

HCAHPS Fact Sheet

(CAHPS® Hospital Survey)

Beginning with January 1, 2025 Discharges and Forward

HCAHPS Overview

The HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) Survey is the first national, standardized, publicly reported survey of patients' perspectives of hospital care. HCAHPS (pronounced “*H-caps*”), also known as the CAHPS® Hospital Survey, is a 32-item survey instrument and data collection methodology for measuring patients’ perceptions of their hospital experience. Since 2008, HCAHPS has allowed valid comparisons to be made across hospitals locally, regionally and nationally. The HCAHPS Survey is in the public domain and hospitals’ scores are publicly reported.

The HCAHPS Survey serves three broad goals. First, the standardized survey and implementation protocol produces data that allow objective and meaningful comparisons of hospitals on topics that are important to patients and consumers. Second, public reporting of HCAHPS results creates incentives for hospitals to improve quality of care. Third, public reporting enhances accountability in health care by increasing transparency of the quality of hospital care provided in return for the public investment.

HCAHPS Development

In 2002, CMS partnered with the Agency for Healthcare Research and Quality (AHRQ) to develop and test the HCAHPS Survey. AHRQ and its CAHPS Consortium carried out a rigorous and multi-faceted scientific process. This included a public call for measures, literature review, cognitive interviews, consumer focus groups, stakeholder input, a three-state pilot test, extensive psychometric analyses, consumer testing, and numerous small-scale field tests. The HCAHPS Survey is in the public domain and hospitals’ scores are publicly reported.

CMS implemented the HCAHPS Survey in October 2006; the first public reporting of HCAHPS results occurred in March 2008. In 2025, CMS made several important changes to survey administration and content, detailed below.

Updated HCAHPS Survey Content The HCAHPS Survey asks recently discharged patients about aspects of their hospital experience that they are uniquely suited to address: 22 questions that ask how often or whether patients experienced a critical aspect of hospital care, 3 screener items that direct patients to relevant questions, and 7 questions to adjust for the mix of patients across hospitals or support Congressionally-mandated reports. Hospitals are permitted to add up to 12 supplemental items; CMS does not review, approve, or receive data from supplemental items.

Measures in the Updated HCAHPS Survey

The updated HCAHPS Survey produces 11 publicly reported measures: 7 composite (multi-item) measures and 4 single-item measures:

1. **Communication with Nurses** (composite)
2. **Communication with Doctors** (composite)
3. **Restfulness of Hospital Environment*** (composite)
4. **Care Coordination*** (composite)
5. **Responsiveness of Hospital Staff** (composite)
6. **Communication about Medicines** (composite)
7. **Discharge Information** (composite)

8. **Cleanliness of Hospital Environment** (single-item)
9. **Information about Symptoms*** (single-item)
10. **Overall Hospital Rating** (single-item)
11. **Recommend the Hospital** (single-item)

* Indicates new measure in the updated HCAHPS Survey.

To ensure that HCAHPS scores allow fair and accurate comparisons among hospitals, it is necessary to adjust for factors that are not directly related to hospital performance but which affect how patients answer survey items. CMS applies adjustments to eliminate any advantage or disadvantage attributable to the mode of survey administration or characteristics of patients that are beyond a hospital's control. A detailed explanation of patient-mix adjustment and the actual adjustments applied can be found at <https://www.hcahpsonline.org/en/mode--patient-mix-adj/>. The HCAHPS Project Team also undertakes a series of quality oversight activities of survey vendors to assure that the HCAHPS Survey is being administered properly and consistently, which include annual training, periodic site visits to inspect survey administration and trace records, and regular statistical analyses, evaluations, and comparisons of HCAHPS data.

Administration of the Updated HCAHPS Survey

HCAHPS is administered to a random sample of adult (18 years and older) inpatients between 48 hours and 42 days after discharge. Patients admitted in the Medical, Surgical and Maternity Care service lines are eligible for the survey; HCAHPS is not restricted to Medicare patients. Hospitals may use an approved survey vendor or, with CMS approval, self-administer the HCAHPS Survey.

HCAHPS can be implemented in six survey modes, each of which requires multiple attempts to contact patients: Mail Only, Phone Only, Mail-Phone (mail with phone follow-up of non-respondents), Web-Mail (Web survey with mail follow-up), Web-Phone (Web survey with phone follow-up), and Web-Mail-Phone (Web survey with mail then phone follow-up). Hospitals must survey patients throughout each month of the year. In addition to English, HCAHPS is available in official Spanish, Chinese, Russian, Vietnamese, Portuguese, German, Tagalog and Arabic translations. From January 2025, the official Spanish translation must be administered to patients who prefer to speak Spanish. The survey and its protocols for sampling, data collection, coding and submission can be found in the HCAHPS *Quality Assurance Guidelines* (QAG) manual located in the Quality Assurance section of the official [HCAHPS Website](#).

HCAHPS Public Reporting

HCAHPS scores are designed and intended for use at the hospital level for the comparison of hospitals. Official HCAHPS scores are based on four consecutive quarters of patient surveys and are publicly reported on [Care Compare](#) on [Medicare.gov](#) four times each year, with the oldest quarter rolling off as the newest quarter rolls on. Hospitals must have a minimum of 25 completed surveys in a four-quarter period for their HCAHPS results to be publicly reported. Hospital survey response rate and the number of completed surveys are also publicly reported. Current and past HCAHPS scores are available in a downloadable database found in the "Hospitals" tab on the [Provider Data Catalog tool](#). The new and revised HCAHPS measures will be publicly reported in October 2026.

