 Participation Exemption Request form for HHCAHPS due **March 31, 2025**.

# Future HHCAHPS APU Participation Periods and Dates

APU Period	Survey Participation Months	PER Form
<b>CY 2026</b>	<b>April 1, 2024–March 31, 2025</b>	<b>Due March 31, 2025</b>
CY 2027	April 1, 2025–March 31, 2026	Due March 31, 2026
CY 2028	April 1, 2026–March 31, 2027	Due March 31, 2027

# HHCAHPS Survey Public Reporting Schedule

- The January 2025 refresh on the Care Compare tool on [www.Medicare.gov](http://www.Medicare.gov) includes HHCAHPS survey data collected from July 2023 through June 2024.
- Next public refresh: April 2025, for HHCAHPS Survey data collected CY 2023,Q4–CY 2024,Q3.

Data Collection Period	Planned for Posting on Care Compare, Medicare.gov
CY 2023,Q4 – CY 2024,Q3	April 2025
CY 2024,Q1 – CY 2024,Q4	July 2025
CY 2024,Q2 – CY 2025,Q1	October 2025



# CY 2025 Home Health Prospective Payment System Final Rule

*Federal Register / Vol. 89, No. 216 / 88431, November 7, 2024*

“Based on feedback from patients and stakeholders, CMS has launched an effort to update and shorten the Home Health Consumer Assessment of Healthcare Providers and Systems (HHCAHPS) survey. In 2022, CMS tested a shortened survey across a variety of different types of HHAs. We reviewed the findings of the field test and plan to finalize in the future updates to the survey with the intent to shorten it. Potential updated HHCAHPS measures have been submitted through the Pre-rulemaking Review Process.”

# Pre-Rulemaking Process

- Any changes to the HHCAHPS Survey must go through the rulemaking process.
- Revised HHCAHPS Survey currently going through pre-rulemaking process.
- Measures Under Consideration (MUC) list is published on the Measure Management System (MMS) Hub: <https://mmshub.cms.gov/measure-lifecycle/measure-implementation/pre-rulemaking/lists-and-reports>

# Home Health Value-Based Purchasing

## HH VBP

- In the CY 2022 Final Rule, HH VBP for all Medicare-certified agencies will go into effect in phases:
  - CY 2022: pre-implementation year
  - **CY 2023: first performance year**
  - CY 2025: first payment year
- HHAs will be reimbursed based on an algorithm that includes their HHCAHPS Survey measures (30%), OASIS measures (35%), and claims-based measures (35%).

## References

Link to the November 9, 2021 Final Rule:

- [2020-24146.pdf \(govinfo.gov\)](#)

# The Total Performance Score (TPS) in Home Health Value-Based Purchasing (HH VBP)

- Home health agencies receive performance scores from claims, OASIS, and HHCAHPS quality measures, that are combined into a TPS score. Each qualifying HHA will receive a TSP score ranging from 0 to 100.
- The HH VBP adjustments range from -5% to 5%.
- CMS will evaluate each performance measure against either the agency's own past performance (Improvement Score) or against the performance of other home health agencies (Achievement Score), whichever is higher.

# HH VBP: Total Performance Score (TPS) (cont'd)

- CMS uses two size cohorts in the HH VBP.
  - Small volume cohort: The group of competing HHAs that had < 60 unique survey-eligible beneficiaries in the calendar year prior to the performance year.
  - Large volume cohort: The group of competing HHAs that had  $\geq$  60 unique survey-eligible beneficiaries in the calendar year prior to the performance year.
- Very similar to Hospital VBP, except HHVBP has multiple cohorts.
- 2023 is the first HH VBP performance year and it is used for the CY 2025 HH VBP payment year.

# Questions?

# **Protocols and Guidelines Manual Version 17.0 Updates**

# Updates to Protocols and Guidelines Manual Version 17.0

Chapter / Appendix	Update Made
Throughout	Updated calendar year references and public reporting periods.
Chapter II Chapter III Appendix A	Revised to note vendor consent form is now electronic (removed hardcopy references).
Chapter III	Clarified that the vendor HHCAHPS Survey Administrator (SA) and Project Manager (PM) should be the same person. Included a reminder about updating contact information for SA/PM.
Chapter III Chapter X	Added text about new Fact Sheet.



# Updates to Protocols and Guidelines Manual Version 17.0 (cont'd)

Chapter / Appendix	Update Made
Chapter IV	Clarified the sample identification (SID) number can be numeric or alphanumeric.
Chapter V Chapter VII	Clarified that OMB number and expiration date must appear on questionnaire cover or first page. This is a separate requirement from the OMB burden disclosure notice.
Chapter XIV	Expanded narrative for the 3 allowable exceptions (DSRS, displaying HHA's name/logo on outgoing envelope, and conducting selected HHCAHPS operations remotely).
Each language appendix	Updated year on cover of mail questionnaires.

# **HHCAHPS Vendor Oversight Highlights and Reminders**

# Site Visit Kudos from 2024

We conducted 15 virtual site visits - here are some kudos we gave specific vendor teams:

## General

- Several vendors had a majority of HHAs with response rates above the national average.
- Training materials developed for HHAs clearly convey the purpose of HHCAHPS, role of the HHA, and guidelines for communicating with patients about the survey.

## Staffing

- Cross-trained staff permit other staff members to replicate sampling and quality control (QC) activities, ensuring good coverage.

## Telephone Survey Operations

- Telephone interviewers had engaging tone, pacing, and skill maintaining rapport with respondents.
- Call attempts made across different days of the week and different times of day were spread across full data collection period.

## Mail Survey Operations

- Using a multi-step approach for reviewing mail survey data (e.g., optical scanner followed by manual verification followed by proportion of survey data manually QC'd against hardcopy surveys).

## Quality Control

- Maintaining clear audit trail for dispositioning non-interview cases.
- Written documentation sufficient to permit other staff to conduct survey operations.

# Site Visit Feedback from 2024

We also provided the following feedback and guidance to vendors:

## Sampling

- SID numbers should be between 6 and 16 digits long.

## Internal Documentation

- Save all original patient data files received.
- Document process for translating comments and/or white mail received in languages other than English.
- Document why any manual change is made to a disposition code in the data management system.

## Telephone Survey Operations

- Automate case management for call scheduling across time zones, varying times of day and days of the week.

## Mail Survey Operations

- Review white mail. Notes that care from the HHA was not received should be coded "220-ineligible," (not "320-Refusal" code).
- Meet scanning QC requirements by reviewing a minimum of 10% of all scanned surveys.

## XML File Generation

- Automate the proxy flag assignment process so that these are not missing or incorrectly assigned.

# 2025 Virtual Site Visits - What to Expect

**Site visit materials** are an important part of a successful virtual visit. The RTI site visit team reviews requested materials prior to each visit.

All CY2025 oversight visits will remain virtual. We will host all live calls via HIPAA-compliant Zoom sessions.

Before each site visit, we request a roster of all staff and subcontractors expected to attend.

For security purposes, unidentified attendees will not be admitted from the session waiting rooms.

The RTI site visit team will “lock” the call once all expected attendees have joined, which will not allow any additional persons to join.

**Remember:**

Information shared during the site visit, including the content of the RTI reports, is for vendor use only and not for marketing, public use, or client communications.

# Maximizing HHCAHPS Response and Survey Quality

# CMS Continues Focus on Improving Patient Participation

## **CMS Goal:**

- Improve patient participation in the HHCAHPS Survey

## **CMS Focus:**

- HHAs with 0% to 5% response rates
- Vendors with low overall response rates

## **Research:**

- Review vendor's quarterly response rates
- Ask vendors during site visits to identify greatest challenges in reaching and/or receiving a response from selected patients

# Obstacles in HHCAHPS Participation

**Challenge:** Vendor staff unfamiliar with internal HHCAHPS processes making coverage difficult

Dedicate two or more well trained and reliable staff in each key project area

Maintain clear and thorough documentation of processes and procedures

Well-trained staff and adequate staffing prevents oversights in patient data file processing, sampling, and data collection preparations

**Challenge:** Communication with client HHAs to allow uninterrupted HHCAHPS participation

Establish communication expectations during onboarding. Suggested topics for that discussion include:

1. how often will vendors reach out to HHA clients?

2. when should the HHAs contact their vendor?

3. what information is needed routinely to conduct the survey?

4. what is the vendor's process for handling missing patient information on a submitted file?

**Challenge:** Successfully contacting sampled patients

Understand agency-specific patient population mix (e.g., language spoken at home)

Encourage HHAs to verify contact details with patients before discharge

Share the HHCAHPS Fact Sheet regularly in the initial patient information packet



# Why Vendor Staffing is a Quality Goal

Having 2 or more well-trained staff in each key project area strengthens processes that impact survey implementation and response rates.

Benefits to adequate staffing include...

## Sampling

- Reduced risk of under-sampling, erroneous sampling of ineligible patients.
- Ability to catch and follow up on missing patient data.
- Ability to complete sampling and QC in a timely manner.

## Survey Management

- Increased bandwidth for consistent communication with all client HHAs and project team members about updates needed to data, processes or instrumentation.

## Survey Operations

- Timely data collections.
- Correctly assembled mailings.
- Well-trained telephone interviewers (at start of their assignment and through ongoing monitoring feedback).
- Clear instructions for participation (good command of survey FAQs; responsive Customer Support Line services).

## Data Systems and File Preparations

- Accurate and consistent coding of final disposition codes.
- Timely processing of all required materials and records.

