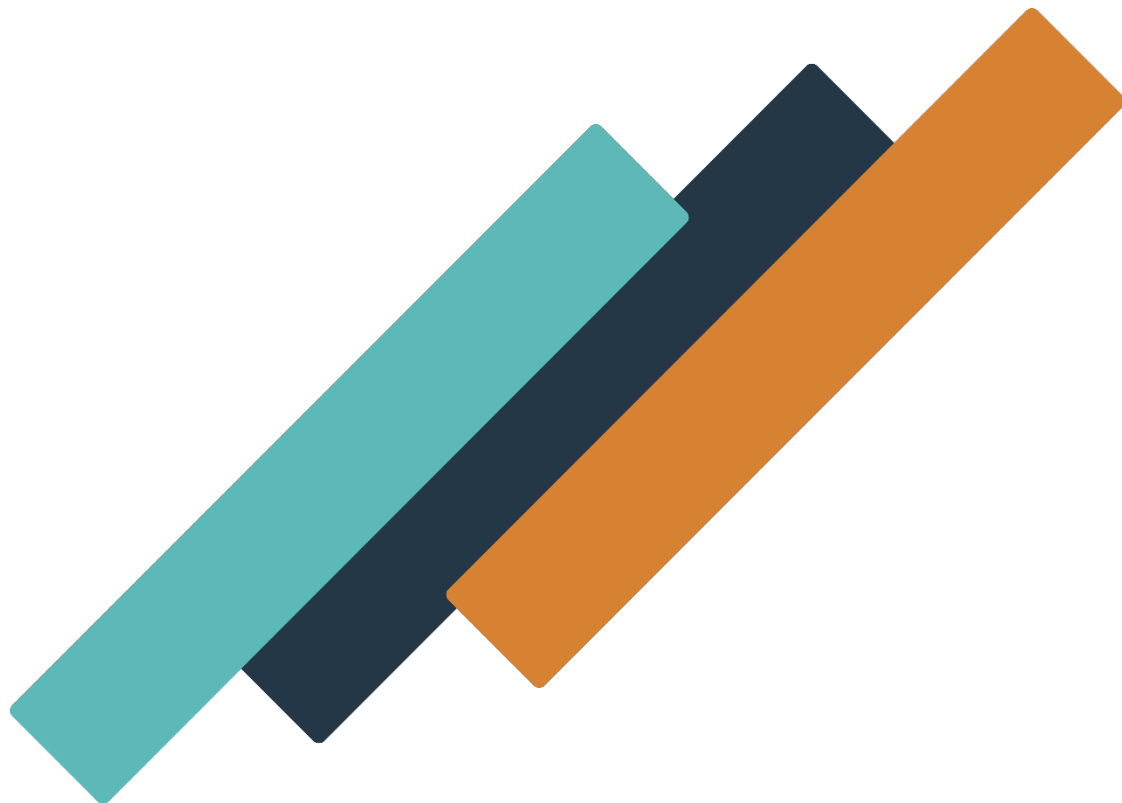




# Hospice CAHPS Portal Client Guide



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*Welcome to WellSky! WellSky CAHPS Services provides easy, accurate, and timely administration of surveys, submission to CMS, and feedback for your agency. This guide will give directions on how to interact with your CAHPS portal to view your file history and upload, reporting based on your agency results, and keep track of your CAHPS compliance at a high level.*

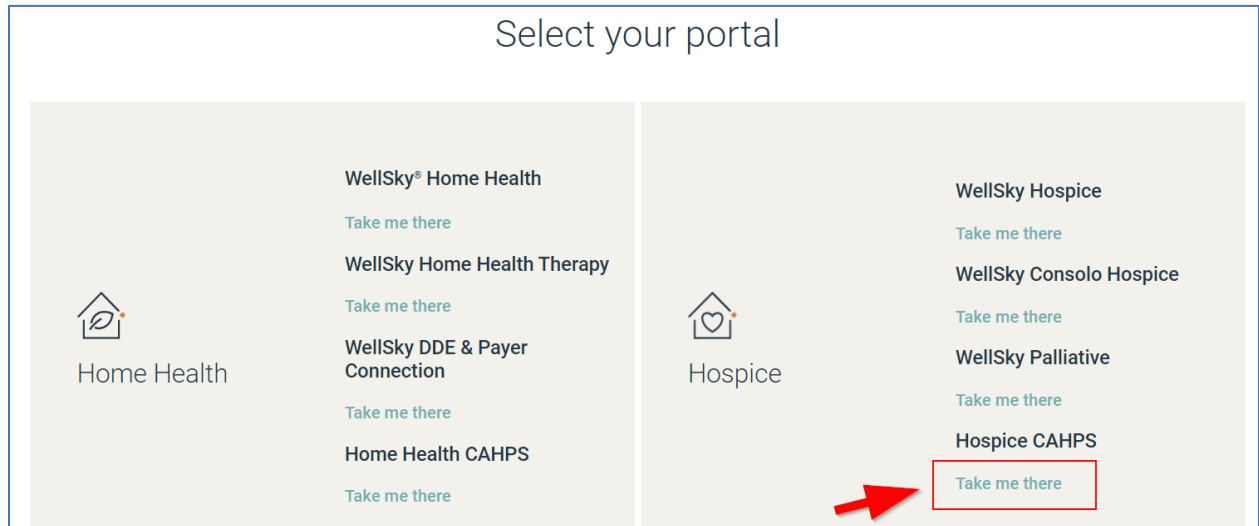
Support Resources:

[CAHPSTeam@wellsky.com](mailto:CAHPSTeam@wellsky.com)

1-800-379-0361

## Accessing the HOSCAHPS Portal

1. All WellSky solutions are accessible in one consolidated, easy to access webpage.  
[www.wellsky.com/login](http://www.wellsky.com/login). For Hospice CAHPS click "Take me there" under Hospice CAHPS.



2. Login with your HOSCAHPS credentials. If you need to be issued a set of credentials, please reach out to [cahpsteam@wellsky.com](mailto:cahpsteam@wellsky.com). A coordinator will assist with account creation. If you have forgotten your credentials, you can utilize the "I can't access my account" reset feature at the login page.

# File Upload

## Overview

The Centers for Medicare and Medicaid (CMS) have created detailed file specifications for patient data that must be submitted to ensure HOSCAHPS survey data collection meets high research standards. This document outlines how you can ensure your HOSCAHPS files meet CMS requirements and submission deadlines. Most EMR vendors have partnered with WellSky CAHPS to provide an HOSCAHPS file export. If your EMR vendor system lacks these capabilities or if you do not use such a system, you can create HOSCAHPS data files using this document. After each HOSCAHPS file transmission, WellSky will send a receipt message via email to whomever is submitting the file, regarding the status of the file transmission and any issues that should be resolved to ensure compliance with CMS. Contact the WellSky HOSCAHPS team at 1-800-379-0361 if you have any questions. Our goal is to make the HOSCAHPS file submission process as easy as possible for every agency.

## How to get the data to WellSky CAHPS

There are three options to get the patient data to WellSky. The file can be exported through your Software Vendor, or you can manually create your file using the WellSky CAHPS Standard File Specifications.

