

# The CAHPS Improvement Guide & CAHPS Quality Improvement Demonstrations

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# Project Team

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## Origin of the Guide

- Medicare CAHPS provides national data using comparable measures on selected domains of performance
- Important to provide QIOs, plans, and providers tools to help them make improvements in CAHPS scores



## Expert Reviewers

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## *The CAHPS Improvement Guide: Practical Strategies for Improving the Patient Care Experience*

*The CAHPS Improvement Guide is a comprehensive resource for health care organizations seeking to improve their performance in the domains of quality measured by CAHPS surveys. The guidance presented in this guide is pertinent to a wide range of providers.*

# CAHPS Improvement Guide Home Page


The CAHPS Improvement Guide - Microsoft Internet Explorer provided by Partners HealthCare System


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 **The CAHPS Improvement Guide**  
Practical Strategies for Improving the Patient Care Experience

The CAHPS Improvement Guide is a comprehensive resource for health care organizations seeking to improve their performance in the domains of quality measured by CAHPS surveys. The guidance presented in this guide is pertinent to a wide range of providers.

**Are You Ready to Improve?**  
Learn about the organizational behaviors that are critical to success in improving patients' experiences with care.

**Analysis of CAHPS Results**  
Learn how to look beyond low scores to identify the best opportunities for improvement.

**Quality Improvement Steps**  
Learn about an effective process for implementing interventions to achieve specific performance goals.

**Browse Interventions**  
Find strategies for improving specific aspects of patients' experience with care.

- Performance Problem -   
- Survey Topic -


Search CAHPS  Go  
☒ Guide ☐ Full CAHPS Site

**Browse the Guide:**  
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**Spotlight**  
Save the Date: **11<sup>th</sup> National CAHPS User Group Meeting**  
Wednesday, December 3 - Friday, December 5, 2008, at the Doubletree Paradise Valley Resort in Scottsdale, Arizona.

CAHPS® : Consumer Assessment of Healthcare Providers and Systems  
Last updated 10/27/2008

 Advancing Excellence in Health Care

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U.S. Department of Health and Human Services

PATIENT EXPERIENCE & PATIENT SAFETY CULTURE  
**11th CAHPS® & 1st SOPS  
USER GROUP MEETING**





## Major Components of the Guide

- [Are You Ready to Improve?](#) – An overview of five behaviors common to health care organizations that have been effective in improving their CAHPS-related performance.
- [Analysis of CAHPS Results](#) – A discussion of various approaches to analyzing data from CAHPS surveys in order to identify opportunities to improve and priorities.
- [Quality Improvement Steps](#) – A walk through the basic steps of a CAHPS-related quality improvement process.
- [Improvement Interventions](#) – Descriptions of interventions that health care organizations can implement in order to help improve consumers' and patients' experiences with care.
- [Resources](#) – Quick access to lists of published studies, Web sites, books, and other resources that address the various issues discussed in the guide.





# Improvement Strategies

- Over 2 dozen strategies mapped to CAHPS core questions
- Apply to plan, medical group, or both
- Each strategy includes:
  - Problem description
  - The intervention and its benefits
  - Examples of implementation
  - Key resources



CAHPS Home

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## The CAHPS Improvement Guide

Practical Strategies for Improving the Patient Care Experience

### Browse Interventions

#### Performance Problem

- Access
- Claims processing
- Communication with doctors
- Coordination/Integration of care
- Communication about costs
- Customer service
- Health promotion/Education
- Preventive services
- Shared decision making

#### Health Plan Survey

- Customer service
- Getting care quickly
- Getting needed care
- How well doctors communicate
- Claims processing
- Coordination of care
- Health promotion/Education
- Preventive services
- Shared decision making

#### Clinician & Group Survey

- Courteous and helpful staff
- Getting appointments and health care when needed
- How well doctors communicate
- Communication about costs
- Coordination/Integration of care
- Health promotion/Education
- Shared decision making

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Are You Ready to Improve



#### About the surveys:

- Health Plan Survey
- Clinician & Group Survey





# Dissemination Plan

- AHRQ website:  
<https://www.cahps.ahrq.gov/qiguide/>
- CAHPS QI demonstrations
- Linkages to web-based CAHPS survey reports:
  - Vendors
  - Sponsors



# CAHPS III Quality Improvement Demonstrations

- Purpose of demonstrations and evaluations:
  - To improve the patient's experience of care
  - To develop and test an improvement framework and set of interventions that will effectively improve CAHPS scores for various CAHPS survey instruments



# Yale Demonstration

- Partners Healthcare System/Partners Community Health Inc. & The Stoeckle Center for Primary Care Innovation, MGH



## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Background:***

- Implemented in the context of the statewide patient survey initiative sponsored by MHQP. MHQP conducted a state-wide survey in 2007 in all adult and pediatric primary care, orthopedic, cardiology and obstetrical practices with three or more physicians. The results of the primary care surveys were publicly reported in the summer of 2008.



## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Background:***

- PCHI:

- PCHI is a management services organization (MSO) that provides the physicians with medical management services, quality improvement programs, data analysis, contracting, information systems and financial expertise.
    - PCHI is affiliated with more than 1,000 internists, pediatricians and family practice physicians and over 3,500 specialists who provide care to more than 1.5 million patients.
    - 15 Regional Service Organizations(RSO's)





# Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- **Background**

- BCBSMA Pay for Performance Contractual Obligations(P4P)

- 2007 – PCHI over sampled at the physician level in primary care (adult and pediatrics), orthopedics, obstetrics/gynecology, and cardiology.
    - 2008 – 95% of Practices with Composite Measure scores below the 2007 statewide mean will develop a Performance Improvement Plan(PIP)for one Composite, if any fall below the statewide mean.
    - 2009 Practice Targets
      - The Practice Target will be to achieve the lower of (1) the 2007 statewide mean; (2) a 5-percentage point improvement over the 2007 baseline, or (3) 90 points in the Targeted Composite Measure.
      - Graduated Network Withhold Return is possible with
        - » 100% return if 80% of PCHI Practices achieve target;
        - » 75% return if 70% of PCHI Practices achieve target;
        - » 50% return if 65% of PCHI Practices achieve target; and
        - » 25% return if 55% of PCHI Practices achieve target.



## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Fielding Patient Experience Survey(s):***
  - MHQP 2007 Survey Process
    - Patient sample: **commercially insured patients** with one visit in 2006 (BCBS, Fallon, HPHC, Health New England)
    - C/G CAHPS with some questions from the ACES survey instrument
    - PCHI paid for over-sampling to obtain physician-level data for primary care, obstetrics, cardiology, and orthopedics.
  - MHQP 2009 Survey Process
    - MHQP will survey in the same specialties at the practice level and will also offer physician-level sampling again.
    - MHQP will use the C/G CAHPS survey in its entirety with the addition of some of the supplemental modules.
    - Primary care and specialty practice level data are expected to be publicly reported.



## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Target Audience(s) of the Intervention(s):***
  - adult and pediatric PCPs and their office staff.



## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Interventions:***

- Communication plan to educate PCHI/Partners leadership about the design of CAHPS surveys, the importance of patient-centered care, and how to approach this kind of process improvement.
- Dissemination of practice-level and unblinded physician level data to practice leadership
- Dissemination of blinded, physician-level data to all PCP's.



## Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Interventions:***

- Creation and dissemination of brief documents, designed to help practices respond to the MHQP data, at different stages of the improvement process. Topics such as Planning the Improvement Effort, Initiating the Improvement effort, Evaluating the Improvement effort, Communicating the Improvement effort.
- Creation and dissemination of pre-populated Performance Improvement Plan Proposal to Blue Cross Blue Shield. Composites were selected for each practice for which system-wide resources and intervention strategies can be offered across the system.



## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Interventions:***

- All of the improvement work will be integrated into practice redesign initiatives, whenever possible, and will be used to introduce the practices to the LEAN process improvement method. Improvement efforts will also be explicitly linked to activities that will improve the quality of work life for the clinical and non-clinical staff in the practices, e.g. the Pediatric Guidebook.



## Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Interventions:***

- Educational offerings and internal consulting:
  - Educational programs and courses will be offered for three different audiences:
    - Clinicians
    - Administrators
    - Front-line staff
  - Internal organizational development and content experts visit with practices.
  - Use of *The CAHPS Improvement Guide* as a resource will be promoted across all PCHI practices.





## PHS/Partners Community Healthcare Inc. (PCHI) & The Stoeckle Center

- ***Key research questions:***
  - Whether, and how, the individual interventions, and the combination of them, impact physician-patient, office staff-patient communication, and other selected composites.



# RAND Quality Improvement Demonstrations

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Co-PI RAND CAHPS Team



# RAND QI Demonstrations

- University of California- LA(UCLA)
- HealthPlus of Michigan



# HealthPlus of Michigan

- HealthPlus Background:
  - commercial, Medicaid, and Medicare Advantage HMO, commercial PPO, and Third Party Administrator (TPA) services to over 200,000 members
  - contracts with over 900 PCPs in the state of Michigan
  - All three HMO products have been recognized by NCQA as "Excellent" in each of the last 10 years.



## HealthPlus of Michigan

- Use of CAHPS Clinician/Group survey:
  - fielded the CAHPS C-G survey to evaluate care provided by primary care providers (PCPs) to its commercial HMO members annually since 2005.
  - Results are reported to physicians and to consumers at the individual physician level annually.



# HealthPlus of Michigan

- Demonstration focus:
  - Physician-Patient and Office Staff-Patient Communication

## – Target audience:

- adult PCPs and their office staff.
- Participation in all interventions is voluntary.
- Incentives: increased reimbursement (pay-for-performance), public reporting of CAHPS C-G performance, and free software and technical assistance to assist with communication (Medfusion).





