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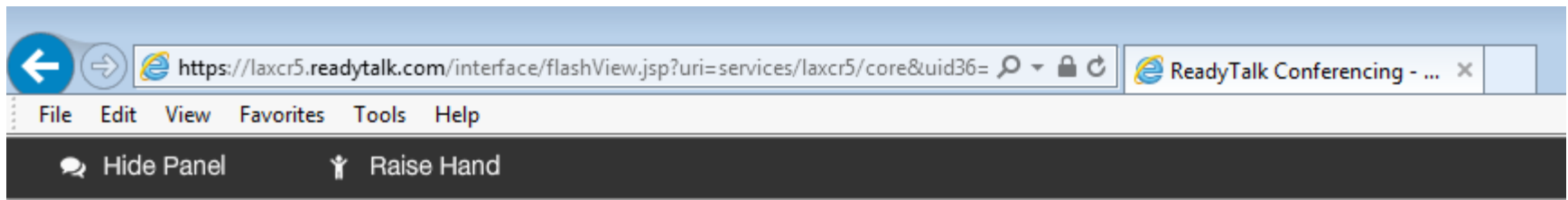
Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stop?

- Click Refresh icon –
or-
Click F5



F5 Key
Top Row of Keyboard



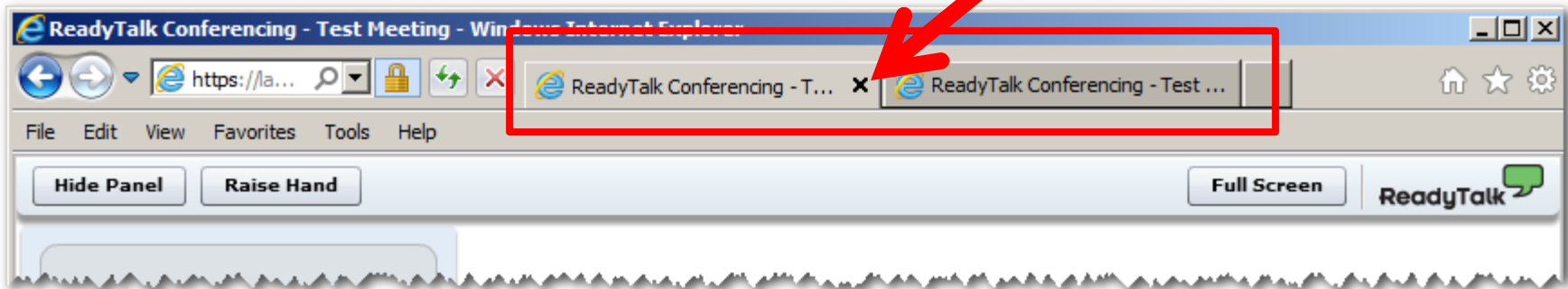
Location of Buttons



Refresh

Troubleshooting Echo

- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.
- Close all but one browser/tab and the echo will clear up.



Example of Two Browsers Tabs open in Same Event

Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



A screenshot of a web interface for a CMS event. The interface is split into two main sections. The left section is a vertical chat window with a white background and a blue border. At the top of the chat window are buttons for "Hide Chat" and "Raise Hand". At the bottom of the chat window is a text input field labeled "Type questions here." and a "Send" button. The right section has a grey background. At the top right of this section are buttons for "Full Screen" and "Reopen". In the center of the right section is the CMS logo (Centers for Medicare & Medicaid Services) and the text "Welcome to Today's Event". Below this, separated by a horizontal line, is the text "Thank you for joining us today! Our event will start shortly." in a smaller, italicized font.