### Option 1: Automatic File Submission

WellSky has partnerships with several hospice EMRs to submit HOSCHAPS monthly patient files within the first week of the month following the sample month. All patient information for a sample month (previous month) will need to be entered into the agency's EMR system before the automated file transfer occurs. Please ensure your file submissions are correctly processed by logging onto <https://wellsky.com/login/> and selecting 'Hospice CAHPS'. Once there, select the HOSCAHPS tab and select the Survey Activity tab, click on your agency and a grid will appear with your agency's file submission(s).

### Option 2: EMR software vendor system export

Most EMR software vendors will have the option to export your Hospice CAHPS decedent/caregiver file monthly. Please contact them directly for a walk through on their Hospice CAHPS export process. In some cases, vendors may schedule automated creation and transmission of your Hospice CAHPS file on a monthly basis. This option will eliminate the need for you or any member of your staff to take action to prepare or transmit Hospice CAHPS files. WellSky' automated system for receiving Hospice CAHPS files can accommodate any vendor created file unless vendors change a file without notifying you or WellSky. If you are changing EMR software vendors, please contact our File Experts at 1-800-379-0361.

### Option 3: Manual creation and transmission of HOSCAHPS files at your agency

If you do not use an EMR software vendor system in your agency, WellSky has created an option for your agency to prepare and transmit HOSCAHPS files to us. A designated person at your agency will create the HOSCAHPS file based on the WellSky's Standard File Specification. We also recommend a call to WellSky's File Experts before starting the file for guidance at 1-800-379-0361.

### Transmitting Hospice CAHPS Data Files

To ensure that a Hospice CAHPS survey is administered to all eligible caregivers, participating agencies should transmit electronic Hospice CAHPS data files before the 20th of each month. Hospice CAHPS data files submitted after the 20th of each month may leave insufficient time to address file issues that must be resolved in time to support survey mailing within required CMS timeframes. As a result, survey data may be disqualified for reporting to CMS.

Hospice CAHPS data files are uploaded through WellSky's secure website with the username and password set up by designated staff. If you do not have a username and password to access the upload site, contact the CAHPS Team at 1-800-379-0361 or cahpsteam@wellsky.com. To submit your patient files on WellSky's web reporting page, follow this process:

1. Go to <https://wellsky.com/login/>.
2. Select the 'Hospice CAHPS', sign in with your login and password.
3. To upload Hospice CAHPS files, select the 'File Submission Tab'.
4. Click the 'Choose File' button and locate the file from your hard drive or desktop.
5. Select the file and click 'Open'.
6. The file you have selected will automatically appear in the upload window.
7. Choose Hospice with in the 'Specify Type' drop down menu.
8. Select 'Yes' or 'No' for Test file.
9. Click 'Upload' to transfer your data.

File Status	Definition	Agency Action Required
Complete	The file has processed but needs to be reviewed for attention required and informational messages.	Yes, contact a File Expert if you are unable to determine what is causing the attention required or informational messages.
Not Processed	The file has not processed.	Yes, contact a File Expert if you are unable to determine what is causing the file to not process.

### Attention Required Messages

Attention required messages will prevent survey administration. To view your submission details, click on the 'Hospice' tab. Once you are on the Hospice tab, select your agency under 'File Activity.' A grid

will display your file activity. Click on the number under the 'Attention required' line and the messages will display under the grid. The following are a list of possible Attention Required Messages:

- Missing decedent information (name, dates of death, etc.)
- Missing caregiver information (name, address, etc.)

Attention Required in File HOSPCAHPS_999998_10_2017 - Final.csv (x)		
Row	Position	Message
1	33	The 'CaregiverFirstName' column is invalid - Value cannot be empty.
1	35	The 'CaregiverLastName' column is invalid - Value cannot be empty.
1	37	The 'CaregiverMailingAddress1' column is invalid - Value cannot be empty.
1	39	The 'CaregiverCity' column is invalid - Value cannot be empty.
1	40	The 'CaregiverState' column is invalid - Value cannot be empty.
1	41	The 'CaregiverZipCode' column is invalid - Value cannot be empty.
1	42	The 'CaregiverTelephone1' column is invalid - Value cannot be empty.
2	33	The 'CaregiverFirstName' column is invalid - Value cannot be empty.
2	35	The 'CaregiverLastName' column is invalid - Value cannot be empty.
2	37	The 'CaregiverMailingAddress1' column is invalid - Value cannot be empty.

Showing 1 to 10 of 14 entries

Previous 1 2 Next

## Informational Messages

Informational Messages will not prevent survey administration. If you are seeing a lot of Informational messages, please reach out to your EMR software vendor for assistance. To view your submission details, click on the 'Hospice' tab. Once you are on the Hospice tab, select your agency under 'File Activity.' A grid will display your file activity. Click on the number under the 'Info Messages' line and the messages will display under the grid.

Informational Messages in File HOSPCAHPS_999998_10_2017-Corrected2.csv (x)		
Row	Position	Message
	3	The 'NPI' column is invalid - Value cannot be empty.
1	45	The 'CaregiverEmailAddress' column is invalid - Value cannot be empty.
2	45	The 'CaregiverEmailAddress' column is invalid - Value cannot be empty.

Showing 1 to 3 of 3 entries

Previous 1 Next

### Resubmitting Your File

To submit a corrected file, please fix the information in your EMR software vendor system, re-export the entire decedent/caregiver file, and resubmit the corrected file. If you are manually creating your file and need to submit a corrected file, please contact a File Expert at 800-379-0361 for assistance.

## Data Collection

<b>Mail Mode:</b> Surveys are only mailed to the decedent's caregivers.	<b>Mixed Mode:</b> Surveys are mailed and then a phone call is made to the decedent's caregivers.
A survey and cover letter are mailed two months following the sample month for Hospice. A second survey is mailed 3 weeks later to those who did not respond to the first survey. The data collection period is 42 days/six weeks.	A survey and cover letter are mailed two months following the sample month for Hospice. A telephone follow-up is conducted, if the mailed survey is not received, approximately 3 weeks after the survey is mailed. The data collection period is 42 days/six weeks.

