

CMS TECHNICAL ASSISTANCE WEBINAR ON USING THE CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS (CAHPS®) SURVEY TO BETTER UNDERSTAND THE QUALITY OF CARE FOR CHILDREN IN MEDICAID AND CHIP

ANSWERS TO FREQUENTLY ASKED QUESTIONS

A. Requirements for Title XXI (CHIP) Programs

1. Are all states that operate a Title XXI program, regardless of type required to collect and submit a CAHPS survey to the Centers for Medicare & Medicaid Services (CMS)?

Answer: Yes, the Children’s Health Insurance Program Reauthorization Act (CHIPRA) requirement related to CAHPS applies to all Title XXI (CHIP) programs. States must submit data that are representative of all children covered by their entire Title XXI program (CHIP Medicaid Expansion Program, Separate CHIP Program, or Combination CHIP Program) beginning in December 2013. Table 1 summarizes the CHIPRA-CAHPS requirements.

2. Which version of the CAHPS survey is required to meet the CHIPRA requirement?

Answer: CHIPRA requires Title XXI (CHIP) programs to include in their annual reports “data regarding access to primary and specialty services, access to networks of care, and care coordination provided under the state child health plan, using quality care and consumer satisfaction measures included in the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey” [Section 402(a)(2)]. CHIPRA does not specify which CAHPS survey tool must be used. To align with the CAHPS measure in the Initial Core Set of Children’s Health Care Quality Measures (Initial Core Set), CMS encourages states to collect the CAHPS 5.0H survey either with or without the Children with Chronic Conditions (CCC) Supplemental Items. However, as indicated in Table 1, states may decide which CAHPS tool to use.

Table 1. CHIPRA-CAHPS Data Requirements

Type of Program	Data Requirements
Title XXI (CHIP) Programs 1. CHIP Medicaid Expansion Programs 2. Separate CHIP Programs 3. Combination CHIP Programs	The CHIPRA requirement applies to all types of Title XXI (CHIP) programs. The agency must obtain CAHPS survey results specifically for CHIP enrollees. If a state would like to provide data on both Medicaid and CHIP enrollees, the agency must sample Title XIX (Medicaid) and Title XXI (CHIP) programs separately and submit separate results to CMS to fulfill the CHIPRA requirement. CHIPRA does not specify which CAHPS survey must be used. CMS encourages states to collect CAHPS 5.0H with or without CCC Supplemental Items; ¹ however, this is the decision of the state.
Title XIX (Medicaid) Programs	Title XIX (Medicaid) programs that do not meet program structures noted in 1-3 above can choose to collect CAHPS and report it to CMS. CMS encourages Title XIX (Medicaid) programs to collect the CAHPS 5.0H survey either with or without CCC Supplemental Items; ¹ however, this is the decision of the state.

¹ CMS encourages states to collect CAHPS 5.0H with or without CCC Supplemental Items in order to align with voluntary reporting of the CAHPS survey in the Initial Core Set.

B. CAHPS 5.0H Survey Version

3. Are other supplemental items (e.g., dental services, care coordination, or specialist care) required for inclusion in the CAHPS survey?

Answer: No, inclusion of supplemental item sets is not required in order to comply with the CHIPRA CAHPS requirement or as part of voluntary reporting for the initial core set measures. CMS encourages states to include the Children with Chronic Conditions (CCC) supplemental items, but the decision is up to each state.

4. Does the CAHPS survey include any items specific to hospital encounters?

Answer: No, the CAHPS Health Plan 5.0H Survey, Child Questionnaire, does not include items specific to hospital encounters. Parents are asked to exclude care received during overnight hospital stays.

5. Where can I find the technical specifications for the CAHPS 5.0H survey for the Child Core Set?

Answer: The Technical Specifications and Resource Manual are available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html>. The technical specifications contain information on contracting with a HEDIS-certified survey vendor, sampling, and fielding the survey. The specifications also include the CAHPS Health Plan 5.0H Survey, Child Questionnaire, with and without the Children with Chronic Conditions (CCC) Supplemental Items.

C. CAHPS Sample

6. If a state samples its combined Medicaid and CHIP populations, is the state still required to sample from its entire CHIP population to satisfy the CHIPRA requirement?

Answer: Yes, if a state chooses to collect CAHPS for children in both Medicaid and CHIP, the state must separately sample children enrolled in the Title XXI CHIP programs and those enrolled in the Title XIX Medicaid programs, and must report separate data for children enrolled in Medicaid and CHIP when submitting data to CMS. States that use more than one delivery system for CHIP (e.g., managed care, primary care case management, or fee-for-service) must submit survey data that are representative of all children enrolled in CHIP, regardless of the delivery system in which they are served.

