

The HCAHPS (pronounced “H-caps”) Survey is the first national, standardized, publicly reported survey of patients’ perspectives of inpatient hospital care. The survey is intended to produce standardized information about patients’ perspectives of care that allows objective and meaningful comparisons of hospitals on topics that are important to consumers. CMS says that public reporting of HCAHPS results creates incentives for hospitals to improve the quality of care. HealthStream has been approved by CMS to administer the HCAHPS Survey since 2008. Contact any member of your HealthStream team to learn more about HCAHPS and our unique product offerings.

<b>Who is Required to Participate</b>	Since 2008, hospitals that are subject to the Inpatient Prospective Payment System (IPPS) are required to collect and submit HCAHPS data as part of the Hospital Inpatient Quality Reporting Program. Non-IPPS hospitals, such as Critical Access Hospitals, may voluntarily participate in HCAHPS. The Affordable Care Act identified HCAHPS as one of the measures to be included in the Hospital Value-Based Purchasing (VBP) program starting in FY 2013.				
<b>The Survey</b>	HCAHPS is a 32-item survey designed to measure patients’ perceptions of their inpatient hospital experience. Eleven HCAHPS measures are publicly reported on the Hospital Compare website. Each of the seven summary measures is constructed from two or three survey questions. <table border="0" style="width: 100%; margin-top: 10px;"> <tr> <td style="vertical-align: top;"> <b>Summary (Composite) Measures:</b> <ol style="list-style-type: none"> <li>1. Communication with Nurses</li> <li>2. Communication with Doctors</li> <li>3. Staff Responsiveness</li> <li>4. Pain Management</li> <li>5. Communication about Medicines</li> <li>6. Discharge Information</li> <li>7. Care Transition</li> </ol> </td> <td style="vertical-align: top; padding-left: 20px;"> <b>Individual Items:</b> <ol style="list-style-type: none"> <li>8. Cleanliness</li> <li>9. Quietness</li> </ol> </td> </tr> <tr> <td></td> <td style="vertical-align: top; padding-left: 20px;"> <b>Global Items:</b> <ol style="list-style-type: none"> <li>10. Recommend Hospital</li> <li>11. Overall Hospital Rating</li> </ol> </td> </tr> </table>	<b>Summary (Composite) Measures:</b> <ol style="list-style-type: none"> <li>1. Communication with Nurses</li> <li>2. Communication with Doctors</li> <li>3. Staff Responsiveness</li> <li>4. Pain Management</li> <li>5. Communication about Medicines</li> <li>6. Discharge Information</li> <li>7. Care Transition</li> </ol>	<b>Individual Items:</b> <ol style="list-style-type: none"> <li>8. Cleanliness</li> <li>9. Quietness</li> </ol>		<b>Global Items:</b> <ol style="list-style-type: none"> <li>10. Recommend Hospital</li> <li>11. Overall Hospital Rating</li> </ol>
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<b>Approved Data Collection Methodologies</b>	Hospitals may use an approved survey vendor like HealthStream, or collect their own HCAHPS data if approved by CMS to do so. CMS has approved four modes of survey administration: mail only, telephone only, mixed methodology of mail with telephone follow-up, and active interactive voice response (IVR). HealthStream offers the telephone and mail methodologies.				
<b>Person Surveyed and Proxies</b>	Every attempt must be made to interview the patient. Proxies are not permitted.				
<b>Approved Languages</b>	The HCAHPS Survey is currently available in English, Spanish, Chinese (mail only), Russian (mail only), Vietnamese (mail only), and Portuguese (mail only). Hospitals/Survey vendors are not permitted to make or use any other language translations.				
<b>Generating the Patient Sample</b>	Hospitals are responsible for providing complete, accurate, and valid patient files that contain all administrative information on all patients who meet the eligible population criteria – including DRG or other means to determine service line. Prior to generating the HCAHPS sample frame, HealthStream applies the eligibility criteria, removes exclusions, and performs de-duplication. Sampling can be conducted one time at the end of the month or continuously throughout the month, provided that a random sample is generated for the entire month.				
<b>Survey Timing</b>	HCAHPS data collection is conducted on an ongoing basis. For each sampled patient, the survey must be initiated (by phone or mail) within 42 days of discharge, and must be completed no later than 42 days after the first attempt. HealthStream typically begins data collection within a few business days after receiving patient files.				
<b>Number of Completes</b>	CMS says that hospitals must submit at least 300 completed HCAHPS Surveys in a rolling four-quarter period (unless the hospital’s inpatient volume is too low to obtain 300 completed surveys).				

