

FREE WEBINAR

HOPE and iQIES, 1 Month Later

*From Launch
to Lasting Compliance*

THU, NOV 6 | 1 PM CT



HOSPICE



TODAY'S SPEAKERS



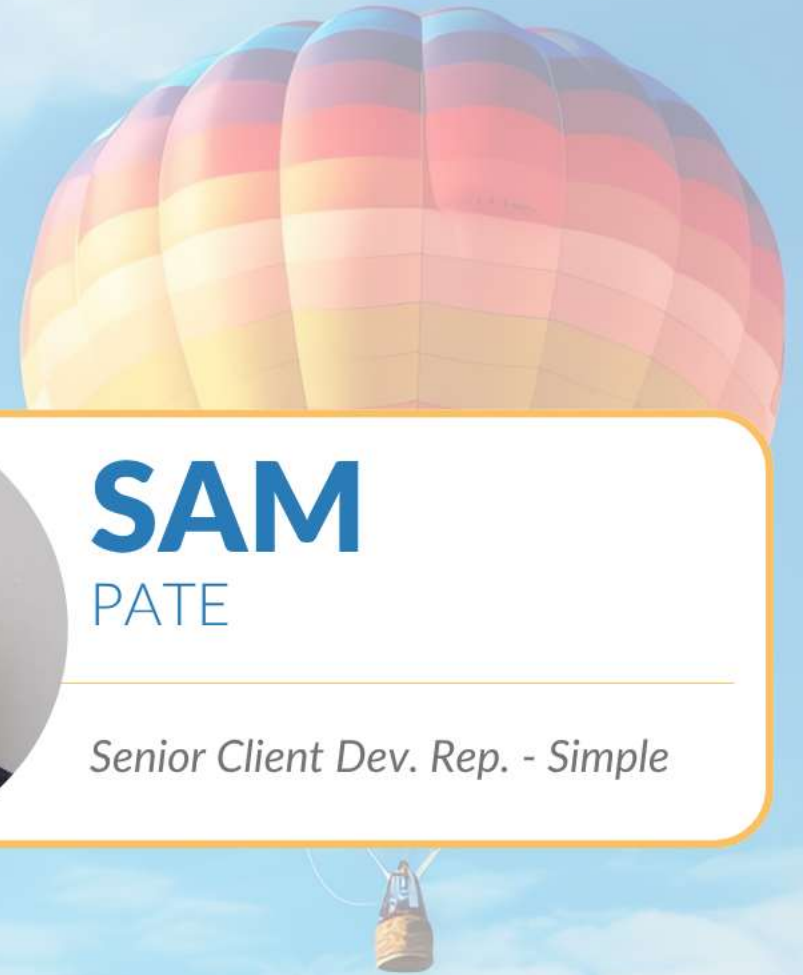
JOSH
MILLER

Director of Client Success - Simple



SAM
PATE

Senior Client Dev. Rep. - Simple



Agenda



- Takeaways from the first month of HOPE
- Common submission risks & tips for success
- Impact of HOPE transition on CMS reports
- New QMs & potential reimbursement changes
- iQIES access & registration

POLL 1

Does your agency experience any issues with HOPE submissions?

- Yes – issues have been resolved
- Yes – issues are still ongoing
- No – everything has been smooth sailing

If you did experience issues with your HOPE submission, what was the primary concern?

- Correcting or exporting HOPE files from EHR/EMR
- Submitting HOPE assessments to CMS
- Verifying submission status or feedback
- Something else



HOPE

**What we learned in
the first 30 days**





115,807: HOPE assessments scrubbed in Simple



16,151: HOPE assessments submitted from Simple

99% acceptance rate | Some issues to mismatch in patient identification (usually just a typo)



40.2%: Scrubbed assessments with a warning or critical error

Errors caught before submission to CMS

Most common HOPE error in Simple

Inconsistent SFV Items

Rule 3108:

If any J2051 symptom impact is marked as Moderate or Severe (2 or 3), then J2052A (SFV) cannot be blank.

This is critical error (causes rejection)

J2052. Symptom Follow-up Visit (SFV) (complete only if any response to J2051 Symptom Impact = 2. Moderate or 3. Severe)														
Enter Code <input type="checkbox"/>	An in-person Symptom Follow-up Visit (SFV) should occur within 2 calendar days as a follow-up for any moderate or severe pain or non-pain symptom identified during Symptom Impact assessment at Admission or HOPE Update Visit (HUV).													
	<p>A. Was an in-person SFV completed?</p> <p>0. No — Skip to J2052C, Reason SFV Not Completed.</p> <p>1. Yes</p> <p>B. Date of In-person SFV — Complete and skip to J2053, SFV Symptom Impact.</p> <table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td colspan="2">Month</td><td colspan="2">Day</td><td colspan="3">Year</td></tr></table>								Month		Day		Year	
Month		Day		Year										

In other words...

- If a patient reports moderate or severe pain, shortness of breath, fatigue, etc → CMS expects the provider to document whether a follow-up visit occurred.
- Leaving J2052A blank triggers error 3108 — essentially: “You said symptoms were moderate or severe, so tell us what you did about it.”

Most common HOPE error in Simple

Inconsistent SFV Items

Why does this matter?

- **Regulatory impact:** This directly feeds into new Hospice QMs that begin public reporting in CY2026. Missing or blank SFV fields will negatively impact compliance and quality scores.
- **Survey readiness:** Consistent documentation shows that hospices are acknowledging and responding to patient needs — a key survey focus area.
- **Data integrity:** Prevents incomplete records being transmitted to iQIES, which could result in rejected submissions or inaccurate quality reporting.

