

# CAHPS Insider

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**NOVEMBER 2017**

INSIGHTS AND UPDATES FOR  
EFFECTIVE COMPLIANCE



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# HCAHPS



## *Hospital Compare Refresh*

The Centers for Medicare & Medicaid Services (CMS) has updated the Hospital Compare website. Specifically, the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey data and HCAHPS Star Ratings. Data not refreshed in the October 2017 release include the following:

1. Hospital Value-Based Purchasing (VBP) Program data and scoring for fiscal year (FY) 2017
2. Hospital VBP Program FY 2015 incentive payment adjustment

For more information about the HCAHPS Star Ratings, including detailed results on the HCAHP Summary Star Ratings, please visit the HCAHPS [website](#).

As of November 14, 2017 CMS has released the December 2017 hospital Compare Overall Hospital Quality Star Rating Hospital-Specific Reports (HSRs). Hospitals have 30 days to download their reports from the QualityNet website.

### **How Do I Access My Organization's Reports?**

You can access your HSRs via the QualityNet Secure Portal. Previously registered users should already have account access. If you are a new user to the QualityNet Secure Portal, please visit the QualityNet website and follow these steps to create an account:

1. Select **Login**
2. Select the appropriate program
3. Select **Start/Complete New User Enrollment**
4. Click **Secure File Transfer** (top-right corner of the screen)
5. Select **Auto Route Inbox** to access hospital's Inpatient Quality Reporting HSR

### **What Is Included in My Organization's Reports?**

The reports will include the Overall Hospital Quality Star Rating results, confidence intervals for group and summary scores, group performance category assignment (i.e. better than, same as, worse than), and the individual measure scores.

### **How Will I Know My Organization's Reports are Available?**

Hospitals should have received a QualityNet notification and detailed instructions on how to access reports when your HSR is available for download from the QualityNet Secure Portal.

If you have specific questions about the Overall Star Rating, please reach out to the Hospital Compare Overall Hospital Star Rating Team via email at [cmsstarratings@lantanagroup.com](mailto:cmsstarratings@lantanagroup.com).

## ***Hospital Value-Based Purchasing Program Results***

### **Hospital Value-Based Purchasing Program Overview**

The Hospital VBP Program is one of many quality programs Medicare has established to pay for the quality of care rather than the quantity of services provided to patients. The Hospital VBP Program is part of a long-standing effort to structure Medicare payments to improve care across the entire healthcare delivery system, including hospital inpatient care. In FY 2018, more hospitals will receive positive payment adjustments than will receive negative payment adjustments, indicating improved quality of care and the rewarding of better value, outcomes, and innovations.

### **Fiscal Year 2018 Hospital VBP Program Results**

The measurement domains for the FY 2018 Hospital VBP Program and the weighting for these domains are:

1. Clinical Care (25 percent)
2. Safety (25 percent)
3. Patient and Caregiver-Centered Experience of Care (25 percent)
4. Efficiency and Cost Reduction (25 percent)

For FY 2018, more hospitals will have an increase in their base operating MS-DRG payments than will have a decrease. In total, close to 1,600 hospitals will have a positive payment adjustment. About half of hospitals will see a small change in their base operating MS-DRG payments (between -0.5 and 0.5 percent). After taking into account the 2 percent withhold as required by law, the highest performing hospital in FY 2018 will receive a net increase in payments of slightly more than 3 percent, and the lowest performing hospital will incur a net reduction in payments of 1.65 percent.

### **What is New in 2019?**

The measure set for the FY 2019 program year will include a few changes:

1. Removing Patient Safety for Selected Indicators Composite (PSI 90) from the Safety domain
2. Adding a risk-standardized elective primary total hip arthroplasty and/or total knee arthroplasty (THA/TKA) complications measure to the Clinical Care domain

The measurement domains and domain weighting for the FY 2019 Hospital VBP Program will remain unchanged.