# QC Reminders

## For All Modes:

- **Required:** Review administrative data received by HHAs for completeness and validity
- **Required:** Store the sample seed for sample replication for oversight tasks
- **Required:** Monitor response rates
- **Required:** Check sample of completed surveys against the XML data
- **Required:** Check audit trail for sample of non-completed cases

# QC Reminders (cont'd)

## Mail Implementation

- **Required:** Review returned surveys for handwritten comments *before* final coding
- **Recommended:** Collect patients' preferred language on monthly information file to know which language to print surveys
- **Recommended:** Seed mailings to monitor response times, check print quality and that envelopes were stuffed correctly
- **Recommended:** Assign Wave 1 and Wave 2 identifiers in survey management system

# QC Reminders (cont'd)

## Telephone Implementation

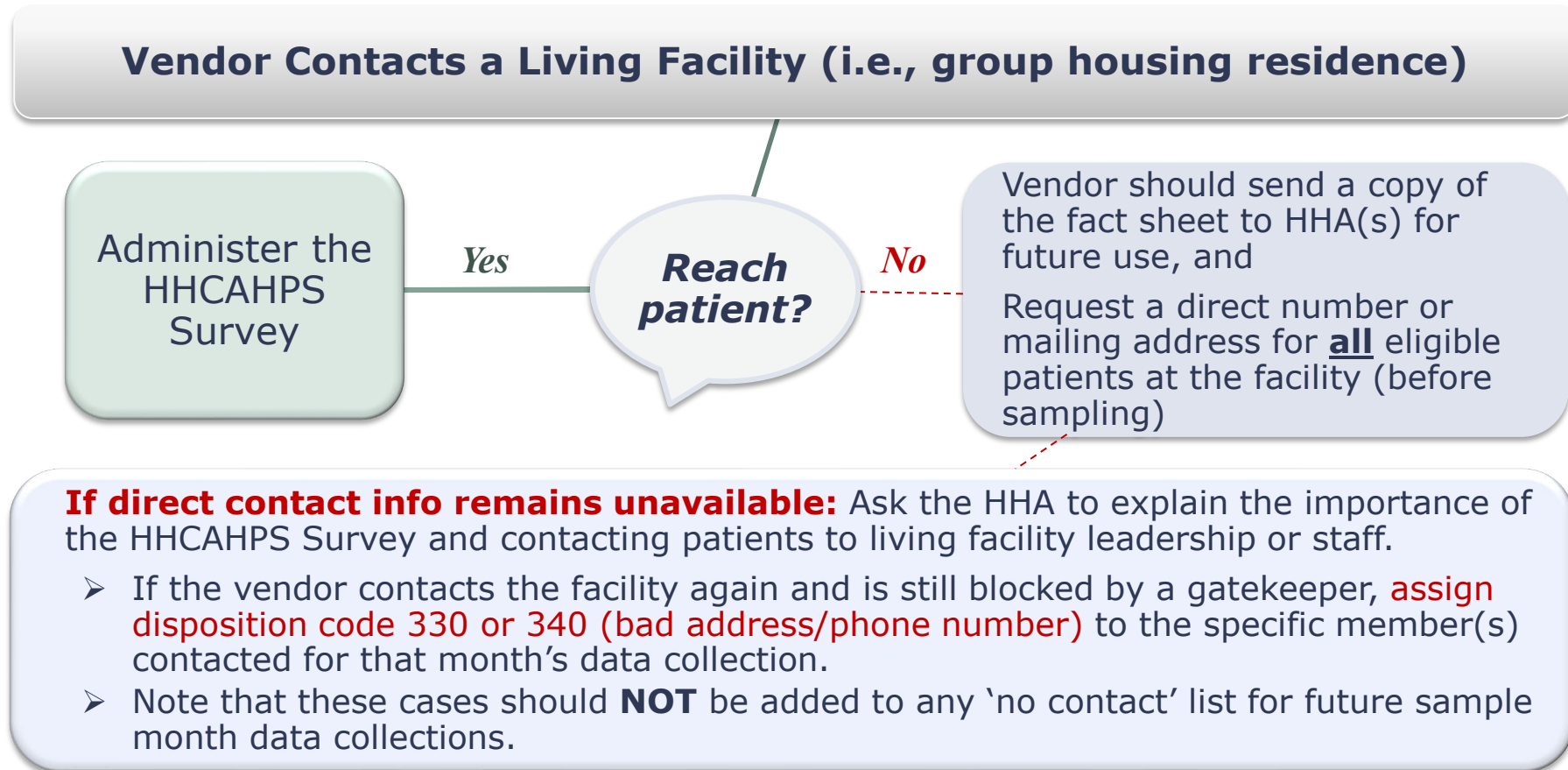
- **Required:** Conduct silent monitoring of at least 10% of all HHCAHPS interviews, using a mix of live and recorded interviews
- **Required:** Document feedback provided to telephone interviewers (TIs) during silent monitoring (e.g., Are TIs emphasizing bolded script words? Are TIs correctly verifying ambiguous responses by repeating the answer choices back verbatim? Are TIs following correct probing techniques?)
- **Required:** Keep written documentation that all telephone interviewing and customer support staff have been properly trained prior to interviewing. Documentation subject to review during oversight visits.

# QC Reminders (cont'd)

## Telephone Implementation (cont'd)

- **Required:** Compare CATI survey data with recorded interview to ensure responses accurately captured, if visual monitoring not available (i.e., vendor cannot view interviewer's screen to verify responses selected during interview)
- **Recommended:** Monitor refusal and proxy rates by telephone interviewers to identify interviewers that require additional coaching
- **Recommended:** Review partially completed surveys (coded 310 – Breakoff) to verify that 310 is the most appropriate code

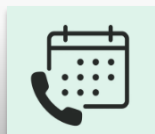
# Navigating Living Facilities and Hard to Reach Patients



# Call Scheduling Tips



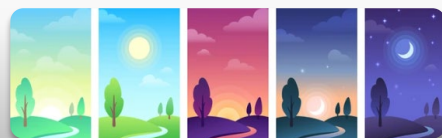
Spread out call attempts intentionally to use the full data collection window



Automate systems to review and manage call schedules daily



Spread call attempts across days of the week including weekends



Spread call attempts across times of day: morning, mid-day, evening



Pay attention to the time zone for each agency and call according to the respondent's local time

# Questions?



# Reporting Reminders for Vendors

# Updating Vendor Application Information

Vendor Applications are a record of...

- Approved mode(s) of administration
- Vendor's technical leadership, equipment, and facilities
- Subcontractors

Vendor Applications identify the point of contact for all official HHCAHPS communications

- Only the vendor's **HHCAHPS Survey Administrator/Project Manager** receives official announcements, email messages and ad hoc communications.

# 2025 Requirement to Renew Remote-Work ERF

- Vendors conducting or planning to conduct HHCAHPS Survey operations from a remote location (other than the vendor's place of business) must submit an Exceptions Request Form (ERF) that summarizes:
  - type(s) of staff impacted, and
  - how remote operations will be conducted to assure compliance with HIPAA, data security, and quality assurance requirements.
- Vendors are required to update and resubmit their remote-work ERF every two years for CMS's continued review.
- All ERFs were last reviewed and approved in 2023.

# 2025 Requirement to Renew Remote-Work ERF (cont'd)

All approved vendors should submit a response to the Coordination Team's forthcoming email regarding your current and/or planned remote operations.

If you are...

## 1) Submitting a NEW request

- Complete and email the Coordination Team a copy of the remote-work ERF MS Word template for review.

## 2) Extending an approved request

- Review, update and email the Coordination Team a track-changed version of your previously approved remote-work ERF MS Word file.
- If no edits needed, complete the attestation of no changes box in the updated MS Word file.

## 3) Conducting no remote-work operations

- Provide written confirmation via email.

# Remote-Work Exceptions Request MS Word Template for 2025 Renewal

Vendor Name:  
Date 2023 ERF Approved:  
HHCAHPS Mode(s):

*\*Vendor responses are shown in blue font below, please update your text responses using tracked changes.*

## Approved Vendor Remote Staff Exceptions Request Review Form

**Vendor Instructions:** Please provide updates in tracked changes to your responses to each numbered item using the **Vendor Response:** fields shown in blue font below.

<b>Attestation of no changes</b>		<b>Vendor Survey Administrator/Project Manager:</b>
<input type="checkbox"/>	As of January 31, 2025 we have no changes to the exceptions request documented below.	

### Operations, Equipment, and Professionalism

1. Please provide the anticipated dates that operations will begin being conducted remotely and the affected sample month(s).

**Vendor Response:**

2. Please describe your process for continuing remote monitoring of interviews and/or quality control of data entry or scanning operations.

No changes? Sign off on your previously approved plan, or...

### Operations, Equipment, and Professionalism

1. Please provide the anticipated dates that operations will begin being conducted remotely and the affected sample month(s).

**Vendor Response:**

2. Please describe your process for continuing remote monitoring of interviews and/or quality control of data entry or scanning operations.

**Vendor Response:**

3. *(Phone vendors)* Please confirm your remote live monitoring capabilities of phone interviews, including if your staff can conduct live monitoring with remote telephone interviewers (TIs), regardless of if they are subcontractor or vendor staff. Please specify if telephone interviewers, QC staff, or both, are remote during live monitoring sessions. *If you are working with a subcontractor to conduct these activities, complete the subcontractor section of this form.*

**Vendor Response:**

4. *(Mail vendors)* If mail receipt/keying/processing is taking place remotely, describe how hardcopy questionnaires will be transported and secured. *If you are working with a subcontractor to conduct these activities, complete the subcontractor section of this form.*

**Vendor Response:**

5. Describe whether your staff is using company-owned laptops and telephones for work. If employees are a measures will be

**Vendor Response:**

6. Please describe

... update the vendor response fields in tracked changes to describe what's new

# How Vendor Documentation Contributes to APU Reviews

Home health agencies participate in the HHCAHPS Survey to meet annual payment update (APU) requirements each calendar year.



Reporting details help CMS understand reasons for non-compliance.



Reasons why an HHA did not participate in given sample months can include:

natural disasters

change in HHA  
ownership

HHA decision to  
end participation

vendor/client  
contract issues,  
including missed  
payment(s)

HHA closures

# Reporting Detail is Important!

## Exception Request Forms (ERFs) should...

- specify which CCNs the request is for or if the request will apply to all current and future clients.
- show proposed changes to survey materials, questionnaires, CATI scripts or instrumentation.
- provide duration of the request.

## Late Start Requests should...

- be emailed by the vendor.
- describe what prevented the timely fielding of the month's surveys (if known).
- include the anticipated data collection start date, once approved by CMS.
- list the impacted CCN(s) (check that these are correct before submission).

# Reporting Detail is Important! (cont'd)

## Discrepancy Notification Reports (DNRs) should...

- Be submitted within 24 hours of the vendor becoming aware of the issue.
- Specify whether sampling or data collection has occurred for the affected month(s) (i.e., whether the DNR is for a late start or missed sample month).
- Include the reason (if known) as to why survey was not fielded or fielded late.
- Specify the number of patients impacted for every individual sample month affected.
- Indicate source of discrepancy (vendor, HHA, or otherwise).
- Use both the late start and missed sample month tabs in the DNR Excel file, as needed, for as many CCNs or months necessary.
- Remember that when reporting multiple DNRs for the same APU year at the same time, only one submission is necessary; use the DNR Excel spreadsheet.
- Describe what actions were taken to prevent future discrepancies.
- Be consistent such that all details in the DNR match across fields in the online DNR form and Excel spreadsheet.
- Include the original DNR submission date in column B of the DNR Excel spreadsheet.



