



H-CAHPS PATIENT EXPERIENCE SURVEY FACT SHEET

The Centers for Medicare & Medicaid Services (CMS) has partnered with the federal Agency for Health Care Research and Quality (AHRQ) to develop a standardized instrument and methodology that can be used to collect and report information on patients' experience with inpatient hospital care received. AHRQ developed the Consumer Assessment of Health Plans Survey (CAHPS), currently used to assess the care provided by health plans covering 123 million Americans. Using this experience and expertise, AHRQ has constructed an instrument known as "H-CAHPS", for assessing patients' experience with hospital inpatient care. The CMS 3-State pilot IPRO is participating with will test the administration of the H-CAHPS survey instrument with volunteer hospitals and will test approaches to reporting the results with consumers.

PURPOSE OF H-CAHPS IN THE PILOT

The 3 state pilot will serve as the laboratory to test the H-CAHPS hospital patient experience survey instrument and methodology. Based upon the experience in the pilot, the instrument will be put in final form and made available for public use.

GOAL OF H-CAHPS

To develop for public domain a standardized hospital survey instrument and methodology to assess patient experience and satisfaction so that comparative information can be made available to providers, practitioners and the public.

STRUCTURE

The pilot instrument will have ~40 questions, addressing eight domains within six structural components. The survey will require ~20 minutes to complete.

DOMAINS

Based upon the Institute of Medicine's Report " Crossing the Quality Chasm: A New Health System for the 21st Century", and the experience of AHRQ, H-CAHPS is designed to address eight domains:

- Access to Care
- Continuity and transition
- Coordination and integration of care
- Emotional support
- Physical comfort
- Involvement of family and friends
- Information, communication and education
- Respect for patients' values, preferences and expressed needs

STRUCTURAL COMPONENTS

The survey has six structural components:

- Admissions
- Discharge /Transition/Billing
- Food / Room
- Hospital Overall
- The Care I Got (i.e. doctors, nurses, care coordination, pain management and safety)
- Patient Demographics

PROPOSED ADMINISTRATION

The pilot instrument will be administered as a "stand alone" unrelated to other hospital survey activities. The survey will be mailed to recently discharged patients, with telephone follow-up conducted in an effort to secure responses. Details on administration and specifications will be available once AHRQ turns the survey over to the pilot for use.

PROPOSED SAMPLING METHOD

A CMS contracted survey vendor will draw a sample of patients from hospitals in the 3 pilot states. Included are all patients with an overnight stay excluding pediatric and psychiatric admissions. Participating hospitals will be required to submit to IPRO a listing of patients recently discharged. IPRO will then turn the listings over to the survey vendor for administration. A target of 50 completed surveys will be obtained from each hospital.

AHRQ will randomly select a small representative group of hospitals for which a target of 450 completed surveys will be obtained, with 150 surveys each of medical, surgical, and OB patients (if no OB then 225 medical and 225 surgical).

Note: It is not yet known if patients already surveyed as a part of a hospital's routine activity will be excluded.

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EXAMPLES OF QUESTIONS

Questions in the pilot instrument address patients' specific and overall experiences.

*During your hospital stay, how often did the doctors explain things about your illness or treatment in a way that you could understand?
(never/sometimes/usually/always)*

*How often did the meals arrive when they were suppose to?
(never/sometimes/usually/always)*

*How often did doctors or other hospital staff talk with you to make sure you understood why tests were being done?
(never/sometimes/usually/always)*

Using any number from 0 to 10 where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital overall?

PROPOSED DISCHARGE FILE DATA ELEMENTS

- Patient name, address, phone number, DOB, gender
- Unique patient identifier #
- Primary discharge diagnosis
- Disposition upon discharge (e.g., home, SNF, etc.)
- Admission and discharge dates
- Major admission service category (i.e., medical, surgical, obstetric)
- Admission source (e.g., ER, SNF, etc.)

Details of specifications will be available once AHRQ turns the survey over to the pilot for use.

SURVEY VENDOR

Single vendor will be selected to conduct the pilot test by Feb 2003.

H-CAHPS SURVEY TENTATIVE TIMELINE

Recruit Hospitals	Nov 2002 – Jan 2003
Discharge Lists from Hospitals	Feb 15, 2003
Administer Survey	Mar – April 2003
Survey Data Analysis	May – Jul 2003
Final instrument Issued	Summer 2003
Consumer Testing	Jul 2003 - 2004

If you are interested in participating in the H-CAHPS survey, you are required to commit to participation in the pilot study. For more information about the pilot see "Hospital Public Reporting Pilot Fact Sheet" or visit our web site at www.ipro.org. If you are interested in participating in this pilot study or have further questions, please contact: Thomas Hartman or Doreen Bedaw at IPRO.

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