

Hospice Technical Questions & Answers

June 6, 2014

ID	Topic	Question	Answer
20140602_002	A-Specs	<p>What value should be submitted for the following:</p> <ul style="list-style-type: none"> -Item set version code -Specifications version code? <p>The Data Specs for version V1.00.1 state the value should be 1.00. That does not seem right. Should it be 1.01?</p>	<p>The specifications indicate a valid value of 1.00 should be submitted for item set version code.</p> <p>The data specs version code should be 1.00. The final specifications are V1.00.1 with the .1 indicating the first minor revision number for this first major (1.00) release.</p>
20140602_003	A-Specs	<p>Is the FAC_ID for the HIS record the same as the HHA_AGENCY_ID for the OASIS - C record, or does the agency get a different submission number for Hospice and Oasis?</p>	<p>The FAC_ID assigned to the hospice provider is a unique identifier for that specific hospice provider. There are no shared FAC_IDs across provider types. The concept for the Hospice FAC_ID is equivalent to the concept for the HHA_AGENCY_ID. The identifiers are issued separately for HHA and Hospice and do not relate between the two provider settings.</p> <p>Yes, the agency will have a different identifier for Hospice and for OASIS.</p>

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20140602_006	A-Specs	<p>The spec states that there is a 5mb limit for submission files. I have two questions about this:</p> <p>Is this limit applied to the XML assessment files or to the ZIP file that contains them</p> <p>Why does this limit exist? It seems arbitrary and unnecessarily restrictive.</p>	<p>The size limitation is applied to the zip file. The zip file size is evaluated at the time the file is submitted to the Assessment Submission and Processing (ASAP) system. If the file size limit is exceeded, an online message will display notifying the user. The user must reduce the size of the zip file and resubmit it to the ASAP system.</p> <p>The size limitation is intentional and enforced to protect the ASAP system from malicious or unintended submissions.</p>
20140602_007	E-ASAP	<p>Clients are confused about the definition of the facility submission ID. You get two IDs for the ASAP system. Which one should be entered into the XML?</p>	<p>You will be required to have two user IDs: one to access the CMSnet Network (CMSNet User ID) and another to access to both the ASAP System and CASPER Reporting System (QIES User ID). When users register for the QIES user ID, the online confirmation message will display the FAC_ID value for your hospice provider. The value is a unique value for the Hospice provider and should be entered into provider software so that it is included in the HIS XML file.</p>
20140602_014	A-Specs	<p>Are error messages and descriptions available online?</p>	<p>Yes. To obtain them, go to the QTSO web site (www.qtso.com) and select the Hospice link in the left navigation bar. At the top of the Hospice page, there is a link for the Hospice User Guide and Training. Select the link and then you will see at the top of the page, a posting for Hospice Submission Users Guide; review Section 5 for the error messages.</p>

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20140602	A-Specs	What is the naming convention for the zip file and the XML files contained therein?	CMS has not established a naming convention but we suggest that you follow rules identified in the data specs Overview document. All file names including the extension must be 260 characters or fewer.
20140418-001	A-Specs	What is the FAC_ID item? How is it assigned?	<p>When the provider registers for a QIES User ID, the FAC_ID (used for provider identification of submitted records) will be displayed on the QIES Registration Confirmation page. This is not available until the provider registers for a user ID. The Hospice QIES User ID registration application will be available mid-May 2014. Training for providers on how to obtain user IDs will be available the first part of May.</p> <p>The FAC_ID number must be entered into the provider's software that create the HIS records so that the FAC_ID is included in the control section items of each HIS record submitted to CMS.</p>
20140418-002	A-Specs	<p>Are there plans to add Edits for Not assessed/no information Dash [-] for J0900C and J2030C? And if those are in the works do you have a timeline on when they will be released?</p> <p>J0900C Errata Issue ID 07 added 2 new edits for J0900C. Edit -3061 if J0900C = [0] and Edit -3062 if J0900C = [1, 2, 3, 9]. There is no edit for J0900C = [-] even though [-] is an allowable answer for J0900C.</p> <p>J02030C Errata Issue ID 20 added Dash [-] as allowable answer for J02030C, but no edit was added for dash [-]. Existing Edit -3045 is for J2030C = [0], and existing Edit -3046 is for J2030C = [1].</p>	There are no plans at this time to add additional edits for J0900C and J2030C for the use of a dash (-). If a dash is submitted in these items warning edit -3055 is issued. The edit text for edit -3055 is updated to include "submitting a dash" in the final version of the data specifications posted on the CMS Technical Information website on 04/10/2014.

