About the CAHPS® Patient-Centered Medical Home (PCMH) Item Set 3.0

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Documents Available for the CAHPS Clinician & Group Survey

This document is part of a comprehensive set of instructional materials that address implementing the Clinician & Group Survey, analyzing the data, and reporting the results. All documents are available on the Agency for Healthcare Research and Quality’s Web site: www.cahps.ahrq.gov. For assistance in accessing these documents, please contact the CAHPS Help Line at 800-492-9261 or cahps1@westat.com.

For descriptions of these documents, refer to What's Available for the CAHPS Clinician & Group Survey 3.0.

Questionnaires

- **CAHPS Clinician & Group Survey:** Overview of the Questionnaires
- **Clinician & Group Survey 3.0** (Adult and Child, English and Spanish)
- **Clinician & Group Survey 2.0** (Adult and Child, English and Spanish)
  - 12-Month Survey 2.0
  - Patient-Centered Medical Home Survey 2.0
  - Visit Survey 2.0

Supplemental Items

- **Supplemental Items for the Adult Survey**
- **Supplemental Items for the Child Survey**
- **About the Health Literacy Item Set for Clinicians & Groups**
- **About the Cultural Competence Item Set**
- **About the Health Information Technology Item Set**
- **About the Patient-Centered Medical Home (PCMH) Item Set**

Survey Administration Guidelines

- **Preparing a Questionnaire Using the CAHPS Clinician & Group Survey**
- **Fielding the CAHPS Clinician & Group Survey**
- **Sample Notification Letters and Emails for the CAHPS Clinician & Group Survey**
- **Sample Telephone Script for the CAHPS Clinician & Group Survey**
- **Translating CAHPS Surveys**

Data Analysis Program and Guidelines

- **CAHPS Analysis Program (SAS)**
- **Preparing and Analyzing Data from the CAHPS Clinician & Group Survey**
- **Instructions for Analyzing Data from CAHPS Surveys**

Reporting Measures and Guidelines

- **Patient Experience Measures from the CAHPS Clinician & Group Survey**
Introduction

The patient-centered medical home (PCMH) is a model for delivering primary care that is patient-centered, comprehensive, coordinated, accessible, and continuously improved through a systems-based approach to quality and safety. Learn more about patient-centered medical homes at http://pcmh.ahrq.gov/page/defining-pcmh.

Over the past several years, primary care practices throughout the United States have been implementing the medical home model. To evaluate the impact of implementing this model, health care organizations and public agencies are investigating how it affects the effectiveness, efficiency, and patient-centeredness of primary care.

To assess how the medical home model affects patients, the CAHPS Team has developed a set of supplemental items that, when used in conjunction with the CAHPS Clinician & Group Survey (CG-CAHPS), help to measure patient experience with the domains of the medical home.

This document discusses

- The rationale for assessing the domains of the medical home from the patient’s perspective.
- Topics covered by the Patient-Centered Medical Home survey items.
- Ways to use the survey results to inform health care consumers and other stakeholders and to improve the quality of care.

Why Assess Medical Homes From the Patient’s Perspective?

The medical home model represents a promising way to improve health care in America by transforming how primary care is organized and delivered. The American Academy of Pediatrics (AAP) introduced the medical home concept in 1967, initially referring to a central location for archiving a child’s medical record. In its 2002 policy statement, the AAP expanded the medical home concept to include these operational characteristics: accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective care.

In March 2007, the AAP, American Academy of Family Physicians (AAFP), the American College of Physicians (ACP), and the American Osteopathic Association (AOA) jointly issued the “Joint Principles for the Patient-Centered Medical Home.”

This consensus statement describes seven principles of a medical home, which include the following:

- Personal physician
- Physician-directed medical practice

Whole-person orientation
- Coordinated care
- Quality and safety
- Enhanced access
- Appropriate payment

These principles serve as the foundation for how many organizations define the PCMH.