Most common HOPE error in Simple

Inconsistent SFV Items

Why are Simple clients seeing Rule 3108 so often?

- Since the SFV is a separate visit, sometimes that assessment is scrubbed before the SFV is completed or before the SFV data is included on the ADM/HUV.
- Some EHR workflows separate ADM or HUV documentation from SFV documentation since it's a separate visit, which makes the timing confusing.
 - The J2051 responses are entered at admission, while the SFV is documented 1–2 days later.



SFVs are one of the more logistically complicated aspects of HOPE – yet so important for the new QMs. CMS has multiple related validation rules. Extra attention to this area is worth it.

Other HOPE error results

Based on 115,807 assessments scrubbed in Simple



Most Frequent Issues: Symptom Follow-Up Visit (SFV), Payer Information, Invalid Values, Date Formatting, Skin Conditions



Out of top 12 most frequent: 11 Critical, 1 Warning



Key Observations

- **Data Integrity Issues:** Invalid values and date formats are major contributors.
- **Clinical Logic Errors:** SFV and opioid-related inconsistencies suggest workflow or documentation gaps.
- **Demographic Completeness:** Race and ethnicity errors indicate missing required fields.
- **Skin Condition Logic:** Two separate rules for skin conditions show frequent misalignment in new HOPE items.

Expect more change/clarification from CMS

Regulation/guidance can continue evolving after major regulatory updates. Example:

Simple asked CMS to clarify the coding instructions for **A1400 Payer Information**

- **We spotted a potential contradiction between HOPE Guidance Manual and a HOPE Technical Specifications/iQIES error message**
 - **HOPE Guidance Manual v1.01 states** *“If the patient had Part C/Medicare Advantage prior to enrolling in hospice, select the response options for BOTH Part C and traditional fee-for-service Medicare or Medicaid, as applicable.”*
 - However, the **CMS Fatal Edit -3083** in the iQIES HOPE Error Message Reference Guide states: *“If A1400A (Payer: Medicare (FFS) = [1], then A1400B (Payer: Medicare (managed care/Part C/Mcr Advant.) must equal [0].”*



Question will be escalated within CMS after government shutdown is over

For now, follow the CMS technical specs (Simple's scrubber rule will validate by those specs)

- **Leave A1400B unchecked with A1400A is checked**

Navigating HOPE with your EHR

Major regulatory updates are complicated and can impact EHR workflows in a big way – this may be ongoing for your agency

- **File export issues:** Some agencies reported issues with their EHR systems editing or exporting HOPE assessments
- **SFV management:** EHRs handle the documentation and scheduling for SFVs differently – make sure you have the visibility you need for accurate/timely completion



Consider a comprehensive HOPE scrubber to ensure backup for accuracy and easier review for documentation errors/inconsistencies

HOPE

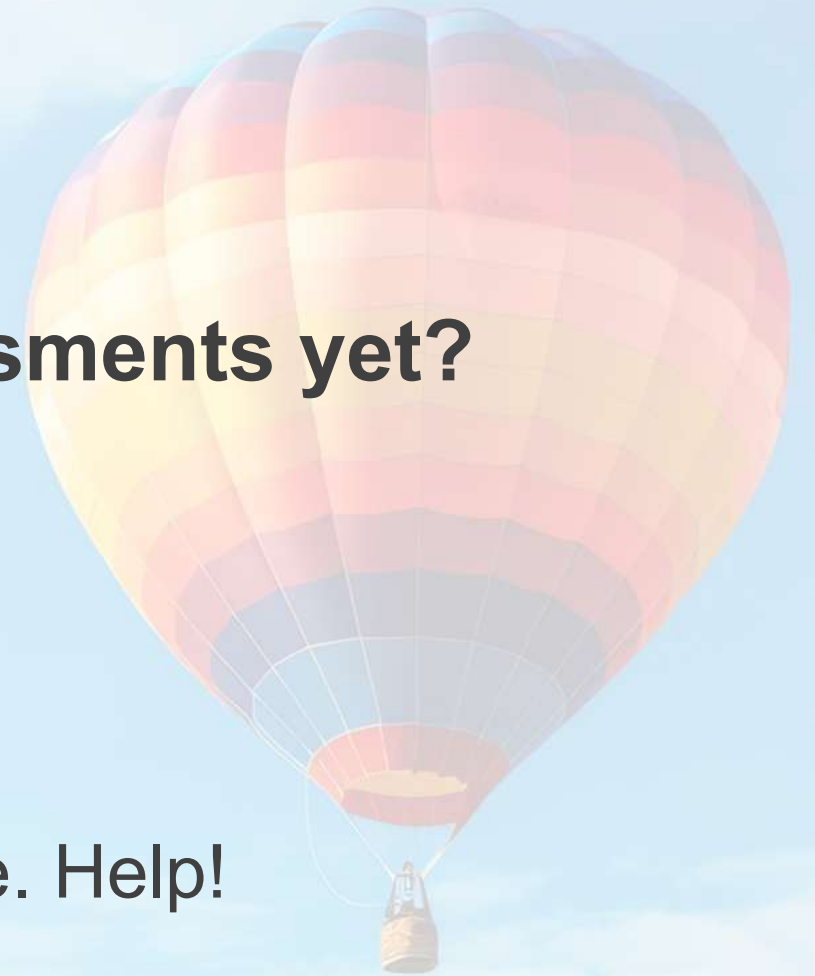
**CMS & iQIES
submission risks**



POLL 2

Have you submitted any HOPE assessments yet?

