



Introduction to OAS CAHPS

Outpatient and Ambulatory Services CAHPS® (OAS CAHPS) Survey Developed by the Agency for Healthcare Research and Quality (AHRQ) and its Consumer Assessment of Health Providers and Systems (CAHPS®) Consortium in 2012.

- Developed to provide a standardized survey instrument to assess patient experience.
 - Provide public reporting
 - Produce comparable data
 - Provide meaningful comparisons
 - Allow consumers to make informed choices

What is evaluated in the survey?

MEASURES						
		COMPOSITE SCO	DRE	GLOBAL RATING		
	Facilities and Staff Questions 3–8	Communication about your procedure Questions 1–2, 9–12	Preparing for discharge and recovery* Questions 13–22	Patients' rating of the facility Question 23	Patients recommending the facility Question 24	
SCORE	Patients who reported that staff			Patients who gave the facility	Patients who reported	
Тор Вох	Definitely gave care in a professional way and the facility was clean	Definitely communicated about what to expect during and after the procedure	Gave them information about discharge and recovery	a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	YES they would definitely recommend the facility to family or friends	
Middle Box	Somewhat gave care in a professional way or the facility was somewhat clean	Somewhat communicated about what to expect during and after the procedure	Somewhat gave them information about discharge and recovery	a rating of 7 or 8 on a scale from 0 (lowest) to 10 (highest)	PROBABLY YES they would recommend the facility to family or friends	
Bottom Box	Did not give care in a professional way or the facility was not clean	Did not communicate about what to expect during and after the procedure	Did not give them information about discharge and recovery	a rating of 0 to 6 on a scale from 0 (lowest) to 10 (highest)	NO they would not recommend the facility to family or friends	

- Our survey has a total of 36 questions regarding:
 - About Facilities and Staff
 - Communication About Your Procedure
 - Preparation for Discharge & Recovery
 - Overall Rating
 - Recommendation of hospital.

▲ OAS CAHPS Survey Measures

OAS CAHPS Survey results are reported for three composites and two global items:

Composite Measures

- Facilities and Staff (Q3, Q4, Q5, Q6, Q7, and Q8)
- Communication About Your Procedure (Q1, Q2, Q9, Q10/Q11, and Q10/Q12)
- Preparing for Discharge and Recovery (Q13, Q14, Q15/Q16, Q17/Q18, Q19/Q20, and Q21/Q22)*

Global Items

- · Patients' Rating of the Facility (Q23)
- Patients Recommending the Facility (Q24)

Publicly Reporting OAS CAHPS Top-, Middle-, and Bottom-Box Scores

OAS CAHPS results are reported as "top-box," "bottom-box," and "middle-box" scores.

The **top-box** is the most positive response to survey items, for example "Yes, definitely" for most of the survey items. For the Overall Facility Rating item, the top-box score is "9" or "10." For the Recommend Facility item, "Definitely yes" is the top-box score.

The "middle-box" captures intermediate responses, for example "Yes, somewhat" for most of the survey items. For the Overall Facility Rating item, the middle-box score is "7" or "8." For the Recommend facility item, "Probably yes" is the middle-box score.

The **bottom-box** is the least positive response category, for example "No" for most of the survey items. For the Overall Facility Rating item, the bottom-box score is "0" to "6." For the Recommend Facility item, "Definitely no" and 'Probably No" is the bottom-box score.

^{*} Not currently reported on the CMS website. Only reported on Facility Preview Reports on OAS CAHPS website. CMS is conducting a quality review of this composite.

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OAS CAHPS METHODOLOGY

Web with Telephone Follow-up Mode

- Data submitted <u>monthly</u> to vendor for sampling.
- Patients will receive a <u>personalized email</u> from JLM, complete with a direct link to the OAS CAHPS survey
- Vendor must attempt to contact <u>every</u> <u>patient</u> in the sample.
- Minimum of <u>five calls</u> attempts.
- Calls at <u>different times</u> of the day and different days of the week.
- Complete initial first contact attempt no later than 3 weeks (21 days) after close of the sample month.
- · Cannot leave voicemail.
- Proxys are permitted.