# HealthPlus of Michigan

- **Interventions:**

1. **Medfusion:** A computer software intervention that supports communication with patients through a secure web portal. (First pilot launch Spring 2008)
2. **Physician-Level Pay-for-Performance:** launched in February 2006. 2008 is the first year that payment will be made based on CAHPS scores. P4P program: a) clinical, b) patient experience (CAHPS), c) access, d) IT (electronic prescribing this year); CAHPS counts for 20%. (First payout Fall 2007)
3. **Transparency:** HealthPlus posts adult CAHPS C-G scores at the individual physician level on a public website. (Individual physician scores first posted December 2007).
4. **Physician training:** In-person workshops facilitated by outside experts will be offered to a sub-set of PCPs. (Not yet started; still in planning phase at this time.)

## ***Interventions:***

5. ***Patient Education:*** Quarterly newsletters to patients promote the “AskMe3” questions and the “Cost/Quality Booklet” (Feb 2008) (On-going; started prior to CAHPS3).
6. ***Learning Networks:*** Telephone learning networks will be offered to physicians and their office staff in between the in-person training sessions, facilitated by outside experts. (Not yet started; still in planning phase at this time.)
7. ***Educational materials/performance reports for physicians:*** Individual feedback reports as well as other educational materials for physicians, e.g., a summary of interviews RAND conducted with high performing physicians, best practices as determined in the literature. (First report 2006).

- ***Key Research Questions:***
  - how do the 7 individual interventions, and the combination of them, impact physician-patient and office staff-patient communication.



# UCLA Faculty Practice Group (FPG)

- ***Background:***
  - A provider organization whose members participate in the various Departmental compensation plans of the UCLA's David Geffen School of Medicine.
  - FPG faculty and UCLA Medical Group affiliates provide clinical services in multiple hospitals and more than 70 ambulatory clinic settings in the UCLA Health System.
  - The FPG provides financial, technical, quality, and support services to its physician members, including approximately 1,200 clinical faculty and approximately 200 clinical affiliates.
  - The FPG serves 220,000 unique patients annually.

- ***Fielding Patient Experience Surveys:***
  - Patient Experience Survey (“PES”)
    - physician-level patient experience survey using a modified version of the CAHPS C-G survey known as the “patient experience survey” or “PES.” In 2006, all specialty patients surveyed. UCLA FPG reports PES data at the individual physician, practice, department, and FPG levels. Chief Administrative Officers and Department Chairs receive practice-level and department-level reports and individual physician-level reports. Practice managers receive practice-level reports and de-identified MD-level data.



## UCLA Faculty Practice Group (FPG)

- ***Fielding Patient Experience Surveys:***
  - Patient Assessment Survey (“PAS”)
    - Since 2004, the UCLA Medical Group has participated in California’s “Patient Assessment Survey” or “PAS,” which is organized by the California Cooperative Healthcare Reporting Initiative (CCHRI) in coordination with key payors to gather and share quality and patient satisfaction data. This program administers annual surveys and reports group-level performance for consumers on the Office of the Health Advocate website (within the California Department of Health Services website). . FPG reports these data as required to participate in this program.



## UCLA Faculty Practice Group (FPG)

- ***Use of CAHPS C/G***

- Practice-level, point-of-service, **visit-specific** survey
  - February 2008, the UCLA FPG developed its own point-of-service, visit-specific survey that ambulatory practices administer directly; results are shared with the FPG. The survey items cover the same, key domains as the PES, and are drawn from the C-G CAHPS survey as well as from the California Quality Collaborative's (CQC) rapid cycle feedback survey. The goal is for practices to receive reports containing these data on a monthly basis to inform QI activities.





# UCLA Faculty Practice Group (FPG)

- ***Demonstration focus:***
  - Physician-Patient and Office Staff-Patient Communication



## UCLA Faculty Practice Group (FPG)

- ***Target audience:***
  - Individual physicians (specialists) and their office staff.
  - The target audience of the California-wide P4P program is the FPG as a whole.



## UCLA Faculty Practice Group (FPG)

- ***Interventions:***

- The UCLA Faculty Practice Group has rolled out a series of quality-improvement interventions that address all four key domains of the PES Survey (Access, Provider-Patient Interaction, Helpful Office Staff/ Customer Service, and Coordination of Care).

- ***Interventions:***

1. Helpful Office Staff: BRITE Training
2. Physician training: A series of workshops/courses for physicians to improve communication with patients.
3. Patient Experience Quality-Improvement Collaborative: A series of interactive problem-solving meetings including speakers, presentations, review of data, policies, and quality improvement strategies and activities.
4. Communication of performance scores
5. Standardized communication of diagnostic test results

- ***Interventions:***

6. Ambulatory Reports and Rapid-Cycle Feedback
7. Systematic review of complaint data
8. Education materials: A series of educational materials directed at physicians to help them improve communication with patients.
9. Departmental alignment and incentives: A series of activities intended to align incentives internally (e.g., through the Community Practice Network of providers), as well as to respond to external incentives (California-wide P4P program).



# UCLA Faculty Practice Group (FPG)

- ***Key research questions:***
  - Whether and how the nine individual interventions, and the combination of them, impact patient experience.