

*Improving CAHPS (Member Experience), HEDIS
and Health Outcomes Survey (HOS) Quality Performance*

Dear Provider,

Please be advised that between **January and March** (depending on the Health Plans, LA Care for example conducts their internal CG-CAHPS survey in November), the Health Plans will be distributing the **Consumer Assessment of Healthcare Providers and Systems (CAHPS)** survey to your members. The survey was formerly known as the “**Member Satisfaction Survey**.” Each year the Health Plans contract with an independent and National Committee of Quality Assurance (NCQA)-certified company to distribute the survey to randomly selected members. The survey results will be shared with DHCS and/or CMS and the Health Plans will be scored based on the categories listed below. Should a member contact you about the CAHPS survey, please ask them to complete the survey and send it back with the prepaid envelope enclosed with the survey. The survey is typically provided in the member’s preferred language. Additionally, the member may call the phone number provided on the survey to receive a survey in the language they choose.

CAHPS Survey Question Categories:

- Getting Needed Care
- Getting Appointments and Care Quickly
- How Well Doctors Communicate
- Customer Service
- Care Coordination
- Rating of Health Care Quality
- Rating of Health Plan
- Annual Flu Vaccine

The **Health Outcomes Survey (HOS)** are Medicare member-reported outcomes measure. The survey will be mailed to randomly selected Medicare members sometimes in **July** for the **Baseline** survey and **two years later** the same members will receive a **Follow-up** survey to conduct a self-evaluation of their health two years later.

Please encourage all members who receive a CAHPS and/or HOS surveys to complete it. Some members will give positive feedback and others may have critique; it is important to encourage as many responses as possible.

We have included a CAHPS and HOS Quick Reference Guide with this bulletin (**4 total pages**).

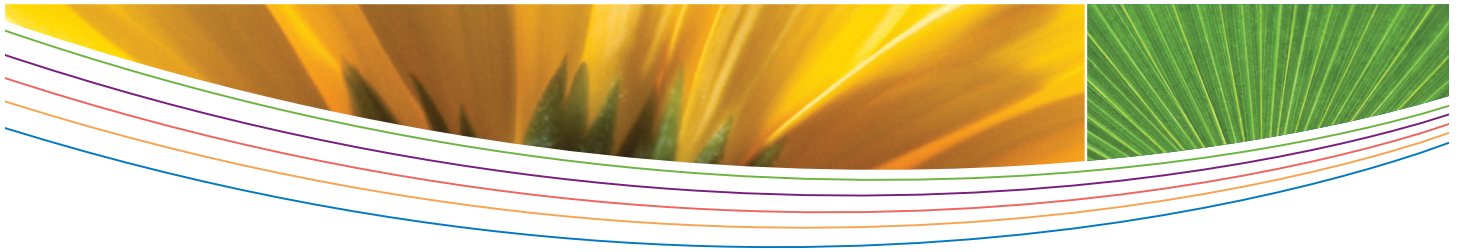
HEDIS Medical Record Audit/Collection:

Health Plans may be contacting you directly or through a contracted vendor from February to June via phone, fax, or postal mail regarding the collection of medical records to help improve on the quality-of-care measures (HEDIS). We appreciate your full cooperation in providing the medical records to the contracted health plans and/or their vendors timely.

Preferred IPA thanks you for your partnership in these efforts to improve both the CAHPS, HOS and HEDIS scores which reflect the combined performance of the physicians, IPA, and health plan.

Preferred IPA has a website page (<http://preferredipa.com/quality/>) on **Quality** and sample **CAHPS** survey questions (Child and Adult surveys). Additionally, Alignment has training video <https://vimeo.com/513122414>. Please ensure all your staff watch this training video.

If you have any questions, please contact Liza Johnson at (818) 265-0800, x232.



Consumer Assessment of Healthcare Providers and Systems CAHPS

Your Success is Our Success

Every year CMS or NCQA may ask your patient the following questions. How do you rate?

Domain	Questions
Getting Needed Care	How easy was it to get the care you needed? How easy was it to get care with specialists?
Getting Appointments and Care Quickly	Did you get care as soon as you needed? Did you get an appointment at a doctor's office or clinic as soon as you needed? Did you see your provider within 15 minutes of your appointment time?
How Well Your Doctor Communicates	Did your doctor explain things in a way that was easy to understand? Did your doctor listen carefully to you? Did your doctor show respect for what you had to say? Did your personal doctor spend enough time with you?
Annual Flu Vaccine	Have you had a flu shot since July 1 last year?
Rating of Health Care Quality	Overall rating 0 - 10
Care Coordination	Was your doctor informed and up-to-date about specialist care? Did your doctor have your medical records? Did your doctor follow up to provide test results? How quickly did you get the results? Did your doctor talk to you about prescription medicines? Did you receive help to manage your care?

