An entity must be approved by CMS in order to administer the HCAHPS Survey and submit HCAHPS data to the HCAHPS Data Warehouse. A hospital self-administering the HCAHPS Survey must meet **ALL** of the Self-administering Hospital Minimum Survey Requirements, and a survey vendor or a hospital administering the HCAHPS Survey for multiple sites must meet **ALL** of the Survey Vendor Minimum Survey Requirements. In addition, subcontractor(s) or **other organization(s)** performing major HCAHPS Survey administration functions (e.g., mail/telephone/IVR operations, XML file preparation) must also meet **ALL** of the HCAHPS Minimum Survey Requirements which pertain to that role.

In reviewing Participation Forms from potential HCAHPS Survey vendors, the HCAHPS Project Team will take into consideration any prior experience the applicant organization may have with administering CMS-sponsored CAHPS Surveys.

The HCAHPS Minimum Business Requirements will continually apply to all HCAHPS approved self-administering hospitals/survey vendors/multi-site hospitals for as long as the organization maintains the HCAHPS approval status. This includes maintaining the adequate number of resources (e.g., staffing, system resources, etc.) in order to fully comply with HCAHPS protocols, deadlines and HCAHPS Project Team requests.

- > Approved HCAHPS Survey vendors **and** self-administering hospitals must fully comply with the HCAHPS oversight activities.
 - The FY 2014 IPPS Final Rule states: "Approved HCAHPS Survey vendors and self-administering hospitals must fully comply with all HCAHPS oversight activities, including allowing CMS and its HCAHPS Project Team to perform site visits at the hospitals' and survey vendors' company locations." Federal Register / Vol. 78, No. 160 / Monday, August 19, 2013 / Rules and Regulations, Section. 412.140
 - In order for the HCAHPS Project Team to perform the required oversight activities, organizations that are approved to administer the HCAHPS Survey must conduct all of their business operations within the United States. This requirement applies to all staff and subcontractors or other organizations (if applicable).
- Approved survey vendors are expected to maintain active contract(s) for HCAHPS Survey administration with client hospital(s). An "active contract" is one in which the HCAHPS Survey vendor is authorized by one or more hospital client(s) to submit HCAHPS data to the HCAHPS Data Warehouse. If an HCAHPS Survey vendor does not have any contracted client hospitals for HCAHPS within two years (a consecutive 24 months) from the date it received approval to administer the HCAHPS Survey, then that survey vendor's "Approved" status for HCAHPS Survey administration will be withdrawn. The HCAHPS "Approved" survey vendor has the option to apply for reapproval prior to the expiration deadline.
 - The first step is to participate in the Introduction to HCAHPS Training. After training is completed, a Participation Form must be submitted for consideration of approval. All Minimum Business Requirements (MBRs) must continue to be met, along with participation in required HCAHPS training sessions in order to be eligible for reconsideration.

- If the organization is approved to administer the HCAHPS Survey for a second term, and no hospital client(s) are obtained within two years (a consecutive 24 months), then the survey vendor's "Approved" status for HCAHPS Survey administration will be withdrawn. A 24-month wait period will be required before the organization is eligible to apply again. All first time survey vendors have 24 months from the date of conditional approval to obtain a hospital client.
- If approval status is withdrawn (i.e., not seeking re-approval for second term), a 24-month wait period will be required before the organization is eligible to apply again.

Note: If a self-administering hospital or a survey vendor is non-compliant with program requirements, HCAHPS data may not be publicly reported for the hospital (or contracted hospitals), which could affect that hospital's CMS Annual Payment Update (APU) for the fiscal year. For additional information regarding APU requirements, please review the FY 2019 IPPS Final Rule.

The minimum survey requirements for the organization are as follows:

1. Relevant Survey Experience

Demonstrated **recent** experience in fielding patient-specific surveys in the requested mode (i.e., Mail, and/or Telephone, and/or Mixed Mode, and/or IVR).

Criteria	Requirement	
Criteria	Self-administering Hospital	Survey Vendor/Multi-site
Patient-Specific Survey Experience	Minimum of two years Mail, and/or Telephone, and/or Mixed Mode, and/or IVR patient-specific survey experience within the most recent two-year time period	Minimum of three years Mail, and/or Telephone, and/or Mixed Mode, and/or IVR patient-specific survey experience within the most recent three-year time period
Number of Years in Business	Minimum three years	Minimum four years
Sampling Experience Note: Hospitals/Survey vendors are responsible for conducting the sampling process and must not subcontract this activity.	One year prior experience selecting random sample based on specific eligibility criteria within the most recent one-year time period	 Two years prior experience selecting random sample based on specific eligibility criteria within the most recent two-year time period Work with contracted client hospital(s) to obtain patient data for sampling via HIPAA-compliant electronic data transfer processes Adequately document sampling process

2. Organizational Survey Capacity

Capability and capacity to handle a required volume of mail questionnaires and/or conduct standardized telephone and/or IVR interviewing in specified time frame.

