# **CAHPS** Insider

**JUNE 2017** 

INSIGHTS AND UPDATES FOR EFFECTIVE COMPLIANCE

#### TABLE OF CONTENTS

HCAHPS	2
Hospital Compare Overall Hospital Quality Star Ratings Update - Postponed	2
HCAHPS Data Submission Deadline	3
Proposed HCAHPS Pain Management Questions	3
CAHPS Hospice	4
CAHPS Hospice Proposed Rule: Public Reporting	4
ICH CAHPS	6
ICH CAHPS Reports	6
ICH CAHPS Spring Fielding Timeline	6
CAHPS for ACO	6
NRC Health Conditionally Approved as Survey Vendor	6
CAHPS for MIPS	7
CAHPS for MIPS Vendor Approval-Update	7
Determining Clinicians' MIPS Participation Status	7
CAHPS Cancer Care	8
CAHPS Cancer Care Survey Overview	8
Centers for Medicare and Medicaid Services Updates	9
CMS IRF and LTCH Experience of Care Surveys Now Publicly Available	9
External Submission Deadlines	10

# HCAHPS

### Hospital Compare Overall Hospital Quality Star Ratings Update - Postponed

The Centers for Medicare and Medicaid Services (CMS) has identified some data issues affecting the upcoming update for three measures that are reported on *Hospital Compare* and that are included in the Overall Hospital Quality Star Ratings. As a result of these issues and a commitment to data accuracy, CMS has decided that it will not update the Overall Hospital Quality Star Ratings on *Hospital Compare* in July 2017, as originally scheduled.

The data issues identified affect three measures in the Safety Measure Group Score:

- Healthcare Associated Infection-1: National Healthcare Safety Network (NHSN) Central line-associated Bloodstream Infection (CLABSI) Outcome Measure (National Quality Forum (NQF) #0139)
- 2. Health Associated Infection-6: National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Clostridium Difficile Infection (CDI) Outcome Measure (National Quality Forum (NQF) #1717)
- Patient Safety Indicator-90: Complication/patient safety for selected indicators composite measure (National Quality Forum (NQF) #0531)

CMS is working with their partners to correct data for these measures. They anticipate updating the three measures and the *Hospital Compare* Overall Star Ratings in October 2017.

The following measures **will** be updated in July 2017:

- 1. Risk Adjusted Mortality
- 2. Risk Adjusted Readmission
- 3. Timely and Effective Care
- 4. Hospital Consumer Assessment of Healthcare Providers Survey (HCAHPS)
- 5. Health Associated Infection (HAI) (data not listed above)
- 6. Excess Days in Acute Care
- 7. Outpatient Imaging Efficiency
- 8. Payment and Value of Care

CMS will **not** refresh/update the following in July 2017:

- 1. PSI-90 data
- 2. July HSRs for Star Ratings
- 3. The Overall Hospital Quality Star Rating

### HCAHPS Data Submission Deadline

The HCAHPS data submission deadline for patients discharged in January, February, and March 2017 (1Q17) is July 5, 2017. NRC Health will submit all 2017 Quarter 1 data via the QualityNet Secure Portal for all clients who have successfully completed their HCAHPS vendor authorization.

### Proposed HCAHPS Pain Management Questions

Last year, it was announced that the Pain Management composite would be removed from Value-based Purchasing (VBP). In light of this, CMS has been working to replace the Pain Management questions with new questions that will focus more directly on communication with patients about their pain during the hospital stay. The fiscal year (FY) 2018 Inpatient Prospective Payment System (IPPS) Proposed Rule proposes to replace the "Pain Management" questions to "Communication about Pain". If adopted, this would be effective with FY 2020 payment determination and subsequent years (beginning with CY 2018 reporting) and be publicly reported for the first time on Hospital Compare in October 2019.

These questions would replace the current "Pain Management" questions (questions 12, 13 and 14). If finalized, the new pain items will appear in all HCAHPS Surveys for patients discharged January 1, 2018 and forward. The final IPPS rule is slated for release on August 1, 2017.