Given the growing adoption of the medical home model and its impact on patient care, stakeholders are interested in a standardized survey that assesses patients’ experiences in medical homes. By expanding on existing survey topics and introducing new topics, the PCMH Item Set improves the relevance of the CAHPS Clinician & Group Survey to the domains of the medical home. However, use of this item set is not limited to practices that explicitly function as medical homes. Any primary care practice that is interested in a more comprehensive assessment of their patients’ experiences may add the PCMH items to the survey.

What’s in the CAHPS PCMH Item Set 3.0?

The PCMH Item Set consists of supplemental items designed for use with the CAHPS Clinician & Group Survey. In developing the items, the CAHPS Team focused on aspects of medical homes for which patients are the best or only source of information.

The changes in the number of items and the content covered in the PCMH Item Set 3.0 for adults and children reflect input from survey users, stakeholders, and experts as well as findings from analyses of multiple data sets. The feedback and findings influenced whether items would be included in the core CG-CAHPS Survey 3.0, the PCMH Item Set 3.0, or the broader set of supplemental items.

The Adult Version

The six items in the Adult PCMH Item Set 3.0 address the following four topic areas:

- Access to care
- Coordination of care
- Self-management support (composite measure can be calculated using two items)
- Comprehensiveness

The original PCMH Item Set for adults included 18 items that covered five topic areas. Items on the topic of shared decisionmaking that were previously in the PCMH Item Set have been moved to the broader set of supplemental items.
Appendix A lists the items included in the Adult PCMH Item Set 3.0 along with instructions about where to place items in the CG-CAHPS Adult Survey.

Appendix C provides a crosswalk of the topics and items in the original and current (3.0) Adult PCMH Item Set.

The Child Version

The 10 items in the Child PCMH Item Set 3.0 address the following four topic areas:

- Access to care
- Coordination of care
- Development (composite measure can be calculated using 4 items)
- Prevention (composite measure can be calculated using 3 items)

The original PCMH Item Set for children included 11 items that covered three topic areas. Two of these topic areas (access to care and coordination of care) remain a focus of the PCMH Item Set; items for the third topic, self-management support, were moved to the broader set of supplemental items. Two topic areas that were included in the CG-CAHPS Survey 2.0 (development and prevention) are now included in the PCMH Item Set.

Appendix B lists the items included in the Child PCMH Item Set 3.0 along with instructions about where to place items in the CG-CAHPS Child Survey.

Appendix D provides a crosswalk of the topics and items in the original and current (3.0) Child PCMH Item Set.

Where To Find More Information About Using the Items

How do I add the PCMH items into my survey?

To learn more about incorporating supplemental items into a questionnaire, please refer to Preparing a Questionnaire Using the CAHPS Clinician & Group Survey.

How do I administer these survey items?

The PCMH Item Set is designed to be administered as part of a CAHPS Clinician & Group Survey, not on its own. Users are encouraged to follow the administration guidelines for the Clinician & Group Survey: Fielding the CAHPS Clinician & Group Survey. In particular, these items should be asked of all patients rather than a subset (e.g., only those patients that access a patient portal).
Using Data From Responses to the PCMH Item Set

The results of this item set can be used to inform consumers, provide feedback to providers, and spur improvements in patients’ experiences with care.

Informing Consumers and Others

Users of the PCMH Item Set can report results at the level of the medical group, physician practice, or individual clinician. In addition to the patient experience measures from the Clinician & Group Survey, users can calculate and report one composite measure:

- **Talking with you about taking care of your own health** (2 items)
  - Someone from provider’s office talked with patient about specific health goals
  - Someone from provider’s office asked if there were things that made it hard for patient to take care of health

The CAHPS Team does not currently recommend public reporting of the individual items in this item set. In general, single-item measures may be publicly reported if the report developers have reason to believe that the measure is important to their audience and the data for those items are sufficiently reliable. However, there are limits to how much comparative information consumers can process effectively. Because a public report would include both the core survey measures as well as the composite measure listed above, and possibly other measures of quality, it is important to consider the value and potential burden to consumers of adding single-item measures.

For information on calculating scores for composite measures, review the analysis instructions in *Instructions for Analyzing Data from CAHPS Surveys* and *Preparing and Analyzing Data from the CAHPS Clinician & Group Survey*, both of which are available at [https://cahps.ahrq.gov/surveys-guidance/cg/instructions/index.html](https://cahps.ahrq.gov/surveys-guidance/cg/instructions/index.html).