# Example DNR Submissions

DNR Field	Example <u>With</u> Errors	Example <u>Without</u> Errors
<i>Description of discrepancy, how it was discovered, and the affected timeframe</i>	Missed sample months in Quarter 1, 2024	Monthly patient files were uploaded with errors for February and March 2024. We attempted to reach the agency to reupload corrected files without success. The survey could not be fielded for these two sample months.
<i>Number of eligible patients affected by the discrepancy</i>	700	~325-February 2024; ~375-March 2024
<i>Description of corrective action to be taken to address discrepancy, along with proposed timeline</i>	None	We reached our contact at the agency and reviewed the errors with them and how to fix them should they happen again.

**Vendor did not specify...**

- which months within Quarter 1, 2024 impacted.
- the reason for the missed sample months (whether known or not).
- the number of affected patients by sample month.
- corrective action taken by the vendor.

# HHCAHPS Summary Reports for Client HHAs

When providing HHCAHPS summary data to your client HHAs, be sure the following requirements are met:

Unless the Consent to Share question is answered in the affirmative...

- Question-level "About You" data must follow the "11 or more" rule, and
- Handwritten comments on returned surveys must be de-identified.

Include disclaimer somewhere on the report that the results presented are not official CMS results.

- Example disclaimer: "ABC Vendor results are not official CMS results and are for your agency's internal quality improvement purposes only."

If summary report is interactive (i.e., client HHA able to filter data), ensure HHCAHPS protocols for patient privacy are met no matter how the HHCAHPS data are filtered.

**See Chapter VIII in the *Protocols and Guidelines Manual*.**

# Questions?

# **HHCAHPS Resources to Share with HHA Clients**

# HHCAHPS Resources to Share with HHA Clients (Overview)

- NEW Fact Sheet
- HHCAHPS Data Submission Report
- *HHCAHPS Survey Website User and Data Submission Manual*  
(Chapter 6)
- Coordination Team Quarterly Review (CTQR) Newsletters
- Contact Information for Other Helpdesks

# NEW Fact Sheet

- What is it?
  - One-page document with general information on the HHCAHPS Survey.
  - HHAs are strongly encouraged to include in the initial patient information packet so patients are aware of the survey and its importance.

## We care about your home health care experience.

[HHA NAME] is collecting feedback from patients who use our agency. The survey asks patients like you about their home health care and if they would recommend the agency to someone else. Your feedback will help us improve our care.

If you receive a survey in the mail or a phone call from [INSERT VENDOR NAME], please take a few minutes to share your experience about the care you received from our agency.

### Your voice matters!



- Visit [medicare.gov/care-compare/](https://www.medicare.gov/care-compare/) to find and compare the quality of home health care agencies across the country.


**Your answers will help us improve the quality of our care and help others choose a home health agency!** Your participation in the survey is voluntary and your information is kept private by law. No one will be able to connect your answers to your name.

*Thank you in advance for your feedback!*

[INSERT AGENCY LOGO  
HERE]


[INSERT VENDOR OR  
CMS LOGO HERE]

# NEW Fact Sheet (cont'd)

- Where can I find it?
  - On the HHCAHPS website Home page, under “Information for HHAs” box.
  - English and Spanish templates available for download.
  - Direct link here:  
<https://homehealthcahps.org/For-HHAs/HHCAHPS-Fact-Sheet> 

### Information for HHAs

Home Health Agencies (HHAs) should click the appropriate link below for information about:

- [HHA Participation Exemption Request Form](#)  
(CY2026 Form Available)
- [HHCAHPS Fact Sheet](#)   
(3/29/2024)
- [HHCAHPS Exemption Information](#)  
(Updated 4/1/24)
- [HHCAHPS Participation Periods](#)  
(Updated 4/1/24)
- [HHA Responsibilities and FAQs](#)  
(Updated 4/1/24)
- [Authorize Survey Vendor](#)  
(Updated 3/22/18)
- [Review Data Submission Reports](#)  
(Updated 5/5/20)
- [Final Rule for Calendar Year 2024](#)  
(Posted 11/13/23)
- [Patient Mix Adjustment Factors](#)  
(Updated 7/18/24)

# NEW Fact Sheet (cont'd)

- How can I (the vendor) help?
  - **Educate HHAs** – Discuss implementing this fact sheet with your client agencies to help improve patient participation.
  - **Encourage Use** – Although optional, educating patients on the survey in advance could help improve response rates.
  - **Populate Fields** – Populate fills in fact sheet template for HHAs, including:
    - HHA name,
    - Vendor name,
    - HHA's logo, and
    - Vendor's or CMS' logo.



# HHCAHPS Data Submission Report

- It is participating HHAs' responsibility to check that their vendor is submitting HHCAHPS data on their behalf to the HHCAHPS Data Center.
- What you (the vendor) can do:
  - Remind your client HHAs that they should monitor submission activity via the online HHCAHPS Data Submission Report BEFORE the quarterly data submission deadline.
  - Follow-up with any HHAs that have not authorized you for the given quarter well in advance of the data submission deadline, if needed.
  - Help your clients understand how the report is beneficial to them.

# HHCAHPS Data Submission Report (cont'd)

Home Health Care CAHPS Survey  
The official website for news and information about the HHCAHPS Survey

Home HHA Dashboard General Information Training Forms for Vendors Survey and Protocols Data Submission For HHAs

For HHAs / Data Submission Reports

Data Submission History

HHA: <Show All HHAs>

Sample Date Range: Start Month: 1 End Month: 12  
Start Year: 2022 End Year: 2022

Show Report

Export to Excel

Vendor	Sample Year	Sample Month	CCN #	Filename	Submission Date	# of Patients Sampled	# of Complete Responses	# of Incomplete Responses	Validation Status
RTI Test Vendor 2	2022	Dec	999999	RTI_999999_202212.xml	03/07/2023	10	10	0	Passed
RTI Test Vendor 2	2022	Nov	999999	RTI_999999_202211.xml	03/07/2023	10	10	0	Passed
RTI Test Vendor 2	2022	Oct	999993	999993_202210_DSRS - passes all.xml	02/16/2023	21	21	0	Passed
RTI Test Vendor 2	2022	Oct	999999	RTI_999999_202210.xml	03/07/2023	10	10	0	Passed
RTI Test Vendor 2	2022	Mar	999999	RTI_999999_202203.xml	07/18/2022	10	10	0	Passed
RTI Test Vendor 2	2022	Feb	999999	RTI_999999_202202.xml	07/18/2022	10	10	0	Passed
RTI Test Vendor 2	2022	Jan	999993	999993_202201_DSRS - passes all.xml	07/18/2022	21	21	0	Passed
RTI Test Vendor 2	2022	Jan	999998	999998 Std 10 patients- passes all.xml	07/18/2022	10	10	0	Passed
RTI Test Vendor 2	2022	Jan	999999	999999 Std 10 patients- passes all.xml	07/18/2022	10	10	0	Passed

Number of records = 9

- To access this report, HHAs must:
  - Log into the HHCAHPS website,
  - Select "Data Submission Reports" under "For HHAs" menu or through "View Data Submission Reports" link on HHA Dashboard,
  - Filter by HHA (if applicable) and Sample Date Range in dropdowns,
  - Select "Show Report."
- Note: Only displays files that passed all data validation checks.

# HHCAHPS Survey Website User and Data Submission Manual

Home Health Care CAHPS Survey  
The official website for news and information about the HHCAHPS Survey

Home | General Information | Training | Forms for Vendors | Survey and Protocols | **Data Submission** | For HHAs

Data Submission / Data Submission Resources

**Data Submission Resources**

This page provides resources for survey vendors to assist in preparing their monthly XML files. The XML Data File Layouts provide details about every data element included in the header record, patient administrative record, and patient response record. The XML Schema Files show the details of all validation that will be applied to each data element at the time the file is submitted. The *Data Submission Manual* provides guidance on the website functions, XML data file preparation, and file submission.

Resource	File
<b>Website User and Data Submission Manual</b>	
XML Sample File	

Sampling Method	XML File Layout	XML Schema File (XSD)	Date Posted
Standard			1/23/2024
DSRS			1/23/2024
Zero Sampled			8/3/2023

Snippet of *Manual's* Table of Contents highlighting chapter specific to HHAs:

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# Coordination Team Quarterly Review (CTQR) Newsletters

- Posted on the HHCAHPS website at beginning of each quarter in January, April, July and October.
- Some CTQR newsletters are dedicated solely to HHAs and can include updates, reminders or other information intended for HHAs.
- Repository of previously-posted newsletters available via “CTQR Newsletters” link in General Information menu.
- We are always open to suggestions! Submit CTQR ideas to us at [hhcahps@rti.org](mailto:hhcahps@rti.org).



# Contact Information for Other Helpdesks – Questions from HHAs

For requests to change provider name, demographic information, or services provided on the Care Compare website, HHAs should...

- Visit HHA QRP webpage: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/How-to-Update-Home-Health-Demographic-Data>
- Contact helpdesk at [iQIES@cms.hhs.gov](mailto:iQIES@cms.hhs.gov) or 1-800-339-9313.

For OASIS-related questions, including star ratings for the quality measures, HHAs should...

- Contact helpdesk at [homehealthqualityquestions@cms.hhs.gov](mailto:homehealthqualityquestions@cms.hhs.gov)

For HHVBP questions, HHAs should...

