

Home Health (HH) Quality Reporting Program (QRP) Quick Reference Guide

The HH QRP creates Home Health Agency (HHA) quality reporting requirements, as mandated by Section 1895(b)(3)(B)(v)(II) of the Social Security Act (“the Act”) and the Medicare regulations at 42 C.F.R. §484.250(a). Each year, by October 1, CMS publishes the quality measures an HHA must report.

HHAs must report both Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Home Health Care Survey data and Outcome and Assessment Information Set (OASIS) data. Additional data is gathered through Medicare claims. Information on measures required for the Home Health QRP can be found on the [CMS Home Health Quality Measures website](#).

If the required quality data is not reported by each designated submission deadline, the HHA will be subject to a two (2) percentage point reduction in their Annual Payment Update.

Frequently Asked Questions

Q: What are the data submission deadlines for OASIS data?

OASIS data must be transmitted within 30 days of the assessment date. OASIS data submitted within 30 days of the assessment date are considered to have met the requirement of submitting the quality data.

The comprehensive assessment must be updated and revised (including the administration of the OASIS) no less frequently than one of the following:

- The last five days of every 60 days beginning with the start of care date, unless there is a beneficiary-elected transfer, significant change in condition, or discharge and return to the same HHA during the 60-day episode.
- The comprehensive assessment must be completed within 48 hours of return home after inpatient facility discharge, or within 48 hours of knowledge of qualifying stay in an inpatient facility. When the physician specifies a date that home care services must resume (a physician-ordered Resumption of Care date), the agency is expected to conduct the ROC (Resumption of Care) visit on that date.
- At discharge.

More information on OASIS submission deadlines can be found in the OASIS User Manual available in the Downloads section of the [Home Health Quality Initiative OASIS User’s Manual webpage](#).

Q: What are the data submission deadlines for HHCAHPS data?

HHCAHPS data must be reported for eligible patients on a monthly basis for four consecutive quarters. You can [view a list of HHCAHPS submission deadlines on the official HHCAHPS website](#).

Q: How do I verify my submissions?

CMS provides both a quarterly [Quality Assessments Only \(QAO\) Performance Report](#) (a sample report is available in the Downloads box), as well as a year-end Historical Quality Assessments Only (QAO) Performance Report. This QAO Performance Report is based on OASIS assessments submitted by an HHA during the applicable reporting period as it relates to compliance and Annual Payment Update (APU).

Additionally, OASIS validation reports are available in the CASPER reporting application. Instructions for running these reports can be found in the CASPER Reporting User's Manual in [Section 4: Reports](#) and [Appendix A - Quick Reference to Final Validation Reports](#).

An HHA can monitor CAHPS® data submission reports under the tab FOR HHAs on the [official website of the Home Health Care CAHPS Survey](#). HHAs are required to check the HHCAHPS data submission reports to confirm that their HHCAHPS data has been entered successfully (and conversely, unsuccessfully) by their respective HHCAHPS survey vendors. Also, under FOR HHAs, all home health agencies can check their quarterly HHCAHPS preview reports for data that will be posted on Home Health Compare. Section 5.3 of the HHCAHPS Survey Website User and Data Submission Manual, Version 5.0 outlines these reports.

Q: How to I submit an HHCAHPS exemption request?

HHCAHPS monthly participation from April 2018-March 2019 is required for the CY 2020 APU. If an HHA has 59 or fewer HHCAHPS-eligible patients in the period of April 2017-March 2018, then the HHA should complete a CY 2020 APU HHCAHPS Participation Exemption Request (PER) form by 11:59 pm March 31, 2019. The PER form is on the [official website of the Home Health Care CAHPS Survey](#) under FOR HHAs.

Help Desk Assistance

HHAPUreconsiderations@cms.hhs.gov (APU/Reconsiderations Help Desk)

For reconsideration requests and follow-up questions after the facility has received a CMS determination of noncompliance letter.

homehealthqualityquestions@cms.hhs.gov (Home Health Quality Help Desk)

For questions about the QAO metric or the content of the QAO Historical Reports and submission of comments, questions, and suggestions about the Quality of Patient Care Star Ratings.

HHCAHPS@RTI.org or 1-866-354-0985 (HHCAHPS Help Desk)

Information or questions about the Home Health Care CAHPS® Survey or Patient Survey Star Ratings.

Help@qtso.com or 1-877-201-4721 (QIES Help Desk)

For questions about OASIS submission reports and CASPER reports.

Helpful Links

[Post-Acute Care \(PAC\) Listserv](#) — Sign up for the official CMS PAC listserv to receive important QRP updates.

[CMS OASIS Website](#) — For access to OASIS quarterly Questions and Answers.

[HHA Quality Reporting Requirements](#) — CMS resource containing information about the quality measures, provider compliance, and methodology.

[Home Health CAHPS® Website](#) or <https://homehealthcahps.org> — Official website for HHCAHPS.

[HHA Quality Reporting Training](#) — Links to past in-person and online training as well as information on upcoming trainings.