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20140418-003	A-Specs	CMS: Validation rule -3055 is Consistency but it seems it should be Format because is intended for validate format of items to dash value with no dependencies between items.	The choices of edit type are Format, Consistency, Skip Pattern (a special type of consistency) and Information. The edit is not addressing the format of the item value. The format is correct, dashes are allowed. It is not an Information message as this is enforced in the ASAP system and Information messages are not enforced in ASAP. It is not a Skip pattern. It is discussing the consistency of the value with the measure that is calculated elsewhere.
20140418-004	A-Specs	Validation rule -3032c contains the following sentence: "Each Group C date must be less than or equal to Z0500B (date record completion was verified)." We suppose there should be "Each Group C active date must be less than or equal to Z0500B (date record completion was verified)." Because Group C dates (F2000B, F2100B, F2200B) are inactive for discharge and inactivation. Is it correct?	Yes, the rule is that an edit only applies to active items.
20140418-005	A-Specs	Do you have or know of someone who has an XML Schema Definition for the Hospice Item Set XML specification?	CMS has not developed a schema or XSD file for the HIS data submission specifications. Please refer to Section 9 of the overview document that accompanies the data specs for information about how the XML submission files should be constructed. The reports that accompany the data specifications should provide all of the additional information that you need to construct submission files.
20140418-006	A-Specs	<ol style="list-style-type: none"> 1. Will there be a Final Validation Report file we can use for testing? 2. Can we get examples of zipped files containing XML files? 3. Is there an XSD available for HIS? 	<ol style="list-style-type: none"> 1. The Hospice Validation Utility Tool (VUT) can be used to test hospice submission files. 2. There are no sample zip files. One or more XML records should be zipped together using standard compression into a zip file for submission. 3. No XSD is available from CMS for the HIS.

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20140418-007	A-Specs	<p>Is J0910A a required item? According to the data specs, an ^ can be submitted for this item. However, all other "gateway" items require a response, so it seemed odd that this one did not.</p> <p>Are some "gateway" items required while others are not?</p>	<p>J0910A allows a caret [^] as it is part of a larger skip pattern (skip pattern within a skip pattern). The gateway item for the larger skip pattern is J0900 - Was the patient screened for pain? If the response is zero [0] then the assessor is to skip to J2030 Screening for Shortness of Breath. This skip pattern requires that J0910A be a caret [^]. If the response to J0900 is one [1], then J0910A is answered as a gateway item to another skip pattern.</p>
20140418-008	A-Specs	<p>In the HIS data specs, I see that completion and submission deadlines do not apply to inactivation and modification records. However, in the case where key items must be edited to an accepted record, an inactivation record would be required, and then a new record created to take the place of the old one.</p> <p>In this instance, is the new record subject to completion and submission deadlines?</p> <p>If so, does that mean that hospices do not get a warning for correcting a non-key item after the deadlines, but will get a warning if a key item needs to be corrected?</p>	<p>It is unknown to the ASAP system whether a new record is due to a resident key field change or some other reason. All new records have the same edits and receive the same warning messages.</p>
20140418-009	A-Specs	<p>My company would like to understand the reason for capturing the software information items:</p> <p>SFTWR_VENDR_ID (Vendor federal employer tax id)</p> <p>SFTWR_VNDR_NAME (Vendor company name)</p> <p>SFTWR_VNDR_EMAIL_ADR (Software vendor e mail address)</p>	<p>CMS is capturing the information below so that we can identify the vendor for purposes of communication via email or perhaps if we determine that the particular vendor is having issues with the edits (many records are rejected for the same reason).</p>

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20140418-010	A-Specs	<p>We have a question on “Check all that apply”</p> <p>“Check all that apply” is the secondary response around the comprehensive pain assessment J0919C.</p> <p>How are those checkmarks to be formatted in the xml file for export?</p> <p>Same applies to ‘Check all that apply’ in J2040 Treatment for shortness of breath.</p> <p>We cannot find this in the Technical data specs.</p>	<p>The Hospice Data Submission Specifications Overview.pdf explains how to format and handle checklist items for the XML along with the detailed data specifications. This overview document is included in the HIS Data Specs DRAFT[ZIP, 2MB] zip file located at http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/HIS-Technical-Information.html.</p> <p>Checklist items are a subset of coded items for which each component item in the checklist has response options of 0 (Not checked (No)) or 1 (Checked (Yes) etc.). These checklist items include J0910C1 through J0910C9 and J2040A1 through J2040C4.</p> <p>Please refer to the overview document and the detailed data specifications for specific item coding instructions.</p>

