

## July HEI Letter

### Welcome

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July 2010

Welcome once again to *HCAHPS Executive Insight*, the gold button on [www.hcahpsonline.org](http://www.hcahpsonline.org).

In July, the Centers for Medicare & Medicaid Services (CMS) refreshed the HCAHPS results on the *Hospital Compare* Web site ([www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)). The new HCAHPS results are based on patients discharged between October 2008 and September 2009. Some highlights include:

- The July 2010 results are based on 2.5 million completed surveys from 3,774 hospitals
- The number of hospitals reporting their HCAHPS results has increased by 1,254 (50%) since the first public reporting in March 2008
- HCAHPS data for Third Quarter 2008 rolled off of Hospital Compare while Third Quarter 2009 results were rolled on

### News and Notes from the HCAHPS Project Team

Since its national implementation in October 2006, HCAHPS has grown to become what some call the 'industry standard' for measuring and reporting patients' experiences of hospital care. The broad reach of HCAHPS can be captured in a few simple statistics. Over the October 2008-September 2009 reporting period, some 8.2 million patients (an average of more than 22,000 per day) were surveyed about their hospital experiences. We estimate that more than 95% of inpatients in the service lines included in HCAHPS receive care at hospitals that participate in HCAHPS. In other words, the vast majority of inpatients hospitalized for medical, surgical or maternity care have a chance of sharing their assessment of hospital care through this standardized, publicly reported survey.

In addition to its growing scope, HCAHPS results are finding their way to the public through diverse channels: from the official results that CMS posts on the Hospital Compare website, to rankings, ratings and descriptions produced by other organizations, to articles in the media, to the promotional materials produced by hospitals. The notion of using HCAHPS results to compare hospitals has even inspired artists: <http://vimeo.com/11788385>.

While we are pleased that the value of HCAHPS is being acknowledged and amplified by others, we would like to reiterate that the full, complete and official HCAHPS results are those publicly reported on Hospital Compare ([www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov)).

The first half of 2010 has been busy for HCAHPS and the HCAHPS Project Team (HPT). As you may know, the recently enacted *Patient Protection and Affordable Care Act* (P.L. 111-148) (<http://docs.house.gov/energycommerce/ppacacon.pdf>) specifically includes HCAHPS as a part of the Hospital Value-Based Purchasing (VBP) program (see Section 3001), which is to begin with discharges in October 2012. CMS will provide more information about Hospital VBP to the public closer to the time of the implementation of this program.

Members of the HPT presented HCAHPS research findings at the CAHPS & SOPS User Group Meeting in Baltimore in April. Other presenters there described how hospitals are using HCAHPS-derived information in their quality improvement efforts; some presentations can be found at <https://www.cahps-sopsugm.org/ugm/UGMAgenda.aspx>. The HPT also

presented HCAHPS research findings at the AcademyHealth Research Meeting in Boston in June.

CMS and the HCAHPS Project Team continually analyze HCAHPS data. Earlier this year we published several research papers in the journal *Medical Care Research and Review*. To make locating our HCAHPS research easier, we have added a [bibliography of publications](#) from the HPT.

Finally, please note that we have updated the *HCAHPS Fact Sheet*, which can be found elsewhere in HCAHPS Executive Insight.

### **HCAHPS Tables**

The HCAHPS Project Team continually strives to increase the value of its HCAHPS On-Line Web site by providing additional information about HCAHPS results. To this end, we are modifying the design of the HCAHPS Executive Insight letter to enable quicker access to our tables and other information.

As always, when we update HCAHPS results on Hospital Compare, we also provide a [Summary of HCAHPS Survey Results](#) table with the most recent state and national HCAHPS results, and information on how to interpret them.

In December 2009, *HCAHPS Executive Insight* introduced a table of inter-correlations of the ten publicly reported HCAHPS measures. In July 2010 we update this table, [HCAHPS Patient-Level Correlations](#). These patient-level Pearson correlations are calculated from linear means for the ten HCAHPS measures. For this analysis, we created patient-level equivalents of the six hospital composite measures; the remaining four measures are single items. The new correlations are based on patients discharged between July 2008 and June 2009, about 2.4 million completed surveys. Comparing the July 2010 correlation matrix to that of December 2009, which was based on patients discharged between July 2007 and June 2008, we note substantial stability, with all correlations within 0.02 units of the values from one year before.