Cuitonio	Criteria Requirement	
Criteria	Self-administering Hospital	Survey Vendor/Multi-site
Personnel Note: Volunteers are not permitted to be involved in any aspect of the HCAHPS Survey administration process.	 Designated HCAHPS Project Manager with minimum one year prior experience conducting patient-specific surveys in the requested mode Have appropriate organizational back-up staff for coverage of key staff 	 Designated HCAHPS personnel: Project Manager with minimum two years prior experience conducting patient-specific surveys in the requested mode Staff with minimum one year prior experience in sample frame development and sample selection Programmer (subcontractor designee, if applicable) with minimum one year prior experience processing data and preparing data files Call Center/Mail Center Supervisor (subcontractor designee, if applicable) with minimum one year prior experience in role Have appropriate organizational back-up staff for coverage of key staff

Criteria	Requirement	
	Self–administering Hospital	Survey Vendor/Multi-site
System Resources Note: All system resources are subject to oversight activities, including on-site visits to physical locations. In order for the HCAHPS Project Team to perform the required oversight activities, organizations that are approved to administer the HCAHPS Survey must conduct all of their business operations within the United States. This requirement applies to all staff and subcontractors.	 Physical plant resources available to handle the volume of surveys being administered A systematic process to: track fielded surveys throughout the protocol, avoiding respondent burden and losing respondents assign random, unique, de-identified patient identification number (Patient ID) to track each sampled patient 	 Physical plant resources available to handle the volume of surveys being administered, including computer and technical equipment Electronic or alternative survey management system to: track fielded surveys throughout the protocol, avoiding respondent burden and losing respondents assign random, unique, de-identified patient identification number (Patient ID) to track each sampled patient
Sample Frame Creation	 One year prior experience selecting sample based on specific eligibility criteria Generate the sample frame data file that contains all discharged patients who meet the eligible population criteria Draw sample of discharges for the survey, who meet the eligible population criteria 	 Two years prior experience selecting sample based on specific eligibility criteria Generate the sample frame data file that contains all discharged patients who meet the eligible population criteria Draw sample of discharges for the survey, who meet the eligible population criteria
Mail Administration Note: Mail survey administration activities are not to be conducted from a residence.	 Obtain and update addresses Produce and print survey instruments and materials; a sample of all mailing materials must be submitted for review Mail out of survey materials Process survey data (including key-entry or scanning) Track non-respondents for follow-up mailing 	 Obtain and update addresses Produce and print survey instruments and materials; a sample of all mailing materials must be submitted for review Mail out of survey materials Process survey data (including key-entry or scanning) Track non-respondents for follow-up mailing

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Criteria	Requi	rement
Criteria	Self-administering Hospital	Survey Vendor/Multi-site
Telephone Administration Note: Telephone interviews are not to be conducted from a residence, and cannot be conducted by staff that provides direct patient care.	 Obtain and update all telephone numbers Collect telephone interview data for the survey; a sample of the telephone script and interviewer screen shots must be submitted for review Identify non-respondents for follow-up telephone calls Schedule and conduct callback appointments 	 Obtain and update all telephone numbers Collect telephone interview data for the survey, using electronic or alternative interviewing system; a sample of the telephone script and interviewer screen shots must be submitted for review Identify non-respondents for follow-up telephone calls Schedule and conduct callback appointments
Mixed Mode Administration Note: Mail survey administration and telephone interviews are not to be conducted from a residence, and cannot be conducted by staff that provides direct patient care.	 See above referenced Mail Administration requirements See above referenced Telephone Administration requirements 	 See above referenced Mail Administration requirements See above referenced Telephone Administration requirements
Active Interactive Voice Response (IVR) Administration Note: Telephone interviews are not to be conducted from a residence, and cannot be conducted by staff that provides direct patient care.	 Obtain and update telephone numbers Collect touch-tone keypad responses to pre-recorded questions; a sample of the IVR script must be submitted for review Identify non-respondents for follow-up telephone calls Ability to conduct telephone interview if respondent opts out of IVR Schedule and conduct callback appointments 	 Obtain and update telephone numbers Collect touch-tone keypad responses to pre-recorded questions; a sample of the IVR script must be submitted for review Identify non-respondents for follow-up telephone calls Use electronic telephone or alternative interviewing system to collect telephone interview if respondent opts out of IVR Schedule and conduct callback appointments