HCAHPS

Overview, Updates, and Hospital Value-Based Purchasing

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Purpose

This event will provide an overview of the HCAHPS Survey, including:

- Background of HCAHPS
- Trends of HCAHPS Measures
- HCAHPS and Hospital Value-Based Purchasing (VBP)
- HCAHPS new Care Transition Measure (CTM)
- Removal of the Pain Management dimension
- HCAHPS correlations

Objectives

At the conclusion of this presentation, participants will be able to:

- Recall the background of the HCAHPS Survey
- Identify how hospitals will be evaluated using the HCAHPS Survey in the Hospital VBP Program
- Recognize the implications of the new Care Transition Measure and the removal of the Pain Management dimension

Name of the Survey

- Official name:
CAHPS[®] Hospital Survey
- Also known as:
Hospital CAHPS[®] or HCAHPS
- Pronounced “*H-caps*”

CAHPS[®] is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ), a U.S. Government agency.

Method of HCAHPS

- Ask patients (survey)
- Collect in standardized, consistent manner
- Analyze and adjust data
- Publicly report hospital results
- Use to improve hospital quality of care

HCAHPS 101

- Participating hospitals
- Short-term, acute care hospitals
 - General hospitals (AHA)
 - IPPS and Critical Access Hospitals
 - IPPS hospitals penalized if don't participate
 - PPS-Exempt Cancer Hospitals can voluntarily participate
 - Excludes pediatric, psychiatric, and specialty hospitals

HCAHPS 101 (cont'd)

Eligible Patients:

- Adult (18+)
- Medical, surgical, or maternity care
- Overnight stay or longer
- Alive at discharge
- **Excludes** hospice discharge, prisoner, foreign address, “no-publicity” patients, patients excluded due to state regulations, and patients discharged to nursing homes, SNF swing bed within hospital, and skilled nursing facilities
 - HCAHPS encompasses ~80-85% of inpatients

How the Survey Is Administered

Participating hospitals, fourth quarter 2015
(4,417):

- Mail: 2,632 hospitals; 60%
- Telephone: 1,772 hospitals; 40%
- Mixed mode: 6 hospitals; 0.1%
- IVR: 7 hospitals; 0.2%

Who Administers the Survey

Fourth quarter 2015:

- 36 approved **survey vendors**
 - 99.77% of surveys
- 61 **self-administering** hospitals
 - 0.14% of surveys
- 1 multi-site hospital
 - 0.09% of surveys

