AHRQ’s CAHPS® Program

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CAHPS = Consumer Assessment of Healthcare Providers and Systems

- Develops standardized surveys and related products according to established principles
- First funded in 1995
- Assesses quality of care from the patient’s point of view across different settings
- Trademark held by AHRQ; all surveys must adhere to CAHPS design principles to earn trademark
AHRQ

Grantees
RAND
Yale

Support Contractor
Westat

Other Government and Private Stakeholders

Consortium
CAHPS Core Surveys: Some Examples

- Provider: Clinician & Group, Home Health, Hospice
- Condition-specific: Cancer care; Surgical care
- Facility: Hospital, Nursing Home, Ambulatory Surgery, In-Center Hemodialysis
- Health Plan: Medicare, Medicaid, Commercial, Behavioral Health (ECHO®)
- Program: Home and Community Based Services (HCBS)

Versions include: adult & child (for many); Spanish and some other translations
CAHPS Supplemental Item Sets: Some Examples

• Clinician & Group: Patient-Centered Medical Home, Health Literacy, Health Information Technology, Narratives

• Health Plan: Children with Chronic Conditions, People with Mobility Impairments

• Cancer Care: Access, Shared Decision-making, Information from providers

You can add your own questions!
CAHPS Design Principles

• Patient-focused: topics that are important to patients and for which they are the best or only source of information

• Include patient reports of experiences – not “satisfaction”

• Include questions and domains that are under the control of the facility/provider, or for which we can risk adjust

• Develop survey items and protocols based on rigorous scientific development and testing, as well as extensive patient and stakeholder input

• Questions are based on current practices and standards of care
Uses of CAHPS Surveys

- Reimbursement – Hospital, Home Health, Hospice, Medicare, In-Center Hemodialysis (CMS)
- Public reporting – See CMS “Compare” websites
- Accreditation
- Quality improvement
- Health services research
AHRQ CAHPS Database

**Health Plan**
- Initiated in 1998
- Submissions in June, followed by reporting in October
- 2016: 382 health plans; 148,000 respondents

**Clinician & Group**
- Initiated in 2010
- Submission in March, followed by reporting in June
- 2015: 2,830 clinician offices and group practices; 636,000 respondents