



Cancer Hospital Workgroup



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*August 28, 2014
2:00 – 3:00 PM ET*

Agenda

- Roll Call
- PCHQR Program Updates
- HCAHPS Updates

PPS-Exempt Cancer Hospital Quality Reporting Program

- Support Contractor – FMQAI/HSAG
 - Phone: 844-472-4477
 - E-mail: <https://cms-ip.custhelp.com/>
- Upcoming Data Deadlines



Hospital Consumer Assessment of Healthcare Providers and Systems Survey (HCAHPS) – PCHQR Update

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HCAHPS – Topics

- HCAHPS Program Background and Purpose
- HCAHPS Survey – Sampling and Administration
- PCH Data Submission Timeline
- HCAHPS Resources

Note: This presentation is an overview of the HCAHPS Survey. Complete details are available at the HCAHPS website at www.hcahpsonline.org.

HCAHPS – PCHQR Program: Data Submission Schedule

Program Year FY2016

Reporting Period (Calendar Year)	CMS Submission Deadlines
Q2 2014 Discharges (April 1, 2014 – June 30, 2014)	October 1, 2014
Q3 2014 Discharges (July 1, 2014 – September 30, 2014)	January 7, 2015
Q4 2014 Discharges (October 1, 2014 – December 31, 2014)	April 1, 2015

HCAHPS – Background

- CMS and the Agency for Healthcare Research and Quality (AHRQ) developed HCAHPS
 - National implementation: 2006
 - First public reporting of HCAHPS scores: 2008
 - Used in Value-Based Purchasing for IPPS hospitals: 2012
- HCAHPS goal – provide standardized survey instrument and data collection methodology for measuring patients’ perspectives on hospital care

Three Objectives of HCAHPS

- Standardization permits meaningful comparisons across hospitals for public reporting
- Increased hospital accountability and incentives for quality improvement
- Enhanced public accountability

The 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 Survey – Composition

- HCAHPS contains **32 items**:
- **Items 1 – 25**: Core of HCAHPS (25 questions)
 - Beginning of survey – do not alter questions; keep questions together
 - 21 substantive questions
 - 4 “screeener” items
- **Items 26 – 32**: “About You” (7 questions)
 - Place later; keep together; do not alter

Example of HCAHPS Survey Items: “Your care from nurses”

1. **During this hospital stay, how often did nurses treat you with courtesy and respect?**
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

2. **During this hospital stay, how often did nurses listen carefully to you?**
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

3. **During this hospital stay, how often did nurses explain things in a way you could understand?**
 - 1 Never
 - 2 Sometimes
 - 3 Usually
 - 4 Always

HCAHPS Content: Seven Composites

1. Communication with **nurses**
2. Communication with **doctors**
3. **Responsiveness** of hospital staff
4. **Pain** Management
5. Communication about **medicines**
6. **Discharge** information
7. **Care transition**

HCAHPS Content: Two Individual Items

What patients/consumers want to know:

1. Cleanliness of hospital environment
2. Quietness of hospital environment

HCAHPS Content: Two Global Items

1. *“Overall rating of hospital”*
 - 0 to 10 scale
2. *“Recommend this hospital”*
 - 4 point scale

HCAHPS Content: “About You” Items

The HCAHPS Survey also includes 7 demographic items (“About You”) that are used for:

- Patient-mix adjustment
- Analytical purposes
- Congressional reports

PCHQR Program: Points to Remember

HCAHPS: For PPS-Exempt Cancer Hospitals

- State/National Benchmarks **do not apply**
- HCAHPS scores for PPS-Exempt Cancer Hospitals are not currently publicly reported on Hospital Compare

Hospital Roles and Responsibilities

- Comply with all HCAHPS Survey protocols
- Provide patient discharge list and administrative data in timely manner
 - To permit sampling and surveying with contact window
- Use survey version in language of patients
- Review data warehouse feedback reports
- Do not influence patients about HCAHPS Survey

Hospital Roles and Responsibilities: Using a Survey Vendor

The Hospital's role in data collection and submission:

- Submit entire discharge list to survey vendor, or develop sample frame of eligible discharges in timely manner
- Monitor feedback reports including Review and Correction Reports
- Comply with oversight process
- Monitor HCAHPS website for updates

Hospital Roles and Responsibilities: Self-Administering

- Develop and draw sample frame of eligible discharges, administer survey
- Submit HCAHPS data in standard format via Secure Portal
- Monitor submission and feedback reports
- Comply with oversight process
- Conduct ongoing quality assurance activities including Data Quality Checks
- Monitor HCAHPS website for updates

Data Collection

Key Points:

- 300+ completed surveys per 12-month reporting period
- Ongoing, continuous data collection
- Multiple attempts to contact patients
- No proxy respondents allowed

Data Collection

- PCH, or survey vendor representing the PCH, conducts the HCAHPS Survey via mail, telephone, or Interactive Voice Response (IVR)
- Survey data must be submitted via the QualityNet Secure Portal in the specified XML file format