- Contact helpdesk at [HHVBPquestions@cms.hhs.gov](mailto:HHVBPquestions@cms.hhs.gov)

# We're Here to Help!

Feel free to direct your client HHAs to us anytime:

[hhcahps@rti.org](mailto:hhcahps@rti.org)

1-866-354-0985

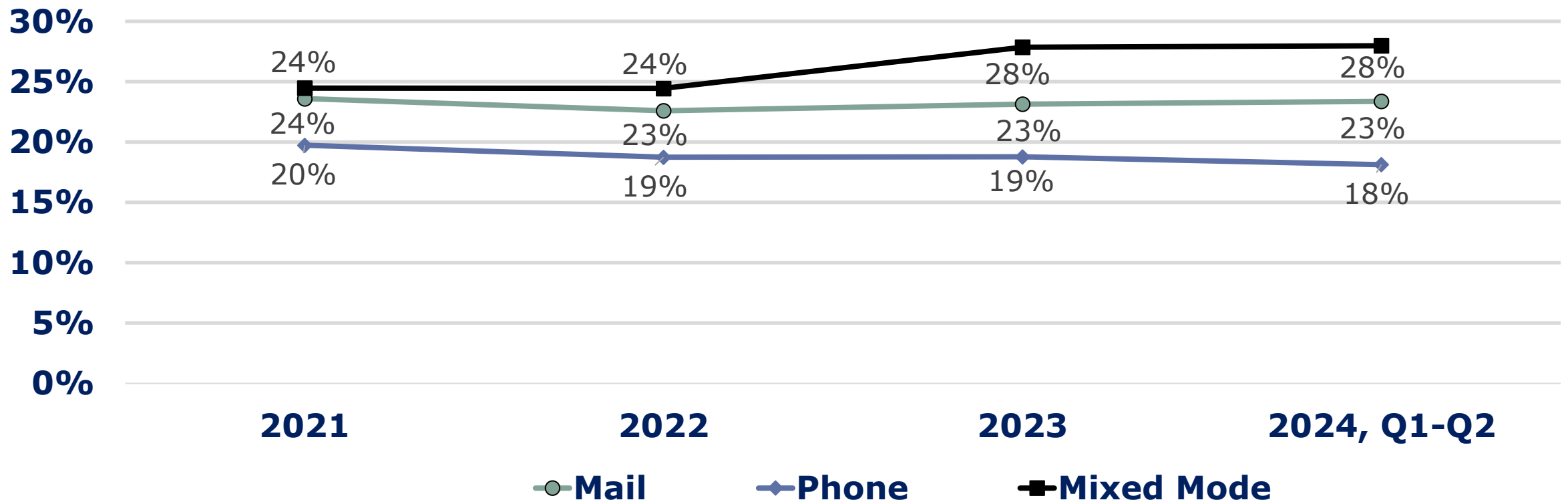
# Questions?

# HHCAHPS Data of Interest



# HHCAHPS Survey Response Rates Over Time

## Response Rate by Mode over Time CY2021-CY2024 (Q1-Q2)



# Average Response Rates by Mode: CY23,Q1-Q2 vs. CY24,Q1-Q2

## Average Vendor Response Rates for Phone Mode

	CY2023, Q1-Q2	CY2024, Q1-Q2
Avg. RR range	# Vendors	# Vendors
0%-25%	8	7
26%-29%	0	1
≥30%	5	3

## Average Vendor Response Rates for Mail Mode

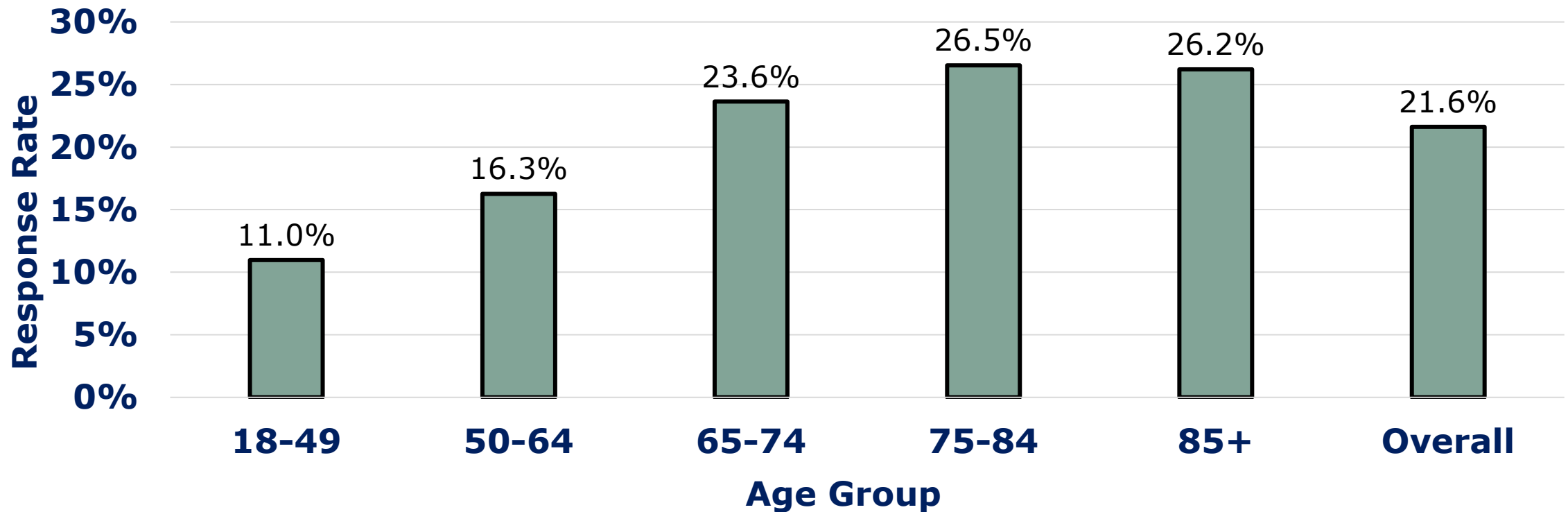
	CY2023, Q1-Q2	CY2024, Q1-Q2
Avg. RR range	# Vendors	# Vendors
0%-25%	10	12
26%-29%	3	1
≥30%	1	2

## Average Vendor Response Rates for Mixed Mode

	CY2023, Q1-Q2	CY2024, Q1-Q2
Avg. RR range	# Vendors	# Vendors
0%-25%	1	2
26%-29%	2	1
≥30%	1	2