- Fewer than 10 submissions
- More than 10 submissions
- No, we haven't had a deadline yet
- No, and we missed a submission deadline. Help!



iQIES Submission Risks



*8,500+ providers have used Simple to submit over 80 million assessments to CMS (over 20 million through iQIES since 2023) – **we know these risks well***



Compliance with submission threshold

- Dropping below the 90% on-time submission threshold = 4% payment penalty
- Make sure you track submission deadlines somewhere – iQIES does not show this



Turnover – maintain submission capability & SO access

- Selection of Security Official (SO) is important – Corporate Level vs Agency Level (or both)
- Consider having more than 1 SO (aka PSO)



New Final Validation Report process

- Final Validation reports are now released through iQIES
- So important to review these reports – make sure you are viewing the full detail version

Submission deadlines



- Track of submission deadlines to help avoid close calls/missed submissions
 - 30 days from the corresponding timepoint ***with no errors***
- How aware are you right now of how many assessments are close to late?
Can you find that information quickly?
 - Keeping track of that manually can be a cognitive overload

SimpleConnect™

Automatically track submission deadline for each assessment in the application



✓ No Issues

Z0500B: 10/13/2025
6 day(s) left to transmit.

ARD: 10/11/2025
Reason: (HUV) HUV1

Have a backup plan for submissions



- **What happens if the person who does submissions isn't available?**
 - Leaves the company
 - Goes on leave, vacation or sick day
 - Doesn't have internet or other unexpected issue
- When you are planning your backup options, keep in mind that iQIES login required for submissions – unless you use a submission tool

SimpleConnect™

Unlimited users, easy-to-learn submission process – **no need for an iQIES account**

A screenshot of the SimpleConnect submission interface. It features a 'Batch Search' input field, 'Start Date' (10/05/2025) and 'End Date' (11/05/2025) fields with calendar icons, and two buttons: 'Submit to CMS' (green) and 'Reject Batch' (red). Below these, a 'Batch Review: 44812 2 Assessments' section shows a folder icon, a green checkmark for 'No Issues', and the text 'Pending Approval'.

New Final Validation process



HOPE Final Validation reports are released through iQIES


- Highly manual process to download but visibility is essential

Best practice: check all Final Validation Reports

- Very important during a major regulatory update so that you are on the same page as CMS
- CMS may accept your submission **but still flag other errors on the FV report**
 - *Example: Missing SFV data when an SFV was triggered on that assessment*
- Non-compliance flags can lead to audits even if submissions are being accepted

SimpleConnect™

Automatically pull Final Validation reports without going to iQIES



Batch Review: 44806 1 Assessments
✓ No Issues
Finalized
Uploaded on 10/15/2025 at 1:29 AM

[Review](#) [Final Validation](#)

Download ▼

[Text](#)
[CSV](#)
[PDF](#)
[HTML](#)

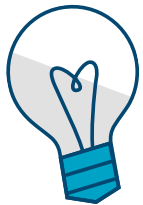
HOPE

**Why does HOPE
accuracy matter?**



Importance of a HOPE scrubber

- Most EHRs check some of the basic CMS validation rules but **do not run a comprehensive check for errors and documentation inconsistencies**
- With potential VBP models coming for hospice – the inconsistencies matter just as much as the fatal errors
 - **Documentation inconsistencies can lead to inaccurate reimbursement**



Especially Symptom Follow-Up Visits (SFVs)

- This is the time to identify gaps in scheduling/completion so that your data is as accurate as possible during CY2026 collection for public ratings

What can happen when assessments aren't accurate?



Rejected submissions (potentially leading to late submissions)



Revenue penalties if under 90% submission compliance

- 4% APU penalty for hospice



Clinical/coding audits | Targeted Probe & Educate (TPE) audits



Inaccurate VBP payment adjustments

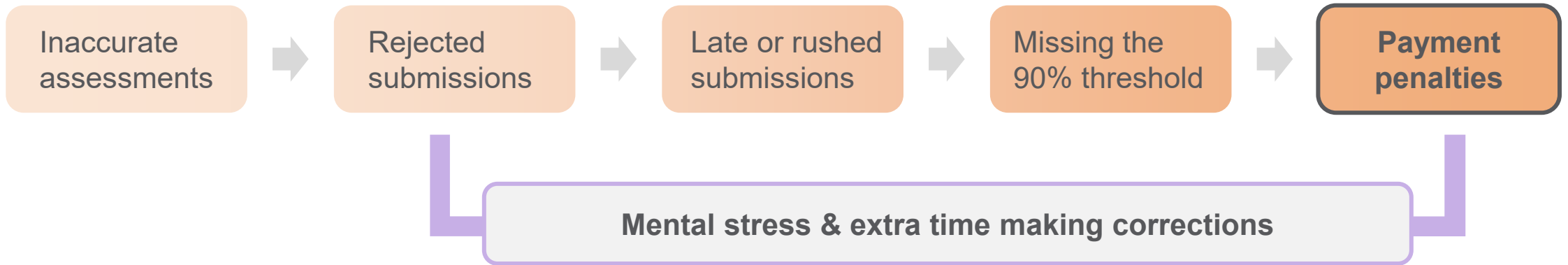
- Is this on the way for hospice???



