

Hospital CAHPS Podcast Series – Transcript

Improving Response Rates of HCAHPS Hospitals

Slide 1-Improving Response Rates of HCAHPS Hospitals

Welcome to the Hospital CAHPS Podcast Series. Hospital CAHPS is better known by the acronym H-CAHPS, so you will hear this acronym throughout the podcast. This is the second episode in the HCAHPS Podcast Series and will cover the important topic of improving response rates of HCAHPS hospitals. This podcast is for anyone interested in the topic and will be particularly useful for hospitals participating in HCAHPS and for survey vendors administering the HCAHPS survey.

Slide 2-Overview: Improving Response Rates of HCAHPS Hospitals

During this episode we will be talking about the importance of a hospital's HCAHPS response rate. We will go through how to calculate a hospital's HCAHPS response rate, talk about why a hospital's HCAHPS response rate is important, and discuss what can affect a response rate and how to improve it.

Slide 3-HCAHPS Response Rate

First, let's cover what a response rate is. A response rate is the percentage of eligible people asked to complete a survey and who do so. The HCAHPS response rate is calculated as the percentage of patients who completed the survey out of the total number of sampled patients after post-sampling ineligible patients have been removed. For an HCAHPS survey to be considered complete, a patient needs to have answered at least half of the core survey questions. To learn more about which survey statuses fall into the completed survey, fielded survey and ineligible survey categories please refer to the Survey Response Rate section in the Data Specifications chapter in version 13.0 of the Quality Assurance Guidelines.

Slide 4-Why are HCAHPS RRs Important?

HCAHPS response rates are important because they affect HCAHPS measure reliability at the hospital-level. Measure reliability is better when more patients complete the survey for a hospital. This is why CMS states that a hospital must obtain at least 300 completed HCAHPS surveys within a reporting period unless a hospital is too small to obtain 300 completes. Furthermore, hospitals must obtain 25 or more completed surveys within a rolling four-quarter period in order to have scores reported on Hospital Compare; hospitals must have 100 or more completes to be eligible for Hospital Value Based Purchasing; and hospitals must have 100 or more completes to receive HCAHPS Star Ratings. Improving hospital response rates means achieving a larger number of completed surveys without increasing the number of patients who receive the survey.

Slide 5-How to Improve Your HCAHPS RR

We will cover five topics about what may affect a hospital's HCAHPS response rate and how to improve upon it. These topics include limiting a hospital's use of supplemental items, offering the HCAHPS survey in CMS approved translations, scheduling patient callbacks, using accurate patient contact information, and using mixed mode survey administration.

Slide 6-Limit Supplemental Items

CMS encourages hospitals and survey vendors to limit the use of supplemental items added to the end of the HCAHPS survey, especially for hospitals using Phone Only, Mixed and Active IVR modes of survey administration. This is supported by evidence from the 2016 HCAHPS Mode Experiment, which showed that there are large declines in response rates when too many supplemental items are added to the HCAHPS survey. A significant decline in response rate was seen at different supplemental item thresholds, depending on the survey mode being used. For Mail Only mode, the use of 44 supplemental items was found to cause at least a 4% response rate decline. Telephone Only and Mixed Mode survey administration are more sensitive to the addition of supplemental items, with a 4% decline in response rate seen with the addition of 27 supplemental items. IVR mode was the most sensitive to the addition of supplemental items, with only 16 items causing a 4% decline in response rate. These findings are consistent with an observational study conducted by Medicare Advantage CAHPS, which found about a 2.5% decline in response rate for every 12 supplemental items used. It's clear that reducing the number of supplemental items may significantly improve a hospital's response rate.

Please note that the placement of supplemental items before the "About You" section may cause self-reported patient information to be missing at a higher rate, which can affect the accuracy of hospital patient-mix adjustment. Because of this, CMS strongly encourages any supplemental items to be placed after the "About You" section.

Slide 7-Offer Survey Translations

CMS strongly encourages hospitals with significant patient populations that speak Spanish, Chinese, Russian, Vietnamese, or Portuguese to offer the HCAHPS survey in these CMS approved translations. It is important to know your hospital's inpatient population so that the HCAHPS survey can be offered in translations that best match the language preferences of a hospital's patient population. We suspect that patients who prefer a language other than English are less likely to complete the HCAHPS survey if they receive it in English. Not offering the HCAHPS survey in one of the CMS approved survey translations may have a deleterious effect on a hospital's response rate.

