

Using CAHPS® To Better Understand the Quality of Care for Children in Medicaid and CHIP

Technical Assistance Webinar

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Purpose of Webinar

- Highlight the value of the Consumer Assessment of Health Care Providers and Systems (CAHPS) Survey
- Provide guidance to states about fielding and reporting the CAHPS Survey
- Distinguish state and survey vendor roles in fielding and reporting the CAHPS Survey

Agenda

- Overview of CAHPS for Core Set Reporting
- Reporting CAHPS Results
- CAHPS Instrument for 2013 Core Set Reporting
- Fielding CAHPS and Preparing Results
- Other TA Resources
- Questions & Answers
 - Please send questions through the chat function during the webinar

Overview of CAHPS for Core Set Reporting

Overview of CAHPS

- CAHPS includes a family of surveys that capture various dimensions of health care quality not easily measured elsewhere
 - Consumer experience
 - Shared decision-making
 - Coordinated care
- CAHPS has been in use since the mid-1990s
 - Many states use CAHPS to gauge consumer experience
 - Approximately 25 states reported CAHPS data for Medicaid children in 2010 to the AHRQ CAHPS Database

CAHPS Reporting: Core Set and CHIPRA

Measure Source	Measure Status	Programs Affected	Version of CAHPS
Core Set of Children's Health Care Quality Measures	Voluntary	Medicaid and CHIP Programs	CAHPS Health Plan 5.0H Survey, Child Version, with Children with Chronic Conditions (CCC) supplemental items*
CHIPRA Section 402(a)(2)	Required by 12/31/2013	Title XXI (CHIP) programs, including Medicaid expansion, separate, and combination CHIP programs	CAHPS Child Survey; CMS recommends that states use the same instrument as specified for the initial core set measure

*CAHPS 4.0H is the current version of the survey instrument. CAHPS 5.0H should be used for data collection in 2013.

CAHPS Core Set Measure

- CAHPS Health Plan 5.0H Survey, Child Version, with Children with Chronic Conditions (CCC) Supplemental Items
- Core survey collects information on parents' experience with their child's health plan
 - For fee-for-service or primary care case management programs, the "program" is considered a health plan
- Includes a CCC module in addition to the core survey
 - CCC module provides information on the experience of children with chronic conditions
 - CCC module is part of the Core Set specification for the CAHPS measure
 - Inclusion of the CCC items is encouraged by CMS, but the decision is up to each state

Reporting CAHPS Results

What CAHPS Tells Us About Medicaid Children's Health Care Quality

- CAHPS results from 25 states in 2010 covered 88,694 respondents across 133 plans
- Parents generally felt they could get care for their child when needed for an illness or injury
 - State median of 76 percent responding “always”
- Parents thought it was more difficult to get routine care or specialty care
 - State median of 65 percent responding “always” for routine care and 47 percent for specialty care
- Most parents had a favorable assessment of the doctor's communication with them, but had a somewhat less favorable assessment of the doctor's interactions with the child
 - State median of 77 percent responding doctor “always” communicates clearly with parent and 68 percent that doctor “always” communicates clearly with child

Source: AHRQ CAHPS Database

**Initial Core Set of Children's
Health Care Quality Measures**

Guidance on Reporting to CMS

- For FFY 2012:
 - Indicate if the state fielded the CAHPS survey (yes/no)
 - If no, explain why the CAHPS survey was not conducted
 - Indicate the version fielded (CAHPS 4.0, CAHPS 4.0H, other)
 - Indicate the supplemental items included in the survey (none, CCC, other)
 - Indicate the population included (Medicaid, CHIP, or both) and any populations excluded from the survey
 - States will not be requested to attach a summary of results in CARTS
- For FFY 2013:
 - Specific reporting requirements will be provided in the 2013 Technical Specifications and Resource Manual

CAHPS Instrument for 2013 Core Set Reporting

CAHPS 5.0H Core Survey Domains

Global Rating Items

- Rating of All Health Care
- Rating of Personal Doctor
- Rating of Specialist Seen Most Often
- Rating of Health Plan

Item-Specific Question Summary Rates

- Health Promotion and Education
- Coordination of Care

Composites

- Customer Service
- Getting Care Quickly
- Getting Needed Care
- How Well Doctors Communicate
- Shared Decision Making

