

Self-Determined Hospice Cap (SDHC) Report

Hospices are required to file a self-determined cap no earlier than 3 months after, and no later than 5 months after the end of the hospice cap year, October 31. The earliest a hospice may file its self-determined cap is January 31, and the latest is March 31 of each year.

Each Medicare Administrative Contractor (MAC) has specific instructions on the completion of the cap report. Ensure that your hospice is completing the cap report and filing it with the appropriate MAC **by the February 28/29 deadline.**

- **Provider Statistical and Reimbursement (PS&R):** Hospices should obtain their Provider Statistical and Reimbursement (PS&R) summary and Hospice Cap reports from the [CMS Website](#). Each MAC has specific instructions on how to gather the necessary data to fill out the cap report, and where to file it. See the links below.
- **MAC Choices:** Choose your MAC for Self-Determined Hospice Cap Instructions and Submission Requirements
 - CGS: [Hospice Cap](#)
 - NGS: [Hospice Cap](#)
 - Palmetto: [Hospice Cap](#)
- **Change in Cap Year:** Beginning in FY2017, the cap year for both the inpatient cap and the aggregate cap will be aligned with the federal fiscal year of October 1, 2016 to September 30, 2017. 2017 is considered the transition year so the table below outlines the timeframes for this year.
- **Aggregate Cap Amount:** The IMPACT Act of 2014 changed the cap calculation formula for each year that ends after September 30, 2016 and before October 1, 2025. The cap will be annually adjusted using the same hospice payment update percentage that is applied to the rates.

Change in Cap Year: In the FY2017 Hospice Wage Index Final Rule, CMS announced a change in the cap year, to align it with the federal fiscal year.