Negative impact on care planning



Rejected submissions



If you don't have thorough, reliable insights into fatal errors (CMS validation rules) today – consider options for assessment validation/scrubbing before submission



SimpleConnect™ checks each assessment against all CMS validation rules for fatal errors



Revenue penalties

Hospice agencies face an 4% Annual Payment Update (APU) penalty if they fail to meet Quality Reporting Program (QRP) requirement of timely submission and acceptance of assessments | **Submit 90% of required data by 30-day deadline**

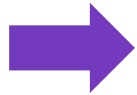
- ⦿ Deadline: 30 days from assessment completion date or timepoint (admission/discharge) date
 - Ex: HOPE ADM due 30 days after admission date, HUV due 30 days after HUV date
 - *OASIS ADM due 30 days after assessment completion date*
 - **Know your assessment types & submit early**
- ⦿ Submissions must be received on time in iQIES **free of errors** (timeliness is determined by receipt date **if the assessment is validated**)
- ⦿ **Agencies should still submit assessments that would be late**



Hospice VBP...?

◎ Is HOPE leading to change in hospice payments?

- Similar to OASIS, HOPE captures more patient-specific, detailed data
- HOPE data will add more insight into current and new QMs – this may eventually be tied to payments



- It's in the name... “HOPE: Hospice **Outcomes** and Patient Evaluation” = greater focus on care quality and patient outcomes → likely tied to reimbursement in a future VBP model

◎ **Start adapting/embracing now** and pay attention to data accuracy so you're ahead of the curve when this anticipated payment update comes

◎ **At the very least, accuracy matters now for QMs & public ratings**



Impact on care planning

- ⦿ Inconsistencies in assessments, inaccurate coding, lack of detail in notes, etc can have a negative impact on care planning

Accurate assessments = better care plans = better care = better outcomes = better ratings
= better reimbursement/revenue

SimpleConnect™

Use scrubber results to catch/fix errors, but also create feedback loop and set goals
Ex: “We are missing this QM criteria, let’s focus there”



HOPE

**New HOPE visits
& CMS reports**



Hospice Outcomes & Patient Evaluation (HOPE)



AS OF OCTOBER 1, 2025...

- HOPE timepoints required for **all patients admitted after 10/1**

Any admissions (HIS) prior to 10/1 must be submitted via QIES

- For existing patients admitted prior to 10/1, the **only HOPE timepoint required is the HOPE-Discharge** – HUVs are **not** required in this case
- All HOPE assessments are submitted through iQIES**

Your CMS reports are moving...



- ◎ ***Per CMS:** Providers *will continue* to access some reports in QIES through February 2026, including the following:
 - Hospice Review and Correct Report, Hospice-Level Quality Measure Report, Hospice Patient-Level Quality Measure Report, Hospice Provider Preview Reports (November 2025 and February 2026 reports), Hospice CAHPs Provider Preview Reports (November 2025 and February 2026 reports), FY2026 Non-compliance Notification Letter
- ◎ CMS plans a phased migration of the QM reports from CASPER into iQIES beginning in February 2026 / some already in iQIES
- ◎ **NOTE:** [PEPPER website is restored](#) but under construction – we're hearing that CMS may be releasing some reports by end of the year

HIS to HOPE Transition Timeline

QIES

HIS submissions & revisions + some reports from QIES

OCT 1



FEB 15, 2026
QIES officially closes

iQIES

HOPE assessments/submissions + some CMS reports

+ all CMS reports

Retrieve CMS reports any time – without logging into QIES or iQIES

The screenshot displays the SimpleConnect Hospice portal interface. On the left, a sidebar lists four reports for 'Grand Aurorian Hospice (Demo)':

- 10/07/2023 08:03 PM: Hospice-Level Quality Measure Report (Done)
- 10/06/2025 04:30 PM: CAHPS for Public Reporting Q3 2022 (Done)
- 10/06/2025 04:30 PM: Hospice Provider Preview Report (Done)
- 10/02/2025 05:04 PM: Hospice Timeliness Compliance Threshold Report (Done)

Below the list is a 'No More Results' message. The main content area shows the 'CAHPS for Public Reporting Q3 2022' report, requested on 10/06/2025 at 04:30 PM. It includes a 'Download' button and a 'PDF' icon.

CAHPS® Hospice Survey: Provider Preview Report

Hospice Name:
CMS Certification Number:
Hospice Facility ID:
State:

This preview report contains both CAHPS Hospice Survey quality measure scores and Star Ratings. Quality measure scores are updated **every quarter**, whereas Star Ratings are updated **every 2 quarters**.

CAHPS Hospice Survey Quality Measure Scores

Reporting Period:	Number of Quarters of Data Included:	Number of Completed Surveys Included:
10/01/2020-09/30/2022	8	63

The following table displays a preview of CAHPS scores for your hospice, based on the reporting period above. These scores represent the proportion of respondents who gave the least, middle, and most favorable responses for each measure, also known as the bottom, middle, and top box scores. State and national scores are also provided for comparison. Please review. If you have questions or concerns about your CAHPS Hospice Survey quality measure scores, please email our technical assistance team at technical@nethsmart.com.

