Spring 2013 HCAHPS Executive Insight Letter

Welcome

Welcome back again to HCAHPS Executive Insight, the gold button on the HCAHPS On-Line Web site, www.hcahpsonline.org – and apologies for the long hiatus.

In April the Centers for Medicare & Medicaid Services (CMS) refreshed the HCAHPS results on the Hospital Compare Web site, http://www.medicare.gov/hospitalcompare/ (this is the new address of this Web site). The new HCAHPS scores are based on patients discharged between July 2011 and June 2012.

Highlights

- HCAHPS data for Second Quarter 2011 were rolled off of Hospital Compare, while Second Quarter 2012 results were rolled on
- The Spring 2013 HCAHPS results on Hospital Compare scores are based on more than 3.0 million completed surveys from 3,904 hospitals
  - Put differently, on average, every day more than 27,000 patients are surveyed about their hospital experience; and every day more than 8,200 patients complete the HCAHPS Survey
- The “Summary of HCAHPS Results” and “HCAHPS Percentiles” tables on the Summary Analyses page have been updated to include the newest HCAHPS scores.

News and Notes from the HCAHPS Project Team

There are a number of items to pass along since last we wrote.

In January 2013, CMS added five new items to the HCAHPS Survey:

- Three items about transition to post-hospital care
- One item that asks whether the patient was admitted through the Emergency Room, and
- One item that asks the patient to rate his or her mental or emotional health
  - The three transition to post-hospital care items will be used to create a Care Transition composite measure, which CMS plans to publicly report beginning in October 2014
  - The other two new items are in the "About You" section of the HCAHPS Survey. CMS is investigating these items for potential use in the patient-mix adjustment of HCAHPS scores

It is anticipated that CMS will make an official Portuguese translation of the HCAHPS Survey (mail only mode) available in Fall 2013
To better accommodate the full range of patients that hospitals serve, CMS strongly encourages hospitals with a significant patient population that speaks Spanish, Chinese, Russian or Vietnamese (and soon, Portuguese) to offer the HCAHPS Survey in those languages.

- The HCAHPS Project Team (HPT) encourages hospitals that serve significant patient populations that speak other languages to request that CMS to create official translations of the HCAHPS Survey in those languages.
  - Please be aware that only the official translations of the HCAHPS Survey instrument, which are found in the HCAHPS Quality Assurance Guidelines, may be implemented.

The HPT released HCAHPS Quality Assurance Guidelines, V8.0 in February 2013. QAG V.8.0 is now the current version of the quality assurance guidelines and should be consulted for all matters pertaining to the HCAHPS Survey.

- See http://www.hcahpsonline.org/qaguidelines.aspx

In March, the HPT conducted the annual Introduction to HCAHPS and HCAHPS Update training sessions via webinar. More than 600 individuals from over 300 organizations (survey vendors, hospitals, Quality Improvement Organizations, etc.) attended training.

- Slides from the HCAHPS training sessions can be found at http://www.hcahpsonline.org/trainingmaterials.aspx

The HPT has added a new research article to the HCAHPS On-Line Web site Bibliography, a test of two proposed new survey modes for HCAHPS: web-based and speech-enabled IVR. Based upon analysis of the results of this mode experiment, CMS has decided not to offer these modes at this time.

The advent of the Hospital VBP program in October 2012 seemed to spark a new burst of interest in patient experience of care, judging by the number of articles in the health care and general media. The HCAHPS Survey, whether in the guise of “patient experience” or “patient satisfaction,” is often alluded to or mentioned, both positively and negatively. CMS and the HPT generally do not comment or reply to articles (unless requested by authors). We are, however, pleased to note a growing body of research-based evidence that validates patient experience as a unique and critical dimension of quality of care and supports the HCAHPS approach to standardized data collection and the creation and publication of common metrics. For instance, please see:


**HCAHPS and Hospital Value-Based Purchasing**

We are now in the second year of the of CMS’s Hospital Value-Based Purchasing (VBP) program, which applies to hospitals paid under the Inpatient Prospective Payment System (IPPS). The Baseline Period for the Patient Experience of Care Domain (HCAHPS) in the FY 2014 Hospital VBP program covers April 1 to December 31, 2010 discharges, while the Performance Period covers April 1 to December 31, 2012 discharges. (Going forward, the
Baseline and Performance Periods will be calendar years.) In the FY 2014 Hospital VBP program the Patient Experience Domain will again constitute 30% of the Total Performance Score.