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20140418-011	A-Specs	<p>Can you clarify the options that the individual has available when completing HIS items A1000A-A1000F?</p> <p>The HIS manual lists that they can enter a check next to each option or leave it blank.</p> <p>The Hospice Data Specs state that acceptable values for these items are:</p> <p>0 for Not checked (No)</p> <p>1 for Checked (Yes)</p> <p>- for Not assessed/no information</p> <p>Does this mean that the individual completing the HIS should have the ability to select a checkbox, not select a checkbox or indicate that all of the items for A1000A-F were not assessed/no information?</p>	<p>The data specifications list 3 values for A1000A - A1000F so the ASAP system will accept each of these values as a valid value. Items A1000A - F are the race/ethnicity items. If the user completing the HIS record has no information and cannot determine the person's race/ethnicity, then a dash would be used in every item A1000A - A1000F per data specification edit -3024.</p>
20140602_010	C-VUT	<p>We are using the VUT to test record output. In some fields, such as J2040C4, a dash is used for 'not assessed, no information' versus the blank when it part of a skip pattern. Records with a dash are always rejected. Can we have clarification on when to use the dash?</p> <p>We used a scenario of a patient dying before the 14 days have passed and entered in a dash because the information was not gathered before the death, and it was rejected using the VUT. We did not use the caret.</p> <p>Please explain when to use the dash versus a caret.</p>	<p>The dash must be listed as a valid value for an item in the data specs in order to use it as a response value for the item.</p> <p>Scenarios that were rejected were requested to be submitted to hospicetechnicalissues@cms.hhs.gov. The issue will try to be replicated to determine if the VUT needs a fix.</p>
20140602_013	C-VUT	<p>Do we yet have the final version of the VUT?</p>	<p>The final version of the VUT will be posted in June on the QTSO Hospice vendor web page.</p>

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20140602_024	C-VUT	With the VUT, is it possible to start processing without pressing the go button?	<p>No, that is not possible at this time.</p> <p>The caller's suggestion to add a switch to the command line that bypasses the 'go' button will be considered as a future enhancement by CMS.</p>
20140418-012	C-VUT	Will CMS provide validation utility which will validate all responses are completed per the requirements at the point an electronic HIS tool is completed/locked to ensure it meets extraction requirements? (this would be similar to what is done for the OASIS today) Or is this the functionality the VUT provides?	Yes, the VUT does this, as long as "extraction requirements" has the same meaning as "submission requirements".
20140418-013	C-VUT	Will a test environment be available for software vendors for validation checks on the HIS export files?	CMS will provide a hospice Validation Utility Tool (VUT) that can be used by vendors to validate their created files.
20140418-014	C-VUT	When will the HIS validation utility tool be available to test HIS submissions?	We expect the Hospice VUT to be available via the QTSO website (https://www.qtso.com) on Monday, April 21 st .
20140602_023	D-HART	<p>The HART user's manual states that HART will run only on the 32-bit processor.</p> <p>The manual says it is not compatible with a 64-bit processor. Is that accurate?</p>	<p>HART will run on a 64-bit, but we only officially support 32-bit. We will review the manual and make an adjustment if necessary.</p> <p>We have compiled HART as a 32-bit application. There are no plans to compile as a 64-bit app at this time.</p>
20140418-015	D-HART	Will CMS will provide free software to Hospice providers for the data entry and submission of the HIS files to the CMS QIES/ASAP system.	HART is the free CMS software to enter data and create HIS submission files for the CMS QIES/ASAP system.
20140418-016	D-HART	Are Hospice providers required to use the CMS supplied data entry software or may they use software developed from a third party vendor for the data entry of the HIS items and submission to the CMS QIES/ASAP system?	Hospice providers may use software developed in house or from any third party vendor for the data entry of the HIS items and creation of the submission software.