CAHPS Hospice Quality Measure (NQF ID 2631)	Score Type	Response Option	Your Hospice (%)	Your State (%)	U.S. National (%)
Communication with family*	Top	Always	81	80	81
	Middle	Usually	12	13	12
	Bottom	Never, Sometimes	7	7	7
Getting timely help	Top	Always	81	76	77
	Middle	Usually	9	14	13
	Bottom	Never, Sometimes	10	10	10
Treating patient with respect	Top	Always	90	90	90
	Middle	Usually	9	8	8
	Bottom	Never, Sometimes	1	2	2

Navigation: < 1 2 3 >

HOPE Timepoints & Timelines

HOPE Timepoint	Date	Assessment Timeframe	Record Completion Goal	Record Submission Deadline
Admission	Admission Date A0220	Within 5 days of admission	No later than the Admission Date A0220 + 14 days	No later than the Admission Date A0220 + 30 days
HUV 1	HUV1 Date Z0350	On or btw day 6 and 15	No later than the HUV1 Date Z0350 + 14 days	No later than the HUV1 Date Z0350 + 30 days
HUV 2	HUV2 Date Z0350	On or btw day 16 and 30	No later than the HUV2 Date Z0350 + 14 days	No later than the HUV2 Date Z0350 + 30 days
Discharge	Discharge Date A0270	At the time of discharge	No later than DC Date A0270 + 7 days	No later than DC Date A0270 + 30 days

Symptom Follow-up Visit (SFV) can be triggered on ADM, HUV 1 or HUV 2:

- SFV is triggered as a follow-up for any pain or non-pain symptom impact rated as moderate or severe on J2051
- SFV requires: an in-person visit, within 2 calendar days (can be on the same day as ADM or HUV)
- ****SFV is a separate visit from the ADM or HUV – embedded in the assessment – NOT A SEPARATE TIMEPOINT**
- SFVs items may be completed by either an RN or LPN/LVN

Symptom Follow-up Visit (SFV) Timepoint



- Tracking **Symptom Follow-up Visits (SFVs)** is very important
- Have a strong plan/process in place to track and manage...
 - When SFVs are triggered in Admissions or HUVs
 - Timely scheduling & completion of SFVs
 - Submission of the SFV ***embedded in*** the ADM or HUV
- Two new hospice quality measures are tied to timely completion of the SFVs**

Create a process for tracking SFVs using all your resources – EHR, internal communication methods & other tools (& check for documentation inconsistencies)



Use SimpleConnect™ to double-check that SFVs are completed when they are required

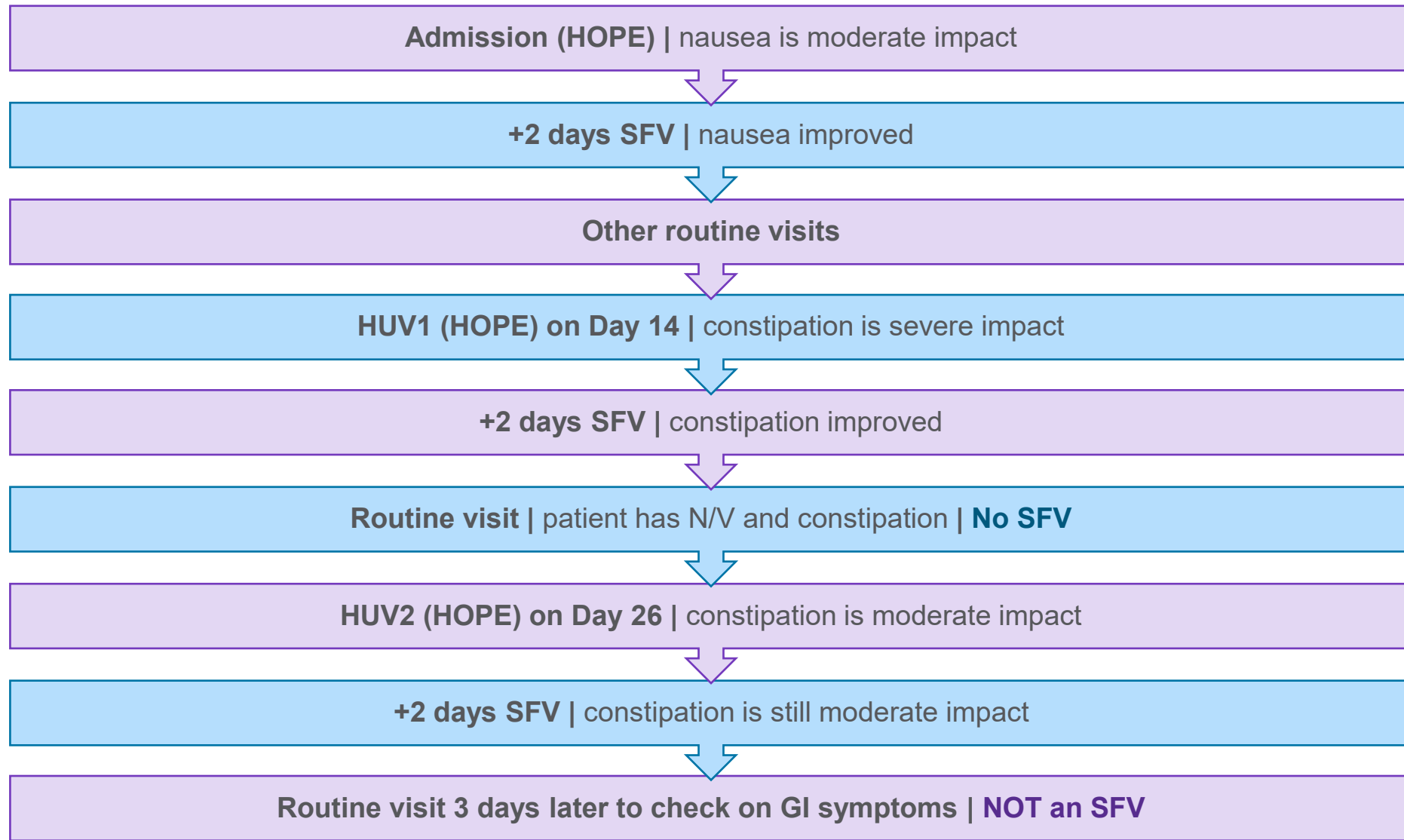
Example HOPE Calendar – Admission, HUVs & SFVs