The Hospital VBP program compares a hospital’s HCAHPS scores in a Baseline Period to those in a later Performance Period. Because the Hospital VBP program runs continuously, the same calendar year will serve as the Performance Period for one iteration of the Hospital VBP program, and as the Baseline Period for another. For example, HCAHPS results from patients discharged in calendar year 2013 will serve as the FY 2015 program’s Performance Period and the FY 2017 program’s Baseline Period.

Results from the first year of the Hospital VBP program are now publicly reported on the Hospital Compare Web site. See http://www.medicare.gov/hospitalcompare/data/VBP/hospital-vbp.aspx

More Information about Hospital Value-Based Purchasing
For more information about Hospital VBP, please visit the CMS dedicated Web site, http://www.cms.gov/Hospital-Value-Based-Purchasing/. The slide set from CMS’ July 2011 “Open Door Forum” on the Hospital VBP program can be found at http://www.cms.gov/Hospital-Value-Based-Purchasing/Downloads/HospVBP_ODF_072711.pdf. Slides 35 to 61 present a comprehensive summary of the Patient Experience of Care domain and how the score for this domain is calculated.

Another excellent source of information about the Hospital VBP program is the QualityNet Exchange web page. See https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228772039937.

To further assist hospitals and their survey vendors, the HPT has created a document that outlines the steps taken in creating the Patient Experience of Care Domain from HCAHPS Survey data.

Because the time periods used in Hospital VBP programs for FY 2013 and 2014 are three quarters in length (rather than four quarters as in public reporting), the HPT has created patient-mix adjustment coefficients specifically for the Baseline Period (July 2009 to March 2010) and Performance Period (July 2011 to March 2012) used in the FY 2013 program and the Baseline Period (April to December 2010) for the FY 2014 program.

Background information about the role of HCAHPS in the Hospital VBP program can be found in the "HCAHPS and Hospital Value-Based Purchasing” section of the Autumn 2012 HCAHPS Executive Insight letter, which can be found in the archive below.

Fifth Anniversary of Public Reporting of HCAHPS

The April 2013 edition of Hospital Compare (http://www.medicare.gov/hospitalcompare/) marks five full years of public reporting of HCAHPS scores. When HCAHPS results debuted on Hospital Compare in March 2008, 2,520 hospitals voluntarily participated and their scores reflected the experience of 1.11 million patients. Now, five years later, 3,904 hospitals are publicly reported (a 55% increase over 2008) and their HCAHPS scores capture the experience of 3.02 million patients (an increase of 172%). Cumulatively, the 21 cycles of HCAHPS scores on Hospital Compare represent the experience of over 14 million discharged inpatients.
The HPT would like to acknowledge its sincere appreciation of the efforts that hospitals and their patients, survey vendors, Quality Improvement Organizations and many others have put into making HCAHPS a success. The collection and public reporting of hospital patients’ experience of care has become firmly established in the United States, supplying invaluable information that supports consumer choice, quality improvement, research and a host of other purposes. We look forward to your continued participation, cooperation, insights and feedback (please see below) as HCAHPS moves forward.

“**What’s New**”

We encourage hospitals and their survey vendors to frequently check our “**What’s New**” button to find the latest information on HCAHPS, such as upcoming data submission deadlines. We also invite you to share the material presented on **HCAHPS Executive Insight**, but when you share or reproduce this material, please include the following citation:

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Thanks for visiting **HCAHPS Executive Insight**. **Comments or suggestions** for HCAHPS Executive Insight should be directed to us, by email, at hcahps@azqio.sdps.org.

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