

The ICH CAHPS (pronounced “I-C-H-caps”) Survey is the first national, standardized, publicly reported survey of patients’ perspectives of in-center hemodialysis care. The survey is intended to produce standardized information about patients’ perspectives of care that allows objective and meaningful comparisons of ICH facilities on topics that are important to consumers. HealthStream has been approved by CMS to administer the ICH CAHPS Survey since 2012. Contact any member of your HealthStream team to learn more about ICH CAHPS and our unique product offerings.

Who is Required to Participate Since 2014 Medicare-certified ICH facilities with 30 or more survey-eligible ICH patients are required to collect and submit ICH CAHPS data. Facilities must use a CMS-approved vendor and may not self-administer.

Timeline	2016 Spring Survey	2016 Fall Survey
Sampling Window	Oct. 1-Dec. 31, 2015	April 1-June 30, 2016
Samples provided to Survey Vendors	April 1, 2016	September 30, 2016
Mail Pre-notification letters	April 22, 2016	October 21, 2016
Begin data collection	May 6, 2016	November 4, 2016
End data collection	July 15, 2016	January 13, 2017

The Survey The survey includes 62 questions with an average interview length of 18 minutes. The survey questions are organized into three summary measures (each of which is comprised of multiple questions), and three global questions. These are the measures/items that will be publicly reported on the Dialysis Facility Compare website:

Summary Measures:

1. Nephrologists Communication and Caring (6 questions)
2. Quality of Dialysis Center Care and Operations (17 questions)
3. Providing Information to Patients (9 questions)

Global Items:

4. Rating of Nephrologist
5. Rating of Dialysis Center Staff
6. Rating of Dialysis Center

CMS has provided a list of 21 supplemental questions that are approved for use. If a facility wants to add a custom question not on the list of approved questions, they must submit the question to the ICH CAHPS Coordination Team (ICCT) for approval.

Approved Data Collection Methodologies CMS has approved three modes of survey administration: mail only, telephone only, and mixed methodology of mail with telephone follow-up. HealthStream offers the telephone methodology.

Person Surveyed and Proxies Every attempt must be made to interview the patient. Proxies are not permitted.

Approved Languages The ICH CAHPS Survey is available in English, Spanish, simplified Chinese (mail only), traditional Chinese (mail only), and Samoan (mail only). Survey vendors are not permitted to make or use any other language translations.

Generating the Patient Sample CMS will select the sample for each facility using patient-level data that ICH facilities submit to CMS via the Consolidated Renal Operations in a Web-Enabled Network (CROWNWeb). The sample will be selected at the CCN level. Facilities do not need to generate a list of patients; however, they are encouraged to update patient contact information in CROWNWeb.

Survey Timing The survey is administered two times per year on a schedule determined by CMS.

Number of Completes CMS has established a target of 100 completed surveys per cycle (target minimum of 200 completed surveys per facility over a 12-month period, which represents 2 survey cycles). Sampling will depend on the number of ICH patients served by a facility. CMS does not currently allow oversampling.

- Facilities with 1-200 unique patients = Census survey (patients could be surveyed in both the Fall and Spring surveys)
- Facilities with 201+ unique patients = Random sample of 200 patients (CMS will attempt to eliminate overlap in sample between Fall and Spring surveys)

In order to be scored on the survey, CMS says that facilities must submit at least 30 completed ICH CAHPS Surveys over the two annual survey administrations.

Patient Eligibility Eligible patients must:

- be 18 years old or older
- currently receive ICH from the facility
- have received ICH care from their current facility for 3 months or longer
- not be known to be receiving hospice care
- not be known to currently reside in an institution (residential nursing home, jail/prison)
- speak one of the approved languages in which the survey is offered
- be physically/mentally capable of responding to the survey

Exclusions To the extent possible, CMS will remove ineligible patients from the sampling frame before the sample is selected. Ineligible patients include those who:

- are under age 18
- have not received ICH at their current ICH facility for 3 months or longer
- currently receive dialysis care at home, not in an in-center hemodialysis facility or receive peritoneal dialysis
- were deceased before the sampling window closed

Patient Confidentiality CMS does not allow HealthStream to share any patient-identifying information with ICH facilities. ICH facilities must never know which of their patients were included in the survey and whether their patients completed the survey. In addition, HealthStream cannot share a patient's responses to the survey with the ICH facility, even if the sample patient gives his or her consent to do so. CMS also requires that we mask data on Insights Online and in the reports unless 11 or more responses are available. HealthStream will not provide a summary report for any facility that receives 10 or fewer responses.

Public Reporting Public reporting of ICH CAHPS data is scheduled to begin in the Fall of 2016. Results from the first public reporting period will be based on data from the two surveys conducted in 2015. Results will be refreshed twice annually, with the results from the oldest survey period being replaced by data from the most recent survey period. Each CCN must have a minimum of 30 completed surveys for results to be publicly reported. CMS will provide each participating facility with its own survey results for review before the results are publicly reported.

CMS Data Adjustments CMS will adjust ICH CAHPS results prior to public reporting. The goal of the adjustments is to ensure ICH CAHPS scoring is fair. CMS has yet to release their adjustment model.

ESRD QIP & Value-Based Payment Starting in payment year 2018, the ICH CAHPS Survey will become a clinical measure in the End-Stage Renal Disease Quality Improvement Program. At that time, the survey will move from a pay-for-reporting requirement to pay-for-performance. Performance standards will be calculated using CY 2015 data.

ICH CAHPS Scoring Facilities will receive an achievement score and an improvement score for each of the three composite measures and three global ratings. A facility's ICH CAHPS score will be based on the higher of the facility's achievement or improvement score for each of the composite measures and global ratings, and the resulting scores on each of the composite measures and global ratings will be averaged to yield an overall score on the ICH CAHPS clinical measure. In order to receive a score on the ICH CAHPS clinical measure, a facility must have treated at least 30 survey-eligible patients during the eligibility period and receive 30 completed surveys during the performance period.

CMS Websites <https://ichcahps.org>
<http://www.medicare.gov/dialysisfacilitycompare/>
<http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ESRDQIP/>