OCTOBER	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
			1 RN Initial Visit Admission Date A0220 = Day 0	2	3 SFV Completed	4 Admission completed	5
	6 Nurse Visit	7	8	9	10	11	12
	HUV 1 Window (Days 6 through 15)						
	13	14 HUV 1 Visit	15	16	17 Nurse Visit	18	19
	HUV 1 Window (Days 6 through 15)				HUV 2 Window (Days 16 through 30)		
	20	21	22	23 HUV 2 Visit	24 SFV Completed	25 Nurse Visit	26 Nurse Visit
	HUV 2 Window (Days 16 through 30)						
	27 Nurse Visit	Patient Died HOPE DC completed	29	30	31	1	2
	HUV 2 Window (Days 16 through 30)						

Example HOPE Calendar – Admission, HUVs & SFVs

OCTOBER	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
			1 RN Initial Visit Admission Date A0220 = Day 0	2	3 SFV Completed	4 Admission completed	5
	6	7 HUV 1 Visit	8	9	10 Nurse Visit	11	12
	HUV 1 Window (Days 6 through 15)						
	13	14 Nurse Visit	15	16	17 HUV 2 Visit	18 SFV Completed	19
	HUV 1 Window (Days 6 through 15)			HUV 2 Window (Days 16 through 30)			
	20	21 Nurse Visit	22	23	24 Nurse Visit	25	26
	HUV 2 Window (Days 16 through 30)						
	27	28 Nurse Visit	29	30	31 Nurse Visit	1	2 Patient Died HOPE DC completed
	HUV 2 Window (Days 16 through 30)						

Example HOPE Visit Schedule



Example HOPE Calendar – Admission, HUVs & SFVs

OCTOBER	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
			1 RN Initial Visit Admission Date A0220 = Day 0	2	3 SFV Complete Nausea better	4 Admission completed	5
	6	7 Nurse Visit	8	9	10 Nurse Visit	11	12
	HUV 1 Window (Days 6 through 15)						
	13	14	HUV 1 Visit Constipation severe	16	17 SFV Complete Constipation better	18	19
	HUV 1 Window (Days 6 through 15)				HUV 2 Window (Days 16 through 30)		
	20	21 Nurse Visit	22	23	24 Nurse Visit	25	26
	HUV 2 Window (Days 16 through 30)						
	HUV 2 Visit Constipation moderate	SFV Completed Constipation not better	29	30 Nurse Visit	31	1 Nurse Visit	2 Hospice care continues
	HUV 2 Window (Days 16 through 30)						

New hospice Quality Measures (QMs)



Two new hospice QMs are tied to timely completion of the SFVs

Timely Follow-up for Pain Impact: % of assessments with a follow-up visit within 2 days after moderate/severe pain is identified

Timely Follow-up for Non-Pain Symptom Impact: % of assessments with a follow-up visit within 2 days after moderate/severe non-pain symptoms (e.g., SOB, anxiety, nausea) are identified

- **Data Collection:** CMS will collect and analyze data from the four quarters of CY 2026 to determine reporting decisions
- **Reporting Timeline:** Preview reports potentially summer of 2027, public HQRP reporting beginning no sooner than FY 2028 (Nov 2027)
- **HQRP Impact:** Outcome focus, potential ties to value-based models; influences public ratings, reimbursement, and public reporting

New hospice Quality Measures (QMs): Part 2



Why is timely assessment/SFV submission is critical?

Late or missing assessments can:

- Reduce your denominator count
- Lead to suppressed scores
- Impact your public quality profile

Timely and complete submissions ensure:

- Accurate measure calculation
- Inclusion in national/state averages
- Better benchmarking and visibility

Best practices for providers:

- Review HOPE assessments regularly before submission
- Train staff on trigger items (J2051) and follow-up protocols to ensure timely completion
- Monitor submission timelines and data completeness

New hospice Quality Measures (QMs): Part 3




Smooth out the wrinkles in the SFV process now

- 2026 will be a full year of SFV data collection for public reporting

SimpleConnect™

Help ensure that SFVs are completed when they are required & identify inconsistencies in J2051/SFV responses




1

1

(HA) ADM : 10/10/2025
Z0500B: 10/13/2025

Asmt#:
Agency#:

-3105: Inconsistent SFV Items



IF A0250=[1,2,3] AND (J2051A=[2,3] OR J2051B=[2,3] OR J2051C=[2,3] OR J2051D=[2,3] OR J2051E=[2,3] OR J2051F=[2,3] OR J2051G=[2,3] OR J2051H=[2,3]) THEN J2052B (Date of in-person SFV) minus J2050B (Date of symptom impact screening) should be less than or equal to 2 calendar days.

