HCAHPS Bulletin
Number 2008-01

October 1, 2008

FROM: HCAHPS Project Team
TO: HCAHPS Approved Survey Vendors, Self-administering Hospitals and Multi-site Hospitals
RE: Calculation and Submission of Lag Time for the HCAHPS Survey

INTRODUCTION

The HCAHPS Project Team is instituting a new method of conveying timely information to all approved survey vendors, self-administering hospitals and multi-site hospitals participating in HCAHPS data collection and submission. HCAHPS Bulletins will be issued when the HCAHPS Project Team believes that clarification or correction is called for in key matters pertaining to data collection or submission. HCAHPS Bulletins may also be issued to announce important changes in survey administration, data submission, etc.

HCAHPS Bulletins will be sent via email to the contact person of record at each approved survey vendor, self-administering hospital and multi-site hospital. It is the responsibility of this organizational contact to distribute this bulletin as appropriate to their staff, subcontractors or contracted hospitals. In addition, HCAHPS Bulletins will be posted on the HCAHPS website (www.hcahpsonline.org), and archived there as well for reference. Please be sure to notify the HCAHPS Project Team at hcahps@azqio.sdps.org of any changes or update to your contact person of record.

It is incumbent upon all approved HCAHPS survey vendors, self-administering hospitals, and multi-site hospitals to promptly read all HCAHPS Bulletins, review their procedures for handling the matters addressed, and where necessary institute changes to comply with HCAHPS protocols.
LAG TIME

The inaugural HCAHPS Bulletin is issued to clarify the Lag Time variable in the Patient Administrative Data Record of the HCAHPS survey. In the course of oversight of HCAHPS, we have become aware of inconsistencies in the calculation and submission of this required variable. Please note the following clarifications:

1. A “Patient Administrative Data Record” is required for each patient sampled for the HCAHPS survey, whether or not the patient responded to the survey.
   • Patients that were selected in the sample but then found to be ineligible prior to survey administration must still have a Patient Administrative Data Record
   • “Lag Time” is a required element of the Patient Administrative Data Record
   • Initial contact with sampled patients must occur between 48 hours and 42 days after discharge
   • Data collection must be closed out no longer than 42 days after the initial contact

2. “Lag Time” is defined as “The number of days between the patient’s discharge from hospital and the return of the mail survey, or the final disposition of the telephone or IVR survey.”
   • The valid values for Lag Time are 000 to 365
   • If Lag Time is not applicable, it should be coded “888”

3. Surveys that receive a “Final Survey Status” code of “1 – Completed survey” or “6 – Non-response: Break-off” must contain the actual lag time.
   • These surveys should NOT be coded “888” for Lag Time

4. Surveys that receive a “Final Survey Status” code of 2, 3, 4, 5, 7, 8, 9, 10 or M (that is, any Final Survey Status code OTHER THAN 1 or 6) need not contain the actual lag time.
   • Such surveys MAY use either the actual lag time, or “888”