The three new questions that would form the Communication about Pain composite measure are as follows:

- 1. During this hospital stay, did you have any pain?
  - o Yes
  - No -> If No, Go to Question \_\_\_\_
- 2. During this hospital stay, how often did hospital staff talk with you about how much pain you had?
  - o Never
  - o Sometimes
  - o Usually
  - o Always

- 3. During this hospital stay, how often did hospital staff talk with you about how to treat your pain?
  - o Never
  - o Sometimes
  - o Usually
  - o Always

### HCAHPS Citation:

http://www.hcahpsonline.org Centers for Medicare & Medicaid Services, Baltimore, MD. June 14, 2017.

HCAHPS website: http://www.hcahpsonline.org

# **CAHPS Hospice**

# CAHPS Hospice Proposed Rule: Public Reporting

CMS has shared information regarding public reporting in the most recent Hospice Proposed Rule released on May 23, 2017. You can expect the final rule to come out in late summer or early fall. CMS has identified several proposals surrounding public reporting, which include:

- 1. Begin public reporting of all eight CAHPS Hospice measures in winter CY 2018
- 2. Display scores based on eight rolling quarters of data
- 3. Initially use CAHPS Hospice Survey data collected between April 1, 2015 and March 31, 2017
- 4. Update the display of scores quarterly
- 5. Only display scores for hospices with 30 or more completed questionnaires during the reporting period

Like other CMS Compare websites, the Hospice Compare website will, in time, feature a quality rating system that gives each hospice a rating between one and 5 stars. Each Hospice will have prepublication access to their own agency's quality data, which enables them to know how they are performing before public posting of data on the Hospice Compare website.

A reimbursement strategy was proposed, as with other measures adopted for HQRP, the 2 percent payment reduction would be tied to successful submission of compliant survey results, sometimes known as "pay for reporting" rather than performance on patient experience metrics, known as "pay for performance."

CMS has proposed that scores for a given hospice be displayed as "top-box," with the national average provided for comparison.

The eight CAHPS Hospice survey-based measures are:

- 1. Hospice Team Communication
- 2. Getting Timely Care
- 3. Treating Family Member with Respect
- 4. Getting Emotional and Religious Support
- 5. Getting Help from Symptoms
- 6. Getting Hospice Care Training
- 7. Rating of Hospice
- 8. Willingness to Recommend Hospice

For additional information on the specifications of these measures, including details regarding top-box scoring methodology and mode and case-mix adjustment please refer to the <u>CAHPS Hospice Survey website</u>.

As more information becomes available, NRC Health will be sure to share these updates.

#### **CAHPS Hospice Citation:**

http://www.hospicecahpssurvey.org/en/ Centers for Medicare & Medicaid Services, Baltimore, MD. June 14, 2017.

#### **CAHPS Hospice website:**

http://www.hospicecahpssurvey.org/en/

# ICH CAHPS

## ICH CAHPS Reports

ICH CAHPS Reports will be delivered August 25, 2017. Please watch for communication from the NRC Health Corporate Compliance Team regarding your facility's ICH CAHPS Reports. If you have any questions about the reports, please feel free to respond to the Corporate Compliance Team at <u>compliance@nrchealth.com</u>.

# ICH CAHPS Spring Fielding Timeline

Activity	Date
End data-collection activities	7/14/2017
Begin cleaning/processing final data, and construct XML file	7/17/2017
Submit data to ICH CAHPS data center	7/26/2017

#### **ICH CAHPS Citation:**

https://ichcahps.org/Home.aspx Centers for Medicare & Medicaid, Baltimore, MD. June 14, 2017.

ICH CAHPS website: https://ichcahps.org/

# CAHPS for ACO

### NRC Health Conditionally Approved as Survey Vendor

The Centers for Medicare & Medicaid Services (CMS) and the CAHPS for ACOs Survey Project Team have conditionally approved NRC Health again as a CMS CAHPS for ACOs Survey vendor for the 2017 survey period.

NRC Health will next complete trainings in July 2017 to move to final approval status. ACOs will need to contract for the 2017 survey administration with a vendor from the final list of approved 2017 CAHPS for ACOs Survey vendors to be posted in late July 2017.

#### CAHPS for ACO website:

# CAHPS for MIPS

# CAHPS for MIPS Vendor Approval-Update

NRC Health has been approved as a CMS CAHPS for MIPS Survey vendor. CAHPS for MIPS is similar to and will replace CAHPS for PQRS. The survey is voluntary, and any group practice is welcome to participate. Although CAHPS for MIPS is not mandatory, it is highly incentivized.