The patient-level, inter-item correlations can be helpful in quality improvement efforts by identifying "key drivers." For instance, "key driver" analyses sometimes use patient-level associations to predict global items, such as ratings and recommendations, from more specific patient experience measures, such as composites and stand-alone items. We plan to refresh the patient-level correlation matrix annually.

Last year we also introduced the HCAHPS "top-box" percentiles table to make it easier to understand where individual hospitals stand on each of the ten publicly reported HCAHPS measures. In July 2010 we introduce several improvements to the HCAHPS percentiles table. In the new [HCAHPS "Top-box" and "Bottom-box" Percentiles](#) table, we updated the table with the most recent publicly reported HCAHPS scores, and have added two more hospital percentile ranks (10<sup>th</sup> and 90<sup>th</sup>). More significantly, we have expanded the table to include "bottom-box" percentiles for each HCAHPS measure, making it easier to see where a hospital's "bottom-box" scores fall relative to other hospitals. Individual hospital's HCAHPS scores can be found on [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov).

The "top-box" is the most positive response to HCAHPS survey questions. The "top-box" response is "Always" for five HCAHPS composites (Communication with Nurses, Communication with Doctors, Responsiveness of Hospital Staff, Pain Management, and Communication about Medicines) and two individual items (Cleanliness of Hospital Environment and Quietness of Hospital Environment), "Yes" for the sixth composite, Discharge Information, "'9' or '10' (high)" for the Overall Hospital Rating item, and "Would definitely recommend" for the Recommend the Hospital item.

The “**bottom-box**” is the least positive response category (or categories) for HCAHPS measures. The “bottom-box” response is “*Sometimes or never*” for five HCAHPS composites (Communication with Nurses, Communication with Doctors, Responsiveness of Hospital Staff, Pain Management, and Communication about Medicines) and two individual items (Cleanliness of Hospital Environment and Quietness of Hospital Environment), “*No*” for the sixth composite, Discharge Information, “*6 or lower (low)*” for the Overall Hospital Rating item, and “*Would not recommend*” for the Recommend the Hospital item.

Using the HCAHPS Percentiles table, we can easily see where a hospital’s “top-box” and “bottom-box” scores place it relative to other hospitals on each HCAHPS measure. The “top-box” score indicates how often patients selected the most positive response category when asked about their hospital experience. The higher a hospital’s “top-box” score, the higher it ranks among participating hospitals.

The “bottom-box” score, on the other hand, reflects how frequently patients chose negative responses when asked about their hospital experience. Low “bottom-box” scores, and thus a low percentile rank, indicate that a relatively small percentage of a hospital’s patients responded negatively about their hospital experience. Conversely, a hospital with a high “bottom-box” score, and thus a high percentile rank, had a relatively large percentage of patients who were critical of their hospital experience.

Please note that while a high “top-box” score is usually associated with a low “bottom-box” score, this is not always the case for a specific hospital. This is because for all HCAHPS measures (except Discharge Information), there is also a “middle-box” category, such as “*Usually,*” that varies in size. Hospitals’ “middle-box” scores can be found on the Hospital Compare website, [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov).

As always, we encourage both hospitals and their survey vendors to be aware of the dates for data submission. For the latest, please see [Key Upcoming Date](#) below. Please note that the HCAHPS Release 3.2 file specifications go into effect for discharges from July 1, 2010, and forward.

We invite you to share (and re-share) the material presented on *HCAHPS Executive Insight*. When you do, please include the following citation:

HCAHPS Executive Insight, July 2010. [hcahpsonline.org](http://hcahpsonline.org). Centers for Medicare & Medicaid Services, Baltimore, MD. *Month, Date, Year the page was accessed*.  
[http://www.hcahpsonline.org/Executive\\_Insight/](http://www.hcahpsonline.org/Executive_Insight/).

Thank you for visiting *HCAHPS Executive Insight*, and please continue to do so as we report updates and add new content. If you have comments or suggestions for HEI, please send us an email at [hcahps@azqio.sdps.org](mailto:hcahps@azqio.sdps.org).

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