### 2023 Hospice CAHPS Data Collection Schedule for Subscribers

Hospice CAHPS Sample Month	File Due to WellSky	Survey Activity Begins by	If Timely File Submitted, Data Collection Period Ends	Final Reports Available
January	February 17 <sup>th</sup> 2023	April 3 <sup>rd</sup> 2023	May 15 <sup>th</sup> 2023	May 29 <sup>th</sup> 2023
February	March 20 <sup>th</sup> 2023	May 1 <sup>st</sup> 2023	June 12 <sup>th</sup> 2023	June 26 <sup>th</sup> 2023
March	April 20 <sup>th</sup> 2023	June 1 <sup>st</sup> 2023	July 13 <sup>th</sup> 2023	July 27 <sup>th</sup> 2023
April	May 19 <sup>th</sup> 2023	July 3 <sup>rd</sup> 2023	August 14 <sup>th</sup> 2023	August 28 <sup>th</sup> 2023
May	June 20 <sup>th</sup> 2023	August 1 <sup>st</sup> 2023	September 12 <sup>th</sup> 2023	September 26 <sup>th</sup> 2023
June	July 20 <sup>th</sup> 2023	September 1 <sup>st</sup> 2023	October 13 <sup>th</sup> 2023	October 27 <sup>th</sup> 2023
July	August 18 <sup>th</sup> 2023	October 2 <sup>nd</sup> 2023	November 13 <sup>th</sup> 2023	November 27 <sup>th</sup> 2023
August	September 20 <sup>th</sup> 2023	November 1 <sup>st</sup> 2023	December 13 <sup>th</sup> 2023	December 27 <sup>th</sup> 2023
September	October 20 <sup>th</sup> 2023	December 1 <sup>st</sup> 2023	January 12 <sup>th</sup> 2024	January 26 <sup>th</sup> 2024
October	November 20 <sup>th</sup> 2023	January 2 <sup>nd</sup> 2024	February 13 <sup>th</sup> 2024	February 27 <sup>th</sup> 2024
November	December 20 <sup>th</sup> 2023	February 1 <sup>st</sup> 2024	March 14 <sup>th</sup> 2024	March 28 <sup>th</sup> 2024
December	January 19 <sup>th</sup> 2024	March 1 <sup>st</sup> 2024	April 12 <sup>th</sup> 2024	April 26 <sup>th</sup> 2024



## Survey Activity

Once a file is submitted to the WellSky HOSCAHPS Portal the file submission outcome reports as well as a receipt trail can be accessed via the Hospice tab > File Activity.

WellSky Hospice CAHPS

Welcome Calley Test! [ Log Off ]

Home

File Submission

Hospice

Need Help? [Click Here](#)

File Activity

Surveys

Reporting

Help

File Activity

999998 - DEMO - My Agency, Inc. ▾

Files for DEMO - My Agency, Inc.

Date/Time Submission	Sample Month	Filename	Status	Attention Required	Info Messages	Total Records Submitted	Eligible	Total Ineligible	Test File	Submitted By
4/20/2020 09:21am	Feb 2020	999998-FazziAgency-Feb2020-SmokeTest.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
3/19/2020 09:10am	Feb 2020	999998-FazziAgency-Feb2020-SmokeTest.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
3/10/2020 09:13am	Feb 2020	999998-FazziAgency-Feb2020.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
2/27/2020 03:18pm	Jan 2020	999998CTHCAHPSFeb2020Detail2.csv	Complete	<a href="#">10</a>	<a href="#">6</a>	3	0	3	Yes	Salvador Montalvo
2/25/2020 09:33am	Jan 2020	TEST 401558 December 2019 sample month.csv	Complete	<a href="#">2</a>	<a href="#">57</a>	20	0	20	Yes	Amanda Besette
2/19/2020 11:15am	Dec 2019	999998-FazziAgency-Dec2019.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
12/12/2019 04:10pm	Oct 2019	999998-FazziAgency-Oct2019-FTPVersion.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
12/12/2019 04:03pm	Oct 2019	999998-FazziAgency-Oct2019PortalVersion.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
12/12/2019 10:20am	Oct 2019	999998-FazziAgency-Oct2019-FTPVersion.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz
12/12/2019 10:17am	Oct 2019	999998-FazziAgency-Oct2019PortaVersion.xml	Complete	<a href="#">17</a>	<a href="#">1</a>	14	13	1	No	Wendy Raskevitz

Showing 1 to 10 of 134 entries

Previous

1

2

3

4

5

...

14

Next

The Survey Activity Page will show vital information to ensure agencies can keep up to date with their surveying and, in turn, their compliance.

Date/Time Submission: The date in which the file was uploaded.

Sample Month: The month in which patients were seen.

File Name: Naming convention of the uploaded file.

File Status: **Complete, Not Processed** status will show if the file is accepted with no issues or is rejected.

Total Records Submitted: Total number of decedent/caregivers submitted on the file. Includes eligible and ineligible decedent/caregivers.

Eligible: How many patients met CMS' survey eligibility criteria.

Total Ineligible: Number of decedent/caregivers who did not meet CMS' eligibility criteria.

Test File: Denotes whether the file submitted was done so as a test file or as a decedent caregiver file.

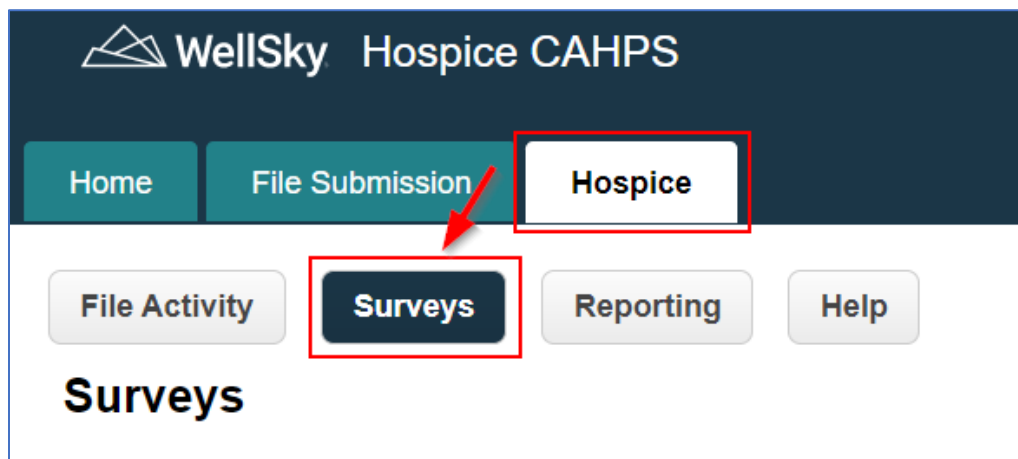
Submitted By: The submitter of the file.

## Reports

Once your surveys return there are three reports that can be utilized to review the survey results.

### Surveys Report

The Surveys Report is a report that shows each individual survey and its responses. This report contains both surveys where the respondents have decided they consent to share their name linked to their survey results and surveys where the respondent has chosen to remain anonymous. Anonymous surveys are still viewable but are stripped of the identifying information.



The Surveys Report can be accessed by going to HOSCAHPS > Surveys.

The image shows a screenshot of the filter options for the Surveys Report. It includes a dropdown menu for 'Select Agency', a dropdown menu for 'Select Date Range', an 'Ending' field with a calendar icon, and a checkbox for 'Filter for Best/Adverse'.

The report allows you to select your **agency** (if you are assigned to many you can change your view), a **period** of 1, 3, 6, or 12 months and the **sample month** you'd like to **end** on. Best/Adverse flags are also able to be looked at.

*Example: Looking at a **Period** of 3 Months with September as the **End Sample Month** will pull a report of data from July, August, and September.*

Once your period is pulled, the report will show individual surveys and how the questions were answered.

