

HCAHPS *Quality Assurance Guidelines V6.0*

Summary of Updates and Emphasis

This document is a reference tool that highlights the major changes from the *HCAHPS Quality Assurance Guidelines V5.0* to *V6.0*. This document is not a substitute for reviewing the *HCAHPS Quality Assurance Guidelines V6.0* in its entirety. The *HCAHPS Quality Assurance Guidelines V6.0* manual went into effect upon its release in March 2011. Required changes to HCAHPS protocols must be fully implemented by July 1, 2011, unless CMS has approved an alternate timeline submitted with your organization’s 2011 Quality Assurance Plan. General format and minor wording revisions have occurred throughout the manual and are not included in this change matrix. Please contact HCAHPS Technical Assistance for any specific questions.

Section of the QAG V6.0	Summary of Key Changes in V6.0
General Revisions	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o V5.0 changed to V6.0 o References to Reporting Hospital Quality Data for Annual Payment Update [RHQDAPU] Program have been updated to: Hospital Inpatient Quality Reporting Program o References to HCAHPS File Specifications V3.2 have been updated to HCAHPS File Specifications V3.3 o New fields have been added to HCAHPS File Specifications V3.3 o Lag time must now be recorded and submitted for all HCAHPS Final Survey Status codes o References to the most current version of MS-DRG codes have been updated to V.28 MS-DRG codes o Additional examples have been added to the Sampling, Mail Only, Telephone Only, Mixed Mode, Active IVR, and Data Coding & Specification chapters o For organizations that copyright their HCAHPS materials, the following language must be added to the copyright citation: “The core HCAHPS questions (Questions 1-22) and “About You” HCAHPS questions (Questions 23-27) are works of the U.S. Government. These HCAHPS questions are in the public domain and therefore are NOT subject to U.S. copyright laws.” o HCAHPS protocol has been added to require that hospitals/survey vendors maintain a crosswalk of their interim disposition codes to the HCAHPS Final Survey Status codes and include the crosswalk in the hospital’s/survey vendor’s QAP
Introduction and Overview	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Added a section regarding <i>HCAHPS and Hospital Value Based Purchasing</i> o CMS has updated dates and statistics to reflect the most current numbers available under the HCAHPS Public Reporting section o The <i>HCAHPS Development, Data Collection and Public Reporting Timeline</i> was updated

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<p>Program Requirements</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ Added updates to the <i>Communicating with Patients about the HCAHPS Survey</i> section of the chapter ○ Notes about “zero cases” and “five or fewer” eligible HCAHPS discharges in a month have been expanded to include more information about when these options should and should not be used
<p>Survey Management</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ The <i>Use of Subcontractors</i> section has been re-titled and is now called <i>Location of Survey Operations</i> ○ The following HCAHPS protocols have been added to the <i>Survey Vendors</i> section: “The voice mail recording must specify that the caller can leave a message about the survey” and “Survey vendors must document questions and responses via a database or tracking log.” ○ Under the <i>Safeguarding Patient Confidentiality</i> section, the following HCAHPS protocol regarding actions to be taken by hospitals/survey vendors has been added: “Establish protocols for secure file transmission. Emailing of PHI via unsecure email is prohibited.” • Emphasis: <ul style="list-style-type: none"> ○ All HCAHPS administration related files must be retained for a minimum of three years
<p>Sampling Protocol</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ This chapter has been reorganized and new examples have been added ○ A new exclusion category has been added to HCAHPS Protocols: “Beginning with July 1, 2011 and forward, patients discharged to nursing homes and skilled nursing facilities will be excluded from HCAHPS survey administration.” <ul style="list-style-type: none"> ▪ This applies to patients with the following discharge codes in UB-04 field location 17: “03 – Skilled nursing facility”,” 64 – Certified Medicaid nursing facility” ○ In addition to noting the lower precision of HCAHPS scores derived from less than 100 completed surveys, publicly reported results based on <u>less than 50 completed surveys</u> will also be noted on the Hospital Compare Web site ○ Updated MS-DRG Codes and Service Line Categories table to V.28 MS-DRG codes ○ Added a note to the Table of V.28 MS-DRG Codes and Service Categories that provides revised instructions for managing patients drawn in a sample who are in the “Ineligible” category (newborn, psychiatric, rehabilitation, or deceased MS-DRGs, and MS-DRGs