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20140418-017	D-HART	We are hoping to transfer the data from our EHR directly into the HART software and use that to submit the data to CMS. Can you tell me if this will be possible?	<p>As we are not familiar with your EHR software, we will discuss the XML record and zip file requirements.</p> <p>If your software creates the required XML records per the Hospice data specifications, then you can zip one or more of the XML files into a zip file for submission to the CMS QIES ASAP system.</p> <p>Regardless of the software used to create XML and zipped submission files, the zipped submission file(s) must be submitted through the CMS QIES ASAP website. HART only creates XML records and zipped submission files. HART does not submit the files.</p> <p>Completed hospice records can be imported into HART. HART will import the XML formatted record or a flat file formatted record per the hospice data specifications. The hospice data specifications contain the information on the proper layout for either a text file or the correct tags and format for the tags (defined in the spec overview) for an XML file. HART accepts multiple records in an import file; however, the entire file has to be either text records or XML records, not some of each. The data specs define what the bytes are for text files. The data specs also define what the XML labels are. They would need to submit valid values based on the specs. If they have their data layout correct, then it should import into HART. HART can then be used to export the records into zipped submission files which will need to be submitted to the CMS QIES ASAP system.</p>

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20140602_001	E-ASAP	<p>Will CMS allow for direct submission by Hospice EHR vendors on behalf of our clients so they do not have to download and then upload a file?</p> <p>If so, will CMS or contractor provide the timeframe and specifications of the transport.</p>	<p>The ASAP system does not accommodate automated scripting. Third-party vendors can submit on behalf of a provider but must utilize the same method as the providers.</p>
20140602_004	E-ASAP	<p>Is there a web API interface that we can develop against instead of using a manual upload via a web page? Such as a SOAP (Simple Object Access Protocol) web service or JSON (Java Script Object Notation) service?</p> <p>We have a priority EMR solution and would like to create an automated interface to submit HIS data and get real time feedback on any issues without having any manual intervention.</p>	<p>The system does not accommodate automated scripting, nor do we anticipate allowing it in the future.</p>
20140602_005	E-ASAP	<p>We have many provider numbers (about 37). Can we zip all XML files for HIS documents and send one a day across all provider numbers, or do we need to break out the Zip file by provider number or CCN number and upload each zip individually?</p>	<p>One submission file may contain multiple .xml record files from different providers as long as the zip file does not exceed 5MB. A 3rd party submitting on behalf of a provider must have permission/rights to submit records for that provider. If a record is submitted by anyone without authority, the record is rejected by the ASAP system.</p> <p>For third-party access, The Third-Party Access Request form must be completed and submitted by the provider. This form may be found on https://www.qtso.com on the CMSNet Information page.</p>

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20140602_008	E-ASAP	<ol style="list-style-type: none"> 1) Can we send discharges and admission assessments in the same zip file? 2) What is the format for the CASPER system generated final validation report? We would like to import it into our system. 3) Is the text format comma delimited and can it be parsed? 4) Can we get an example of that text report? 	<ol style="list-style-type: none"> 1) Yes. Discharge and admission assessment may be sent in the same zip file. 2) The system-generated final validation report is in text format and placed into the provider-shared folder. Hospice reports run by a user in the CASPER application are in PDF format. 3) The text format is not comma delimited. Some vendors have parsed the generated final validation report for other systems. The file extension is .txt. 4) Hospice training modules #5 and 6 display the final validation report.
20140602_009	E-ASAP	Is there a site to practice sending submissions?	<p>No, there is no site to practice uploading files. The VUT should be used to check the completeness and format of the XML assessment files.</p> <p>Please do not submit test records at any time to the ASAP system. No test records are allowed in the ASAP System at any time. All records submitted to the ASAP system are production records. Test records accidentally submitted to the ASAP system must be manually deleted by contacting the QTSO help desk, completing request forms, and obtaining CMS approval.</p>

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20140602_015	E-ASAP	Where should I go to sign up, as a vendor, to submit records on behalf of a provider?	Go to the QTSO website (https://www.qtso.com) home page. Click on the CMSnet information link in the CMSnet Information box at the top right area of the page. On the CMSnet Information page, you will see several access request forms. Under the heading 'Access Request Forms' and the sub-heading 'Hospice/IRF/Swing Bed/LTCH,' select the Hospice/IRF/Swing Bed/LTCH Corporate and Third Party Forms link. A corporate form, as well as a third party form, exists. The <i>provider</i> must fill out the third party form and it must be submitted by the provider .