Decedent/Caregivers for DEMO - My Agency, Inc.										Show All
Decedent	Date of Death	Caregiver	Location	Consent to Share	Veteran	Language	Best/Adverse	View Survey	Type	
William Smith	3/2/2015	<a href="#">Dorothy Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English	Best	<a href="#">Download</a>	Mail	
William Smith	5/5/2017	<a href="#">Linda Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English		<a href="#">Download</a>	Mail	
William Smith	2/19/2018	<a href="#">Susan Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English		<a href="#">Download</a>	Mail	
William Smith	5/2/2018	<a href="#">Elizabeth Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English	Best	<a href="#">Download</a>	Mail	
William Smith	5/23/2020	<a href="#">Jennifer Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English		<a href="#">Download</a>	Mail	
William Smith	7/27/2020	<a href="#">Linda Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English	Adverse	<a href="#">Download</a>	Mail	
William Smith	7/11/2020	<a href="#">Susan Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English	Adverse	<a href="#">Download</a>	Mail	
William Smith	7/4/2020	<a href="#">Susan Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English		<a href="#">Download</a>	Mail	
William Smith	7/28/2021	<a href="#">Jennifer Smith</a>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	English	Adverse	<a href="#">Download</a>	Mail	

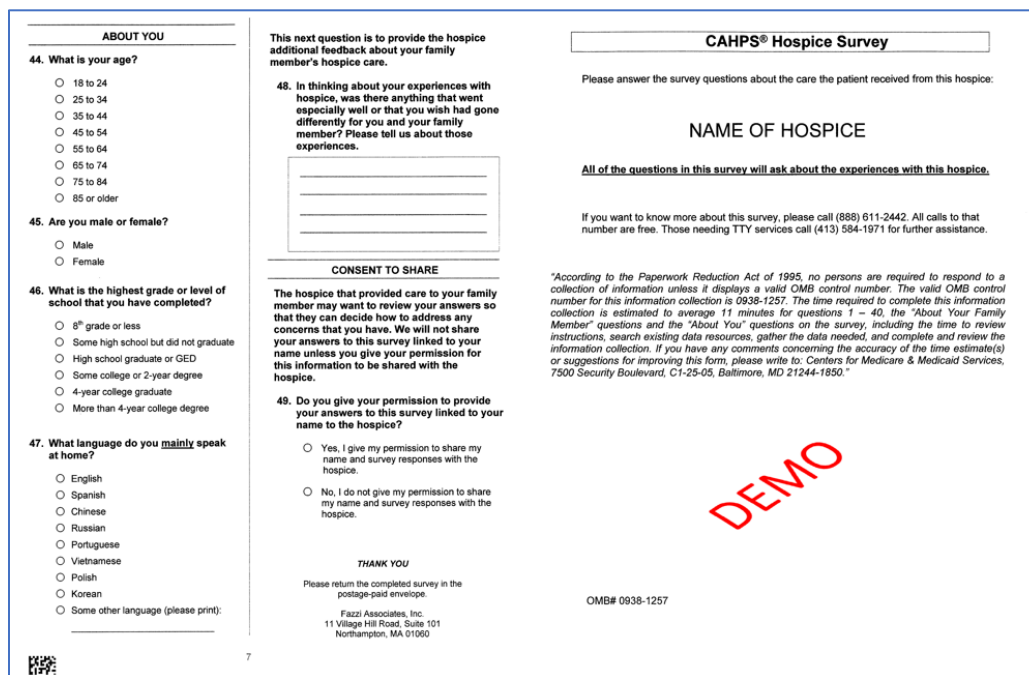
Clicking on the blue linked Caregiver will show survey responses.

Decedent / Caregiver Detail
Print
Done

Survey Responses

1: How are you related to the person listed on the survey?	My spouse or partner	26: Did he or she show any feelings of anxiety or sadness?	Yes
2: What locations did your family member receive care?	Home	27: How often did your family member get the help needed from the hospice team for feelings of anxiety or sadness?	Always
3: How often did you take part in or oversee care for him or her?	Always	28: Did he or she ever become restless or agitated?	No
4: Did you need to contact the hospice team during evenings, weekends, or holidays?	Yes	29: Did the hospice team give you the training needed about what to do if your family member became restless or agitated?	
5: How often did you get the help you needed during evenings, weekends, or holidays?	Always	30: Did the hospice team give you the training needed about how to safely move your family member?	Yes, definitely
6: How often did the hospice team keep you informed about when they would arrive?	Always	31: Give you as much information as you wanted about what to expect while your family member was dying?	Yes, definitely
7: How often did you get help as soon as you needed it?	Always	32: Did your family member receive care while he or she was living in a nursing home?	No
8: How often did the hospice team explain things in a way that was easy to	Always	33: How often did the nursing home staff and hospice team work well together?	

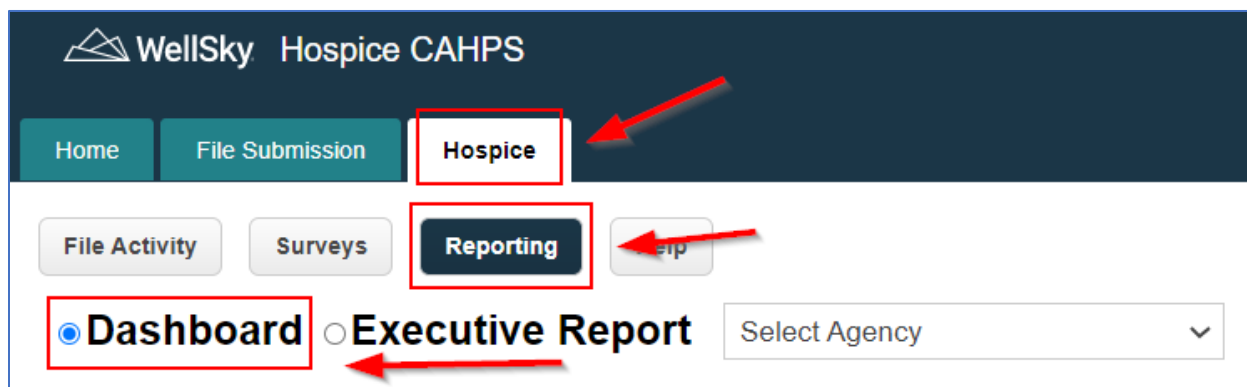
Clicking on the blue linked Download will show an optical image of the survey.



The image shows a printed version of the CAHPS Hospice Survey. It is divided into several sections. On the left, under 'ABOUT YOU', are questions 44, 45, 46, and 47 regarding age, gender, education, and language. The center section contains question 48 about hospice experiences, a 'CONSENT TO SHARE' section, and question 49 about permission to share answers. The right section is titled 'CAHPS Hospice Survey' and includes instructions for answering questions, a space for the hospice name, and a disclaimer. A large red 'DEMO' watermark is diagonally across the right side. At the bottom right, it lists the OMB number 0938-1257 and the publisher Fazzi Associates, Inc.

## Dashboard

The Dashboard serves as a quick report to show five publicly reported measures from your results. You can view your overall rating of care, the likelihood of recommendation, the care of patients, communications, and specific care issues for the desired period as well as trending those scores over time. The Dashboard report is also included and expanded upon in the Executive Report.



The Dashboard Report can be accessed by going to Hospice > Reporting > Selecting Dashboard Report bubble.