Aggregate HCAHPS measure scores, both current and past, can be found in the Summary Analyses section of the official [HCAHPS Website](#). The tables include national and state *top-box* (most positive survey response) and *bottom-box* (most negative survey response) scores, percentiles for each measure, inter-correlations of the measures, comparisons of HCAHPS measures by hospital characteristics, and benchmarks for the three HCAHPS service lines (Medical, Surgical, and Maternity Care), and top-box scores for the individual survey questions that form the HCAHPS composite measures. The HCAHPS Website also contains news and updates about the survey, frequently asked questions, training materials,

survey instruments for every survey mode and translation, current and past Quality Assurance Guidelines, a bibliography of published research from the HCAHPS Project Team, and a growing series of podcasts to promote understanding of HCAHPS content, implementation, modes, adjustment and scoring.

HCAHPS Star Ratings

HCAHPS Star Ratings summarize all survey responses for each HCAHPS measure and present these in a simple format familiar to consumers to make it easier to use the information and spotlight excellence in healthcare quality. HCAHPS Star Ratings for each publicly reported HCAHPS measures, as well as the HCAHPS Summary Star Rating, which combines the HCAHPS measure star ratings are updated quarterly in the [Provider Data Catalog](#). The HCAHPS Summary Star Rating is also displayed on [Care Compare](#) on [Medicare.gov](#), labelled as “Patient survey rating.” Hospitals must have at least 100 completed HCAHPS Surveys over a four-quarter period to receive HCAHPS Star Ratings. The HCAHPS Summary Star Rating is also used as a component in the [Care Compare Overall Star Ratings](#).

The HCAHPS Star Rating Technical Notes describe how the Star Ratings are calculated and also include both the current and historical adjustments for patient mix and survey mode.

HCAHPS and Hospital Value-Based Purchasing

CMS’s Hospital Value-Based Purchasing (Hospital VBP) program links a portion of Inpatient Prospective Payment System (IPPS) hospital payment from CMS to performance on a set of quality measures. The Person and Community Engagement (PCE) domain, which accounts for 25% of the Hospital VBP Total Performance Score, is based on HCAHPS. More information about how HCAHPS scores are used in this program can be found at <https://qualitynet.cms.gov/inpatient/hvbp>.

The PCE domain score (0–100 points) consists of the HCAHPS Base Score (0–80 points) and HCAHPS Consistency Score (0–20 points). Hospital VBP utilizes HCAHPS scores from two calendar years: the Baseline Period and the Performance Period, which is two years later. Each of the eight HCAHPS dimensions contributes to the Base Score through either Improvement Points or Achievement Points. “Improvement” is the amount of change in a hospital’s HCAHPS dimension from the Baseline to the Performance Period. “Achievement” is the comparison of each dimension in the Performance Period to the national median for that dimension in the Baseline Period. The larger of the Improvement Points or Achievement Points for each dimension contributes to the Base Score. The HCAHPS Consistency Score, the second piece of the PCE domain, targets and further incentivizes improvement in a hospital’s *lowest performing* HCAHPS dimension.

More information about the Hospital VBP program can be found on the CMS Website at <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/HVBP/Hospital-Value-Based-Purchasing.html> and in the HCAHPS and Hospital VBP section of the HCAHPS Website at <https://www.hcahpsonline.org/en/hcahps-and-hospital-vbp/>.

Revision of the HCAHPS Survey

Regular review and evaluation are vital for HCAHPS to continue to fulfill its mission of providing a national standard for collecting and publicly reporting information about patient experience. In 2019, CMS initiated a multi-faceted review of HCAHPS content, design, and implementation. Focus groups and cognitive interviews were conducted with recent hospital inpatients to discuss their experiences of care and assess existing, revised, and potential survey items. In 2020, the HCAHPS Project Team convened a Technical Expert Panel (TEP) to discuss the HCAHPS revision efforts and in 2021 recruited a nationally representative set of hospitals for a large-scale experiment to test new survey modes, potential new and revised survey items, and changes to implementation protocols. Changes to HCAHPS content and administration then went through CMS’s pre-rulemaking process and proposal and public comment in the FY 2024 and FY 2025 IPPS rules, culminating in the updated HCAHPS Survey. Information about the 2021 mode experiment, a cross-walk of questions from the original to the updated HCAHPS Survey, and

schedules for public reporting and use in Hospital VBP can be found on the HCAHPS Website at <https://www.hcahpsonline.org/en/updated-hcahps-survey/>.

For More Information

For information about HCAHPS policy updates, administration procedures, patient-mix and mode adjustments, training opportunities, and participation in the survey, please visit the HCAHPS Website at <https://www.hcahpsonline.org>.

To Provide Comments or Ask Questions

- To communicate with CMS about HCAHPS: Hospitalcahps@cms.hhs.gov
- For technical assistance with the HCAHPS Survey: hcahps@hsag.com or 888-884-4007

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