## ***Value-Based Purchasing Medicare Bonuses***

More hospitals are earning Medicare bonuses under the Value-Based Purchasing Program. Just under 1,600 hospitals will see bonuses from Medicare in fiscal year 2018 under the Hospital Value-Based Purchasing Program, according to the new federal data released earlier this month. The results are a slight improvement from last year as more hospitals earned positive payment adjustments.

The number of hospitals that saw their payments docked fell from 1,343 in 2017 to 1,211 in 2018, according to a Modern Healthcare analysis of the data. About 57% of hospitals will receive Medicare bonuses in 2018, which is a 2% increase from 2017 when we saw 55% of hospitals receiving Medicare bonuses.

To read the full article on Modern Healthcare, [click here](#).

**HCAHPS Citation:**

<http://www.hcahpsonline.org> Centers for Medicare & Medicaid Services, Baltimore, MD. November 16, 2017.

<https://www.qualitynet.org> Centers for Medicare & Medicaid Services, Baltimore, MD. November 16, 2017.

<http://www.modernhealthcare.com> Crain Communications, Inc., Detroit, MI. November 18, 2017

**HCAHPS website:**

<http://www.hcahpsonline.org>

## CAHPS Hospice



### **Hospice Preview Reports - Available**

Hospice Preview Reports will be available to download starting December 1, 2017. The reports will remain available for 30 days.



### **ASPEN: How to Update Demographic Data**

The demographic data displayed on Hospice Compare is generated from the information stored in the Automated Survey Processing Environment (ASPEN) system. Guidance on how to update your provider’s demographic information such as address, telephone number, and ownership with your state ASPEN coordinator is now available.

To ensure there is enough time to complete these demographic updates prior to each quarterly refresh of Hospice Compare, please see the table below regarding the cutoff dates for contacting your ASPEN Coordinator to update demographic information. Updates to information will not happen in real-time and can take approximately 6-months to appear on Hospice Compare.

Contact Your State’s ASPEN Coordinator Prior to This Date for Demographic Data Changes	Hospice Compare Refresh Cycle When Changes Will Appear
First business day of June	November
First business day of September (in the year prior)	February

<b>First business day of December (in the year prior)</b>	May
<b>First business day of March</b>	August

When requesting update to your demographic data, it is important to ask for updates to your data within the ASPEN system, and not your data on the Hospice Compare site.

[Click here](#) to view the “How to Update Demographic Data 11.14.17” PDF, also available on the Hospice Quality Public Reporting webpage.



### ***DELAYED - Hospice Compare Refresh***

The Hospice Compare Refresh scheduled for November 21, 2017 has been delayed. CMS will inform the provider community when the new refresh date is determined.

This delay will **not** impact the HIS Freeze date of November 15, 2017 and HIS Provider Preview Reports that will be available on December 1, 2017.

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

<http://www.hospicecahpssurvey.org/en/> Centers for Medicare & Medicaid Services, Baltimore, MD. November 16, 2017.

<https://www.cms.gov/> Centers for Medicare & Medicaid Services, Baltimore, MD. November 16, 2017.

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

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

## Home Health CAHPS



### ***Home Health Compare - Public Reporting Results Refreshed***

Home Health Care CAHPS (HHCAHPS) Survey results based on responses from patients who received home health care from Medicare-certified home health agencies (HHAs) from April 2016 through March 2017 are now reported on the Home Health Compare link on <http://www.Medicare.gov/>. HHCAHPS Survey results are updated each calendar year quarter.

You can also find these survey results on the HHCAHPS [website](#) through the “Archived Publicly Reported Data” link under the “General Information” tab. Other information available on this webpage includes:

1. HHA-level data
2. State and national averages
3. Star ratings cut points
4. Patient mix adjustment coefficients for the linearized data used to construct the Star Ratings



### **Home Health CAHPS Participation Periods Document - Updated**

The HHCAHPS Participation Periods Document has been updated to include the CY 2021 APU requirements as provided in the Home Health Prospective Payment System (HH PPS) Rate Update Final Rule for Calendar Year 2017 that was published in the Federal Register earlier this month.

To view the updated document, [click here](#).