Providing Feedback

Health care organizations can use the composite measure from this item set for benchmarking and reporting at the group or practice site level. For example, a health system may report the composite measure listed above to compare performance across provider groups, or a provider group may compare performance across practice sites.

To help providers better understand the behaviors and actions that improve patients’ experiences with the care they receive through the medical home, organizations may also want to provide feedback on performance at the item level. In addition to the
items included in the composite measure, the following survey items may be useful for this purpose:

- Patient got information about what to do if care is needed on evenings, weekends, or holidays (Access)
- Provider seemed informed and up-to-date about care from specialists (Coordination)
- Someone from provider’s office talked about worrying/stressful aspects of patient’s life (Comprehensiveness)

**Improving Quality**

Health care providers can use survey results to identify targets for improvement. Strategies include—

- Identifying strengths and weaknesses by topic area or individual item.
- Examining trends in scores over time.
- Comparing results to internal and external benchmarks.
- Conducting a key driver analysis to understand how PCMH topics drive the patients’ rating of their experience.
- Assessing other quantitative and qualitative data that complements the survey results, such as call abandonment rates and feedback from provider shadowing.

Responses can also be segmented for further analysis to provide more detailed information. To identify subgroups of possible interest, providers can use one or more variables from multiple sources:

- Variables from the survey, such as patient demographics, health status, or whether or not the provider is the patient’s regular provider.
- Variables from administrative or medical record data, such as clinical data.
- Additional supplemental items on the survey, such as length of relationship with providers.

Based on this data, providers can identify opportunities for improvement, such as:

- Helping patients set health goals and overcome barriers to these goals
- Enhancing coordination of care among providers, including specialists, through information systems

Providers can then field the items again to evaluate the success of improvement activities.
The CAHPS Ambulatory Care Improvement Guide offers insights into quantitative and qualitative analyses useful for identifying improvement opportunities as well as strategies for improving patients’ experiences: https://cahps.ahrq.gov/quality-improvement/improvement-guide/improvement-guide.html.

Development of the CAHPS PCMH Item Set

The Agency for Healthcare Research and Quality (AHRQ) sponsored the CAHPS Team’s development of the PCMH Item Set to improve the usefulness of the CAHPS Clinician & Group Survey as a tool for assessing patients’ experiences with the domains of primary care that define a medical home. The development process, which started in late 2009, included the following steps:

- **Literature review.** The CAHPS Team conducted a literature review to ensure that the items would reflect appropriate content and the best research in this area.

- **Technical Expert Panel input.** The CAHPS Team assembled a panel of PCMH experts representing various stakeholders, including providers, health plans, payers, professional organizations, policymakers, and regional collaboratives, to provide input on the development and use of a CAHPS survey to assess patient experience with the medical home. Panel members were interviewed in late 2009 and early 2010; the panel met in person in April 2010 and by phone in July 2011.

- **Stakeholder input.** Stakeholder input is critical to the CAHPS survey development process. The CAHPS Team benefited from extensive feedback that the National Committee for Quality Assurance (NCQA) gathered from stakeholders on the development of a patient experience survey for its PCMH program.

- **Focus group input.** In summer 2010, adult patients and parents of children receiving care in medical home practices provided input to
  - Confirm the domains of interest identified by the Technical Expert Panel and other stakeholders;
  - Identify additional domains, if any; and
  - Convey how they describe the care they receive in their medical homes.

- **Cognitive testing (English and Spanish).** In August 2010, the CAHPS Team conducted cognitive testing of draft questionnaires that incorporated PCMH items into the 12-Month Survey. The testing was done with both adults and children in English and Spanish. A second round of cognitive testing was completed in the spring of 2011. The team revised the draft questionnaires based on the findings from the cognitive interviews.
- **Field testing.** NCQA field tested the instrument in the winter of 2010-2011. Data from early adopters of the survey were also used to inform implementation issues.

