

CAHPS Insider

DECEMBER 2017

INSIGHTS AND UPDATES FOR
EFFECTIVE COMPLIANCE



TABLE OF CONTENTS

Extraordinary Circumstances Extension/Exception (ECE)	2
HCAHPS	3
Hospital HCAHPS Survey Data Submission Deadline	3
Hospital Quality Star Ratings December 2017 – Methodology Enhancements	3
HCAHPS Podcast Now Available	5
CAHPS Hospice	5
Hospice Compare Refresh – Now Available	5
UPDATED – CAHPS Hospice Step-by-Step Guide	5
REMINDER – CY 2017 Participating Exemption for Size Form Submission Deadline Approaching	5
CMS Promises More Accurate Hospice Compare Site	6
ICH CAHPS	7
2017 ICH CAHPS Fielding Timeline	7
2018 Tentative ICH CAHPS Data Collection Schedule	7
ICH CAHPS Survey Results – Proposed Star Ratings	8
OAS CAHPS	8
OAS CAHPS Final Rule Publication	8
CAHPS for ACO	9
CAHPS for ACO Fielding Timeline	9
CAHPS for MIPS	9
CAHPS for MIPS Fielding Timeline	9
Things to Remember/Consider for 2018	10
External Submission Deadlines	11



Extraordinary Circumstances Extension/Exception (ECE)

Due to the devastating impact of the California wildfires since October 8, 2017, CMS is granting exceptions under certain Medicare quality reporting and value-based purchasing programs to acute care hospitals, inpatient psychiatric facilities, skilled nursing facilities, home health agencies, hospices, inpatient rehabilitation facilities, long-term care hospitals, renal dialysis facilities, and ambulatory surgical centers. These providers will be granted exceptions without having to submit an extraordinary exception request if they are located in one of the California counties listed below. All of these have been designated by FEMA as a major disaster county.

California Counties	
Butte	Orange
Lake	Solano
Mendocino	Sonoma
Napa	Yuba
Nevada	

For the Hospital, Hospice, and Home Health Consumer Assessment of Healthcare Providers and Systems (HCAHPS/Hospice CAHPS/HHCAHPS) Survey, submission of Quarter 3 and Quarter 4, 2017 data is covered under this exemption.

If you are located within one of the FEMA designated areas, you should have received an email from the NRC Health Corporate Compliance Team. If you did not receive an email or have additional questions, please do not hesitate to reach out to the Compliance Team at compliance@nrchealth.com

CMS Citation:

<http://www.cms.gov/> Centers for Medicare & Medicaid Services, Baltimore, MD. December 18, 2017

HCAHPS



Hospital HCAHPS Survey Data Submission Deadline

The submission deadline for the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) patient perspectives on care survey data for third quarter (3Q) 2017 discharges (July 1 – September 30, 2017) is **January 3, 2018**. Participating hospitals have an opportunity to access and review the HCAHPS Data Review and Correction Report.

What Is the HCAHPS Data Review and Correction Report?

The HCAHPS Data Review and Correction Report contains a summary of the data accepted into the warehouse for the quarter. The report displays a frequency distribution of every variable submitted as part of the Patients' Perspective on Hospital Care Survey. We strongly encourage you to review this report before January 3rd and notify us if you have any questions.

If you have additional questions regarding the HCAHPS submission deadline, please reach out to the NRC Health Corporate Compliance team at compliance@nrchealth.com.



Hospital Quality Star Ratings December 2017 - Methodology Enhancements

The Overall Hospital Quality Star Ratings ("Star Ratings") publicly launched in July 2016. The Star Ratings aim to fulfill the following guiding principles while utilizing a scientifically valid methodology:

1. Alignment with *Hospital Compare* and Centers for Medicare and Medicaid Services (CMS) programs
2. Transparency of methodological decisions
3. Being responsive and inclusive to stakeholder input

Your facility can receive 1-5 stars for an "overall rating" which are then reported on *Hospital Compare* along with 4,000+ hospitals.

The previous Overall Star Ratings Methodology consisted of five steps:

1. Selection and standardization of measures for inclusion
2. Assignment of measures to measure groups
3. Calculation of group scores from latent variable models (LVM)
4. Generation of hospital summary scores as a weighted average of group scores
5. Application of clustering to assign hospitals to one of five Star Rating categories

The main enhancement starting with the December 2017 Star Ratings occurs within step five of the previous methodology. K-means clustering is a statistical method used to create and assign hospitals to five star categories. The previous SAS procedure utilized the default setting (one iteration) to identify star categories. Moving forward, the enhancement will utilize multiple iterations to maximize

stability of clustering. Hospital summary scores were previously Winsorized prior to k-means clustering to minimize the effect of a few extreme outliers. With the clustering enhancements, Winsorization is no longer necessary.

CMS has provided a few comparisons to show the distribution of the previous methodology versus the enhanced methodology as well as the reliability of Star Ratings with the methodology enhancement (see below).