NRC Health will continue to share new information regarding CAHPS for MIPS as it becomes available. As a reminder, the deadline to register and elect participation in CAHPS for MIPS is June 30, 2017.

### Determining Clinicians' MIPS Participation Status

Do you have clinicians who are unsure of their participation status in the Merit-based Incentive Payment System (MIPS)? Clinicians can now use an interactive tool on the <u>CMS Quality Payment Program website</u> to determine if they should participate in 2017.

#### **Participation Criteria**

#### Clinicians should participate in MIPS in 2017 if they:

- → Bill Medicare Part B more than \$30,000 a year AND
- → See more than 100 Medicare patients a year

#### Clinicians must also be:

- → Physicians **OR**
- → Physician assistants **OR**
- → Nurse practitioners **OR**
- → Clinical nurse specialists **OR**
- → Certified nurse practitioners

If a clinician is new to Medicare in 2017, they are not required to participate in MIPS. They may also be exempt if they qualify for one of the special rules for certain types of clinicians, or are participating in an Advanced Alternative Payment Model (APM).

#### **MIPS Participation Status Letter**

Practices should have received a letter in the month of May from the Medicare Administrative Contractor that processes Medicare Part B claims. This letter will tell the participation status of each MIPS clinician associated with the Taxpayer Identification Number or TIN in the practice.

CMS is encouraging MIPS clinicians to visit the <u>Quality Payment Program website</u> to review the following resources:

- <u>MIPS Participation Fact Sheet</u>
- <u>MIPS Improvement Activities Fact Sheet</u>
- 2017 CMS-Approved Qualified Registries

#### **CAHPS for MIPS Citation:**

https://qpp.cms.gov/ Centers for Medicare and Medicaid Services, Baltimore, MD. June 14, 2017.

# **CAHPS Cancer Care**

### CAHPS Cancer Care Survey Overview

Members of the Corporate Compliance and Research teams at NRC Health recently attended training for the CAHPS Cancer Care Survey. AHRQ has released three new surveys that assess the experience of cancer patients. These surveys include three separate assessments for both inpatients and outpatients, including:

- 1. Radiation Therapy
- 2. Drug Therapy
- 3. Cancer Surgery

The Cancer CAHPS surveys are intended for all facility types, for example:

- 1. Independent community oncology practices
- 2. Cancer centers at community hospitals
- 3. Cancer centers at academic medical centers (including those designated as comprehensive cancer centers by the National Cancer Institute (NCI)).

NRC Health will continue to share updates and new information that becomes available regarding CAHPS Cancer Care.

**CMS Citation:** 

CAHPS Cancer Care Survey. Content last reviewed June 2017. Agency for Healthcare Research and Quality, Rockville, MD.

# Centers for Medicare and Medicaid Services Updates

# CMS IRF and LTCH Experience of Care Surveys Now Publicly Available

CMS has made both the Inpatient Rehabilitation Facility (IRF) and Long-term Care Hospital (LTCH) Experience of Care surveys publicly available for use by individual facilities and their vendors. CMS is currently conducting a Mode Experiment testing. Data collection has just begun for the pilot study that will go through the summer. Participants in the pilot study can expect to receive their full feedback report in October 2017.

To access the IRF Experience of Care Survey, <u>click here</u>, or visit the IRF website at <u>https://irfmode.rti.org</u> and click on Information for IRFs.

To access the LTCH Experience of Care Survey, <u>click here</u>, or visit the LTCH website at <u>https://ltchmode.rti.org</u> and click on Information for LTCHs

IRF Experience of Care website: https://irfmode.rti.org

LTCH Experience of Care website: https://ltchmode.rti.org

# **External Submission Deadlines**

	Q1 2017 Discharges	Q2 2017 Discharges	Q3 2017 Discharges	Q4 2017 Discharges	
HCAHPS	7/5/2017	10/4/2017	1/3/2018	4/4/2018	
HHCAHPS	7/20/2017	10/19/2107	1/18/2018	4/19/2018	
CAHPS Hospice	8/9/2017	11/8/2017	2/14/2108	5/9/2018	
OAS CAHPS	7/12/2017	10/11/2017	1/10/2018	4/11/2018	
ICH CAHPS	7/26/2017 (Spring 2017)		1/31/2018 (Spring 2017)		
ACO CAHPS	2/8/2018*				
CAHPS for MIPS	2/8/2018*				

\*Tentative deadline