999998 - DEMO - My Agency, Inc. ▾

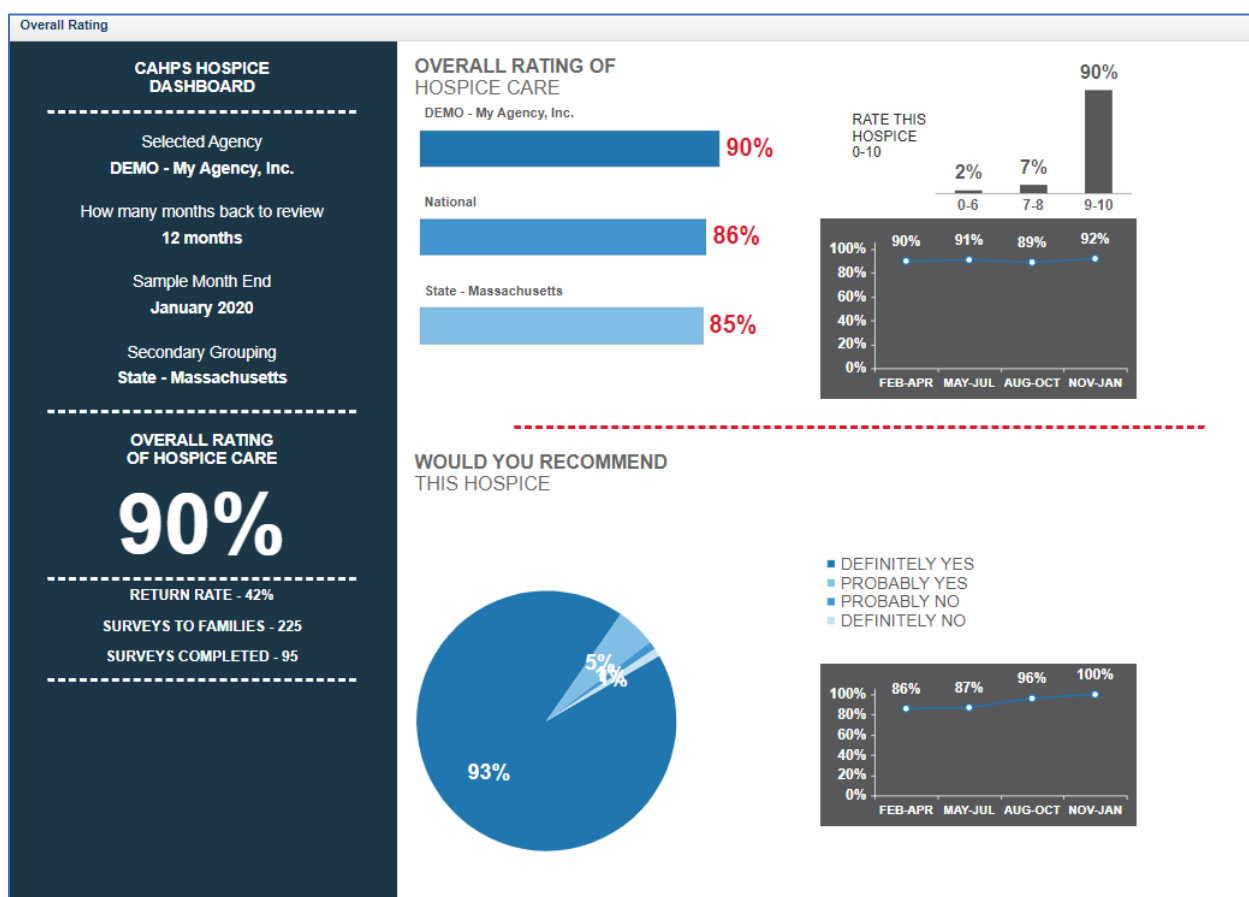
1 month ▾

State - Massachusetts ▾

The report allows you to select a **period** of 1, 3, 6, or 12 months and the **sample month** you'd like to **end** on.

*Example: Looking at a **Period** of 3 Months with September as the **End Sample Month** will pull a report of data from July, August, and September.*

**Benchmark** will default to your agency' state benchmarks but can be changed to a regional and percentage benchmark if desired.



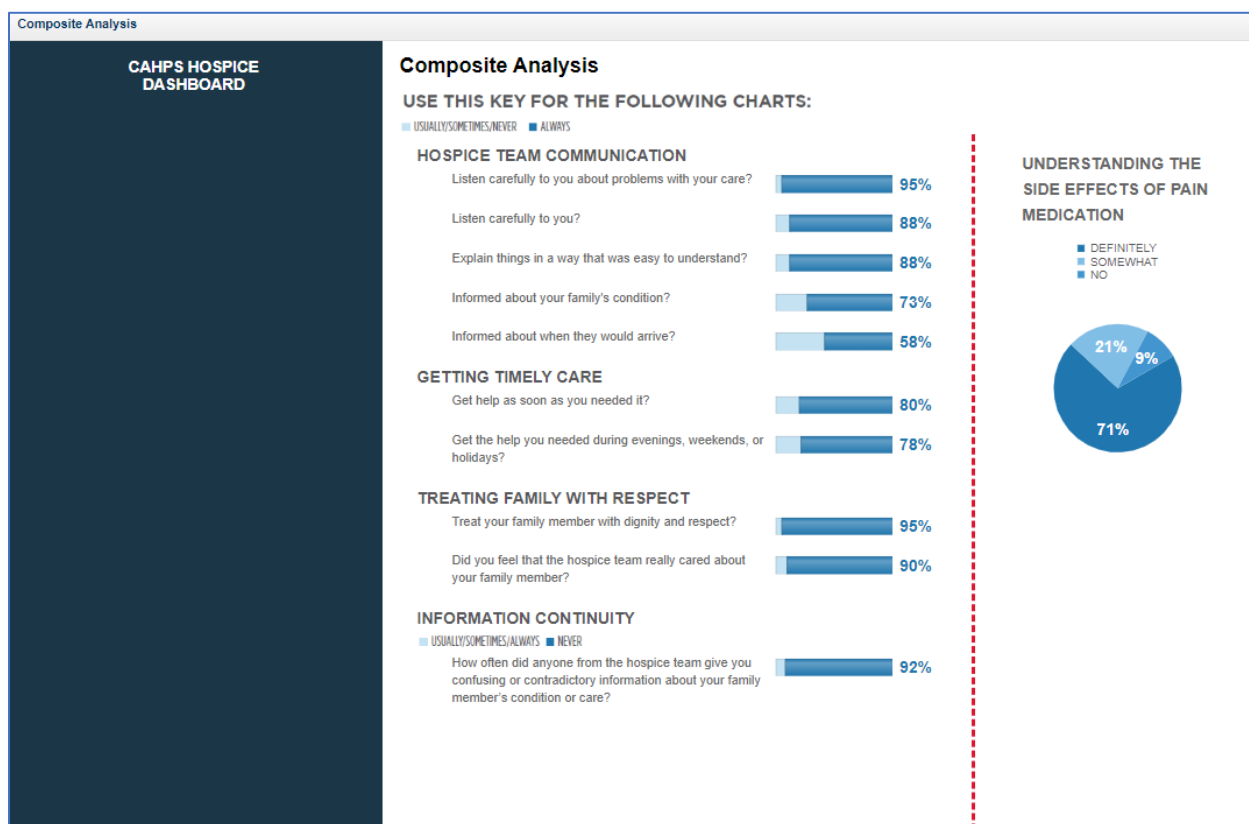
Return Rate: The report will display the number of surveys sent, surveys completed, and the return rate overall for the period pulled.