Overall Star Ratings Distribution of the Previous Methodology in December 2017 versus The Enhanced Methodology in December 2017:

Star Rating	Previous Methodology (December 2017)	Methodology Enhancements (December 2017)
1	125 (3.39%)	260 (7.04%)
2	710 (19.23%)	753 (20.40%)
3	1,959 (53.06%)	1,187 (32.15%)
4	820 (22.21%)	1,155 (31.28%)
5	78 (2.11%)	337 (9.13%)

Reliability (5,000 simulations) of Star Ratings with December 2017 Methodology Enhancement:

Star Rating	1	2	3	4	5
1	86.9%	13.06%	0.04%	0%	0%
2	7.36%	76.21%	15.89%	0.52%	0.02%
3	0.4%	15.97%	66.14%	16.55%	0.95%
4	0.03%	1.4%	20.89%	66.43%	11.25%
5	0%	0.01%	0.48%	17.43%	82.08%

*This analysis determines the percent of hospitals that would receive that same Star Rating if the Star Ratings assignment was randomly simulated 5,000 times.

If you have specific questions regarding your facilities Star Ratings, you can email cmsstarratings@lantanagroup.com.



HCAHPS Podcast Now Available

The national HCAHPS Project Team has posted a podcast specifically targeted for HCAHPS approved survey vendors and self-administering hospitals to provide important information about key items related to the HCAHPS Survey administration. The HCAHPS podcast titled “Overview of Requirements” reviews the basic requirements for successfully transitioning to the New *Communication About Pain* items effective with January 1, 2018 and forward discharges.

To view the podcast and access of copy of the podcast transcripts, [click here](#).

HCAHPS Citation:

<http://www.hcahponline.org> Centers for Medicare & Medicaid Services, Baltimore, MD. December 18, 2017.

<https://www.qualitynet.org> Centers for Medicare & Medicaid Services, Baltimore, MD. December 18, 2017.

HCAHPS website:

<http://www.hcahponline.org>

CAHPS Hospice



Hospice Compare Refresh - Now Available

The December 2017 quarterly Hospice Compare refresh is now available. This refresh covers Quarter 1, 2016 through Quarter 4, 2016 decedents. [Click here](#) to view the data.



UPDATED - CAHPS Hospice Step-by-Step Guide

The National CAHPS Hospice Project Team has updated documents for calculating CAHPS Hospice Survey Top-Box Score and Case-Mix Adjustment Methods for CAHPS Hospice Survey. These documents have been posted on the Scoring and Analysis page. To view or download these documents, [click here](#) or visit the CAHPS Hospice [website](#) and click on Scoring and Analysis on the left hand side of the page.



REMINDER - CY 2017 Participating Exemption for Size Form Submission Deadline Approaching

As a reminder, the Participation Exemption for Size Form for the calendar (CY) 2017 CAHPS Hospice Survey data collection and reporting requirements is available to complete and submit on the CAHPS Hospice Survey [website](#).

If your facility served fewer than 50 survey-eligible decedents/caregivers in CY 2016 (January 1, 2016 through December 31, 2016) you can apply for an exemption from participating the CAHPS Hospice Survey CY 2017.

The Participation Exemption for Size Form will be available to complete and submit online until **December 31, 2017**. [Click here](#) to access and complete the online Participation Exemption for Size Form.

If you have questions regarding the Participation Exemption for Size process or how to complete the form, you can contact the CAHPS Hospice Survey Project Team at hospicecahpssurvey@HCQIS.org.

CMS Promises More Accurate Hospice Compare Site

The Hospice Compare site is aimed at helping terminally ill Medicare beneficiaries and their families find hospices. More recently, providers noticed that the site had incorrect addresses. Beyond incorrect addresses, no consumers have noted wrong information on the site.

CMS understands the importance of having accurate information available to the consumers and that even though it may be a small amount of wrong information, it is unacceptable none-the-less.

With the December 2017 quarterly Hospice Compare refresh now available, Hospices are confident the update will lead to better patient choices.

CAHPS Hospice Citation:

<http://www.hospicecahpssurvey.org/en/> Centers for Medicare & Medicaid Services, Baltimore, MD. December 18, 2017.

<https://www.cms.gov/> Centers for Medicare & Medicaid Services, Baltimore, MD. December 18, 2017.

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

CAHPS Hospice website:

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

ICH CAHPS



2017 ICH CAHPS Fielding Timeline

Activity	Date
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 st Questionnaire (mail only and mixed mode)/Begin Telephone data collection (phone only mode)	5/4/2018
Mail 2 nd 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.

ICH CAHPS Citation:

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

<https://www.medicare.gov/> Centers for Medicare & Medicaid, Baltimore, MD. December 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.

OAS CAHPS Citation

<https://oascahps.org/> Centers for Medicare & Medicaid Services, Baltimore, MD. December 18, 2017.

OAS CAHPS website:

<https://oascahps.org/>

CAHPS for ACO



CAHPS for ACO Fielding Timeline

Activity	Date
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 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
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

Activity	Date
Close customer support toll-free line	2/1/2018
Submit final data to CMS	2/6/2018-2/8/2018

CAHPS for MIPS Citation:

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

Things to Remember/Consider for 2018

With the close of a calendar year (CY), there can come many changes within your facility. To keep your data reporting running smoothly, here are a few items to remember/consider for transitioning into CY 2018.

1. Have you communicated any EMR vendor changes planned for CY 2018 to your authorized survey vendor?
2. Are you anticipating any staffing changes for CY 2018 who currently interact with NRC Health?
3. Will those staffing changes affect your data submitting processes?

As your authorized survey vendor, NRC Health is here to help answer any questions you have related to CAHPS. Please do not hesitate to reach out to your Account Manager or the NRC Health Corporate Compliance team for support and assistance.

External Submission Deadlines

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

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