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	<p>with no assigned type)</p> <ul style="list-style-type: none"> o Under the <i>MS-DRG Codes and Service Line Categories</i> section of the chapter the following note has been added: “It is strongly recommended that hospitals/survey vendors assign the Service Line based on the hospital information (e.g., Patient MS-DRG code at discharge). For survey vendors: if client hospitals assign the Service Line, then survey vendors must validate that the Service Line is assigned appropriately and is in accordance with the service line determination methodology identified in the “Determination of Service Line” field” <ul style="list-style-type: none"> • Emphasis: <ul style="list-style-type: none"> o Added clarification that “No Publicity” patients may voluntarily sign a “No Publicity” request <u>while in the hospital</u> expanding from the original “when admitted to the hospital” o Added clarification regarding the de-duplication process o Added clarification that it is strongly recommended that sampling rates be fairly consistent among the months in a quarter
<p>Mail Only Survey Administration</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o A new field has been added to the HCAHPS File Specifications V3.3: “Number Survey Attempts – Mail.” This field is required when “Survey Mode” in the Header Record is “1 – Mail Only.” This field captures the mail wave attempt in which the final disposition of the survey is determined o Guidelines for patients who request to be sent an additional questionnaire (either after the first or second mailing) have been added o HCAHPS protocols have been added requiring that the HCAHPS cover letter or survey not be shown to patients prior to the administration of the HCAHPS survey o HCAHPS protocols have been added that prohibit the mailing of pre-notification letters or post cards after discharge to notify patients about the HCAHPS survey • Emphasis: <ul style="list-style-type: none"> o Added the following clarification regarding hospital-specific supplemental questions: “It is not acceptable to ask patients why they indicated that they would not recommend the hospital to friends and family” o Added clarification about the cover letter requirement to notify patients that their survey responses will be shared with the hospital o Added clarification for conducting seeded mailings

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<p>Telephone Only Survey Administration</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ A new field has been added to the HCAHPS File Specifications V3.3: “Number Survey Attempts – Telephone.” This field is required when “Survey Mode” in the Header Record is “2 – Telephone Only.” This field captures the telephone attempt in which the final disposition of the survey is determined ○ Guidelines for use of caller ID have been added: “Survey vendors may program the caller ID to display “on behalf of [HOSPITAL NAME],” with the permission and compliance of the hospital’s HIPAA/Privacy Officer. Survey vendors may not program the caller ID to display only [HOSPITAL NAME]” ○ A new section, “<i>Monitoring/Recording Phone Calls,</i>” has been added ○ Guidelines for handling inadvertently dropped calls have been added ○ Additional guidelines for training interviewers have been added: <ul style="list-style-type: none"> ▪ “Interviewers must be trained to read response options similarly at an even pace without emphasis on any particular response category” ▪ “Interviewers must be trained to record responses to survey questions only after the patient has responded to the questions; that is, interviewers must not pre-code response choices” • Emphasis: <ul style="list-style-type: none"> ○ Added clarification regarding the timeline for data collection ○ Added clarification regarding the telephone script ○ Added the following clarification regarding hospital-specific supplemental questions: “It is not acceptable to ask patients why they indicated that they would not recommend the hospital to friends and family” <p>Added a recommendation to visually observe and ensure the professionalism of the telephone interviewers</p>
<p>Mixed Mode Survey Administration</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ See Mail Only and Telephone Only Survey Administration sections
<p>Active Interactive Voice Response (IVR) Administration</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> • See Telephone Only Survey Administration section
<p>Data Specifications and Coding</p>	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> ○ The updated file layout and specifications in accordance with HCAHPS File