HCAHPS Never Rests

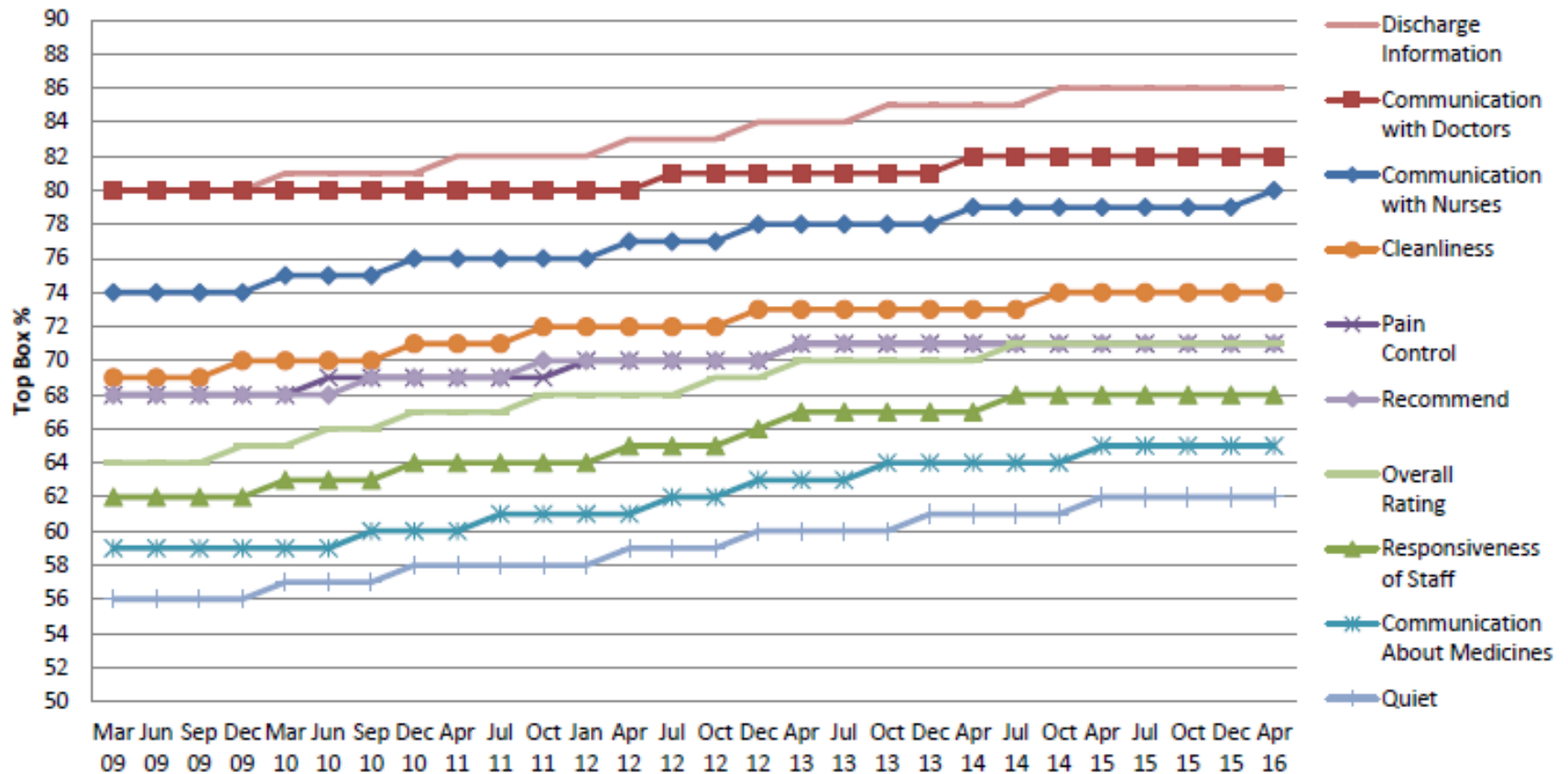
- October 2016 publicly reported scores are based on more than **3.1 million completed surveys** from patients at **4,281 hospitals**
- **Every day** more than **8,500** patients **complete** the HCAHPS Survey

Using HCAHPS Scores for Intra-Hospital Comparisons

- HCAHPS was designed and intended for inter-hospital (hospital-to-hospital) comparisons
 - Identified by CMS Certification Number (CCN)
- CMS does **not** review or endorse the use of HCAHPS scores for **intra-hospital** comparisons
 - Such as comparing a ward, floor, or individual staff members
 - Such comparisons are unreliable unless large sample sizes are collected at the ward, floor, or individual level
 - HCAHPS questions do not specify individual doctors/nurses

Trends of HCAHPS Measures

HCAHPS Top-Box Scores, 2009 to 2016



HCAHPS and Hospital Value-Based Purchasing (VBP)

Introduction to Hospital VBP

- Hospital VBP links a portion of CMS payment to hospitals to their performance on a set of quality measures
 - Inpatient Prospective Payment System (IPPS) subsection (d) hospitals only
 - Some types of hospitals are excluded
 - Established by the *Patient Protection and Affordable Care Act of 2010* (Public Law 111-148), Section 3001(a)
 - Affects payment for patients discharged October 1, 2012 (FY 2013) and forward

Purpose of Hospital VBP

- Encourages hospitals to improve the safety and quality of care inpatients receive during acute-care stays
- By reengineering hospital processes that improve the patient's experience of care
- Thus, hospitals are paid for their quality of care, not just quantity of services

Value-Based Incentive Payment Percentage by Program Fiscal Year

Fiscal Year	Percent Reduction
2013	1.0
2014	1.25
2015	1.5
2016	1.75
2017*	2.0

*Subsequent fiscal years after FY 2017 will utilize a 2.0 percent reduction.