Slide 8-HCAHPS Survey Translations Offered

Various HCAHPS survey translations are available depending on the mode of administration. For Mail Only mode, the HCAHPS survey is currently available in English, Spanish, Chinese, Russian, Vietnamese, and Portuguese translations. For Telephone Only and Mixed Mode, the survey is available in English, Spanish, Chinese, and Russian translations. For Active IVR mode, the survey is available in English and

Spanish translations. Appropriately matching survey translations to the patient population being served maximizes the number of patients who can accurately respond, which benefits the hospital response rate. If you would like to request additional survey language translations that are not currently approved by CMS, please send your request to HCAHPS@hcqis.org. CMS reviews these requests on an ongoing basis.

Slide 9-Schedule Patient Callbacks

It is widely recognized that more and more people are using cellphones and thus are likely to be contacted at inconvenient times and in inconvenient places. Patients may be discouraged from answering the HCAHPS survey if contacted during an inconvenient time. This is why starting with the release of QAG 13.0 in March 2018, vendors and self-administering hospitals using Telephone Only and Mixed Mode survey administration must schedule a telephone callback that accommodates a patient's request for a specific time and day. CMS also encourages weekend callbacks if it's convenient for the patient.

Scheduling callbacks at a patient's request is meant to increase opportunities for patients to take and complete the HCAHPS survey, while respecting patients' availability and time. Following the new patient callback protocol may have a positive impact on a hospital's response rate.

Slide 10-Use Accurate Patient Contact Information

HCAHPS survey vendors and self-administering hospitals must work with client hospitals to obtain the most current patient contact information and must use other means to find the patient contact information. For mailing addresses, vendors and self-administering hospitals can use other methods such as the National Change of Address and the United States Postal Service Coding Accuracy Support System Software as well as commercial software and internet search engines. For telephone numbers, vendors and self-administering hospitals should make sure to run update program software against the sample file just before or after uploading data to survey management systems as well as utilize commercial software and internet directories.

Slide 11-Keep Patient Contact Information Updated

Hospitals should keep their patient contact information as current as possible and communicate any updated contact information to their HCAHPS survey vendor so that vendors will have the best chance of reaching patients. Poor response rates may be due to inaccurate patient contact information so it's very important that contact information is accurate and complete before attempting to contact patients. Ensuring that HCAHPS survey vendors have the correct, most up-to-date patient contact information increases the likelihood that patients will be reached and have the opportunity to respond, maximizing a hospital's response rate.

Slide 12-Use Mixed Mode Survey Administration

The use of Mixed Mode survey administration has the highest response rate since it utilizes both mail and telephone mode when attempting to reach patients. Initially offering to survey people in one mode

and switching to a different mode at follow-up increases response rates by allowing more people the opportunity to respond in their preferred mode. This was reinforced through the 2016 HCAHPS Mode Experiment, which showed that Mixed Mode consistently produces the highest response rate, especially for adults older than 45 years. Mixed Mode may be particularly beneficial for low response rate hospitals currently using Mail Only mode. While Mixed Mode may be more expensive than the Mail Only or Phone Only modes, it may achieve the required 300 completes at a lower cost for some low response rate hospitals.

Slide 13-Always Room for Improvement

Hospital response rates can be improved by limiting the use of supplemental items, offering the HCAHPS survey in CMS approved translations, scheduling patient callbacks, using accurate patient contact information, and using Mixed Mode survey administration.

HCAHPS survey vendors and self-administering hospitals should always strive to maximize the number of respondents to the HCAHPS survey by considering the different ways that response rates can be impacted. Hospitals with exceptionally low HCAHPS response rates may want to have a conversation with their survey vendor about efforts being made to improve a hospital's response rate.

Slide 14-Questions and HCAHPS Technical Support

For HCAHPS technical assistance or any questions you may have, you can email us at HCAHPS@hcqis.org or call us at 1-888-884-4007. For more information about the HCAHPS survey, you can visit the Hospital CAHPS website at: www.hcahponline.org. Thank you for listening to the HCAHPS Podcast on Improving Response Rates of HCAHPS Hospitals.

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