Composite Scores: Each question in the surveys will roll up into an overall composite. There are five composites: overall rating of care, likelihood of recommending, care of patients,

communications, and specific care issues. These composites are used by CMS to create the STAR ratings published on Care Compare and are what your agency is being scored on.

Trend Analysis Over Time: As your agency is surveying with us longer, our system will show the composite scores over time. The report will default to the period pulled.

*Example: If the report is pulled for a 3-month period, the trend will map out the composite scores for each 3-month period backwards.*



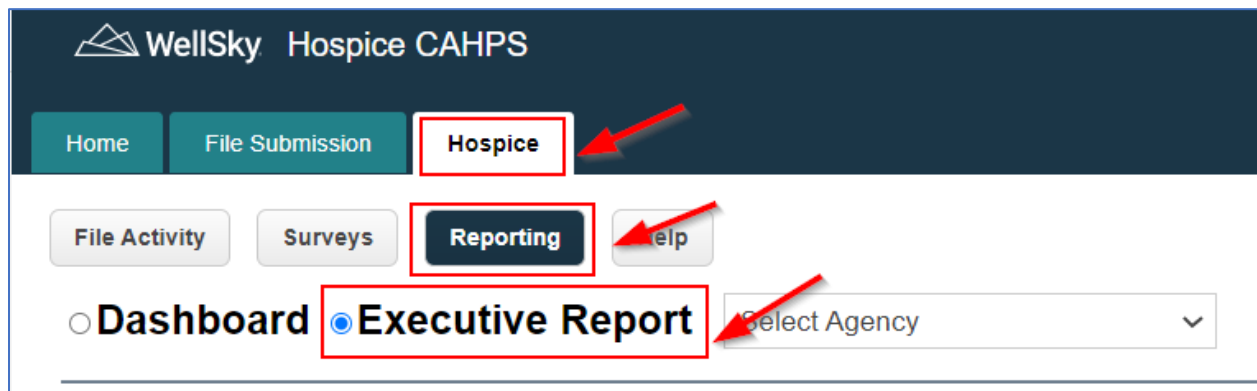
Composites: For each Composite Score, this part of the report will show which questions feed into each score and how they were answered overall for the period pulled.

Top Response Legend: The scoring will show in tan the "Top Response" that could be given to any question. The bar graph will then show all the top responses against all non-top responses.

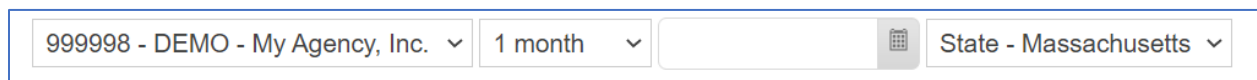
*Example: Some questions have a scale of "Never, Usually, Sometimes, Always". The top response may be Always but all non-top responses "Never, Usually, Sometimes" are lumped together.*

## Executive Report

The Executive Report includes the five publicly reported composite measures as well as an expansion into quality improvement measures, top box reporting, and patient open ended question comments.



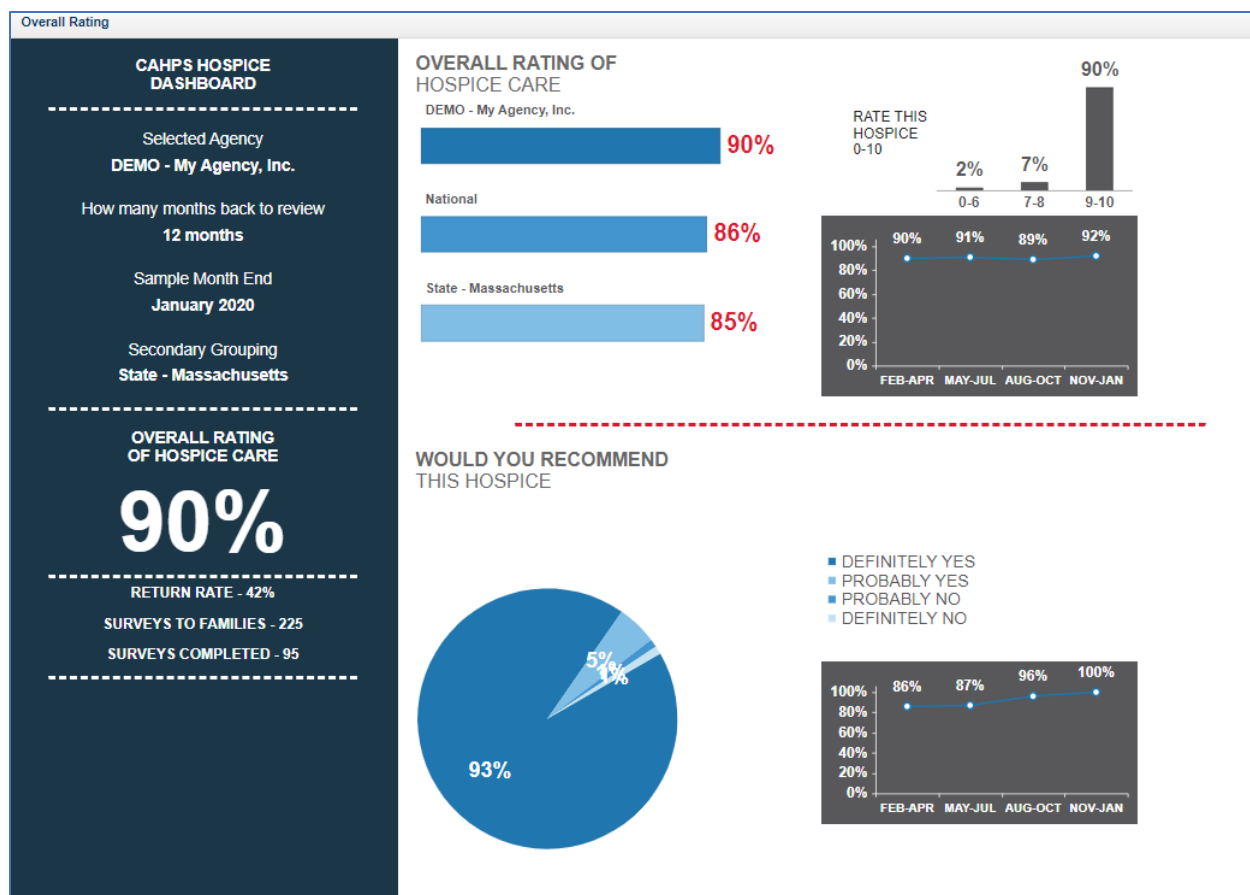
The Executive Report can be accessed by going to HOSCAHPS > Reporting > Selecting Executive Report bubble.



The report allows you to select a **period** of 1, 3, 6, or 12 months and the **sample month** you'd like to **end** on.

*Example: Looking at a **Period** of 3 Months with September as the **End Sample Month** will pull a report of data from July, August, and September.*

**Benchmark** will default to your agency' state benchmarks but can be changed to a regional and percentage benchmark if desired.