Hospital VBP Scoring FY 2017

Hospital VBP Total Performance Score (TPS)

- Four Hospital VBP domains for FY 2017:
 - Clinical Care
 - Clinical Care – Process: 5%
 - Clinical Care – Outcomes: 25%
 - Safety: 20%
 - Efficiency and Cost Reduction: 25%
 - **Patient and Caregiver Centered Experience of Care/Care Coordination (HCAHPS): 25%**
- HCAHPS data from Hospital IQR used in Hospital VBP
 - No additional data collection or submission is required
 - In FY 2017 Hospital VBP, 3,082 IPPS hospitals had HCAHPS scores

Hospital VBP Scoring FY 2018

Hospital VBP Total Performance Score (TPS)

- Four Hospital VBP domains for FY 2018:
 - Clinical Care: 25%
 - Safety: 25%
 - Efficiency and Cost Reduction: 25%
 - **Patient and Caregiver Centered Experience of Care/Care Coordination (HCAHPS): 25%**
- HCAHPS data from Hospital IQR used in Hospital VBP
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Patient Experience Domain Score

The Patient Experience domain score is the sum of:

- **HCAHPS Base Score** (0 – 80 points)
+ *PLUS* +
- **HCAHPS Consistency Points** (0 – 20 points)

The Patient and Caregiver Centered Experience of Care/Care Coordination (Patient Experience) domain score:

- 0 to 100 points
- Comprises 25% of Hospital VBP Total Performance Score in FY 2017 & FY 2018

HCAHPS and Hospital VBP Scoring FY 2013 – FY 2017

- **Eight HCAHPS dimensions** in Hospital VBP
 - Communication with **Nurses**
 - Communication with **Doctors**
 - Staff **Responsiveness**
 - **Pain** Management
 - Communication about **Medicines**
 - **Discharge** Information
 - **Cleanliness & Quietness** of Hospital Environment (combined)
 - **Overall** Rating of Hospital
- **Percent of patients who chose the top-box response**
- Same measures as reported on *Hospital Compare*, except
 - Cleanliness and Quietness are combined
 - Recommend the Hospital is not used

HCAHPS Changes for Hospital VBP FY 2018

For **FY 2018**:

- **Care Transition Measure** dimension **added** to Hospital VBP
- **Pain Management** dimension **removed** from Hospital VBP
- There will continue to be eight dimensions in the Patient Experience domain
- Each of the eight HCAHPS dimensions accounts for one-eighth of the Patient Experience domain

Care Transition Dimension Added to Hospital VBP in FY 2018

Care Transition Measure (CTM)

Added to the HCAHPS Survey in 2013

- Publicly reported on *Hospital Compare* since 2014

Pain Management Dimension Removed from Hospital VBP in FY 2018

- Pain Management dimension will be removed from Hospital VBP in FY 2018
 - OPPS Final Rule, November 2016
 - In response to concerns that this dimension creates pressure to over-prescribe opioids
 - Pain Management questions will remain on the HCAHPS Survey
 - Pain Management will still be reported on *Hospital Compare*

HCAHPS and Hospital VBP Scoring FY 2018

- **Eight HCAHPS dimensions** in Hospital VBP:
 - Communication with **Nurses**
 - Communication with **Doctors**
 - Staff **Responsiveness**
 - **Care Transition Measure**
 - Communication about **Medicines**
 - **Discharge** Information
 - **Cleanliness & Quietness** of Hospital Environment (combined)
 - **Overall** Rating of Hospital
- **Percent of patients who chose the top-box response**
- **Care Transition Measure** dimension **added**
- **Pain Management** dimension **removed**

Hospital VBP Time Periods FY 2018

Two time periods in Hospital VBP:

- FY 2018 **Baseline** Period:
 - January – December 2014
- FY 2018 **Performance** Period:
 - January – December 2016
- IPPS hospitals must have at least 100 completed HCAHPS Surveys in the Performance Period to be included in Hospital VBP

Key Differences

Hospital IQR vs. Hospital VBP

Hospital IQR	Hospital VBP
<ul style="list-style-type: none"> • Current HCAHPS Performance 	<ul style="list-style-type: none"> • HCAHPS Achievement, Improvement, and Consistency
<ul style="list-style-type: none"> • Eleven HCAHPS measures are publicly reported <ul style="list-style-type: none"> • Including Pain Management and Care Transition Measure 	<ul style="list-style-type: none"> • Eight HCAHPS dimensions <ul style="list-style-type: none"> • “Cleanliness” and “Quietness” combined • No “Recommend” • CTM added in FY 2018 • Pain Management removed in FY 2018
<ul style="list-style-type: none"> • IPPS and non-IPPS hospitals participate (~4,200) 	<ul style="list-style-type: none"> • Only IPPS hospitals participate (~3,100)
	<ul style="list-style-type: none"> • Minimum of 100 completed surveys in Performance Period

Note on Patient Experience Domain Score Calculation

The Hospital VBP *Percentage Payment Summary Report* (PPSR) contains **rounded** scores for the HCAHPS Baseline Period and Performance Period rates (xx.xx)

However, CMS uses **unrounded** rates (xx.xxxxxx....) when calculating the Achievement and Improvement points

If a hospital recalculates its scores, Achievement or Improvement points for a dimension may be off by one point (+/-) on rare and random occasions

The PPSR notes, “Calculated values were subject to rounding.”

HCAHPS Hospital VBP Summary

- Hospital VBP links hospital payment to Patient Experience of Care (HCAHPS)
- HCAHPS has been part of Hospital VBP since VBP began (2012)
- No additional HCAHPS data collection is necessary for Hospital VBP
- Only IPPS hospitals with 100+ completed HCAHPS Surveys receive a Patient Experience domain score

Information on HCAHPS and Hospital VBP

- Available at CMS website
 - <http://www.cms.gov/Hospital-Value-Based-Purchasing/>
- Hospital VBP slide set can be found at:
 - http://www.cms.gov/Hospital-Value-Based-Purchasing/Downloads/HospVBP_ODF_072711.pdf
 - Summary of the Patient Experience of Care domain (HCAHPS) and its score calculation is on slides 35–61
- *QualityNet* website, Hospital VBP pages
 - <https://www.qualitynet.org/dcs/ContentServer?c=Page&pageName=QnetPublic%2FPage%2FQnetTier2&cid=1228772039937>

HCAHPS and the Care Transition Measure

Importance of Measuring Care Transitions

- Poorly managed transitions can result in post-discharge complications and avoidable readmissions
- Several root causes of poorly managed transitions have been identified, including poor communication between patient and hospital staff
- Coleman's model for improving transitions after a hospital stay is widely used and has been rigorously tested

Care Transition Measure

- Adapted from the Care Transitions Program[®] three-question Care Transitions Measure[®] (CTM)
- CTM endorsed by NQF

Care Transition Measure Questions

23. **During this hospital stay, staff took my preferences and those of my family or caregiver into account in deciding what my health care needs would be when I left.**
- 1 Strongly disagree
 - 2 Disagree
 - 3 Agree
 - 4 Strongly agree
24. **When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.**
- 1 Strongly disagree
 - 2 Disagree
 - 3 Agree
 - 4 Strongly agree
25. **When I left the hospital, I clearly understood the purpose for taking each of my medications.**
- 1 Strongly disagree
 - 2 Disagree
 - 3 Agree
 - 4 Strongly agree
 - 5 I was not given any medication when I left the hospital