**Home Health CAHPS Citation:**

<https://homehealthcahps.org/> Centers for Medicare & Medicaid Services, Baltimore, MD. November 17, 2017.

**Home Health CAHPS website:**

<https://homehealthcahps.org/>

## ICH CAHPS



### **2017 ICH CAHPS Fielding Timeline**

Activity	Date
Mail 2 <sup>nd</sup> Questionnaire/Begin Phone Follow-up (Mixed Mode)	12/6/2017
Data Collection Ends	1/17/2018
Vendors Clean/Process Final Data and Construct XML File	1/18/2018-1/31/2018
Deadline for Submitting XML Data File to ICH Data Center	1/31/2018





## 2018 Tentative ICH CAHPS Data Collection Schedule

Activity	Date
Submit New Facility-Specific Questions to CMS	1/31/2018
2018 Introduction to the ICH CAHPS Survey Webinar Training	2/14/2018
2018 ICH CAHPS Survey Vendor Update Training Session	2/15/2018
Deadline for Authorizing NRC Health for 2018 Spring Survey	2/28/2018
Deadline for Submitting a 2018 Facility Non-Participation Form	2/28/2018
Sampling Window	7/1/2017-9/30/2017
Sample Files Uploaded on ICH CAHPS Website	3/30/2018
Vendors Attest to Receipt of Sample File	4/3/2018
Mail Prenotification Letters	4/20/2018
Mail 1 <sup>st</sup> Questionnaire (mail only and mixed mode)/Begin Telephone data collection (phone only mode)	5/4/2018
Mail 2 <sup>nd</sup> Questionnaire (mail only)/Begin phone follow-up (mixed mode)	6/1/2018
Data Collection Ends	7/13/2018
Vendors Clean/Process Final Data and Construct XML File	7/16/2018-7/25/2018



## ICH CAHPS Survey Results - Proposed Star Ratings

The Centers for Medicare & Medicaid Services (CMS) and its Quality Incentive Program (QIP) are currently discussing the use of star ratings when reporting ICH CAHPS Survey results on Dialysis Facility Compare (DFC).

### What Are the Benefits of Star Ratings?

Star ratings would make it easier for consumers to use the information on the DFC [website](#) and spotlight excellence in health care quality. To view the methods that will be used to calculate linear scores and for producing star ratings, [click here](#).

Please note that implementing star ratings for the ICH CAHPS Survey is in the discussion phase **only**; there is not an immediate plan to implement star ratings for ICH CAHPS Survey results that are publicly reported on DFC.



### **Dialysis Facility Compare Refresh - Postponed**

The Dialysis Facility Compare (DFC) October 2017 data refresh is being delayed until early 2018. NRC Health will continue to monitor the DFC website for updates on the October 2017 data refresh.

**ICH CAHPS Citation:**

<https://ichcahps.org/Home.aspx> Centers for Medicare & Medicaid, Baltimore, MD. November 16, 2017.  
<https://www.medicare.gov/> Centers for Medicare & Medicaid, Baltimore, MD. November 16, 2017.

**ICH CAHPS website:**

<https://ichcahps.org/>

## OAS CAHPS



### **OAS CAHPS Final Rule Publication**

The Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs Final Rule was published in the Federal Register on November 13, 2017. To access the Final Rule, [click here](#).

As stated in the Final Rule, CMS plans to continue the voluntary participation period for OAS CAHPS throughout 2018. The next update (CY 2019 Rule) will be proposed in July and finalized in November 2018. The CY 2019 Rule will reflect any changes that would impact the 2019 data collection period (CY 2021 payment determination).

If you have questions regarding the Final Rule and the continuation of the voluntary participation period for OAS CAHPS, please contact your Account Manager or the NRC Health Corporate Compliance team at [compliance@nrchealth.com](mailto:compliance@nrchealth.com).

**OAS CAHPS Citation**

<https://oascahps.org/> Centers for Medicare & Medicaid Services, Baltimore, MD. November 16, 2017.