- **Psychometric analysis.** In the spring of 2011, the data collected during field testing was analyzed to determine the psychometric properties of the survey items. This analysis informed the final version of the expanded 12-Month Survey with Patient-Centered Medical Home items.

- **Consumer testing of composite labels.** In the winter of 2011, the CAHPS Team conducted focus groups with consumers to assess how they interpret and categorize the items. In spring 2012, the Team did one-on-one testing with consumers to gauge their response to composite labels and alternative approaches to displaying the full set of measures.

- **User feedback and updating of the items.** In 2015, AHRQ included revisions to the PCMH Item Set in a call for public comments on proposed changes to the Clinician & Group Survey. In response to feedback from stakeholders and users, the CAHPS Team decided to make changes to both the adult and child versions of the item set, moving some questions out of the item set (into the core survey or general set of supplemental items) and moving some questions from the core survey into the item set. The 3.0 version of the PCMH Item Set, which is meant to be incorporated into the 3.0 version of the Clinician & Group Survey, was released in the fall of 2015.
Appendix A. Items in the Adult PCMH Item Set 3.0

The table below lists the questions included in the 3.0 version of the Adult PCMH Item Set. Also included are instructions about how to incorporate the PCMH items into the core CG-CAHPS Adult Survey 3.0.

<table>
<thead>
<tr>
<th>Number in the Adult PCMH Item Set</th>
<th>Question and response options</th>
<th>Placement in the Adult Survey 3.0</th>
</tr>
</thead>
</table>
| PCMH1                             | Did this provider’s office give you information about what to do if you needed care during evenings, weekends, or holidays?  
1 □ Yes  
2 □ No | After core question 8 |
| PCMH2                             | Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you see a specialist for a particular health problem?  
1 □ Yes  
2 □ No → If No, go to #PCMH4 | After core question 18 |
| PCMH3                             | In the last 6 months, how often did the provider named in Question 1 seem informed and up-to-date about the care you got from specialists?  
1 □ Never  
2 □ Sometimes  
3 □ Usually  
4 □ Always | After PCMH2 |
| PCMH4                             | Please answer these questions about the provider named in Question 1 of this survey.  
In the last 6 months, did someone from this provider’s office talk with you about specific goals for your health?  
1 □ Yes  
2 □ No | After PCMH3 |
| PCMH5                             | In the last 6 months, did someone from this provider’s office ask you if there are things that make it hard for you to take care of your health?  
1 □ Yes  
2 □ No | After PCMH4 |
| PCMH6                             | In the last 6 months, did you and someone from this provider’s office talk about things in your life that worry you or cause you stress?  
1 □ Yes  
2 □ No | After PCMH5 |
### Appendix B. Items in the Child PCMH Item Set 3.0

The table below lists the questions included in the 3.0 versions of the Child PCMH Item Set. Also included are instructions about how to incorporate the PCMH items into the core CG-CAHPS Child Survey 3.0.

<table>
<thead>
<tr>
<th>Number in the Child PCMH Item Set</th>
<th>Question and response options</th>
<th>Placement in the Child Survey 3.0</th>
</tr>
</thead>
</table>
| PCMH1                             | Did this provider’s office give you information about what to do if your child needed care during evenings, weekends, or holidays?  
  1 □ Yes  
  2 □ No | After core question 15 |
| PCMH2                             | Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did your child see a specialist for a particular health problem?  
  1 □ Yes  
  2 □ No → If No, go to #PCMH4 | After core question 25 |
| PCMH3                             | In the last 6 months, how often did the provider named in Question 1 seem informed and up-to-date about the care your child got from specialists?  
  1 □ Never  
  2 □ Sometimes  
  3 □ Usually  
  4 □ Always | After PCMH2 |
| PCMH4                             | Please answer these questions about the provider named in Question 1 of this survey. In the last 6 months, did you and someone from this provider’s office talk about the kinds of behaviors that are normal for your child at this age?  
  1 □ Yes  
  2 □ No | After PCMH3 |
| PCMH5                             | In the last 6 months, did you and someone from this provider’s office talk about how your child’s body is growing?  
  1 □ Yes  
  2 □ No | After PCMH4 |
| PCMH6                             | In the last 6 months, did you and someone from this provider’s office talk about your child’s moods and emotions?  
  1 □ Yes  
  2 □ No | After PCMH5 |
<table>
<thead>
<tr>
<th>Number in the Child PCMH Item Set</th>
<th>Question and response options</th>
<th>Placement in the Child Survey 3.0</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCMH7</td>
<td>In the last 6 months, did you and someone from this provider’s office talk about things you can do to keep your child from getting injured?</td>
<td>After PCMH6</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>PCMH8</td>
<td>In the last 6 months, did you and someone from this provider’s office talk about how much or what kind of food your child eats?</td>
<td>After PCMH7</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>PCMH9</td>
<td>In the last 6 months, did you and someone from this provider’s office talk about how much or what kind of exercise your child gets?</td>
<td>After PCMH8</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>PCMH10</td>
<td>In the last 6 months, did you and someone from this provider’s office talk about how your child gets along with others?</td>
<td>After PCMH9</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
Appendix C. Crosswalk of items in the Adult PCMH Item Sets 2.0 and 3.0