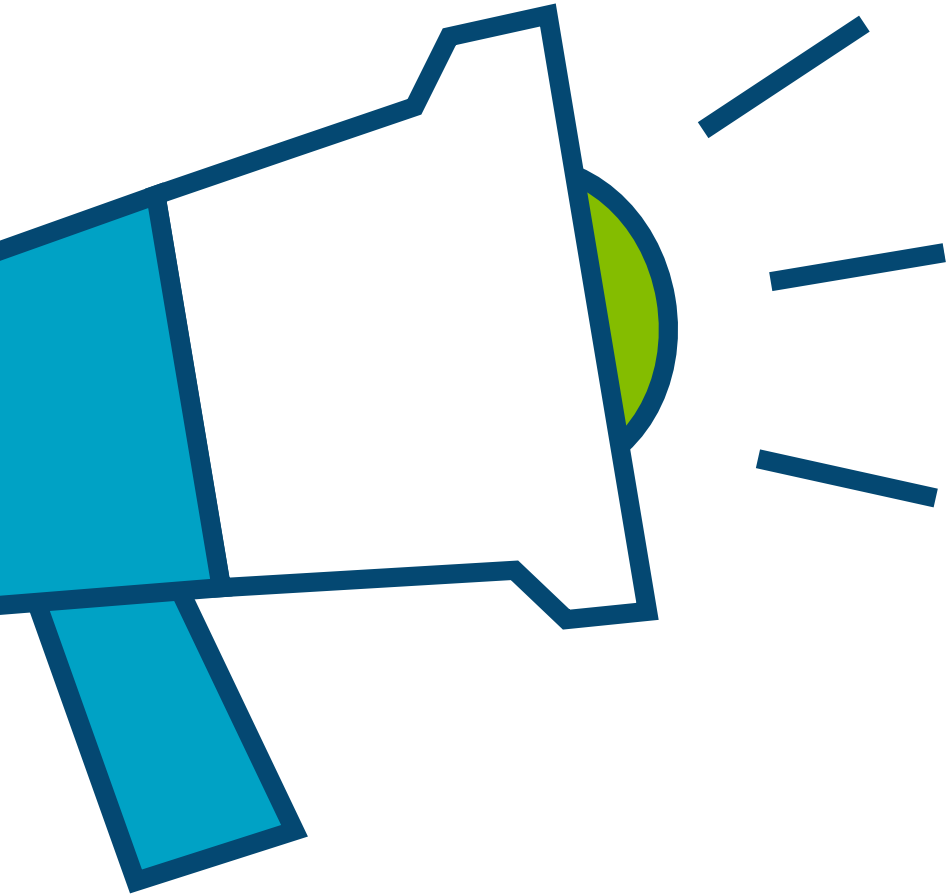
Rule#: 1159

POLL 3

How well do you think your agency is doing in regard to SFVs and public reporting of the new QMs?

- Very confident – we're well prepared
- Somewhat confident – a few areas need work
- Not very confident – still getting organized
- Unsure – we could use some guidance





According to our industry contacts, **as many as 40% of hospices** still had not registered an iQIES account as of Oct. 1

◎ *Make sure you have iQIES access*

HOPE

**iQIES registration
& considerations**



What is iQIES & why does it matter?



What is iQIES (Internet Quality Improvement & Evaluation System)?

- iQIES is an internet-based system that will be used for all submissions and communications to and from CMS
- Including hospice as of 10/1 (QIES remains open for submissions/reports until Feb 2026)

Official CMS iQIES manuals: <https://qtso.cms.gov/software/iqies/reference-manuals>

Every agency/corporation needs at least one Security Official (SO) in iQIES – also known as a Provider Security Official (PSO)

iQIES Registration



***Per CMS:** Please note that failure to have access to iQIES means you cannot submit records and will be non-compliant

- [Instructions for registering a PSO account via CMS QTSO site](#)
- If your agency does not have a PSO yet, or if you are responsible for submitting data or pulling CMS reports... **make sure you have an iQIES login**

SimpleConnect™

Unlimited users, easy-to-learn submission process – **no need for an iQIES account**

The screenshot displays the SimpleConnect submission interface. At the top, there is a 'Batch Search' input field. To its right are 'Start Date' and 'End Date' fields, both set to 10/05/2025 and 11/05/2025 respectively, with calendar icons. Further right are two buttons: a green 'Submit to CMS' button and a red 'Reject Batch' button. Below these fields, a folder icon is shown next to the text 'Batch Review: 44812 2 Assessments'. Underneath this, there is a green checkmark icon followed by 'No Issues' and the text 'Pending Approval'.

iQIES Registration



Create an Account
HCQIS Access Roles and Profile

1 Profile Information 2 Account Information 3 Remote Proofing 4 Confirmation

Profile Information

Enter your profile information for identity proofing. HARP uses Experian to help verify your identity. Already called Experian? Enter Reference Number

Want to retry a previously failed registration attempt? Retry Remote Proofing

All fields marked with an asterisk (*) are required.

Legal First Name *

Middle Name

Email Address *

Personal Phone Number

Home Address Line 1 *

City *

Zip Code *

Social Security Number *

Legal Last Name *

Date of Birth *

Confirm Email Address *

Is your address in the United States? * ☒ Yes ☐ No

Home Address Line 2

State *

Zip Code Extension

Don't want to enter your SSN? Initiate Manual Proofing

By registering for HARP, you agree to the Terms & Conditions

Next →

STEP 1 – (HARP)

- Register for a HARP account:
<https://harp.cms.gov/register>
- Setup MFA (Multi-Factor Authentication)
- Complete the Identity Proofing

NOTE: Requires a time-consuming and complex security verification process

NOTE: May require a business domain email

People have reported issues registering with public email domains like @gmail.com, @yahoo.com

iQIES Registration



iQIES Assessments Reports

Home My Profile Access Request Form

STEP 3
Add Organizations

Add providers for the Provider Security Official role by entering their CCN or Facility ID.