**OAS CAHPS website:**

<https://oascahps.org/>

# CAHPS for ACO



## CAHPS for ACO Fielding Timeline

Activity	Date
Mail out second survey with cover letter	12/12/2017-12/13/2017
Initiate CATI follow-up (first attempt <u>must</u> occur during this time)	1/4/2018-1/11/2018
Submit interim data	1/9/2018-1/11/2018
Conduct additional CATI follow-up	1/12/2018-2/1/2018
Complete the phone follow-up sequence	2/1/2018
Cutoff date for returned mail surveys	2/1/2018
Close customer support toll-free line	2/1/2018
Submit final data to CMS	2/6/2018-2/8/2018



## CAHPS for ACO Survey Vendor Training

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

NRC Health recently completed the second round of survey vendor training for CAHPS for ACO. If you have questions regarding CAHPS for ACO, please reach out to your Account Manager.

### CAHPS for ACO Citation

<http://acocahps.cms.gov/> Centers for Medicare & Medicaid Services, Baltimore, MD. November 16, 2017.

### CAHPS for ACO website:

<http://acocahps.cms.gov/>

# CAHPS for MIPS



## *CAHPS for MIPS Fielding Timeline*

Activity	Date
Mail out second survey with cover letter	12/12/2017-12/13/2017
Initiate CATI follow-up (first attempt <u>must</u> occur during this time)	1/4/2018-1/11/2018
Submit interim data	1/9/2018-1/11/2018
Conduct additional CATI follow-up	1/12/2018-2/1/2018
Complete the phone follow-up sequence	2/1/2018
Cutoff date for returned mail surveys	2/1/2018
Close customer support toll-free line	2/1/2018
Submit final data to CMS	2/6/2018-2/8/2018



## *CAHPS for MIPS Survey Vendor Training*

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

NRC Health recently completed the second round of survey vendor training for CAHPS for MIPS. If you have questions regarding CAHPS for MIPS, please reach out to your Account Manager.



## **Quality Payment Program Resources - Available on CMS.gov**

Clinicians can now visit [CMS.gov](https://www.cms.gov) to view new and existing Quality Payment Program Resources. CMS has moved its [library for Quality Payment Program](#) resources to cms.gov to make it easier for clinicians to search and find important information. Clinicians will be able to search the library for Quality Payment Program resources by title, topic, or year.

A few resources available to clinicians include:

1. Fact sheets
2. User guides
3. Toolkits
4. Technical Assistance Resource Guides

In addition to including all existing Quality Payment Program resources, CMSA has also posted the follow new materials:

1. Quality Payment Program final rule with comment and the interim final rule with comment
2. 2017 Medicare Shared Savings Program and MIPS Interactions
3. Advancing Care Information – Information Blocking Fact Sheet
4. CMS Web Interface Fact Sheet (updated)
5. CMS Web Interface & CAHPS for MIPS Survey Assignment Methodology
6. CMS Web Interface Sampling Methodology
7. MIPS Data Validation Criteria
8. MIPS Specialty Guides for Podiatrists and Radiologists
9. MIPS Scoring 101 Guide

For more information and to review new and existing Quality Payment Program resources to the [QPP Resource Library](#) on CMS.gov.

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

<https://qpp.cms.gov/> Centers for Medicare and Medicaid Services, Baltimore, MD. November 16, 2017.

## External Submission Deadlines

	Q3 2017 Discharges	Q4 2017 Discharges
<b>HCAHPS</b>	1/3/2018	4/4/2018
<b>HHCAHPS</b>	1/18/2018	4/19/2018
<b>CAHPS Hospice</b>	2/14/2108	5/9/2018
<b>OAS CAHPS</b>	1/10/2018	4/11/2018
<b>ICH CAHPS</b>	1/31/2018 (Spring 2017)	
<b>ACO CAHPS</b>	2/8/2018*	
<b>CAHPS for MIPS</b>	2/8/2018*	

\*Tentative deadline



If you have any questions regarding the information included in this edition of the CAHPS Insider, please email NRC Health CAHPS Compliance at [compliance@nrchealth.com](mailto:compliance@nrchealth.com).