The table below provides a crosswalk of the individual questions in the 3.0 and 2.0 versions of the Adult PCMH Item Set, organized by topic.

<table>
<thead>
<tr>
<th>PCMH Topic</th>
<th>Short Item Title 3.0</th>
<th>Adult 3.0 Item #</th>
<th>Short Item Title 2.0</th>
<th>Adult 2.0 Item #</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access</td>
<td>N/A</td>
<td>N/A</td>
<td>Number of days wait for urgent care appointment</td>
<td>PCMH1</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Patient got information about what to do if care is needed on evenings, weekends, or holidays</td>
<td>PCMH1</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Patient needed care during evenings, weekends, or holidays</td>
<td>PCMH3</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Patient able to get needed care on evenings, weekends, or holidays</td>
<td>PCMH4</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Patient got reminders from provider’s office between visits</td>
<td>PCMH5</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td>Shared decision-making</td>
<td>N/A</td>
<td>N/A</td>
<td>Patient started or stopped a medicine</td>
<td>PCMH6</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Provider talked to patient about reasons patient might want to take a medicine</td>
<td>PCMH7</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Provider talked to patient about reasons patient might not want to take a medicine</td>
<td>PCMH8</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Provider asked what patient thought was best</td>
<td>PCMH9</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td>PCMH Topic</td>
<td>Short Item Title 3.0</td>
<td>Adult 3.0 Item #</td>
<td>Short Item Title 2.0</td>
<td>Adult 2.0 Item #</td>
<td>Notes</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>-----------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>-----------------</td>
<td>--------------------------------------------</td>
</tr>
<tr>
<td>Coordination</td>
<td>Patient saw a specialist for a particular health problem</td>
<td>PCMH2</td>
<td>Patient saw a specialist for a particular health problem</td>
<td>PCMH10</td>
<td>No change to item</td>
</tr>
<tr>
<td></td>
<td>Provider seemed informed and up-to-date about care from specialists</td>
<td>PCMH3</td>
<td>Provider seemed informed and up-to-date about care from specialists</td>
<td>PCMH11</td>
<td>No change to item</td>
</tr>
<tr>
<td>Self-management support</td>
<td>Someone from provider’s office talked with patient about specific health goals</td>
<td>PCMH4</td>
<td>Anyone in provider’s office talked with patient about specific health goals</td>
<td>PCMH12</td>
<td>Changed referent to be consistent with wording in core items</td>
</tr>
<tr>
<td></td>
<td>Someone from provider’s office asked if there were things that made it hard for patient to take care of health</td>
<td>PCMH5</td>
<td>Anyone in provider’s office asked if there were things that made it hard for patient to take care of health</td>
<td>PCMH13</td>
<td>Changed referent to be consistent with wording in core items</td>
</tr>
<tr>
<td>Coordination</td>
<td></td>
<td>N/A</td>
<td>Patient took prescription medicine</td>
<td>PCMH14</td>
<td>Moved to core survey</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td>Anyone in provider’s office talked with patient about all prescriptions</td>
<td>PCMH15</td>
<td>Moved to core survey</td>
</tr>
<tr>
<td>Comprehensiveness</td>
<td></td>
<td>N/A</td>
<td>Anyone in provider’s office asked if patient had felt sad, empty, or depressed</td>
<td>PCMH16</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td>Someone from provider’s office talked about worrying/stressful aspects of patient’s life</td>
<td>PCMH6</td>
<td>Anyone in provider’s office talked about worrying/stressful aspects of patient’s life</td>
<td>PCMH17</td>
<td>Changed referent to be consistent with wording in core items</td>
</tr>
<tr>
<td></td>
<td></td>
<td>N/A</td>
<td>Anyone in provider’s office talked with patient about personal problem, family problem, alcohol use, drug use, or a mental or emotional illness</td>
<td>PCMH18</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
</tbody>
</table>
Appendix D. Crosswalk of items in the Child PCMH Item Sets 2.0 and 3.0