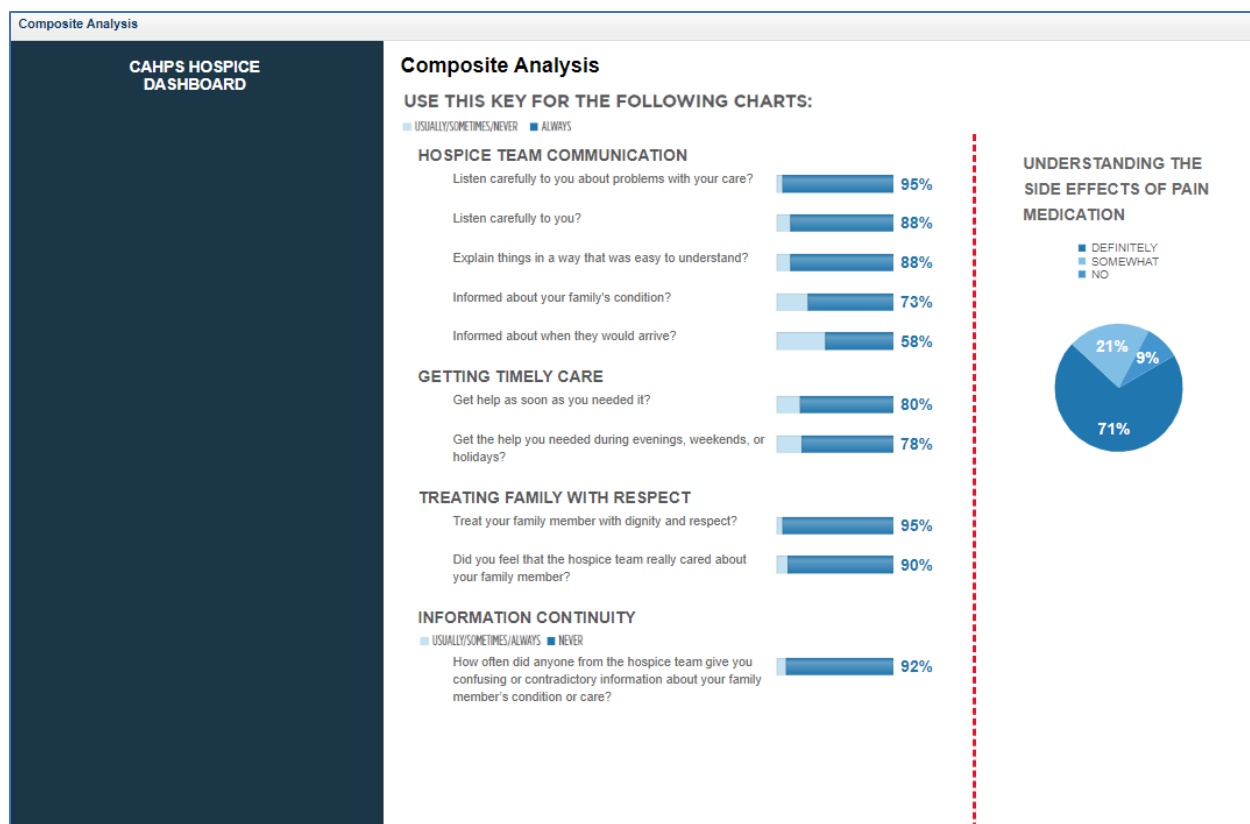
Return Rate: The report will display the number of surveys sent, surveys completed, and the return rate overall for the period pulled.

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Trend Analysis Over Time: As your agency is surveying with us longer, our system will show the composite scores over time. The report will default to the period pulled.

*Example: If the report is pulled for a 3-month period, the trend will map out the composite scores for each 3-month period backwards.*

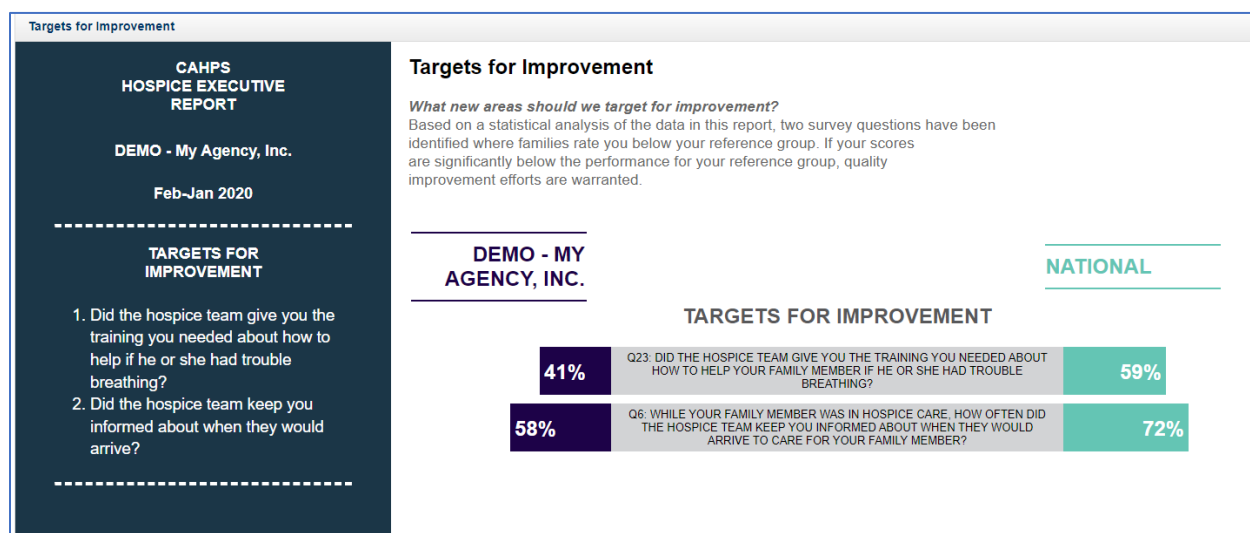
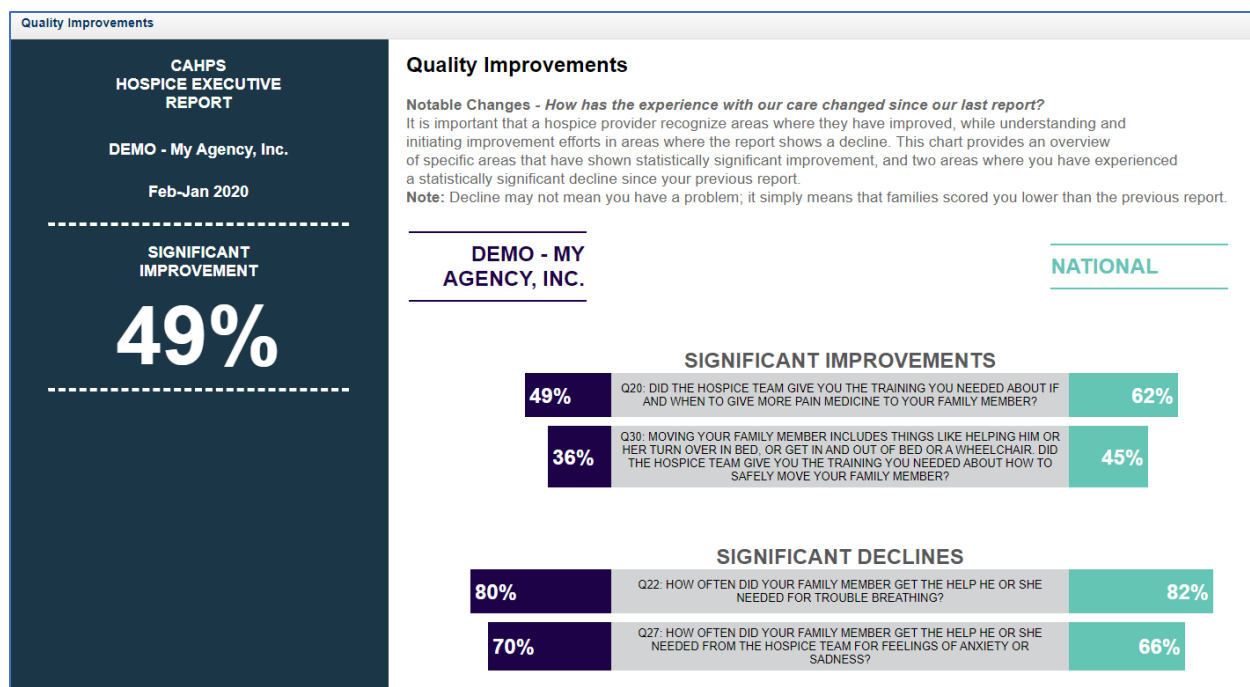