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Criteria	Requirement
Criteria	Self-administering Hospital Survey Vendor/Multi-site
Data Submission Note: Hospitals/Survey vendors are responsible for conducting data submission and must not subcontract this process.	 One year prior experience transmitting data via secure methods (HIPAA-compliant) Registered user of the QualityNet Secure Portal Prepare final patient-level data files for submission Access and submit data electronically via the QualityNet Secure Portal Prepare final patient-level data files for submission Access and submit data electronically via the QualityNet Secure Portal Prepare final patient-level data files for submission Access and submit data electronically via the QualityNet Secure Portal
Data Security	 ➤ Take the following actions to secure electronic data: ◆ Use a firewall and/or other mechanisms for preventing unauthorized access to the electronic files ◆ Implement access levels and security passwords so that only authorized users have access to sensitive data ◆ Implement daily data backup procedures that adequately safeguard system data ◆ Test backup files at a minimum on a quarterly basis to make sure the files are easily retrievable and working ◆ Perform frequent saves to media to minimize data losses in the event of power interruption ◆ Develop a disaster recovery plan for conducting ongoing business operations in the event of a disaster

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Criteria	Requirement	
Criteria	Self-administering Hospital	Survey Vendor/Multi-site
Data Retention and	➤ Take the following actions to	➤ Take the following actions to
Storage	securely store all survey	securely store all survey
	administration related data:	administration related data:
	 Store HCAHPS-related 	 Store HCAHPS-related
	data files, including	data files, including
	patient discharge files and	patient discharge files and
	de-identified electronic	de-identified electronic
	data files (e.g., HCAHPS	data files (e.g., HCAHPS
	Sample Frame, XML	Sample Frame, XML
	files, etc.), for all survey	files, etc.), for all survey
	modes for a minimum of	modes for a minimum of
	three years. Archived	three years. Archived
	electronic data files must	electronic data files must
	be easily retrievable.	be easily retrievable.
	 Store returned mail 	 Store returned mail
	questionnaires in a secure	questionnaires in a secure
	and environmentally safe	and environmentally safe
	location. Paper copies or	location. Paper copies or
	optically scanned images	optically scanned images
	of the questionnaires must	of the questionnaires must
	be retained for a	be retained for a
	minimum of three years	minimum of three years
	and be easily retrievable,	and be easily retrievable,
	when needed.	when needed.
Technical Assistance/	One year prior experience	> Two years prior experience
Customer Support	providing telephone customer	providing telephone customer
	support	support
	Provide customer support line	Provide toll-free customer
		support line

C-:'4	Requirement	
Criteria	Self-administering Hospital	Survey Vendor/Multi-site
Organizational	Develop confidentiality	Develop confidentiality
Confidentiality	agreements which include	agreements which include
Requirements	language related to HIPAA	language related to HIPAA
	regulations and the protection	regulations and the protection
	of patient information, and	of patient information, and
	obtain signatures from all	obtain signatures from all
	personnel with access to	personnel with access to
	survey information, including	survey information, including
	staff and all subcontractors	staff and all subcontractors
	involved in survey	involved in survey
	administration and data	administration and data
	collection	collection
	Execute Business Associate	Execute Business Associate
	Agreement(s) in accordance	Agreement(s) in accordance
	with HIPAA regulations	with HIPAA regulations
	Confirm that staff and	Confirm that staff and
	subcontractors are compliant	subcontractors are compliant
	with HIPAA regulations in	with HIPAA regulations in
	regard to patient protected	regard to patient protected
	health information (PHI)	health information (PHI)
	Establish protocols for secure	Establish protocols for secure
	file transmission. Emailing of	file transmission. Emailing of
	PHI via unsecure email is	PHI via unsecure email is
	prohibited.	prohibited.

3. Quality Control Procedures

Personnel training and quality control mechanisms employed to collect valid, reliable survey data and achieve, on average, a 26 percent response rate.

~	Requir	rement
Criteria	Self-administering Hospital	Survey Vendor/Multi-site
Demonstrated Quality Control Procedures	 Established systems for conducting and documenting quality control activities including: In-house training for staff and subcontractors involved in survey operations Printing, mailing and recording receipt of survey information, if applicable Telephone administration of survey, if applicable IVR administration of survey, if applicable Coding and editing or keying in survey data Preparing final patient-level data files for submission All other functions and processes that affect the administration of the HCAHPS Survey 	 Established systems for conducting and documenting quality control activities including: In-house training for staff and subcontractors involved in survey operations Printing, mailing and recording receipt of survey information, if applicable Telephone administration of survey, if applicable IVR administration of survey, if applicable Coding and editing or keying in survey data Preparing final patient-level data files for submission All other functions and processes that affect the administration of the HCAHPS Survey
Quality Assurance Plan (QAP) Documentation Requirements	Develop a QAP for survey administration in accordance with the HCAHPS <i>Quality Assurance Guidelines</i> and update the QAP on an annual basis and at the time of process and/or key personnel changes as part of retaining participation status	Develop a QAP for survey administration in accordance with the HCAHPS <i>Quality Assurance Guidelines</i> and update the QAP on an annual basis and at the time of process and/or key personnel changes as part of retaining participation status

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