# HHCAHPS Survey Response Rate by Age: 2023

## HHCAHPS Survey Response Rate by Age CY2023

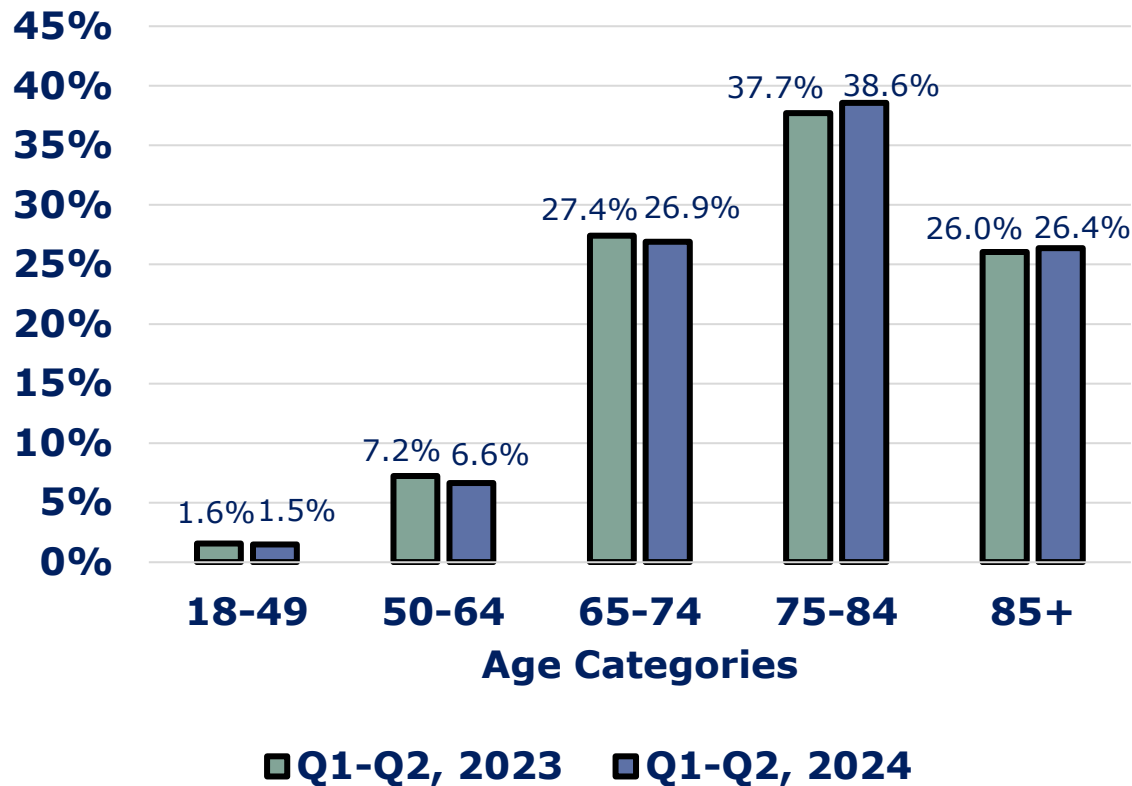


# Selected Disposition Code Rates: 2023

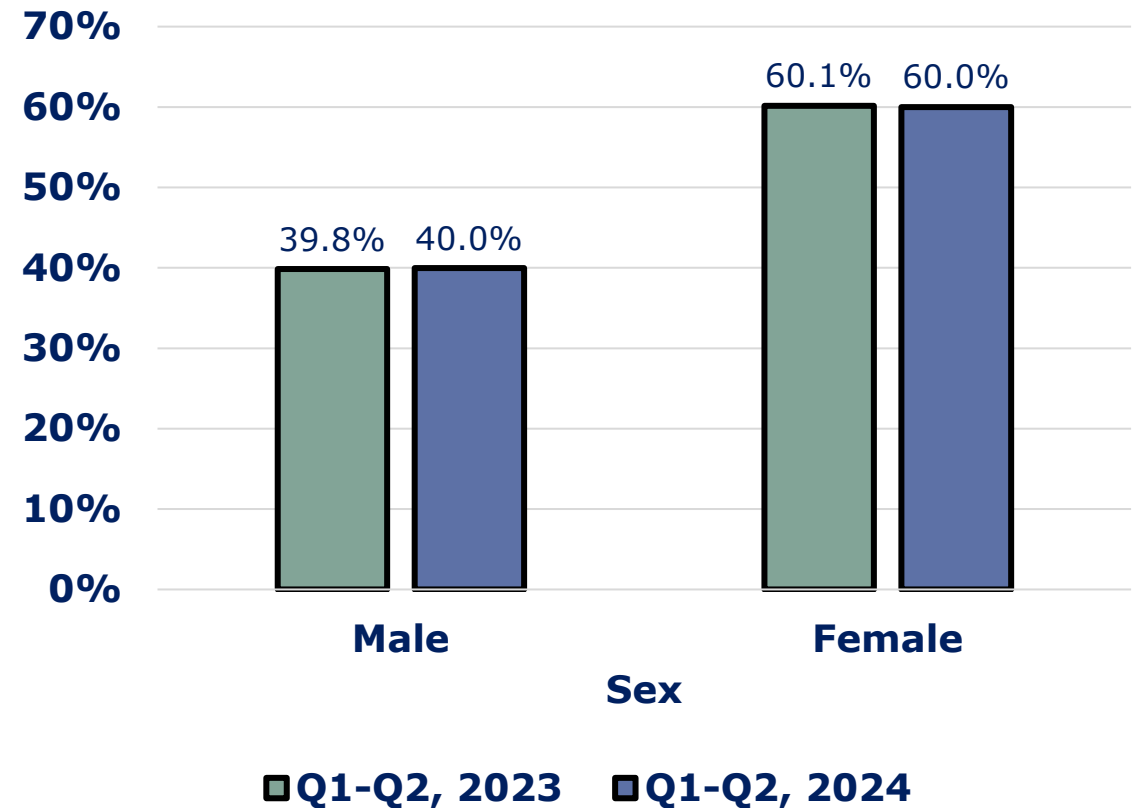
Final Disposition	CY23 Mail Mode (%)	CY23 Phone Mode (%)	CY23 Mixed Mode(%)
<b>Refusal (320)</b>	<b>0.2%</b>	<b>9.2%</b>	<b>9.7%</b>
<b>All ineligibles</b>	<b>0.3%</b>	<b>7.4%</b>	<b>3.9%</b>
Ineligible (220)	0.3%	2.6%	2.5%
Ineligible (230)	0.0%	2.1%	0.7%
Ineligible (240)	0.0%	2.6%	0.7%
<b>Breakoff (310)</b>	<b>0.4%</b>	<b>1.2%</b>	<b>1.8%</b>
Total sampled	100.0%	100.0%	100.0%

# Respondent Characteristics

**Respondent Age**  
CY2023, Q1-Q2 v CY2024, Q1-Q2

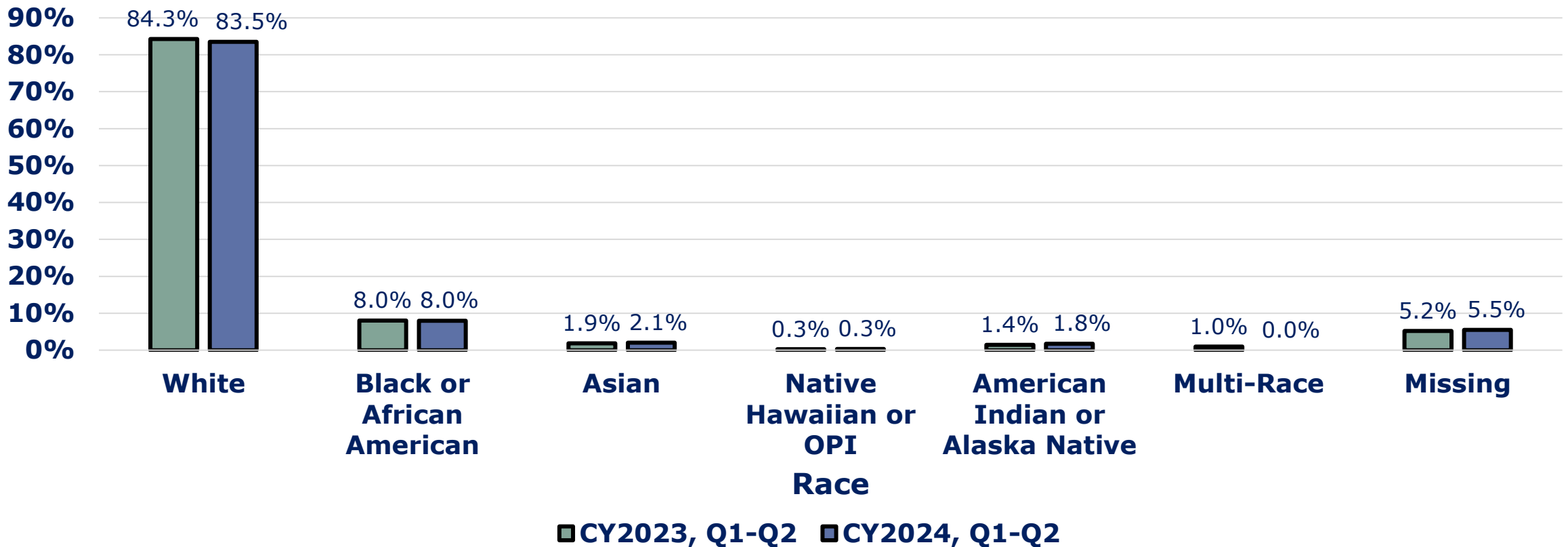


**Respondent Sex**  
CY2023, Q1-Q2 v CY2024, Q1-Q2



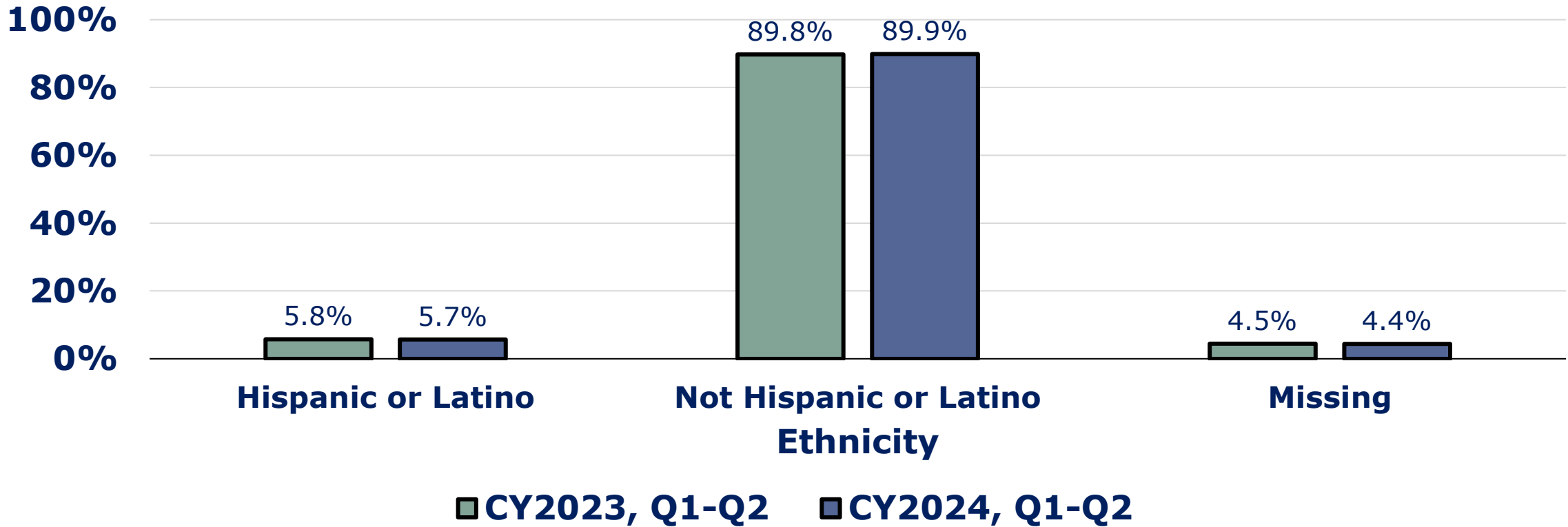
# Respondent Characteristics (cont'd)

**Respondent Race  
CY2023, Q1-Q2 v CY2024, Q1-Q2**



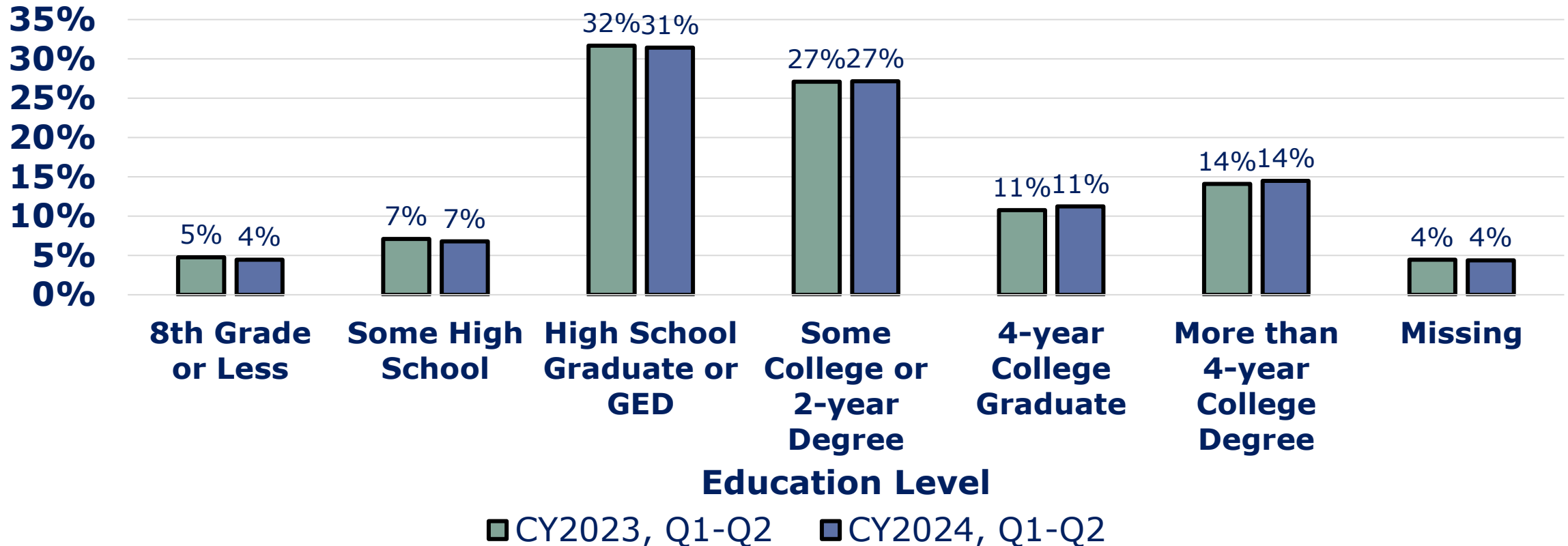
# Respondent Characteristics (cont'd)