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	<p>Specifications V3.3 are required for patient discharges from July 1, 2011 and forward</p> <ul style="list-style-type: none"> o Guidelines for the new data fields “Number Survey Attempts – Telephone” and “Number Survey Attempts – Mail” have been added • Emphasis: <ul style="list-style-type: none"> o Added guidelines for “Zero Cases” qualification o Added clarifications for skip pattern coding o Added guidelines for “Lag Time” o Added clarification for coding the “Race” question o Added clarification for coding the <i>HCAHPS Final Survey Status/Disposition</i>
Data Preparation and Submission	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o No significant updates from Quality Assurance Guidelines V5.0 in this chapter
Oversight Activities	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o The HCAHPS Project Director/Project Manager must be physically present during the on-site visit • Emphasis <ul style="list-style-type: none"> o The HCAHPS QAP should not contain extraneous information, such as programming language
Data Reporting	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Updated the Reporting Period dates o Added information regarding the revisions to the Hospital Compare display o Added reference to the HCAHPS Web site “Summary Analyses” page
Appendices	
Appendices A, B, C, D, and E HCAHPS Survey Mail Materials	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Added three additional response categories to Q27 o Corrected language and underlined text in translated materials
Appendices F and G HCAHPS Telephone Script	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Small revisions were made to “Initiating Contact – If asked who is calling” content

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	<ul style="list-style-type: none"> o Provided guidance for Q21 probe o Added “I am required to read all five categories” to Q26 o Added three additional response categories to Q27 o Added “Please listen to all six response choices before you answer” to Q27
Appendix H HCAHPS IVR Script	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Small revisions were made to “Initiating Contact – If asked who is calling” content o Added three additional response categories to Q27
Appendix I Interviewing Guidelines	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Added guidelines on contacting health care facilities in the <i>Introduction and Refusal Avoidance</i> section • Emphasis: <ul style="list-style-type: none"> o Added clarification to <i>Answering Questions and Probing</i> section
Appendix J Frequently Asked Questions	<ul style="list-style-type: none"> • No significant updates
Appendix K Sample Frame File Layout	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Added nursing home and skilled nursing facility exclusion o Deleted <i>Point of Origin for Admission or Visit</i> code “7 – Emergency Room” o Revised the definition of <i>Point of origin for Admission or Visit</i> codes “1” and “2” o Added MS-DRG codes V.28 to <i>Determination of Service Line</i> • Emphasis: <ul style="list-style-type: none"> o Strongly recommend that Survey Vendors determine the HCAHPS Service Line for their client hospitals
Appendix L Data File Structure	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Updated to correspond with the HCAHPS XML File Specifications Version 3.3
Appendix M XML File Specifications V 3.3	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o HCAHPS XML File Specifications Version 3.3 are effective for 3Q10 (July 1, 2011) eligible discharges and forward

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	<ul style="list-style-type: none"> o Removed <i>Patient Discharge Status</i> of “7 – Emergency Room” o Deleted <i>Point of Origin for Admission or Visit</i> code “7 – Emergency Room” o Revised the definition of <i>Point of origin for Admission or Visit</i> codes “1” and “2” o Added <i>Number Survey Attempts – Telephone</i> and <i>Number of Survey Attempts - Mail</i> fields for Mail Only, Telephone Only, Mixed Mode –Telephone, and IVR HCAHPS survey administration o Added three additional response choices for Q27
Appendix O Participation Form for Hospitals Self-administering Survey	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Forms modified slightly
Appendix P Participation Form for Hospitals Administering Survey for Multiple Sites	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Forms modified slightly
Appendix Q Participation Form for Survey Vendors	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Forms modified slightly
Appendix R Exceptions Request Form	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Form modified slightly
Appendix S Discrepancy Report	<ul style="list-style-type: none"> • Updates: <ul style="list-style-type: none"> o Form has been updated o Further changes are anticipated to the online form by July 1, 2011