Your colleagues have offered the following suggestions to improve your ratings:

- Let patients know your office hours and how to get care after-hours
- Offer to schedule specialist appointments while your patients are in the office
- Make sure your contact information is correct in our online provider directory
- Offer extended, evening or weekend hours
- If you are running late, have your staff let your patients know and apologize
- Consider offering e-mail or text communication, particularly for medication refills
- Remember, almost everyone can receive and benefit from a flu shot
- It's just as important to explain why you are not doing something as it is to explain what you are doing
- Invite questions and encourage your patients to make notes – research shows most patients forget 2 out of 3 things you tell them when they walk out of the exam room
- Remember your patients are “sitting on pins and needles” waiting for your return call or their test results – it's better to apologize for calling late in the day than to anger a patient by keeping them up all night waiting for your call

You and your staff can strongly impact HOS scores and the Medicare Star rating

The Health Outcome Survey (HOS) is used by the Centers for Medicare & Medicaid Services (CMS) to assess patients' perception of you, your staff, and Blue Shield of California. Scores from this survey figure prominently in determining Blue Shield's Medicare Star rating. A 5-Star rating increases our enrollment and brings more patients to your practice. To improve HOS success, here are best practice recommendations and educational resources by measure.

HOS measure – Physical health: In the past four weeks...

- Q Are you experiencing limitations in typical daily activities such as moving a table, vacuuming, bowling, playing golf, or climbing stairs?
- Q Have you accomplished less than you would like or felt limited in work or other activities?
- Q Did pain interfere with your normal work, both inside and outside the home?

Recommendations:

- Ask patients about their physical well-being and if appropriate, level of pain/discomfort.
- Suggest physical therapy or pain management if needed.
- Recommend ways to begin and/or continue to engage in physical activities (e.g., no extra cost gym membership through SilverSneakers®, YMCA, community centers, etc.).

HOS measure – Monitoring physical activity: In the past 12 months...

- Q Have you talked with your doctor or health provider about exercise or physical activity? For example, were you asked if you exercise regularly or take part in physical exercise?
- Q Did your doctor or health provider advise you to start, increase, or maintain your exercise level or physical activity? For example, were you advised to take the stairs, increase walking from 10 to 20 minutes daily, or maintain your current exercise program?

Recommendations:

- Discuss the benefits of physical activity and assess your patient's physical activity level.
- Use the Exercise is Medicine® [physical activity prescription form](#) with your patients.
- Refer patients with limited mobility to physical therapy to learn safe and effective exercises.
- Refer patients to Blue Shield of California's online health library [Fitness and Exercise](#) resources. (Health library resources are available to members and non-members.)

HOS measure – Urinary incontinence: In the past six months...

- Q Have you accidentally leaked urine? If yes, how much of a problem was this for you?
- Q Have you talked with your doctor or health provider about your urine leakage?
- Q There are many ways to treat urinary incontinence (i.e., bladder training, medication, surgery). Have you talked with your doctor or healthcare provider about any of these?

Recommendations:

- Discuss urinary incontinence with patients or ask nursing staff/medical assistants to do so.
- Encourage staff to view Blue Shield's recorded webinar, [Talking with Older Patients About Sensitive Topics](#). (45 min)

Recommendations continued:

- Display urinary incontinence patient education materials in exam rooms.
- Review medications for those that can contribute to bladder control issues.
- Educate patients about noninvasive behavioral interventions for urinary incontinence; when necessary, refer for appropriate treatment.

HOS measure – Improving or maintaining mental health: In the past four weeks...

- Q Because of emotional problems such as feeling depressed or anxious, have you accomplished less than you would like or not performed as carefully as usual?
- Q How much of the time have you: (1) Felt calm and peaceful? (2) Had a lot of energy? (3) Felt downhearted and blue?
- Q How much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?

Recommendations:

- Assess and discuss mental health status at every appointment, even when your patient has not screened positive for a mental health condition.
- Consider conducting a PHQ9 annually, and more frequently if appropriate.
- Create a staff list of mental health carve outs and individual health plan referral processes.
- Refer patients to educational resources like the [National Institute of Mental Health \(NIH\)](#) and/or Blue Shield of California's online health library [Mental and Behavioral Health](#) resources. (Health library resources are available to members and non-members.)

HOS measure – Reducing risk of falling: In the past 12 months...

- Q Did you talk with your doctor or health provider about issues with falling, walking, or balance?
- Q Has your doctor or health provider done anything to help prevent falls or treat problems with balance or walking? Some things they might do include: (1) Suggest that you use a cane or walker; (2) Check your blood pressure lying and standing; (3) Suggest that you do an exercise or physical therapy program; (4) Suggest a vision or hearing test.

Recommendations:

- Teach staff how to screen for fall risk (see the Centers for Disease Control and Prevention's (CDC) STEADI [Fall Risk Factors Checklist](#)) and how to [administer gait/balance assessments](#). (See the Functional Assessments tab.)
- Assess fall risk and discuss fall prevention activities with each patient.
- Conduct a medication review.
- Encourage annual eye exams and regular prescription updates.
- Promote exercise, specifically those that increase leg strength and balance.
- Consider referral to a home health occupational/physical therapist for home safety evaluation and modification (e.g., handrails in the shower, using a cane or walker).
- Distribute [CDC STEADI fall prevention education materials](#) by email and/or consider providing copies in your waiting and exam rooms.

For questions or additional information about the HOS survey and/or Medicare Star measures, please send inquiries to MedicareStarRating@blueshieldca.com.