CAHPS CCC Supplemental Items Domains

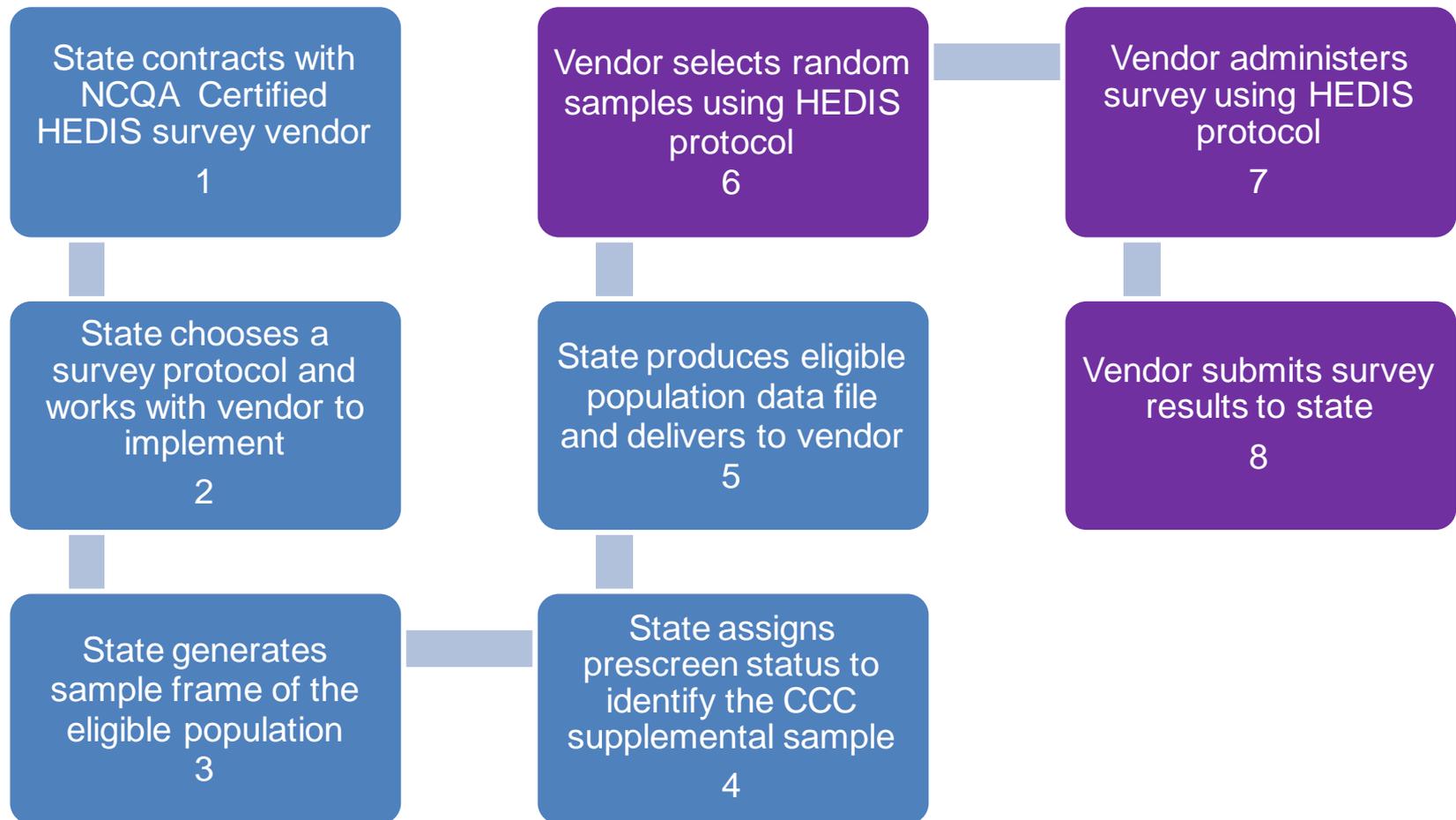
- Access to Specialized Services
- Family Centered Care: Personal Doctor Who Knows Child
- Coordination of Care for Children With Chronic Conditions
- Access to Prescription Medicines
- Family Centered Care: Getting Needed Information

CAHPS 5.0H with CCC Survey Covers Two Populations and Produces Two Sets of Results

- General Population Results
 - CAHPS Ratings, Composites, and Question Summary Rates
 - CCC Composites and Question Summary Rates
- Children with Chronic Conditions Results
 - CAHPS Ratings, Composites, and Question Summary Rates
 - CCC Composites and Question Summary Rates

Fielding CAHPS and Preparing Results

Steps for CAHPS Fielding and Reporting Activities



State Contracts with NCQA Certified HEDIS Survey Vendor

- NCQA annually trains and certifies survey vendors
- Certified vendors are listed on NCQA's web site with a year; the vendor list is being updated and will reflect the 2013 vendors soon
- For a list of NCQA-certified HEDIS survey vendors, go to <http://www.ncqa.org/LinkClick.aspx?fileticket=o1WCTrVjMI8%3d&tabid=170>