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20140418-018	E-ASAP	How are hospice records submitted to CMS?	<p>The CMS requirement is that Hospices must complete and submit required HIS admission and discharge records to CMS' Quality Improvement and Evaluation System (QIES) Assessment Submission and Processing (ASAP) system for all patient admissions beginning on or after July 1, 2014.</p> <p>To do this:</p> <p>1 - Each provider must create electronic HIS records and submission files using software that creates files that meet the requirements detailed in the current HIS Data Submission Specifications, available on the CMS HQRP website at http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Hospice-Quality-Reporting/.</p> <p>To create the XML and zipped submission files, a hospice can use any software vendor or they may utilize the free CMS software for data entry and .xml file creation.</p> <p>2 - The zipped submission files are submitted to the CMS ASAP system. There is only one ASAP submission process for hospices.</p> <p>The provider can contract with an entity to perform their submission or submit the files themselves. Any arrangement between providers and other entities is outside of CMS.</p> <p>There will be technical training for hospice providers available in May. Please check the CMS Hospice QRP website as well as https://www.gtso.com for future announcements regarding the training.</p>

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20140418-019	E-ASAP	I have a question about the process of uploading the data collected for the HIS tool. Will there be a specific website designated for that? How do we register, obtain the login information etc.?	Training for uploading/submitted the HIS data to the QIES ASAP system will consist of a series of recorded WebEx modules that will be posted on the www.QTSO.com website the first part of May 2014. This training will instruct on obtaining user IDs; submitting the HIS records; and retrieving the final validation reports that identify a successful or failed submission. This entire process is similar to other provider types that submit data to the CMS QIES ASAP System.
20140418-020	E-ASAP	Can we, as a vendor, apply for a CMSNet login so that we can upload files on behalf of our clients? Or can our clients set up a CMSNet login for us so that we can upload their files?	Vendors (third party) can request a CMSNet and a QIES User ID to submit HIS files on behalf of a hospice provider. Please check the QTSO website for future updates on applying for these user ID.
20140418-021	E-ASAP	Can you advise if the vendor will be allowed to send multiple provider HIS files in a scripting or batch type fashion? We were advised by CMS that scripting/batching would not be allowed and I also spoke with your help desk and they advised the same thing. We are trying to understand if this process is just a vendor registering and logging in with a vendor ID that allows access to one provider session for upload and retrieval as a single session or if a provider can implement some sort of access that allows multiple HIS provider files to be uploaded at one time?	Scripting is not allowed. A user may log into the ASAP system once under their user ID and submit multiple files. The training on uploading/submitted the HIS data referred to below will demonstrate the process to upload a file. After a file has been uploaded, the user may upload another file in the same manner. The user does not have to sign out between uploads as long as the use is only for uploading the file for which their user ID has submission authority. If the vendor has a user ID with authority to submit to multiple providers, then files from these providers can be uploaded without signing out between uploads.
20140418-022	E-ASAP	Does CMS provide free software to the Hospice provider that will enable their third party software to communicate with the CMS QIES/ASAP system?	Verizon supplies the JuniperClient (free) software that is used to connect to the CMS WAN (CMSNet) to submit the created submission files. This connection software must be used to connect to the CMS WAN regardless of what software creates the submission files.

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20140602_011	F-Policy	The provider user ID registration has fields for birthday and SSN for the user. Why is this information needed?	<p>Those fields are not mandatory. CMS asked us to place the fields on the registration to prepare for a new CMS user identity management system. If the provider completes those fields, they will be pre-vetted, if not, they will be vetted when the new system goes live. Jack Hoffman</p> <p>These fields will be required in the future.</p>
20140602_012	F-Policy	We have several users who submit OASIS and will also submit HIS. Must they apply for a separate CMSnet ID and QIES login ID to submit the HIS?	The may use their CMSNet user id, but must still complete the CMSNet form indicating that they already have a current CMSNet ID. Then they must register for a HIS specific QIES User ID to submit the HIS.
20140418-023	F-Policy	Are any of the fields within the HIS considered “key” fields where those key fields are not allowed to be edited/modified by the agency? (In the OASIS file, there were specific fields that were “key” fields and they were not able to be modified and the process for updating those fields was to inactivate or delete the original record and resubmit a new). If there are key fields, can you provide us with the documentation which identifies the fields which are Key vs. non-key? Can you provide any clarification regarding the “key fields” vs. “non-key fields”?	<p>Hospice will have items that cannot be modified that are equivalent to the OASIS key fields.</p> <p>These Hospice items are listed in the HIS Manual – Guidance Manual for Completion of the Hospice Item Set (HIS) in Chapter 3 under Section 3.6 on correcting errors.</p>
20140418-024	F-Policy	Is there a software vendor ID application process?	<p>CMS does not have a vendor ID application. Providers may choose to use any software vendor as this is a business arrangement between the provider and vendor.</p> <p>As documented in the data specifications, the software vendor is to enter the company’s Employer Identification Number (EIN) as the software vendor ID.</p>