Implications for Policy

- Transitions in care is a critical aspect of hospital care
- Data indicates there is room for quality improvement in this area
 - Current national top-box score: 52%
- Collection and public reporting of CTM will aid quality improvement efforts

HCAHPS and the Pain Management Measure

CMS Developing New Survey Questions for Pain Management

- CMS is developing new questions about pain management
 - Field tests, empirical analysis, focus groups, mode experiment, and cognitive interviews with hospital staff and administrators
- Rule-writing process will be employed to replace current pain management survey questions with new ones

Current Pain Management Questions

The current Pain Management items on the HCAHPS Survey:

12. During this hospital stay, did you need medicine for pain?

1 Yes

2 No → If No, Go to Question 15

13. During this hospital stay, how often was your pain well controlled?

1 Never

2 Sometimes

3 Usually

4 Always

14. During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?

1 Never

2 Sometimes

3 Usually

4 Always

Other HCAHPS Changes on *Hospital Compare*

- 25 or more completed surveys are required for HCAHPS scores to be reported on *Hospital Compare*
 - Beginning December 2016

Correlations of Overall Rating, Recommendation, and Other HCAHPS Measures

HCAHPS Correlations

	Communication with Nurses	Communication with Doctors	Responsiveness of Hosp. Staff	Pain Management	Comm. About Medicines	Cleanliness of Hospital Env.	Quietness of Hospital Env.	Discharge Information	Care Transition	Overall Hospital Rating	Recommend the Hospital
Communication with Nurses	1	0.52	0.56	0.56	0.50	0.38	0.32	0.27	0.44	0.64	0.57
Communication with Doctors		1	0.37	0.44	0.43	0.26	0.26	0.28	0.40	0.50	0.46
Responsiveness of Hosp. Staff			1	0.48	0.41	0.34	0.31	0.20	0.35	0.51	0.45
Pain Management				1	0.44	0.31	0.30	0.25	0.39	0.54	0.48
Comm. About Medicines					1	0.33	0.29	0.35	0.45	0.48	0.42
Cleanliness of Hospital Env.						1	0.27	0.18	0.27	0.41	0.36
Quietness of Hospital Env.							1	0.13	0.25	0.35	0.29
Discharge Information								1	0.31	0.30	0.27
Care Transition									1	0.48	0.45
Overall Hospital Rating										1	0.76
Recommend the Hospital											1

*Patient-level Pearson correlations of rescaled linear means of HCAHPS measures, for patients discharged between July 2014 and June 2015 (3.2 million completed surveys)

HCAHPS Correlations: Footnotes

- *Patient-level Pearson correlations of rescaled linear means of HCAHPS measures, for patients discharged between July 2014 and June 2015 (3.2 million completed surveys)
- Note: All correlations are significant at $p < 0.001$
- End of HCAHPS content

Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
 - It is your responsibility to submit this form to your accrediting body for credit.

CE Credit Process

- Complete the ReadyTalk[®] survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “Done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
 - This is a separate registration from ReadyTalk[®].
 - Please use your PERSONAL email so you can receive your certificate.
 - Healthcare facilities have firewalls up that block our certificates.

CE Certificate Problems?

- If you do not immediately receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that is sent out.
- Please go back to the **New User** link and register your personal email account.
 - Personal emails do not have firewalls.

CE Credit Process: Survey

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by [SurveyMonkey](#)
Check out our [sample surveys](#) and create your own now!

CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Existing User Link:

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

CE Credit Process: New User

The screenshot shows a web browser window displaying the registration page for a CE credit course. The page header includes the HSAG logo (Health Services Advisory Group) on the left and a security notice on the right: "this is a secure site please provide credentials to continue" with a lock icon. Below the header, the course title "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015" is displayed. The registration form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". A "Register" button is located below the "Email:" field. The page is framed by a blue border.

