

Improve CAHPS[®] Results and Patient Experience

A PROVIDER GUIDE





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Importance of CAHPS

Patients are looking for both quality clinical care and an overall positive care experience. The Consumer Assessment of Healthcare Providers and Systems (CAHPS)¹ survey is conducted annually to gather feedback about a patient's experience with the health plan and health plan providers.

A positive patient experience has many benefits. It helps to boost patient retention, increases compliance with provider recommendations and supports improved outcomes.

Any interaction can have the potential to impact patient experience and their perceived access to care. Everyone plays a role in positively impacting the patient experience, including:

- The physician or provider.
- Charge nurse.

• Case coordinator.

- The call center.
- Front office staff.

Use this guide to help you achieve a strong CAHPS performance

The guide gives examples of survey questions. It also provides tips and reminders to drive your discussion on key CAHPS topics with patients during their office visit.

The guide focuses on the below CAHPS measures that are heavily impacted by providers and clinic staff when patients come in for care.

- Patient access.
- Communication with patients.
- Care coordination.





CAHPS Survey Overview

CAHPS is a survey tool that asks patients to evaluate their experience with their health plan and at providers' offices. The CAHPS survey is sent to a random sample of health plan patients in the spring of each year. Responses are anonymous.

The CAHPS survey contains about 60 questions, which roll up into the various CAHPS measures that represent various patient experiences.

The CAHPS survey:

- Is required by the National Committee for Quality Assurance (NCQA) for accreditation and by Centers for Medicare & Medicaid Services (CMS) for Star Ratings.
- Uses standardized NCQA questions.
- Provides a broad-based view of patient issues and concerns.

Health plans cannot:

- Ask custom questions.
- Go into detail on member characteristics.
- Explore the details of member issues and concerns.



Provider- and participating physician group-impacted measures

Measures impacted by providers and office staff:

Ø	Getting appointments and care quickly.
V	Getting needed care.
V	Care coordination.
V	How well doctors communicate.
V	Rating of personal doctor.
V	Rating of specialist.
Ø	Rating of healthcare quality.
Ø	Getting needed prescription drugs.
V	Annual flu vaccine.
V	Shared decision making.



CAHPS Measure	CAHPS Survey Questions	Recommendations and Best Practices
Getting Needed Care	In the last 6 months How often did you get an	 Help patients schedule appointments with: Primary care physician (PCP):
	appointment to see a specialist as soon as you needed it?	» Urgent: Same day/within 48 hours. » Routine: Within 10 business days.
	How often was it easy to get the care, tests or treatment you needed?	 Specialist: » Urgent: Within 96 hours.
	In the last 6 months	» Routine: Within 15 days.
Getting Care Quickly	When you needed care right away, how often did you get care as soon	 Offer early morning walk-in or evening appointments at least 1x/week.
	as you needed it? How often did you get an appointment for a check-up or routine care as soon as you needed it?	 Review, monitor and audit prior authorization and referral practices, and evaluate how decisions are communicated to the patient.
	How often did you see the person you came to see within 15 minutes of your appointment time?	• Communicate provider delays at time of the appointment.
		• Patient experience with the provider and provider office staff, including communication and courteous/respectful treatment, can impact the patient's perception of access to care.

Additional best practices

Incorporate the below actions to improve the patient's access to care:

- Open access scheduling for routine and urgent appointments.
- Rapid referral programs.

 \checkmark

- Training to advance physicians' communication skills.
- Respect patients' preference for a provider (i.e., patient prefers a female physician for Pap test).
- Address multiple care gaps in one visit (when applicable).
- Call patients to let them know of last-minute slot openings due to cancellations.
 - Limit time patients spend in the waiting room.
 - Make scheduling process easy; take the burden off the patient.

Provider and Office Staff Communication Measure

CAHPS Measure	CAHPS Survey Questions	Recommendations and Best Practices
Example How Well Doctors Communicate	 In the last 6 months How often did your personal doctor explain things in a way that was easy to understand? How often did your personal doctor listen carefully to you? How often did your personal doctor show respect for what you had to say? How often did your personal doctor spend enough time with you? 	 Ensure that our patients feel respected by providers and office staff: Listen to patient and express understanding. Ask if all questions have been addressed. Thank the patient for waiting, if appropriate. Include patient in next steps and decision making. Provide support to address communication challenges across cultures, including access to interpreter services. Set expectations for the member on appointment availability, and appropriate follow-up. Ensure that provider and provider office staff are trained to handle sensitive situations. Sit down during an appointment and make eye contact.

Additional best practices

Use the tips below to help communicate better with your patients during their office visit:

Meet patients' language needs by:

- Using translation and interpreter services.
- Using alternate format resources.
- Speaking in plain, simple language.



Require cultural competency training so you can better treat an increasingly diverse population.

Provide sensitivity training to staff on how to handle sensitive situations.



Be transparent and set expectations:

- When possible, share expected payment amount at check-in.
- Explain next steps to the patient in a way that is easy to understand. Allow time for questions.
- Share turn-around times on when to expect the next appointment slot to open, get back test results or a call back from the provider/office.
- Appointment availability. Show empathy for patients who believe they need an urgent appointment due to pain or fear.

Care Coordination Measure

CAHPS Measure	CAHPS Survey Questions	Recommendations and Best Practices
	In the last 6 months How often did your doctor have your medical records or other information about your care? How often did someone from your personal doctor's office follow up to give you test results? How often did you get those test	 Providers should encourage office staff engagement with the patient. Ask questions about past care and treatment, discuss medications, include patients in decision making, and have relevant information and medical history during appointments. Ensure patients are called about test results and/or any delays. Encourage PCP groups to set up patient
Care Coordination	 now often did you get those test results (blood test, X-ray or other tests) as soon as you needed them? How often did you and your personal doctor talk about all the prescription medicines you were taking? Did you get the help you needed from your personal doctor's office to manage your care among these different providers and services? How often did your personal doctor seem informed and up to date about the care you got from specialists? 	 portals where patients can easily access test results and communicate with providers. Monitor prior authorization and referral practices. Share results with all applicable providers. Help schedule appointments with specialists.

Additional best practices

Care coordination approaches include:



Care management.

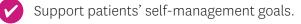


Medication management.

Investing in health information technology to coordinate among providers.



Help with transitions of care.



Link patients to community resources.







Resources

There are a variety of provider-facing resources that will help you improve CAHPS/patient experience. They are available online in the Provider Library at **providerlibrary.healthnetcalifornia.com,** under *Education, Training* and *Other Materials and Health Equity, Cultural and Linguistic Resources* or scan the QR code below. Some examples of materials and trainings include:

- Timely access to care/access standards.
- Interpreter/translation services.
- On-demand microlearnings.
- Special needs and cultural competency.
- Implicit bias.

Make the most of the Plan's multiple resources on improving patient experience. For additional support, contact **Program_Accreditation@healthnet.com.**



Community Health Plan of Imperial Valley ("CHPIV") is the Local Health Authority (LHA) in Imperial County, providing services to Medi-Cal enrollees in Imperial County. CHPIV contracts with Health Net Community Solutions, Inc. to arrange health care services to CHPIV members. *Health Net Community Solutions, Inc. is a subsidiary of Health Net, LLC and Centene Corporation. Health Net is a registered service mark of Health Net, LLC. All other identified trademarks/service marks remain the property of their respective companies. All rights reserved.