

Patient Experience



CAHPS for ACOs

Questions and Answers

PRC has been an integral partner for CAHPS® programs (the Consumer Assessment of Healthcare Providers and Systems) since their beginning, and we are proud to be among the approved vendors for the CAHPS for ACOs (Accountable Care Organizations) survey. Our years of experience and tested methodologies make PRC the logical choice for all patient experience survey needs.



Who is eligible for the CAHPS for ACOs survey?

According to CMS (the Centers for Medicare and Medicaid Services), the CAHPS for ACOs survey allows two types of Accountable Care Organizations to meet their requirement to measure patient experience of care:

1. **Next Generation ACO Model** – This model is designed for the high performers and presents opportunities for greater risk and reward. Applications for this advanced program are accepted annually.
2. **Shared Savings Program** – This national program aims to help healthcare providers coordinate care to improve the overall quality of care for Medicare Fee-for-Service beneficiaries. This program accepts applications each year from organizations to become Shared Savings Program ACOs.

Is PRC a CMS-approved CAHPS for ACOs survey vendor?

Yes, PRC has been a fully approved CAHPS for ACOs survey vendor since 2013.

How is the CAHPS for ACOs survey administered?

CAHPS for ACOs requires a mixed-mode survey administration approach, which consists of a pre-notification letter, two survey mailings, and up to six follow-up telephone calls to non-responders or to those who have not completed the survey.

CMS will select a random sample of eligible Medicare beneficiaries who received primary care services from qualified providers. CMS will limit the sample to beneficiaries age 18 and older and who are known not to be institutionalized or deceased. The sample size is 860 patients per year, but CMS may decide to adjust this number in the future.

The 2018 survey administration will occur between October 2018 and January 2019. Participating ACOs must select a vendor and submit a completed vendor authorization form to CMS by September 18, 2018.

Event	Date
ACOs must submit Vendor Authorization form	09/18/18
Pre-notification letters are mailed	10/24/18
First mail questionnaires are sent	10/31/18
Second mail questionnaires are sent	11/14/18
Phone interviews begin	12/04/18
All data collection ends	01/16/19
Data is submitted	01/25/19

What does the CAHPS for ACOs survey measure?

The CAHPS for ACOs survey asks beneficiaries about the interpersonal aspects of healthcare— aspects for which patients may be the best, if not the only, source of information, and areas that patients have identified as being important to them.

The survey includes the core questions contained in the CG-CAHPS Survey® plus several required supplemental items.

The CAHPS for ACOs survey includes the ten patient experience of care summary survey measures shown to the right. CMS has identified seven measures to be included in the Medicare Shared Savings Program payment structure as pay for performance. Summary survey measure 8, Stewardship of Patient Resources, is a pay for reporting measure. Summary survey measures 9 and 10 include additional questions developed based on qualitative research with beneficiaries and input from clinical and quality of care experts; feedback on these domains will be provided to the ACOs for informational purposes. These two measures are not used for payment purposes.

How will we receive the survey results?

For ACOs that choose to work with us, PRC will provide results through its online portal, PRCEasyView.com®. Users can compare themselves against PRC's live norm of other participating ACOs by way of top-box percentages or linear mean scores.

CMS will generate results and scores at the ACO level. In future years, CMS may allow oversampling to yield clinician-level results. CMS provides reports through its website, portal.cms.gov. Both narrative reports and an Excel® workbook of scores based on the survey data are available through CMS.gov.

Will the results be publicly reported?

Currently, Physician Compare shows mean scores for select measures at the ACO level through the Accountable Care Organization Quality Data link (www.medicare.gov/physiciancompare/aco/search.html). The information here is refreshed annually in late fall to reflect the past year's performance.

Customize your CG-CAHPS Survey

We also conduct customized versions of the CG-CAHPS survey for numerous clients. If you are interested in discussing options for year-round ongoing measurement to move beyond compliance to excellence, please contact us at 800-428-7455 for CG-CAHPS information.

ACO Quality Performance Measures

(Results will impact payment structure)

1. Getting Timely Care
2. Provider Communication
3. Rating of Provider
4. Access to Specialists
5. Health Promotion and Education
6. Shared Decision Making
7. Health Status/Functional Status

Required CG-CAHPS Core Set

(Pay for reporting)

8. Stewardship of Patient Resources

Supplementary Questions Provided for Informational Purposes Only

(Not part of payment structure)

9. Courteous and Helpful Office Staff
10. Care Coordination



What are your goals?

To learn what PRC's custom data can do for you, contact us at 800-428-7455 or visit PRCCustomResearch.com

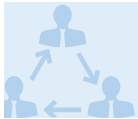
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