Overview
The HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey is the first national, standardized, publicly reported survey of patients' perspectives of hospital care. HCAHPS (pronounced “H-caps”), also known as the CAHPS® Hospital Survey, is a survey instrument and data collection methodology for measuring patients’ perceptions of their hospital experience. While many hospitals have collected information on patient satisfaction for their own internal use, until HCAHPS there was no national standard for collecting and publicly reporting information about patient experience of care that allowed valid comparisons to be made across hospitals locally, regionally and nationally.

Three broad goals have shaped HCAHPS. First, the survey is designed to produce data about patients’ perspectives of care that allow objective and meaningful comparisons of hospitals on topics that are important to consumers. Second, public reporting of the survey results creates new incentives for hospitals to improve quality of care. Third, public reporting serves to enhance accountability in health care by increasing transparency of the quality of hospital care provided in return for the public investment. With these goals in mind, the Centers for Medicare & Medicaid Services (CMS) and the HCAHPS Project Team have taken substantial steps to assure that the survey is credible, useful, and practical.

HCAHPS Development, Testing and Endorsement
Beginning in 2002, CMS partnered with the Agency for Healthcare Research and Quality (AHRQ), another agency in the federal Department of Health and Human Services, to develop and test the HCAHPS survey. AHRQ carried out a rigorous scientific process, including a public call for measures; review of literature; cognitive interviews; consumer focus groups; stakeholder input; a three-state pilot test; extensive psychometric analyses; consumer testing; and numerous small-scale field tests. During this process, CMS provided three separate opportunities for the public to comment on HCAHPS, and responded to well over one thousand comments.

In May 2005, the HCAHPS survey was endorsed by the National Quality Forum, a national organization that represents the consensus of many healthcare providers, consumer groups, professional associations, purchasers, federal agencies, and research and quality organizations. In December 2005, the federal Office of Management and Budget gave its final approval for the national implementation of HCAHPS for public reporting purposes. CMS implemented the HCAHPS survey in October 2006, and the first public reporting of HCAHPS results occurred in March 2008. The survey, its methodology and the results it produces are in the public domain.

Hospitals implement HCAHPS under the auspices of the Hospital Quality Alliance (HQA), a private/public partnership that includes major hospital and medical associations, consumer groups, measurement and accrediting bodies, government, and other groups that share an interest in improving hospital quality. The HQA has endorsed HCAHPS.
The enactment of the Deficit Reduction Act of 2005 created an additional incentive for acute care hospitals to participate in HCAHPS. Since July 2007, hospitals subject to the Inpatient Prospective Payment System (IPPS) annual payment update provisions ("subsection (d) hospitals") must collect and submit HCAHPS data in order to receive their full IPPS annual payment update. IPPS hospitals that fail to publicly report the required quality measures, which include the HCAHPS survey, may receive an annual payment update that is reduced by 2.0 percentage points. Non-IPPS hospitals, such as Critical Access Hospitals, may voluntarily participate in HCAHPS.

The recently enacted Patient Protection and Affordable Care Act of 2010 (P.L. 111-148) includes HCAHPS among the measures to be used to calculate value-based incentive payments in the Hospital Value-Based Purchasing program, beginning with discharges in October 2012.

**HCAHPS Content and Administration**

The HCAHPS survey asks discharged patients 27 questions about their recent hospital stay. The survey contains 18 core questions about critical aspects of patients’ hospital experiences (communication with nurses and doctors, the responsiveness of hospital staff, the cleanliness and quietness of the hospital environment, pain management, communication about medicines, discharge information, overall rating of hospital, and would they recommend the hospital). The survey also includes four items to direct patients to relevant questions, three items to adjust for the mix of patients across hospitals, and two items that support Congressionally-mandated reports.

The HCAHPS survey is administered to a random sample of adult patients across medical conditions between 48 hours and six weeks after discharge; the survey is not restricted to Medicare beneficiaries. Hospitals may either use an approved survey vendor, or collect their own HCAHPS data (if approved by CMS to do so). To accommodate the needs of hospitals, HCAHPS can be implemented in four different survey modes: mail, telephone, mail with telephone follow-up, or active interactive voice recognition (IVR). Hospitals can use the HCAHPS survey alone, or include additional questions after the core HCAHPS items. Hospitals must survey patients throughout each month of the year. The survey is available in official English, Spanish, Chinese, Russian and Vietnamese versions. The survey and its protocols for sampling, data collection and coding, and file submission can be found in the HCAHPS Quality Assurance Guidelines, Version 5.0, which is available on the official HCAHPS website, [www.hcahpsonline.org](http://www.hcahpsonline.org).

**HCAHPS Measures**

For each participating hospital, ten HCAHPS measures (six summary measures, two individual items and two global items) are publicly reported on the Hospital Compare website, [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov). Each of the six summary measures, or composites, is constructed from two or three survey questions. Combining related questions into composites allows consumers to quickly review patient experience of care data and increases the statistical reliability of these measures. The six composites summarize how well nurses and doctors communicate with patients, how responsive hospital staff are to patients’ needs, how well hospital staff help patients manage pain, how well the staff communicates with patients about medicines, and whether key information is provided at discharge. The two individual items address the cleanliness and quietness of patients’ rooms, while the two global items report patients’ overall rating of the hospital, and whether they would recommend the hospital to family and friends. Survey response rate and the number of completed surveys, in broad ranges, are also publicly reported.
HCAHPS and Public Reporting
Publicly reported HCAHPS results are based on four consecutive quarters of patient surveys. CMS publishes participating hospitals’ HCAHPS results on the Hospital Compare website (www.hospitalcompare.hhs.gov) four times a year, with the oldest quarter of patient surveys rolling off as the most recent quarter rolls on. A downloadable version of HCAHPS results is also available through this website. The number of hospitals that publicly report HCAHPS results has increased from 2,521 in March 2008 to 3,774 in July 2010. Additional HCAHPS results can be found on HCAHPS On-Line, (www.hcahpsonline.org), including a summary of state and national results, the “top-box” percentiles for the ten HCAHPS measures, a table of inter-correlations of the HCAHPS measures, and a bibliography of HCAHPS research publications.

To ensure that publicly reported HCAHPS scores allow fair and accurate comparisons across hospitals, it is necessary to adjust for factors that are not directly related to hospital performance but which affect how patients answer HCAHPS survey items. CMS and the HCAHPS Project Team perform adjustments that eliminate any advantage or disadvantage in scores that might result from the survey mode employed or from characteristics of patients that are beyond a hospital’s control. In addition, the HCAHPS Project Team undertakes a series of quality oversight activities, including inspection of survey administration procedures, statistical analyses of submitted data, and site visits of HCAHPS survey vendors and self-administering hospitals, to assure that the HCAHPS survey is being administered according to the protocols.

For More Information
To learn more about HCAHPS, including background information, recent news and policy updates, administration procedures, patient-mix and survey mode adjustments, training opportunities, and how to participate in the survey, please visit HCAHPS On-Line, at www.hcahpsonline.org.

To Provide Comments or Ask Questions:
• To communicate with CMS staff about HCAHPS: Hospitalcahps@cms.hhs.gov
• For technical assistance, contact the HCAHPS Project Team: hcahps@azqio.sdps.org or 1-888-884-4007