

CAHPS C&G Survey: The Minnesota Experience



APRIL 2010



Track:	Reporting CAHPS Survey Results to Consumers
Session:	Reporting Results of the CAHPS Clinician & Group Survey: Experiences in Three Markets
Date & Time:	April 21, 2010, 9:30 am
Track Number:	CAHPS T4 – S2



About MN Community Measurement



- MN Community Measurement is a non-profit organization with a mission to improve health through public reporting of data
 - Started with health plan data in 2004
 - Grew to include direct data submission directly from medical groups by clinic for quality measures in 2006
 - Expanded to include cost information, HIT survey results, and patient experience in 2009
- Data is used by consumers, providers, and health plans



Overview of 2008 CG-CAHPS survey



- How was it organized?
 - Focus on medical groups paying for themselves (explored other options: health plans, employer groups, etc.)
 - Recruited medical groups by visiting them in 2007 and asked them to participate
- Who led the project?
 - Collaborative effort – from start to finish
 - Workgroup of medical group participants, MNCM, Westat, vendors all worked together
- Number of sites
 - Nine medical groups representing a total of 124 clinic sites



Process for developing the public report



- Collaborative development of public display
 - Groups involved also participated in the development of display
 - Consumer tested (Recruited consumers from Craig's List – 3 males, 3 females ages 19-59 with varied degrees of experience with data)
- Report results at clinic level only
- Details for the reporting that were carefully considered
 - Report the three composite results plus the overall rating item
 - Adhere to site level reliability of 0.8 for reporting.
 - Report four measure items side-by-side, since no overall roll-up measure is available
 - Results ordered high-to-low performance
 - Report as percentage and bar graph, to parallel clinical measures. Above average highlighted.

Public Reporting: How are our results displayed?

Landing page

Can click to
read more
text

Display subtleties =
Challenge in
interpretation!

Displays bars as
percentages with
color to indicate
high
performance

Patient Experience

These four measures show what patients experienced during their last visit to their doctor. Patients who were surveyed rated their doctor and overall office visit on how well care was provided. The survey asks about key things that should be part of every patient visit, including prompt care, good communication, and respectful staff.

[read more ▶](#)

Legend: ■ = Top Performance (statistically higher than the average)

Sort by Name

Sort

Sort

Getting Care
When Needed
[info](#)

How
Com
[info](#)

Average = 92%

Average = 92%

[Fairview Hugo Clinic](#)

[view profile >](#)

95%



92%



97%



71%



[Park Nicollet Clinic -
Bloomington](#)

[view profile >](#)

94%



82%



93%



[Park Nicollet Clinic - Eagan](#)

[view profile >](#)

93%



89%



94%



73%



[Allina Medical Clinic -
Champlin](#)