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site
please provide credentials to continue

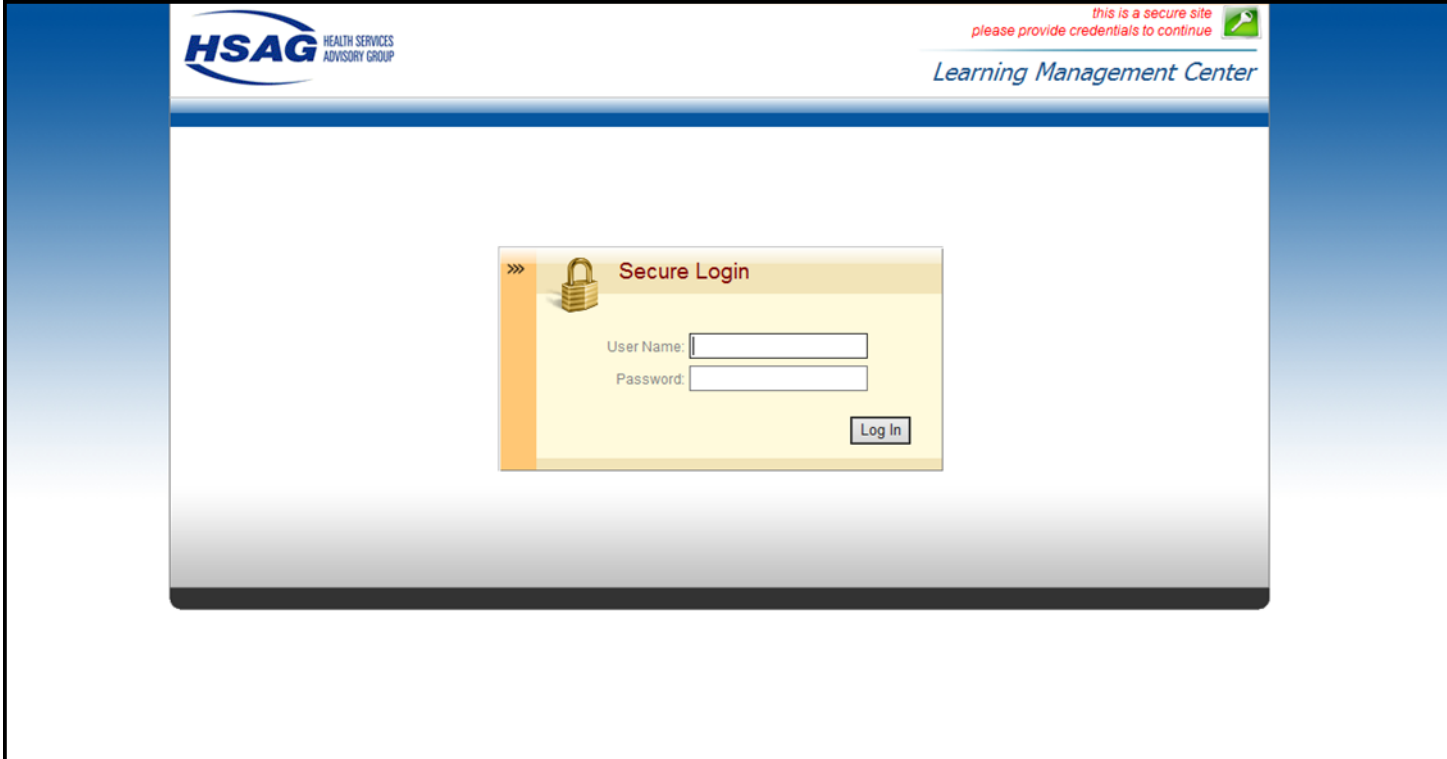
Learning Management Center

Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015

First Name: Last Name:

Email: Phone:

CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a red security warning reads "this is a secure site please provide credentials to continue" next to a small icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box with a yellow background and a lock icon. It contains two input fields: "User Name:" and "Password:". A "Log In" button is positioned at the bottom right of the login box.

QUESTIONS?