The table below provides a crosswalk of the individual questions in the 3.0 and 2.0 versions of the Child PCMH Item Set, organized by topic.

<table>
<thead>
<tr>
<th>PCMH Topic</th>
<th>Short Item Title 3.0</th>
<th>Child 3.0 Item #</th>
<th>Short Item Title 2.0</th>
<th>Child 2.0 Item #</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access</td>
<td>N/A</td>
<td>N/A</td>
<td>Number of days wait for urgent care appointment</td>
<td>PCMH1</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td>Respondent got information about what to do if child needed care on evenings, weekends, or holidays</td>
<td>PCMH1</td>
<td>Respondent got information about what to do if child needed care on evenings, weekends, or holidays</td>
<td>PCMH2</td>
<td>No change to item</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>Child needed care during evenings, weekends, or holidays</td>
<td>PCMH3</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>Child able to get needed care on evenings, weekends, or holidays</td>
<td>PCMH4</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>Respondent got reminders from provider’s office between visits</td>
<td>PCMH5</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td>Coordination</td>
<td>Child saw a specialist for a particular health problem</td>
<td>PCMH2</td>
<td>Child saw a specialist for a particular health problem</td>
<td>PCMH6</td>
<td>No change to item</td>
</tr>
<tr>
<td></td>
<td>Provider seemed informed and up-to-date about care from specialists</td>
<td>PCMH3</td>
<td>Provider seemed informed and up-to-date about care from specialists</td>
<td>PCMH7</td>
<td>No change to item</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>Child took prescription medicine</td>
<td>PCMH10</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
<tr>
<td></td>
<td>N/A</td>
<td>N/A</td>
<td>Anyone in provider’s office talked with patient about all prescriptions</td>
<td>PCMH11</td>
<td>Moved to general set of CG-CAHPS supplemental items</td>
</tr>
</tbody>
</table>
### PCMH Topic | Short Item Title 3.0 | Child 3.0 Item # | Short Item Title 2.0 | Child 2.0 Item # | Notes |
--- | --- | --- | --- | --- | --- |
**Development** | Respondent and provider talked about age-appropriate behaviors | PCMH4 | N/A | N/A | Moved from core survey |
|  | Respondent and provider talked about child’s physical development | PCMH5 | N/A | N/A | Moved from core survey |
|  | Respondent and provider talked about child’s moods and emotions | PCMH6 | N/A | N/A | Moved from core survey |
|  | Respondent and provider talked about how child gets along with others | PCMH10 | N/A | N/A | Moved from core survey |
**Prevention** | Respondent and provider talked about injury prevention | PCMH7 | N/A | N/A | Moved from core survey |
|  | Respondent and provider talked about child’s eating habits | PCMH8 | N/A | N/A | Moved from core survey |
|  | Respondent and provider talked about child’s physical activity | PCMH9 | N/A | N/A | Moved from core survey |
**Self-management support** | N/A | N/A | Anyone in provider’s office talked about specific health goals for child | PCMH8 | Moved to general set of CG-CAHPS supplemental items |
|  | N/A | N/A | Anyone in provider’s office asked if there were things that made it hard for to take care of child’s health | PCMH9 | Moved to general set of CG-CAHPS supplemental items |