97%



89%



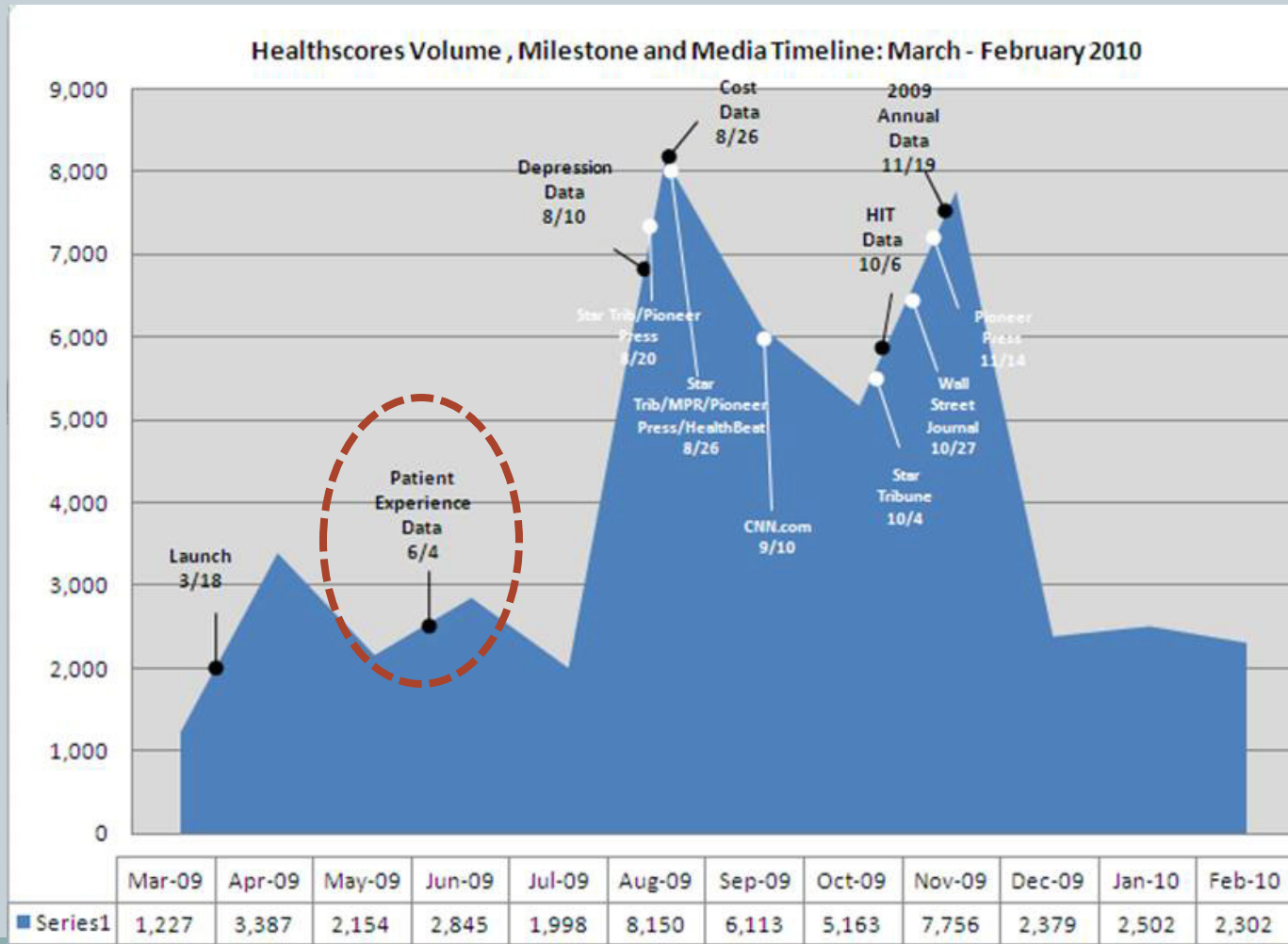
94%



73%



Use of results: Web release of data





Use of results in the community



- Google analytics reviewed regularly for mnhealthscores.org
 - Number of web hits
 - Time spent per page
- Limited media attention when released
- No marketing dollars, but promotion through stakeholders
 - Open enrollment
 - Media promotion with opportunities



Challenges and lessons learned



- Independent evaluation of MNCM's website
 - People don't understand how the narrative relates to the data
 - In general, people do not understand percentages – both what it means and how to interpret
 - Any number larger than 10 people get lost
 - People don't attribute negative results with their provider
 - Inherent skepticism in results and data
- Challenge: Push and tug between medical groups wanting rigorous and exact reporting to reflect differences and need for consumers to keep things simple.



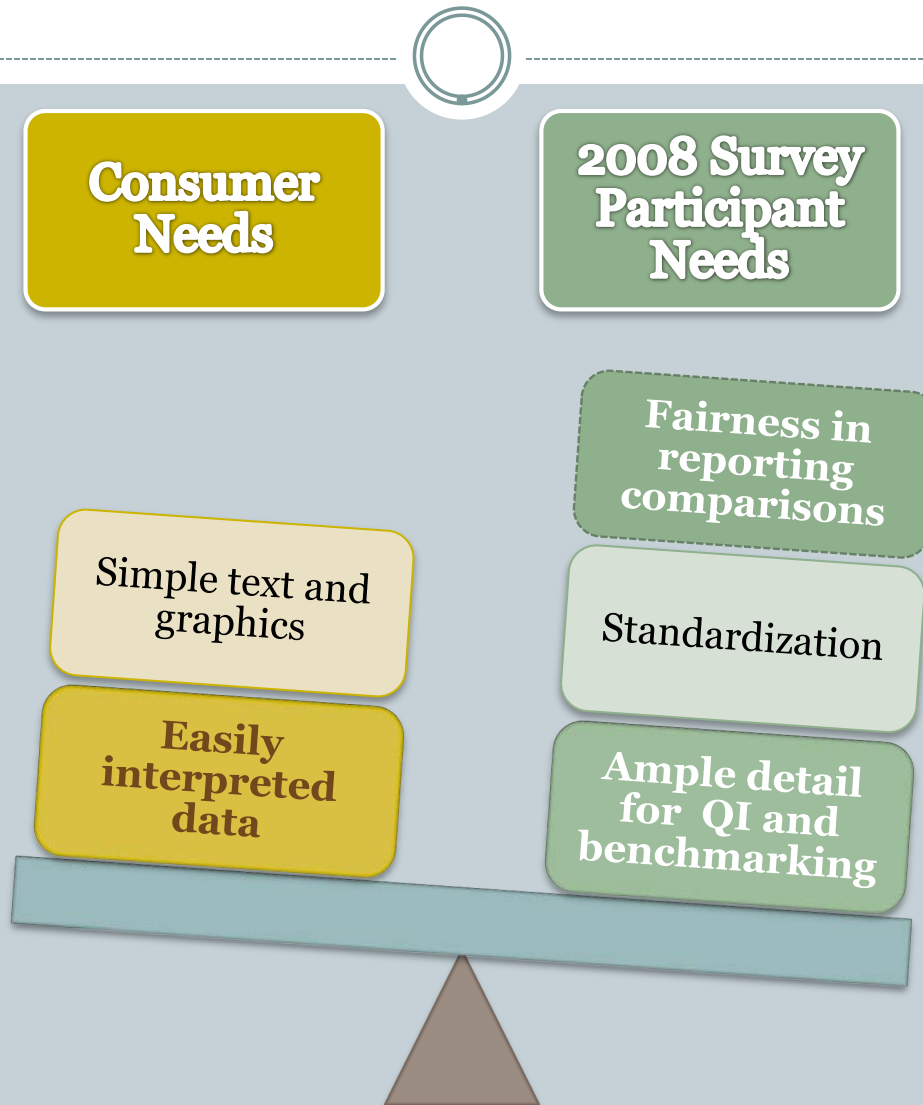
Future plans for the CG-CAHPS survey



- Doing another survey in 2010 – will look different
 - H-CAHPS model: People using vendors for QI surveying submit results to CAHPS
 - Modes and method variability: Including handout surveys
- Impetus: Statewide reporting is going to be required
 - 2010 Health Care Reform rule
 - Patient centered medical homes
- Increase use of clinical measures – including patient experience – to promote patient decision making

Future plans for public reporting

CURRENT STATE





Future plans for public reporting



**Consumer
Needs**

**2010 Survey
Participant
Needs**

Simple text
and graphics

Fairness
with
constrained
flexibility

**Easily
interpreted
data**

Adequate
detail for QI
and
benchmarking

**FUTURE
STATE**

