

# Proposed HHCAHPS Survey Overview

## HHCAHPS CHANGES COMING IN Q2 2026

### BACKGROUND

In the CY 2026 Home Health Prospective Payment System (HH PPS) Proposed Rule that was published in July 2025, CMS proposed changes to the HHCAHPS Survey to take effect with April 2026 sample month.

### UPDATED SURVEY QUESTION CROSSWALK

Gray highlights indicate proposed changes.

Current HHCAHPS Survey		Updated HHCAHPS Survey	
Q1	According to our records, you got care from the home health agency, [AGENCY NAME]. Is that right? As you answer the questions in this survey, think only about your experience with this agency.	Q1	According to our records, you got care from the home health agency, [AGENCY NAME]. Is that right? As you answer the questions in this survey, think only about your experience with this agency.
Q2	When you first started getting home health care from this agency, did someone from the agency tell you what care and services you would get?	Q2	<i>N/A (removed from revised survey)</i>
Q3	When you first started getting home health care from this agency, did someone from the agency talk with you about how to set up your home so you can move around safely?	Q2	When you first started getting home health care from this agency, did someone from the agency talk about ways to help make your home safer? For example, they may have suggested adding grab bars in the shower or removing tripping hazards.
Q4	When you started getting home health care from this agency, did someone from the agency talk with you about all the prescription and over-the-counter medicines you were taking?	Q3	Has someone from the agency ever reviewed the prescribed and over-the-counter medicines you were taking? For example, they might have asked you to show them your medicines and talked with you about how and when to take each one.

Q5	When you started getting home health care from this agency, did someone from the agency ask to see all the prescription and over-the-counter medicines you were taking?		N/A (removed from revised survey)
Q6	In the last 2 months of care, was one of your home health providers from this agency a nurse?	Q6	In the last 2 months of care, was one of your home health providers from this agency a nurse?
Q7	In the last 2 months of care, was one of your home health providers from this agency a physical, occupational, or speech therapist?	Q7	In the last 2 months of care, was one of your home health providers from this agency a physical, occupational, or speech therapist?
Q8	In the last 2 months of care, was one of your home health providers from this agency a home health or personal care aide?	Q8	In the last 2 months of care, was one of your home health providers from this agency a home health or personal care aide?
Q9	In the last 2 months of care, how often did home health providers from this agency seem informed and up-to-date about all the care or treatment you got at home?	Q6	In the last 2 months of care, how often did home health staff from this agency seem to be aware of all the care or treatment you were getting at home?
Q10	In the last 2 months of care, did you and a home health provider from this agency talk about pain?		N/A (removed from revised survey)
Q11	In the last 2 months of care, did you take any new prescription medicine or change any of the medicines you were taking?	Q11	In the last 2 months of care, did you take any new prescription medicine or change any of the medicines you were taking?
Q12	In the last 2 months of care, did home health providers from this agency talk with you about the purpose for taking your new or changed prescription medicines?		N/A (removed from revised survey)
Q13	In the last 2 months of care, did home health providers from this agency talk with you about when to take these medicines?		N/A (removed from revised survey)
Q14	In the last 2 months of care, did home health providers from this agency talk with you about the side effects of these medicines?	Q4	In the last 2 months of care, did home health staff from this agency talk with you about any side effects of your medicines?
Q15	In the last 2 months of care, how often did home health providers from this agency keep you informed about when they would arrive at your home?	Q5	In the last 2 months of care, how often did home health staff from this agency keep you informed about when they would arrive at your home?

Q16	In the last 2 months of care, how often did home health providers from this agency treat you as gently as possible?	Q7	In the last 2 months of care, how often did home health staff from this agency treat you with care – for example, when moving you around or changing a bandage?
Q17	In the last 2 months of care, how often did home health providers from this agency explain things in a way that was easy to understand?	Q8	In the last 2 months of care, how often did home health staff from this agency explain things in a way that was easy to understand?
Q18	In the last 2 months of care, how often did home health providers from this agency listen carefully to you?	Q9	In the last 2 months of care, how often did home health staff from this agency listen carefully to you?
Q19	In the last 2 months of care, how often did home health providers from this agency treat you with courtesy and respect?	Q10	In the last 2 months of care, how often did home health staff from this agency treat you with courtesy and respect?
	<i>N/A (not on current survey)</i>	Q11	In the last 2 months of care, how often did you feel that home health staff from the agency cared about you as a person?
	<i>N/A (not on current survey)</i>	Q12	In the last 2 months of care, did home health staff from this agency provide your family or friends with information or instructions about your care as much as you wanted?
	<i>N/A (not on current survey)</i>	Q13	In the last 2 months of care, how often have the services you received from this agency helped you take care of your health?
Q20	We want to know your rating of your care from this agency's home health providers. Using any number from 0 to 10, where 0 is the worst home health care possible and 10 is the best home health care possible, what number would you use to rate your care from this agency's home health providers?	Q14	We want to know your rating of your care from this agency's home health staff. Using any number from 0 to 10, where 0 is the worst home health care possible and 10 is the best home health care possible, what number would you use to rate your care from this agency's home health staff?
Q21	In the last 2 months of care, did you contact this agency's office to get help or advice?	Q18	In the last 2 months of care, did you contact this agency's office to get help or advice?
Q22	In the last 2 months of care, when you contacted this agency's office did you get the help or advice you needed?	Q16	When you contacted this agency's office, did you get the help or advice you needed?
Q23	When you contacted this agency's office, how long did it take for you to get the help or advice you needed?		<i>N/A (removed from revised survey)</i>

Q24	In the last 2 months of care, did you have any problems with the care you got through this agency?		N/A (removed from revised survey)
Q25	Would you recommend this agency to your family or friends if they needed home health care?	Q17	Would you recommend this agency to your family or friends if they needed home health care?
Q26	In general, how would you rate your overall health?	Q22	In general, how would you rate your overall health?
Q27	In general, how would you rate your overall mental or emotional health?	Q23	In general, how would you rate your overall mental or emotional health?
Q28	Do you live alone?	Q28	Do you live alone?
Q29	What is the highest grade or level of school that you have completed?	Q29	What is the highest grade or level of school that you have completed?
Q30	Are you Hispanic or Latino/Latina?	Q30	Are you Hispanic or Latino/Latina?
Q31	What is your race? Please select one or more.	Q26	What is your race? Please select one or more.
Q32	What language do you mainly speak at home?	Q32	What language do you mainly speak at home?
Q33	Did someone help you complete this survey?	Q33	Did someone help you complete this survey?
Q34	How did that person help you? Check all that apply.	Q34	How did that person help you? Check all that apply.