Search By: CCN Search for: [input] [Add]

Select whether to search by CCN or Facility ID

Provider	Provider Type	CCN	Facility ID
----------	---------------	-----	-------------

[Submit Request] [Previous]

STEP 2 – (iQIES)

- Log into iQIES using HARP credentials
- Search by CCN and select Provider names

NOTE: Home Health users may already have HARP – request your hospice CCNs

NOTE: Set reminder to login to HARP/iQIES at least once every 60 days

iQIES Resources & Training from CMS



- ① [Creating a HARP Account Training Videos](#)
- ① [iQIES Reference and Manuals Page](#)
- ① [iQIES Training Videos Page](#)
- ① [iQIES News & Updates Page](#)

CHOW process & iQIES



1. Old Operator > New Operator Communication Plan
2. New Operator Identifies and Requests PSO Access
3. Old Operator approves requests
4. New Operator (PSO) updates/manages access including Third Party Vendors

SimpleConnect™ for Hospice

One simple solution to scrub & submit HOPE files...

No matter which EHR/EMR you use.

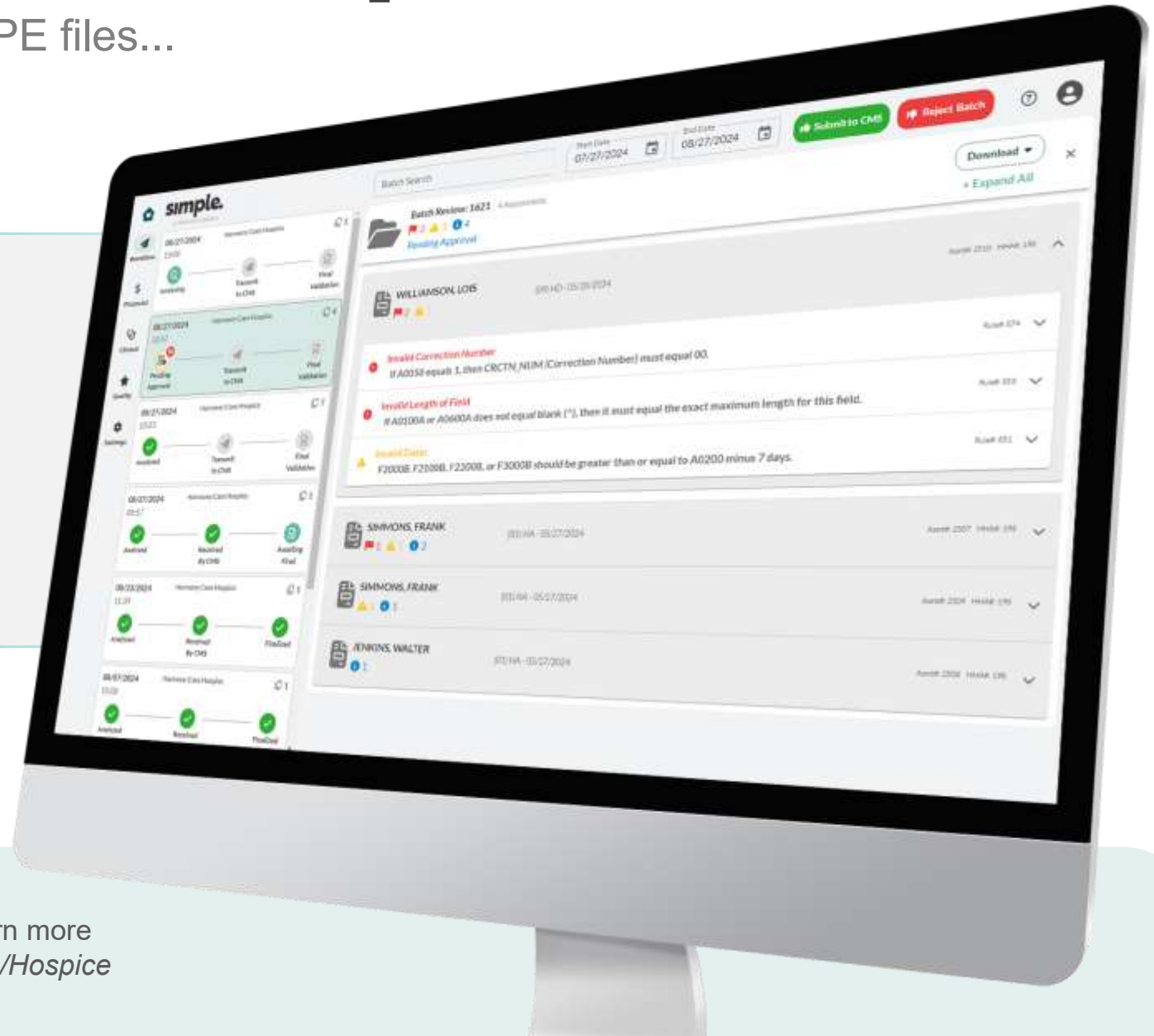
Scrub & submit HOPE files without logging into iQIES

- + Identify fatal errors before submission
- + Catch documentation inconsistencies
- + Automatically retrieve final validations

TRUSTED BY 8,500+ POST-ACUTE PROVIDERS



Scan the code to learn more
or visit Simple.Health/Hospice



QUESTIONS

Recording and slides will be available:
simple.health/blog

