

Autumn 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 – our apologies for the long hiatus.

In July, 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 October 2011 and September 2012.

Highlights

- HCAHPS data for Third Quarter 2011 were rolled off of Hospital Compare, while Third Quarter 2012 results were rolled on
- The July 2013 HCAHPS results on Hospital Compare scores are based on more than 3.0 million completed surveys from 3,912 hospitals
 - Put differently, on average, every day more than 28,000 patients are surveyed about their recent hospital experience; and every day more than 8,400 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.

- Due to technical problems in the data warehouse and delays caused by the partial government shutdown, there will be some **changes in the posting of HCAHPS scores on the Hospital Compare Web site**:
 - HCAHPS scores that were posted on Hospital Compare in July 2013, which represents patients discharged between October 2011 and September 2012, will remain on the Web site until December 2013
 - HCAHPS scores for patients discharged between January and December 2012 will be posted on Hospital Compare in December 2013
 - o Normally, these scores would have been posted in October 2013
 - HCAHPS scores for patients discharged between April 2012 and March 2013 will be posted on Hospital Compare in January 2014
 - o Normally, these scores would have been posted in December 2013
- The **Inpatient Prospective Payment System Final Rule for FY 2014**, which includes the HCAHPS Survey, went into effect on October 1, 2013. We would like to call particular attention to items that were codified in this Rule (Section 412.140):

- Approved HCAHPS survey vendors and self-administering hospitals must fully comply with all HCAHPS oversight activities, including site visits at their company locations
- CMS approves survey vendors to administer the HCAHPS Survey when they have met the Minimum Survey Requirements, Rules of Participation and agree to comply with the current survey administration protocols
- An official **Portuguese translation** of the HCAHPS Survey (Mail mode only) is now available for use; please see http://www.hcahpsonline.org/Files/HCAHPS_Mail_Survey_Materials_Portuguese.pdf
 - If a significant portion of your hospital's patient population speaks Spanish, Chinese, Russian, Vietnamese or Portuguese, we strongly encourage you to make the HCAHPS Survey version available to patients in the appropriate language(s).
- **HCAHPS training** will take place March 3-6, 2014. Please save these dates. We will be providing more detailed information soon.
- The patient-mix adjustment for **language spoken at home** has been revised beginning with patients discharged in October 2013. Please see "What's New" for details.
- The [HCAHPS Fact Sheet](http://www.hcahpsonline.org/Facts.aspx) has been updated and can be found at <http://www.hcahpsonline.org/Facts.aspx>

Posters/White Boards in Patient Rooms

Many hospitals are engaged in activities to improve their patients' experience of care and we applaud those efforts. Still, we hasten to note that such efforts must respect HCAHPS guidelines that guard against introducing bias. Please be sure that the messages conveyed by posters, white boards or other media placed in patients' rooms or where patients are likely to encounter them do not attempt to bias how or which patients respond to the HCAHPS Survey. For details about what is permissible or should be avoided in communications with patients, please see HCAHPS Quality Assurance Guidelines, V8.0, pages 19-21, <http://www.hcahpsonline.org/qaguidelines.aspx>.

If you have questions or concerns about how these guidelines apply in specific instances, please contact the HCAHPS Project Team: hcahps@azqio.sdps.org.

HCAHPS and Hospital Value-Based Purchasing

We are now in the second year of the of CMS' 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. (In the future, 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 a later iteration. 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 HCAHPS Project Team (HPT) has created a document that outlines the steps taken in creating the Patient Experience Domain scores 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.

"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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