



HCAHPS: Patients' Perspectives of Care Survey

Educational Briefing

Executive Summary

The Hospital Consumer Assessment of Health Care Providers and Systems (HCAHPS, pronounced “H-caps”) survey was developed collaboratively by Centers for Medicare and Medicaid Services (CMS) and the Agency for Healthcare Research & Quality (ARHQ). The survey aims to produce data about patient experience of care that allows for objective and meaningful comparisons of hospitals. The questions address topics that are important to consumers, create new incentives for hospitals to improve quality of care, and enhance provider accountability in health care by increasing transparency of the quality care. Included as a component of the [Value-Based Purchasing](#) program, CMS uses provider HCAHPS survey results to positively or negatively adjust individual hospitals’ Medicare reimbursement.

Why is the HCAHPS survey a key issue for providers?

The HCAHPS survey measures patient experience. HCAHPS survey scores are an indication of the level of service provided by an organization, contribute to its reputation, and have reimbursement implications for providers. Traditionally, consumers have “consumed” and not “shopped” for health care services. However, more consumers are moving or being forced to move to high deductible health plans. As a result of this increased financial commitment, patients are more engaged in their health care decisions. Experience is one of the many ways consumers are weighing their options. Under Value-Based Purchasing (VBP), HCAHPS accounts for 30% of the TPS in FY 2015 and 25% in FY 2016 and FY 2017.

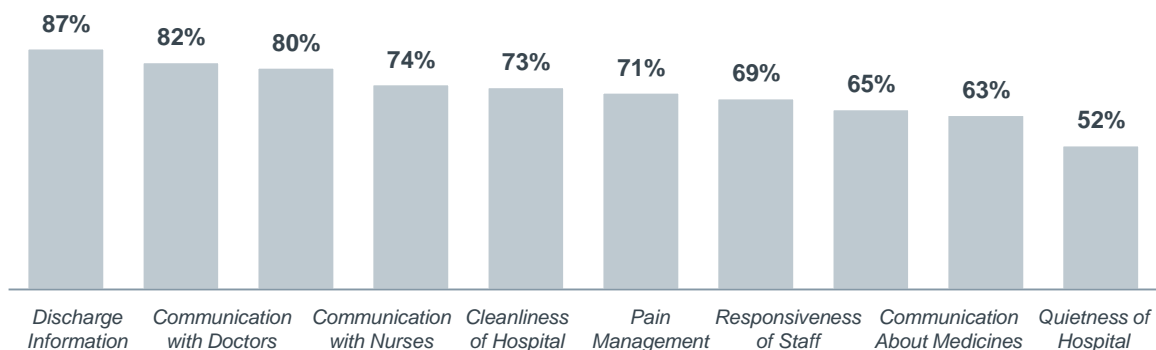
How does HCAHPS work?

The survey asks for patient feedback in several areas, including communication with nurses and doctors, the responsiveness of hospital staff, the cleanliness and quietness of the hospital environment, pain management, communication about medicines, discharge information, among others. A random sample of discharged adult patients across medical conditions are asked to answer 27 questions pertaining to their most recent hospital stay. Patients taking the survey must be 18 years or older and have had at least one overnight stay in the hospital as an inpatient, but are not required to be Medicare beneficiaries. The questions are administered to patients by mail, telephone, mail with telephone follow-up, or interactive voice recognition. Hospitals submit collected data to CMS for analysis. The Patient Experience Domain Score for each hospital is determined by summing the hospital’s HCAHPS Base Score (0-80) and HCAHPS Consistency Score (0-20). CMS publicly reports HCAHPS scores on its [Hospital Compare website](#).

Summary of HCAHPS Survey Results

Average “Top Box” Score for Hospitals

July 2017 (October 2015 to September 2016 Discharges)



How does HCAHPS affect providers?

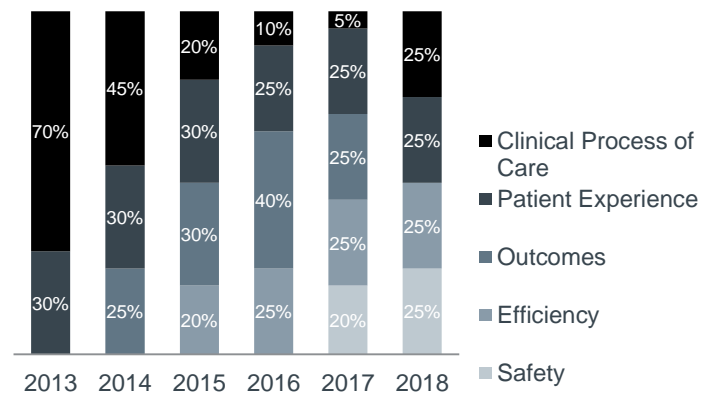
Clinical

Clinical staff must communicate effectively with patients to perform well on HCAHPS surveys. Doctors' and nurses' ability to listen and respond to patient needs play an integral role in scoring. Questions on the survey specifically address patients' perspectives on nurse care, physician care, pain management, and discharge information and instructions. Clinical staff are beginning to focus on managing pain properly, and educating discharged patients and their family members to enable post-discharge health management. The public reporting of HCAHPS scores is meant to create an incentive for providers to increase quality of care.

Financial

HCAHPS scores impact provider finances by figuring into their Medicare reimbursement determination. A provider's HCAHPS score decides their Patient- and Caregiver-Centered Experience of Care/Care Coordination Score, which comprises 25% of a provider's Total Performance Score (TPS) under [Value-Based Purchasing](#) (VBP) for FY 2016. A provider's TPS is compared to their own historical baseline TPS and to a nationwide benchmark. Whichever comparison is more favorable to the provider is used to calculate any adjustment to the provider's base operating DRG payment from CMS.

VBP Domain Weighting
(with year of starting consideration)



Operational

Patient satisfaction is becoming increasingly important, creating a need for new provider leadership roles. Many providers have created a new C-suite level role – the chief patient experience officer. Chief patient experience officers coordinate patient experience enhancement plans and benchmark initiatives to develop and test new approaches to satisfy patients. From facility design to staff training, the chief patient experience officer is tasked with ensuring patient satisfaction throughout hospital stays.