7. Approximately 85 percent of the children in our state's CHIP population are covered by managed care. Can the CAHPS surveys conducted by the state's managed care organizations (MCOs) satisfy the CHIPRA reporting requirement for CAHPS? Or, are we required to sample and submit data for the entire CHIP population?

Answer: To satisfy the CAHPS requirement under CHIPRA, a state must collect CAHPS survey data that are representative of the entire population of children covered by its Title XXI program, including children not enrolled in MCOs. The data submitted to CMS must be representative of the entire Title XXI population and must be aggregated to the state level (rather than reported at the plan level or by type of delivery system). States that use more than one delivery system for CHIP (managed care, fee-for-service, or primary care case management) must submit survey data that is representative of all children, regardless of the delivery system in which they are served.

8. Does state-level sampling satisfy the CHIPRA requirement, or are states required to conduct plan-level sampling?

Answer: To satisfy the CAHPS requirement under CHIPRA, a state must collect CAHPS survey data that are representative of the entire population of children covered by its Title XXI program. State-level sampling satisfies the requirement for submitting CAHPS data for the state's entire Title XXI population. States should not submit plan-level data.

D. Survey Administration

9. Will there be a federal match for conducting an annual CAHPS survey? If yes, will it be a 90/10 match?

Answer: External Quality Review Organizations (EQROs) that administer CAHPS surveys are eligible for a 75 percent match when conducted as an optional activity. State-administered CAHPS surveys are eligible for a 50/50 federal match. To adhere to CAHPS 5.0H measure specifications, states must contract with a National Committee for Quality Assurance- (NCQA) certified HEDIS survey vendor that will administer the survey according to HEDIS protocols. A current listing of NCQA-certified HEDIS survey vendors is available at <http://www.ncqa.org/hedis-quality-measurement/data-reporting-services/cahps-5-0-survey>.

10. What are some reasons a vendor would want to oversample for the CAHPS survey?

Answer: To achieve the targeted number of completed surveys, a state may decide to oversample if it (1) has a prior history of low survey response rates, (2) anticipates that a significant number of addresses or telephone numbers in the enrollment files are inaccurate, (3) cannot eliminate disenrolled children from eligibility files, or (4) does not expect to achieve a denominator of 100 for most survey calculations. More information on conducting the Child CAHPS 5.0H survey is available in the Technical Specifications and Resource Manual available at <https://www.medicare.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html>.

11. Has there been any recent analysis regarding survey fatigue (i.e., how many questions are “too many”) and whether it may result in parents’ not completing the survey?

Answer: The Agency for Healthcare Research and Quality (AHRQ) worked with leading research organizations to develop the family of CAHPS survey instruments. The CAHPS protocols are designed to minimize respondent burden and maximize response rates. As the measure steward of CAHPS 5.0H and HEDIS survey administration protocols, NCQA closely monitors the response rates of NCQA-certified HEDIS survey vendors. For example, NCQA limits to 20 the number of supplemental questions that a survey sponsor can add.

E. Reporting

12. Can a state report CAHPS survey findings that were collected by its participating managed care organizations (MCOs)?

Answer: To satisfy the CHIPRA CAHPS requirement for Title XXI programs, a state may report CAHPS survey data that were collected by its participating MCOs. However, the data must be representative of its entire population of Title XXI-covered children

(including those not enrolled in MCOs, if applicable, and excluding all Title XIX-covered children). Further, the data must be combined across MCOs and reported at the state level. Information on developing state-level rates is available in a technical assistance brief at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/state-level-rates-brief.pdf>.

13. How are composite scores calculated? For example, are the answers to the separate questions averaged?

Answer: Different composite measures are scored in different ways. The National CAHPS Database, maintained by AHRQ, performs the scoring for the composite measures. The National CAHPS Database is temporarily closed. For more information on the CAHPS database, visit AHRQ's website: <http://cahps.ahrq.gov/>.

14. Will there be additional technical assistance provided on how to aggregate a state-level rate for CAHPS?

Answer: The procedures for creating a state-level rate for CAHPS are similar to those discussed in the technical assistance brief on Approaches to Developing State-Level Rates for Children's Health Care Quality Measures Based on Data from Multiple Sources. This brief is available at <https://www.medicaid.gov/medicaid/quality-of-care/downloads/state-level-rates-brief.pdf>. Questions about developing state-level rates for CAHPS should be sent to the technical assistance mailbox at MACQualityTA@cms.hhs.gov.

F. Webinar Resources

15. Are the slides and briefs from the webinar on November 13, 2012 available to states?

Answer: Yes, the presentation slides and other resources from the technical assistance webinar are available at <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/child-core-set/index.html>.