State Chooses a Survey Protocol and Works with Vendor to Implement

Mail-only Methodology

Tasks	Time Frame (Days)
Send first questionnaire and cover letter	0
Send postcard reminder to non-respondents after 1 st mailing	4-10
Send second questionnaire and cover letter to non-respondents	35
Send postcard reminder to non-respondents after 2 nd mailing	39-45
Send third questionnaire and cover letter to non-respondents	60
Allow at least 21 days for third questionnaire to be returned	81

State Chooses a Survey Protocol and Works with Vendor to Implement (cont.)

Mixed Methodology (Mail with telephone follow-up)

Tasks	Time Frame (Days)
Send first questionnaire and cover letter	0
Send postcard reminder to non-respondents after 1 st mailing	4-10
Send second questionnaire and cover letter to non-respondents	35
Send postcard reminder to non-respondents after 2 nd mailing	39-45
Initiate computer-assisted telephone interviews for non-respondents	56
Initiate systematic contact for all non-respondents for 3 phone attempts at different times on days and weeks	56-70
Complete telephone follow-up sequence	70

State Generates the Sample Frame

- Generate a data file that contains the eligible population (i.e., sample frame) and prescreen status code

Eligible Population for the Initial Core Set

Product Lines	Medicaid and/or CHIP
Ages	17 years and younger as of 12/31 of the measurement year
Continuous Enrollment	The last 6 months of the measurement year
Allowable Gap	One month or up to 45 days where enrollment is verified daily
Current Enrollment	Currently enrolled at the time survey is completed
Prescreen Status for CCC module	Assign code based on claims algorithm

State Generates the Sample Frame (cont.)

- Sampling overview for the CCC module
 - Because Children with Chronic Conditions are a relatively small proportion of the general population, the measure uses a supplemental sample of children who, based on claims, are more likely to have a chronic condition
 - Children With Chronic Conditions are identified from the general population sample and the CCC supplemental sample, through responses to items on the CCC questionnaire

State Assigns Prescreen Status to Identify CCC Supplemental Sample

- Use claims data to assign a Prescreen Status Code to each child in the sample frame data file
 - Technical Assistance Brief will contain detailed tables of codes to identify visit type and qualifying diagnoses
- Assign Prescreen Status Code of 2 for the following:
 - One outpatient, non-acute inpatient, acute inpatient, or emergency department encounter with a qualifying diagnosis
- OR
- Two outpatient encounters or one non-acute inpatient, acute inpatient, or emergency department encounter with a qualifying diagnosis
- Assign Prescreen Status Code of 1 for all others

State Produces Eligible Population Data File and Delivers to Vendor

- Use standardized layout
- Include all variables required by the survey vendor, including Prescreen Status Code
- Provide data file to survey vendor that will select the random samples

Vendor Selects Random Sample

- Total sample size equals:
 - 1650 children if not including CCC module
 - 3490 children if including CCC module
- Follow HEDIS protocols to select random sample
 - Randomly select 1650 children from the eligible population
 - This includes children with Prescreen Status Code = 1 or 2 if including CCC module
 - Randomly select 1840 children who have a Prescreen Status Code = 2 (if including CCC module)
 - These children are more likely to have a chronic condition (based on visit and diagnosis history in claims data)
- Oversampling is optional and depends on quality of the data in the sample frame
 - Survey vendor will provide support with oversampling, if desired

Vendor Administers Survey and Submits Data File

- Administer the survey according to the HEDIS data collection protocol selected by the state (mail-only or mixed methodology)
- Prepare and submit data file of results to state

Other TA Resources

CAHPS Resources

- A technical assistance brief on CAHPS is forthcoming and will be posted at <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/CHIPRA-Initial-Core-Set-of-Childrens-Health-Care-Quality-Measures.html>
- Answers to questions submitted during the webinar through the chat function will be posted in a Q and A document at the link shown above
- For future technical assistance, please contact us through the TA mailbox at CMSCHIPRAQualityTA@cms.hhs.gov

Upcoming Webinar

- **Guidance for Reporting FFY 2012 Initial Core Set Measures in CARTS**
 - December 6, 2012 - 12:30 to 2:00 pm (Eastern Time)
 - FFY 2012 Resource Manual and Technical Specifications will be released by the end of November

Questions?

Thank you for participating in today's webinar!

Please complete the evaluation as you exit the webinar.