Administration Overview

Key Points

- Survey after **discharge** (48 hours to 42 calendar days post-discharge)
- **Random** sample of eligible discharges
- **Four modes** of administration – Mail, Telephone, Mixed Mode, IVR
- **Standardized** data collection, submission, analysis, and reporting

Communication with Patients

- No communication with patients intended to influence survey results
- No incentives of any kind
- Don't show HCAHPS Survey or cover letter to patients prior to discharge from the hospital
- Don't send pre-notification letters or postcards after discharge about the HCAHPS Survey

Brief Sampling Overview

Steps in Sampling Process:

1. Identify Population (All Patient Discharges)
2. Identify Initially Eligible Patients
3. Remove Exclusions
4. Perform De-Duplication
5. Develop HCAHPS Sample Frame
6. Draw Sample

Note: Refer to www.hcahpsonline.org for in-depth details regarding sampling.

Patient Population: Eligible Patients

- Eligible Patient Populations:
 - Adult (18+)
 - Medical, surgical, or maternity care
 - Overnight stay or longer
 - Alive at discharge
- HCAHPS encompasses about 80-85% of inpatients

Patient Population: Excluded Patients

- Excluded Patient Populations:
 - Hospice discharges
 - Court/Law Enforcement (i.e., prisoners)
 - Foreign address
 - “No-publicity” patients
 - Patients excluded due to state regulations
 - Patients discharged to nursing homes, SNF swing beds within hospital, and skilled nursing facilities

Sampling – Reminder (1 of 3)

- Requirement: **Obtain at least 300 completed HCAHPS Surveys in a rolling 4-quarter period**
- Why 300?
 - For statistical precision of the ratings, which is based on a reliability criterion
 - Obtaining at least 300 completed surveys ensures that the reliability for the publicly reported measures will be 0.80 or higher
 - Calculate sample size based on target of 335 completed surveys to ensure attaining 300 completed surveys most of the time

Sampling Reminder (2 of 3)

- **Sampling is ongoing**
- Draw a random sample of eligible discharges on a monthly basis
 - Sampling may be daily, weekly, bi-weekly, or at the end of the month
 - Sample frame must include eligible discharges from the entire month
 - All eligible discharges must have an equal chance of being sampled

Sampling Reminder (3 of 3)

- If more than 300 completed surveys:
 - Do not stop surveying when a total of 300 is reached
 - Continue to survey every patient in the sample
 - Surveying must continue even if hospital's predetermined target (quota) has been met
- If fewer than 300 completed surveys:
 - Attempt to obtain as many as possible
 - Survey all eligible discharges

Sampling Key Points

- Same sampling type must be maintained throughout the quarter
- Sample must include discharges from each month in the 12-month reporting period
- HCAHPS sample drawn first if multiple surveys administered
- Do not stop sampling/surveying if 300 at completed surveys

Survey Administration

Modes of Administration:

- Mail Only
- Telephone Only
- Mixed (Mail with Telephone Follow-up)
- Active Interactive Voice Response (IVR)

Note: Refer to www.hcahpsonline.org for in-depth information regarding guidelines for each administration mode.

Modes of Administration: Overview

- No changes are permitted to the content or order of the HCAHPS questions or answer categories for the Core or “About You” questions
- The “About You” questions must remain as one block of questions
- Final data files are submitted to CMS via QualityNet Secure Portal by data submission deadline
- Copyright language must be added to the HCAHPS Survey (see www.hcahpsonline.org)

Survey Management: Reminders

- Follow HIPAA guidelines
- Maintain patient confidentiality and data security
- Provide confidentiality and privacy assurances to patients
- Ensure physical and electronic data security guidelines

Steps to Joining HCAHPS in 2014

1. Submit an HCAHPS Participation Form
 - For self-administering hospitals, hospitals administering surveys for multiple sites, and survey vendors
 - Form available online
2. Do an HCAHPS Dry Run
 - Voluntary, but strongly suggested
 - Last month of calendar quarter
 - Contact HCAHPS Project Team for details
hcahps@hcqis.org
3. Collect and submit data on a continuous basis

HCAHPS: More Information

HCAHPS Website and Technical Support:

www.hcahpsonline.org

- Official website for content, announcements, HCAHPS Bulletins, updates, reminders
- Monitor weekly for “What's New”
- Quick links to Current News, Background, Participation, etc.
- Series of PowerPoint training sessions

HCAHPS Technical Support

- Email: hcahps@HCQIS.org
 - Please sure to include:
 - 6-digit CMS Certification Number (CCN)
 - Hospital Name
 - Contact information
- Telephone: 1-888-884-4007
 - Please sure to include:
 - 6-digit CMS Certification Number (CCN)
 - Hospital Name
 - Contact information



HCAHPS – Reminder

- First HCAHPS data submission is coming soon:
 - Submission deadline is October 1, 2014, for 2nd Quarter 2014 discharges.
- Plan ahead.
- Review the series of training sessions on the HCAHPS website at www.hcahpsonline.org.
- For HCAHPS technical support:
 - E-mail hcahps@HCQIS.org or call 888-884-4007.

HCAHPS for PCHQR Program

Questions?

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