## Respondent Ethnicity CY2023, Q1-Q2 v CY2024, Q1-Q2



# Respondent Characteristics (cont'd)

## Respondent Education Level CY2023, Q1-Q2 v CY2024, Q1-Q2





# Respondent Characteristics (cont'd)

**Completed Responses by Education Level,  
by Mode Assignment**

Education Level	CY2023 Mail	CY2023 Phone	CY2023 Mixed
8th Grade or Less	4%	9%	8%
Some High School	7%	9%	8%
High School Graduate or GED	32%	28%	28%
Some College or 2-year Degree	27%	27%	26%
4-year College Graduate	11%	9%	11%
More than 4-year College Degree	15%	10%	13%
Missing	4%	8%	6%

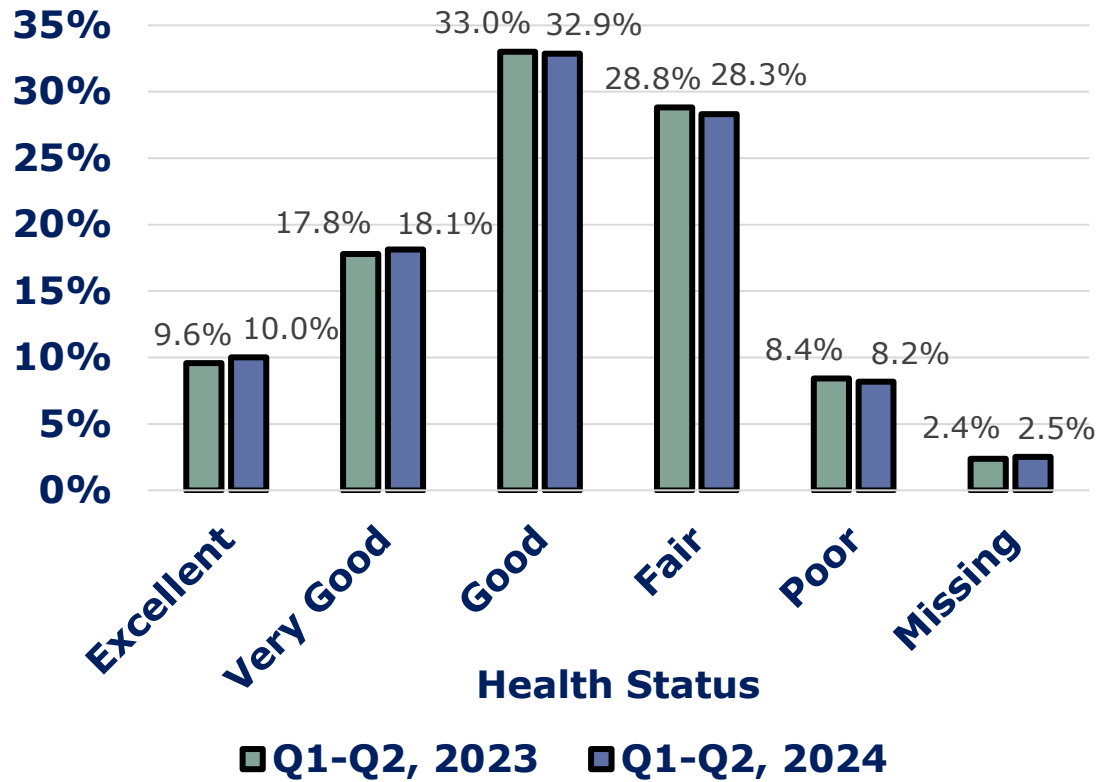


**Completed Responses by Education Level  
for Mixed Mode Only**

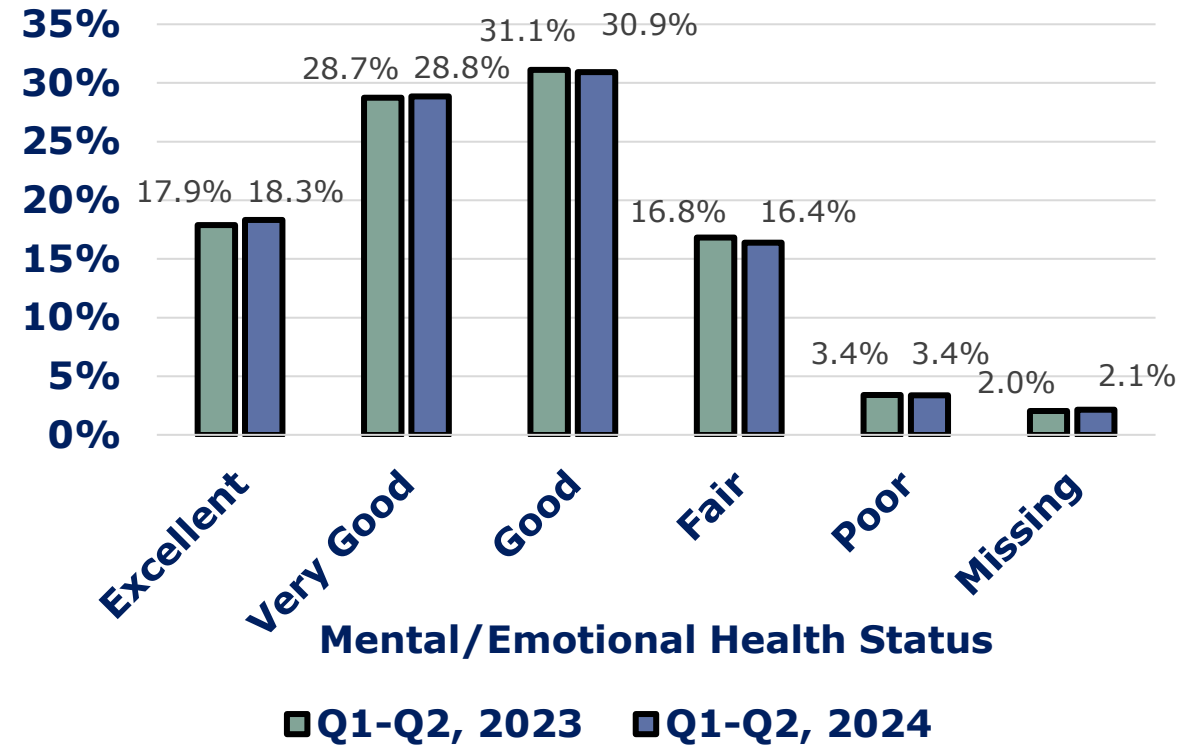
Education Level	CY2023 Mail	CY2023 Phone
8th Grade or Less	5%	11%
Some High School	7%	9%
High School Graduate or GED	29%	28%
Some College or 2-year Degree	27%	25%
4-year College Graduate	12%	9%
More than 4-year College Degree	16%	10%
Missing	5%	8%