Composites: For each Composite Score, this part of the report will show which questions feed into each score and how they were answered overall for the period pulled.

Top Response Legend: The scoring will show in tan the “Top Response” that could be given to any question. The bar graph will then show all the top responses against all non-top responses.

*Example: Some questions have a scale of “Never, Usually, Sometimes, Always”. The top response may be Always but all non-top responses “Never, Usually, Sometimes” are lumped together.*



Improvements Noted: Provides the two questions that have shown the greatest statistically significant improvement since the period before the period pulled. Will also note if results improved in the two specific areas we targeted for improvement based on our last report

Targets for Improvement: Based on statistical analyses of your present report, the two survey questions with the lowest scores compared to benchmarks have been identified. If your scores are significantly below the performance for your reference group, quality improvement efforts are warranted.

Top Box Report									
<div> <div>CAHPS HOSPICE EXECUTIVE REPORT</div> <div>DEMO - My Agency, Inc.</div> <div>Feb-Jan 2020</div> </div>									
Top Box Report									
Indicator	N Agency	% Top Agency	N State	% Top State	Diff State	N Nat'l	% Top Nat'l	Diff Nat'l	
Q5 Did you get the help you needed during evenings, weekends, or holidays?(Always)	54	78%	252	74%	4%	10467	78%	0%	
Q6 Did the hospice team keep you informed about when they would arrive? (Always)	92	58%	384	68%	-10%	14414	72%	-14%	
Q7 Did you get help as soon as you needed it?(Always)	92	80%	386	79%	1%	14403	79%	1%	
Q8 Did the hospice team explain things in a way that was easy to understand?(Always)	94	88%	389	88%	0%	14515	87%	1%	
Q9 Did the hospice team keep you informed about your family member's condition?(Always)	93	73%	389	79%	-6%	14511	80%	-7%	
Q10 Did anyone from the hospice team give you confusing or contradictory information?(Never)	95	92%	390	89%	3%	14496	89%	3%	
Q11 Did the hospice team treat your family member with dignity and respect?(Always)	95	95%	389	96%	-1%	14540	96%	-1%	
Q12 Did you feel that the hospice team really cared about your family member?(Always)	94	90%	387	91%	-1%	14526	90%	0%	
Q14 How often did the hospice team listen carefully to you when talked about problems with your family member care?(Always)	42	95%	169	88%	7%	6918	86%	9%	
Q16 Did your family member get as much help with pain as needed?(Yes, definitely)	76	91%	288	88%	3%	11311	86%	5%	
Q18 Were side effects of pain medicine discussed with any member of the hospice team?(Yes, definitely)	78	71%	343	76%	-5%	12964	78%	-7%	
Q19 Did the hospice team give you the training needed about side effects from pain medicine?(Yes, definitely)	76	66%	337	68%	-2%	12865	70%	-4%	

Top Box Reporting: Top Box reporting allows you to see what percentage of respondents gave the top response for each question on the survey. Since some respondents do not fill every question out in a completed survey, the (1.) **Agency Responses** column shows how many respondents answered each question for the period being viewed. Then of that number, the (2.) **% Top Agency** column shows what percentage gave that top response. For each question, the top response is given in the (3.) **Indicator** column in brackets.

Top Box Report		
Indicator	N Agency	% Top Agency
Q5 Did you get the help you needed during evenings, weekends, or holidays?(Always)	54	78%
Q6 Did the hospice team keep you informed about when they would arrive? (Always)	92	58%
Q7 Did you get help as soon as you needed it?(Always)	92	80%

Example: 90 total respondents completed and sent back a survey. 54 respondents answered Question 5: Did you get the help you needed during evenings, weekends, or holidays? Of those 54 responses, 78% of the time, the respondents gave the top response for that question "Yes".

Survey Images: At the end of the Benchmark Analysis, all open ended questions are compiled for viewing. This question provides optical scans of handwritten comments from respondents regarding their hospice care.

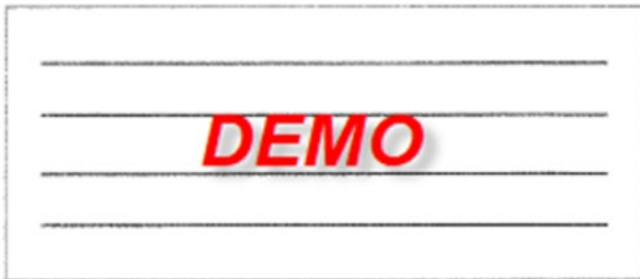
#### Comments - Print Surveys

In thinking about your experience with hospice, was there anything that went especially well or that you wish had gone different for you and your family member?

Please tell us about those experiences.



A rectangular box containing four horizontal lines for handwritten text. A large, red, italicized, semi-transparent watermark with the word "DEMO" is centered across the middle of the box.



A rectangular box containing four horizontal lines for handwritten text. A large, red, italicized, semi-transparent watermark with the word "DEMO" is centered across the middle of the box.

## Help/Training

### Support Lines

- **CAHPS Operational Support:** Support line agencies can call to ask operational CAHPS questions such as portal access, file submission issues, reporting consulting, or general queries.
  - (800) 379-0361
- **Phone Support**
  - Operates 9am-5pm EST
  - Off hours support > voicemail that is returned
- **Email Support**
  - Operates 9am-5pm EST
  - [cahpsteam@wellsky.com](mailto:cahpsteam@wellsky.com)

### Additional Materials

Additional materials such as copies of the survey and cover letter, portal access forms, and more can be found on the help tab.