**Unit Targets** CMS sampling rules allow hospitals to establish a targeted number of completes by unit or treatment area. When conducting disproportionate sampling, CMS requires facilities sample a minimum of ten eligible discharges for each unit each month.

**Patient Eligibility** The HCAHPS sampling protocol employs the patient's principal diagnosis at discharge to determine whether he or she falls into one of the three eligible service line categories: Maternity Care, Medical, or Surgical. HCAHPS is not restricted to Medicare patients. The following are the eligibility criteria:

- Eighteen (18) years or older at the time of admission.
- Admission includes at least one overnight stay in the hospital (defined as an inpatient admission in which the patient's admission date is different from the patient's discharge date). The admission need not be 24 hours in length. For example, a patient had an overnight stay if he or she was admitted at 11:00 PM on Day 1, and discharged at 10:00 AM on Day 2. Patients who did not have an overnight stay should not be included in the sample frame (e.g., patients who were admitted for a short period of time solely for observation; patients admitted for same day diagnostic tests as part of outpatient care).
- Non-psychiatric MS-DRG/principal diagnosis at discharge. Patients whose principal diagnosis falls within the Maternity Care, Medical, or Surgical service lines and who also have a secondary psychiatric diagnosis are still eligible for the survey. MS-DRG codes in the ineligible category include codes for newborn, psychiatric, rehabilitation, or deceased, and MS-DRG codes with no assigned type.
- Alive at the time of discharge.

**Exclusions** The following categories of patients are excluded from the sample frame:

- "No-Publicity" patients – Patients who request that they not be contacted.
- Court/Law enforcement patients (i.e., prisoners); this does not include patients residing in halfway houses.
- Patients with a foreign home address (the U.S. territories – Virgin Islands, Puerto Rico, Guam, American Samoa, and Northern Mariana Islands are not considered foreign addresses and are not excluded).
- Patients discharged to hospice care (Hospice-home or Hospice-medical facility).
- Patients who are excluded because of state regulations.
- Patients discharged to nursing homes and skilled nursing facilities.

**Public Reporting** HCAHPS results currently on display on the Hospital Compare website represent over 3.1 million surveys from over 4,100 hospitals. The data is based on a rolling twelve month average top-box score, and is updated quarterly. A hospital must have four quarters of data before results show on the Hospital Compare website. Data from the HCAHPS survey results are displayed as seven composite scores, two individual items, and two global items.

HCAHPS results are publicly reported on Hospital Compare as top-box, bottom-box and middle-box scores. The top-box is the most positive response to HCAHPS survey items. For example, the percentage of patients who said "always" on questions using the never, sometimes, usually and always scale. HealthStream's Insights Online reporting website displays the full distribution of responses, as well as top-box and mean score.

**HCAHPS Star Ratings** CMS released the HCAHPS Star Ratings on the Hospital Compare website with the April 2015 public reporting of HCAHPS results. Twelve star ratings appear on Hospital Compare – one for each of the 11 HCAHPS measures, plus an HCAHPS Summary Star. The star ratings are part of CMS's plans to make it easier for consumers to compare healthcare facilities. CMS updates the HCAHPS Star Ratings each quarter. Hospitals must have at least 100 completed surveys in a 12-month reporting period to be eligible for HCAHPS Star Ratings.

**CMS Data Adjustments** CMS adjusts HCAHPS results for survey mode and patient-mix prior to public reporting. CMS says that only the adjusted results should be considered the official HCAHPS results. The goal of both the mode and patient mix adjustments is to ensure HCAHPS scoring is fair.

**HealthStream  
Reporting &  
Support**

In addition to online access to survey results throughout data collection, HealthStream offers a comprehensive report with comparisons to national benchmarks, percentile ranks and identification of priorities for improvement. Hospitals will have access to our complete library of Best Practices, and a detailed report review with a senior member of their dedicated project team.

We also help organizations to improve the patient experience and CAHPS survey results through online and on-site assessments, coaching and educational tools. We focus on strategies that have the greatest potential impact for rapid CAHPS improvement. We also offer a variety of improvement tools and resources to assist our clients, including:

- Rapid HCAHPS Diagnostic Tool
- PX Advisor
- Re-CAHPS Webinar Series
- HCAHPS Resource Guide

Learn more at: [HealthStream's HCAHPS Survey](#)

**CMS Websites**

[www.hcahponline.org](http://www.hcahponline.org)

[www.medicare.gov/hospitalcompare](http://www.medicare.gov/hospitalcompare)

<https://www.qualitynet.org>

<http://www.cms.gov/Hospital-Value-Based-Purchasing>