# Respondent Characteristics (cont'd)

### Self-Reported Health Status CY2023, Q1-Q2 v CY2024, Q1-Q2

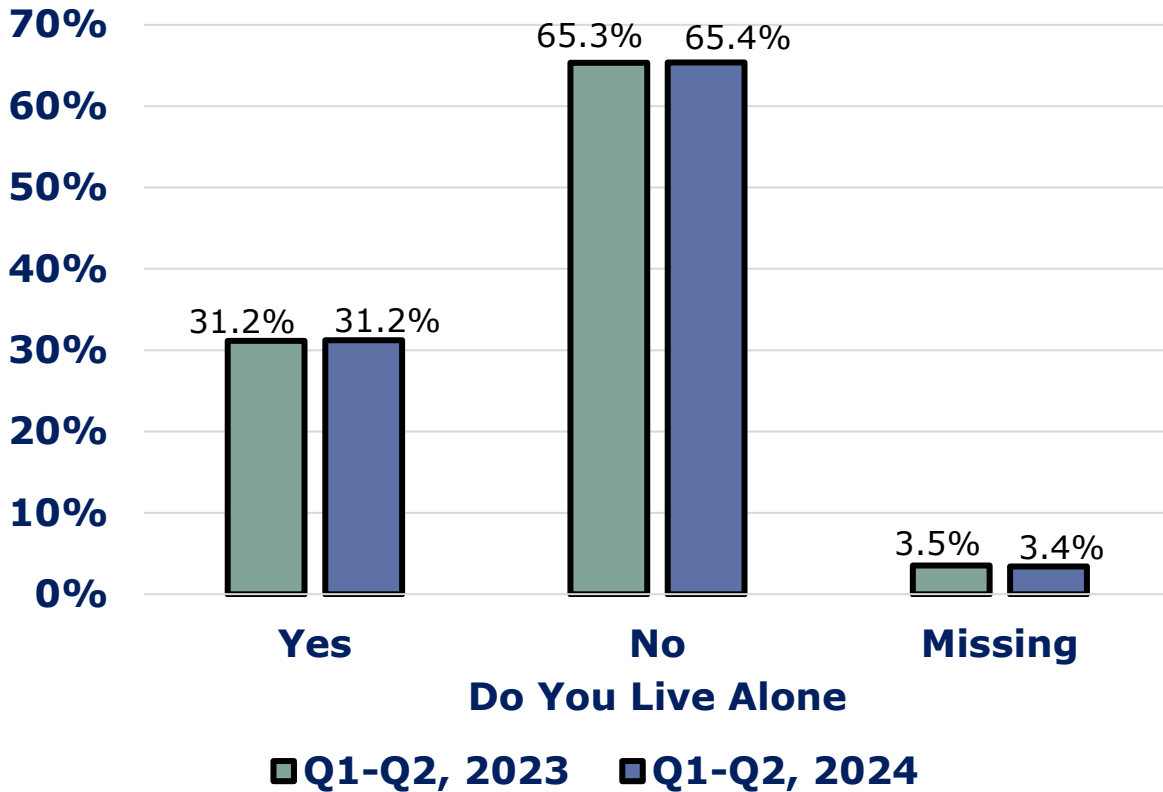


### Self-Reported Mental/Emotional Health Status CY2023, Q1-Q2 v CY2024, Q1-Q2

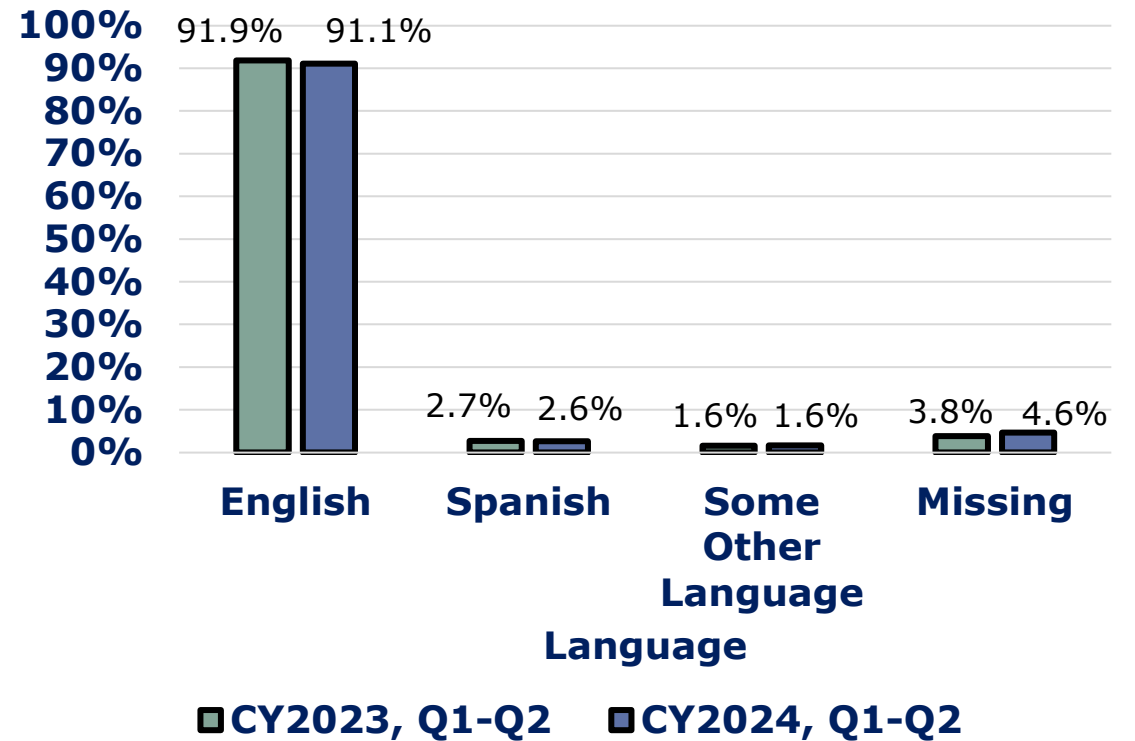


# Respondent Characteristics (cont'd)

**Do You Live Alone (Q28)**  
CY2023, Q1-Q2 v CY2024, Q1-Q2

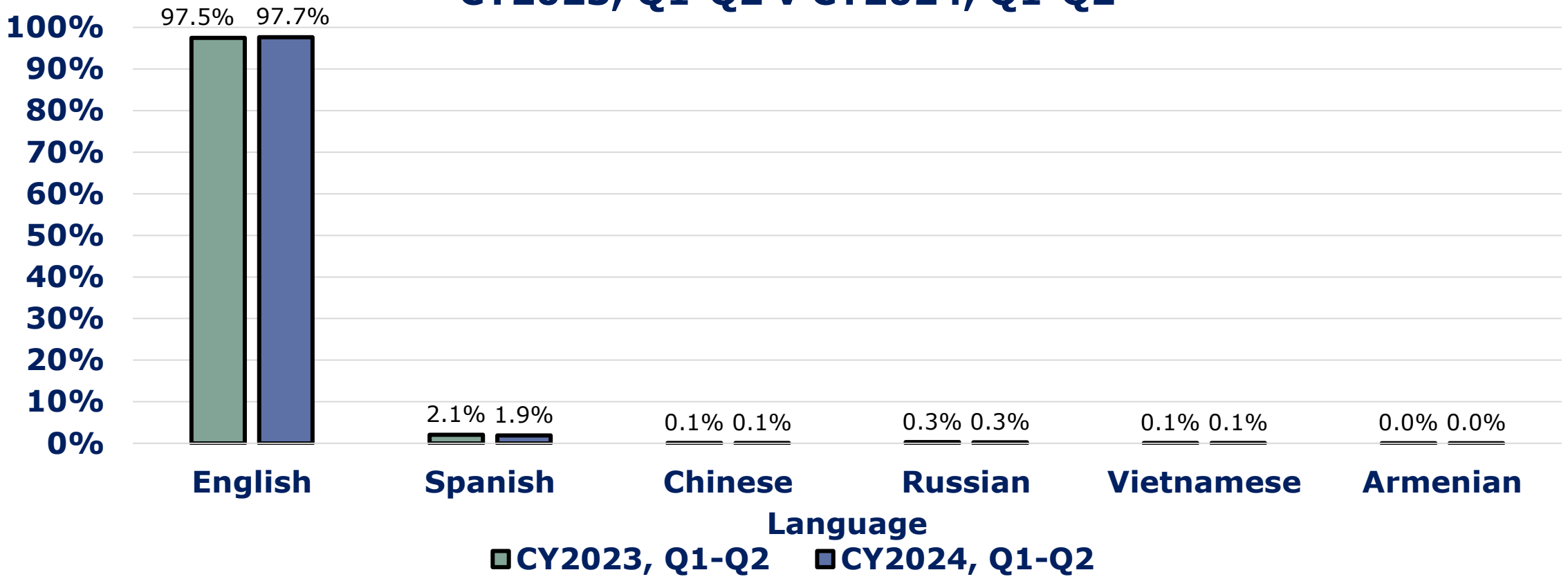


**Language Mainly Spoken at Home (Q32)**  
CY2023, Q1-Q2 v CY2024, Q1-Q2



# Language in Which the HHCAHPS Survey Was Completed

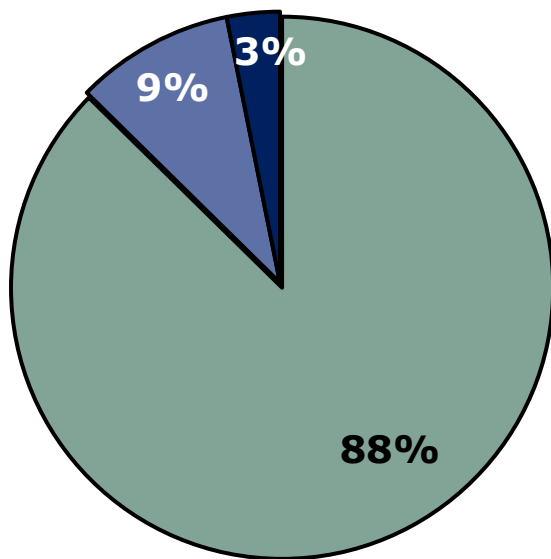
Language in which Survey Completed  
CY2023, Q1-Q2 v CY2024, Q1-Q2