ROLES AND RESPONSIBILITIES

For HOPD OR ASC

- Contract with an approved OAS CAHPS survey vendor to conduct their survey.
- Authorize the contracted survey vendor to collect and submit OAS CAHPS Survey data to the OAS CAHPS survey data center.
- Provide Data in a timely manner to vendor.
- Use a secure method to transmit monthly patient information files (SFTP).

For OAS VENDOR

- Create Monthly patient information files.
- Check patient information files for data integrity.
- Appy filter criteria, sample patients following CMS protocols.
- Administer the OAS CAHPS Survey in accordance with CMS protocols.
- Submit and confirm acceptance of data files to OAS Data Center.



Communicating with patient

HOPD's or ASC should NOT do any of the following:

- Send or provide information to patients <u>in</u> advance.
- <u>Provide a copy</u> of the OAS CAHPS survey questionnaire.
- Include words or phrases verbatim from OAS CAHPS Survey.
- Attempt to <u>influence their patients</u> answers to the OAS CAHPS Survey questions.
- Offer <u>incentives</u> of any kind to the patients for participating (or not) in the survey.
- Help the patient answer the survey questions.
- Ask patients why they gave a certain response or rating.
- <u>Include any messages or materials promoting</u> the HOPD or ASC survey.



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Patient Eligibility Requirements

- At least 18 years of age.
- Regardless of insurance or method of payment.
- Domestic U.S. mailing address; not deceased; do not reside in a nursing home or hospice.
- Not a "No publicity" patient (identified by ASC).
- One outpatient surgery/procedure
 - G-Code of G0104, G0105, G0121, or G0260;
 - Surgical CPT-4 code in the 10021-69990



HOPD Eligible For Survey Criteria:

- An HOPD is eligible to participate in the OAS CAHPS Survey if it has an HOPD or any department that meets all of the following criteria:
 - performs procedures that are within the OAS CAHPS—eligible range of CPT-44 Codes for Surgery (i.e., CPT codes between 10004 and 69990) or one of the following Gcodes: G0104, G0105, G0121, or G0260;
- is Medicare-certified, has a CCN, and has in effect an agreement with CMS obtained in accordance with 42 CFR 419 subpart B (General Conditions and Requirements);
- bills under the Outpatient Payment Prospective System (OPPS) when billing CMS; and
- is eligible to participate in the Hospital Outpatient Quality Reporting (Hospital OQR) Program

ASC Eligible For Survey Criteria:

- An ASC is eligible to participate in the OAS CAHPS Survey if it meets all of the following criteria:
 - performs procedures that are within the OAS CAHPS—eligible range of CPT-45 Codes for Surgery (i.e., CPT codes between 10004 and 69990) or one of the following Gcodes: G0104, G0105, G0121, or G0260;
 - is Medicare-certified, has a CCN, and has in effect an agreement with

- CMS obtained in accordance with 42 CFR 416 subpart B (General Conditions and Requirements);
- bills under ASC Payment System when billing CMS; and
- is eligible to participate in the Ambulatory Surgical Center Quality Reporting (ASCQR) Program.

Surgical Category Assigned

Surgical Category Assigned	Туре	Description
Category 1	Gastrointestinal	CPT code(s) in range 40000-49999 or G-code(s) G0105, G0121, or G0104
Category 2	Orthopedic	CPT code(s) in range 20000-29999 or G-code is G0260
Category 3	Ophthalmology	CPT code(s) in range 65000-68899
Category 4	Other	CPT code(s) 10004–19999, 30000–39999, 50000–64999, and 68900–69990

Why Choose J.L. Morgan & Associates?

- Local and Established CMS Vendor with 18 years of Experience.
- Surveys captured via telephone mode, ensuring personal interaction with your patients resulting in increased responses.
- We provide Real Time Data in Real Time.
- We ensure the most cost-efficient surveys available.
- You can call "1-800-HELPDESK" for direct access to our management team.
- 24 -hour access to survey database.









Thank you for your time!

J.L. Morgan & Associates strives to be excellent. We are transforming the patient experience in real-time. We would work with you and your organization to complete set goals to better your patients experience!

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