

BATES COUNTY MEMORIAL HOSPITAL
Butler, Missouri

TRAINING MODULE: HCAHPS

HCAHPS stands for Hospital Consumer Assessment of Healthcare Providers and Systems.

The Center for Medicare and Medicaid Services (CMS) partnered with the Agency for Healthcare Research and Quality (AHRQ) to develop the survey.

HCAHPS is the first national, standardized, publicly reported survey of patients' perspectives of hospital care.

Results of the survey are reported on *Hospital Compare* Web site www.medicare.gov/hospitalcompare.

There are a total of 32 items on the survey. The core of the survey contains 21 items that ask "how often".

The "how often" questions are answered at "Always", "Usually", "Sometimes", and "Never".

The hospital is only scored on the "Always" answers.

The survey questions are broken down into "dimensions" which include:

- Communication with Nurses
- Communication with Doctors
- Responsiveness of Hospital Staff
- Pain Management
- Communication about Medicines
- Hospital Cleanliness and Quietness
- Discharge Information
- Overall Rating of Hospital
- Willingness to Recommend Hospital
- Care Transitions

All but the Willingness to Recommend the Hospital Care Transitions are currently included in Value Based Purchasing (*pay for performance*).

The hospital must have 100 completed surveys in a 12-month period in order for the scores to be included in Value Based Purchasing.

The HCAHPS survey can be administered anywhere between 48 hours to six weeks after discharge.

A second survey can be administered with 21 days to those that did not respond to the first survey.

Hospitals must use certified vendors for administration of surveys. (*currently using Press Ganey*)

There are only four approved methods of administering surveys:

- Mail only
- Telephone only (*currently using phone mode*)
- Mixed Mode Survey – mail and telephone
- Interactive Voice Response

CMS has very strict guidelines as to how the surveys are administered with specific deadlines for submission and reporting.

- Patients eligible for the HCAHPS Survey must meet the following criteria:
- Eighteen (18) years or older at time of admission
- Must have an overnight stay
- Non-psychiatric MS-DRG/principal diagnosis at discharge
- Alive at the time of discharge

Patients excluded from the HCAHPS Survey are:

- “No-Publicity” patients
- Court/Law enforcement patients (prisoners)
- Patients with a foreign address
- Patients discharged to hospice care
- Patients excluded because of state regulations
- Patients discharged to Swingbed, SNF, and nursing homes with no certified Medicare beds – discharge status of 03, 61, or 64

Hospitals/survey vendors can communicate to patients about the survey prior to their discharge that is telling them they may receive a survey.

Hospitals/survey vendors are not allowed to:

- Ask any HCAHPS or HCAHPS-like questions of patients prior to administration of the survey after discharge
- Attempt to influence or encourage patients to answer HCAHPS questions in a particular way
- Wear buttons donating “Always” or “10”
- Imply that the hospital, its personnel or agents will be rewarded or gain benefits for positive feedback from patients by asking patients to choose certain responses, or indicate that the hospital is hoping for a given response, such as a “10”, “Definitely yes,” or an “Always”
- Ask patients to explain why he or she chose their specific response
- Indicate that the hospital’s goal is for all patients to rate them as a “10”, “Definitely yes,” or an “Always”
- Offer incentives of any kind for participation in the survey
- Show or provide the HCAHPS survey or cover letters to patients while they are in the hospital or at any time prior to the administration of the survey
- Mail any pre-notification letters or postcards informing patients about the HCAHPS survey.

Requirement that only the patient is allowed to be surveyed.