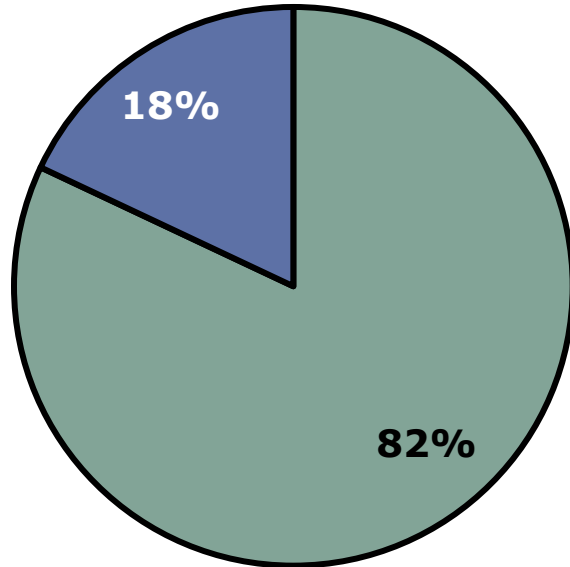
# Proxy Rates

## CY2023, Q1-Q2

Mail

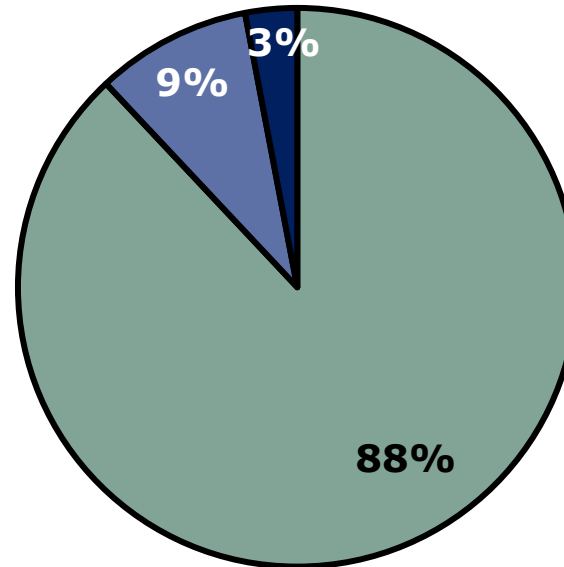


Phone

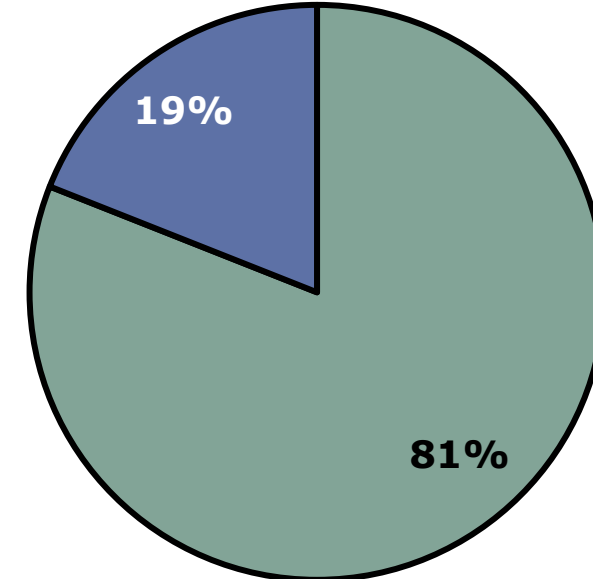


## CY2024, Q1-Q2

Mail



Phone



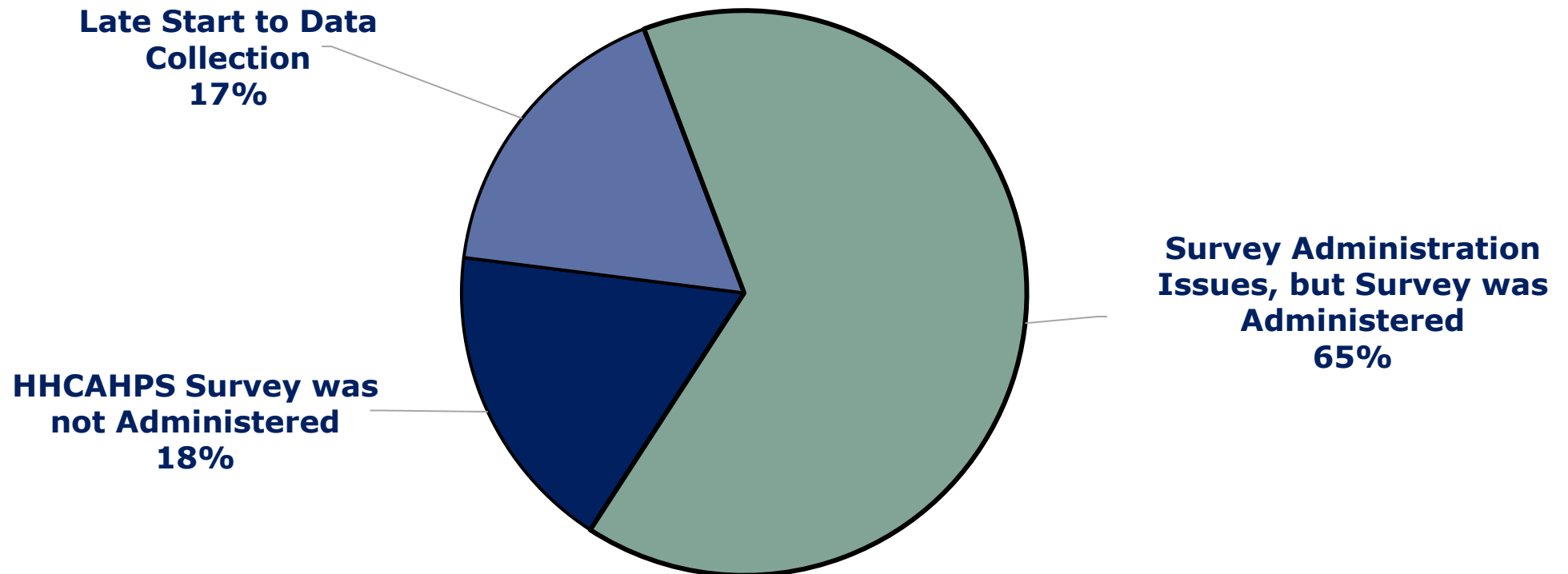
 No Proxy

 Completed by Proxy

 Unknown

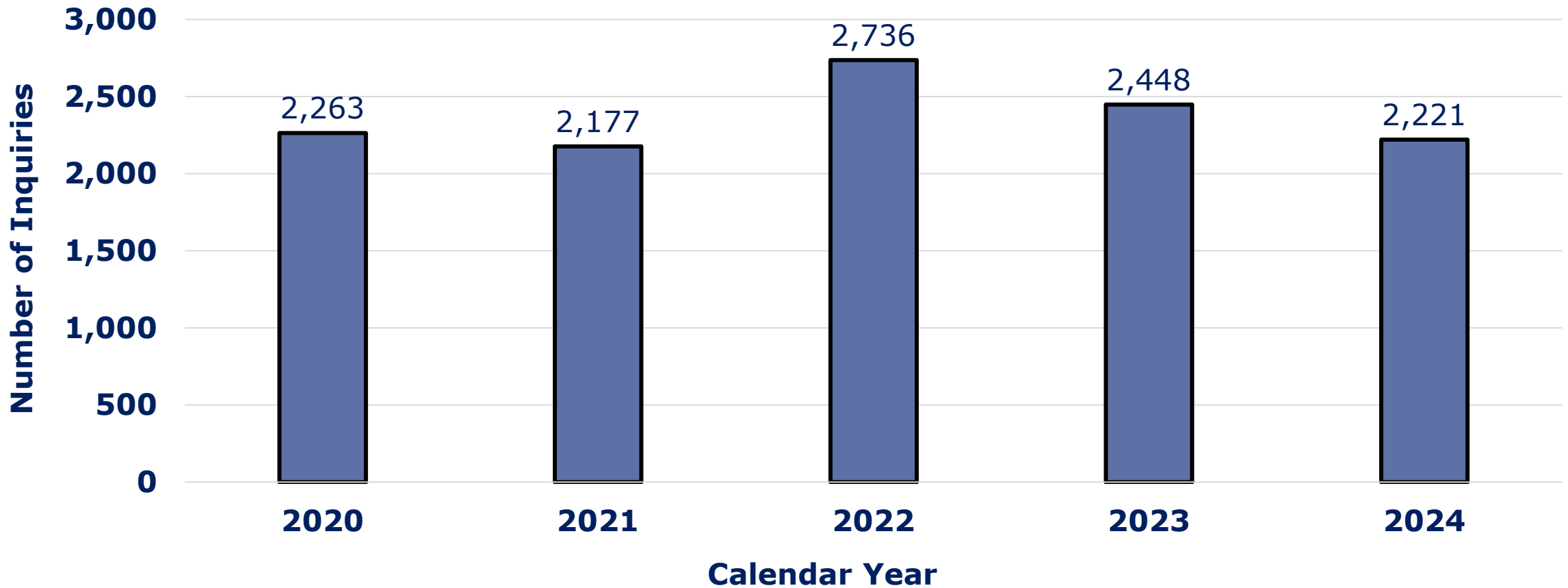
# Discrepancy Notification Reports (DNRs) Received for the CY 2025 APU Period

**DNR Categories for CCNs with DNRs in the CY2025 APU Period  
(April 2023-March 2024)  
n=3,302**



# Technical Assistance Inquiries

## HHCAHPS Survey Technical Assistance Inquiries Received



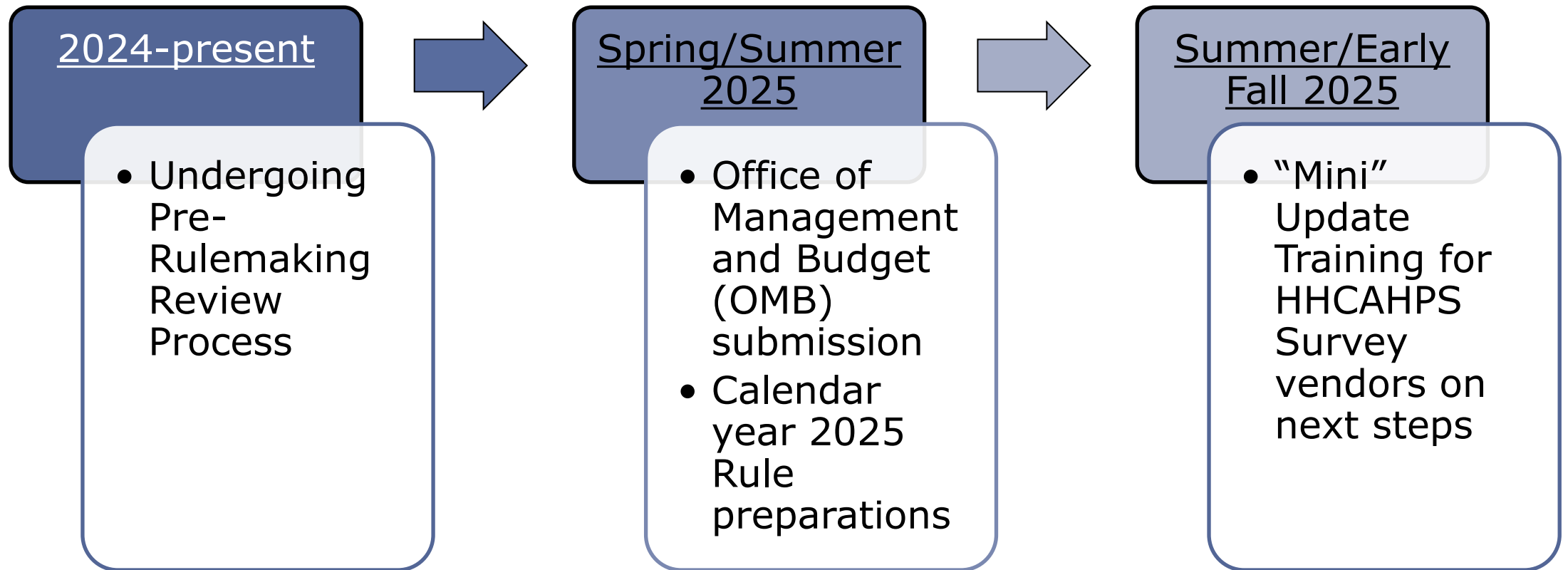
# HHA Technical Assistance Topics in 2024

Topic	Percent
<b>HHA Credentialing Process</b>	<b>42.2</b>
<b>Switching Vendors</b>	<b>18.0</b>
<b>Vendor Authorization</b>	<b>10.3</b>
<b>Meant to Contact Vendor, OASIS, or other CAHPS</b>	<b>7.9</b>
<b>Participation Requirements</b>	<b>6.8</b>
<b>HHA Exemption</b>	<b>6.1</b>
<b>Public Reporting</b>	<b>3.3</b>
<b>Reports (data submission, other)</b>	<b>2.2</b>
<b>Survey Instrument</b>	<b>1.7</b>
<b>Star Ratings</b>	<b>1.4</b>



# **Revised Survey Instrument: Next Steps**

# Revised Survey: Next Steps



# Questions?

# Thank You

- Thank you for participating in the Vendor Update Training Session.
- Please complete the HHCAHPS Vendor Update Training Session Evaluation Form before disconnecting from this session.