




*HCAF – VBP Part 3*

*Overview of HHCAHPS Star Ratings –  
Communication & Care of Patients Measures*

**Presented By:**  
*Melinda A. Gaboury, CEO*  
*Healthcare Provider Solutions, Inc.*  
*healthcareprovidersolutions.com*

 Measures Affecting Star Ratings

VBP - HHCAHPS Measures	Source	Home Health Compare	Star Rating
Communication	HHCAHPS	✓	★
Care of Patients	HHCAHPS	✓	★
Specific Care Issues	HHCAHPS	✓	★
Overall Rating	HHCAHPS	✓	★
Would Definitely Recommend	HHCAHPS	✓	

## HHCAPHS Star Ratings

- ▶ CMS published the first round of HHCAPHS Star Ratings in January 2016
- ▶ The data posted in January included surveys administered for the sample months of July 2014 to June 2015
- ▶ HHAs must have at least 40 completed surveys over the four-quarter reporting period to receive HHCAPHS Star Ratings
- ▶ Four of the five publicly reported HHCAPHS measures are included in the Star Rating calculation:
- ▶ **The three HHCAPHS composite measures are:**
  - ▶ **Care of Patients (Q9, Q16, Q19, and Q24)**
  - ▶ **Communication Between Providers and Patients (Q2, Q15, Q17, Q18, Q22, and Q23)**
  - ▶ **Specific Care Issues (Q3, Q4, Q5, Q10, Q12, Q13, and Q14)**
- ▶ **The HHCAPHS Global Item is:**
  - ▶ **Overall Rating of Care Provided by the Home Health Agency (Q20)**
- ▶ Each of these measures is individually rated, and a "Summary" rating is also provided

## Linearized Scoring

- ▶ The HHCAPHS Star Rating calculation uses a very different methodology called "Linearized Scoring"
- ▶ Individual survey responses are converted into linear scores on a 0-to-100 point scale
- ▶ Example:
  - ▶ Score 0: 0 x 0 = 0
  - ▶ Score 1: 0 x 10 = 0
  - ▶ Score 2: 0 x 20 = 0
  - ▶ Score 3: 0 x 30 = 0
  - ▶ Score 4: 0 x 40 = 0
  - ▶ Score 5: 0 x 50 = 0
  - ▶ Score 6: 1 x 60 = 60
  - ▶ Score 7: 1 x 70 = 70
  - ▶ Score 8: 6 x 80 = 480
  - ▶ Score 9: 9 x 90 = 810
  - ▶ Score 10: 33 x 100 = 3,300
  - ▶ Total Score: 4,720
- ▶ **Linearized Score: 4,720 / 50 responses = 94.4%**

Response	Count	You	SHP
0 Worst home health care possible	0	0%	0%
1	0	0%	0%
2	0	0%	0%
3	0	0%	0%
4	0	0%	0%
5	0	0%	1%
6	1	2%	1%
7	1	2%	3%
8	6	12%	9%
9	9	18%	16%
10 Best home health care possible	33	66%	60%
Total		50	

**SHIP** Source: Strategic Healthcare Programs

## Driving Improvement with Staff

### 1 — Know the HHCAHPS Survey

- Institute a practice to have agency staff periodically read the survey so that the questions stay fresh in their mind, and they are reminded of how the perception of their care and performance is being measured by the patient. Agency success relies, in part, on the ability of agency staff to deliver quality care and explain care delivery using the actual language found on the survey.

### 2 — Know what is NOT ALLOWED by CMS for agency staff to do

- See following 3 screens

### 3 — Focus improvement on the publicly reported scores

- HHCAHPS publicly reported scores include one global question and three composite measures. Because the composites are comprised of other survey questions, by focusing on them, you will automatically be considering the multiple facets of the satisfaction equation.

## Information for Patients

- Because home health patients may be sicker and more vulnerable than other patient populations and they receive care from the home health provider in their homes, they may be more susceptible to actions that may influence their responses to the HHCAHPS Survey.
- Any information or communication about the survey from HHAs may introduce bias to the survey. It is acceptable for HHAs to inform patients during their next scheduled assessment that they may be asked to respond to a patient experience survey as long as all patients are notified in this way.

## Information for Patients

It is **not** acceptable, however, for an HHA to do the following:

- Mail or e-mail information to patients in advance alerting them about the survey, other than the information provided to all patients;
- Provide a copy of the HHCAHPS Survey questionnaire or cover letters to the patients;
- Include words or phrases verbatim from the HHCAHPS Survey in its marketing or promotional materials (CMS is encouraging HHAs not to use text from HHCAHPS questions in their marketing and promotional materials);
- Attempt to influence their patients' answers to the HHCAHPS Survey questions;

## Information for Patients

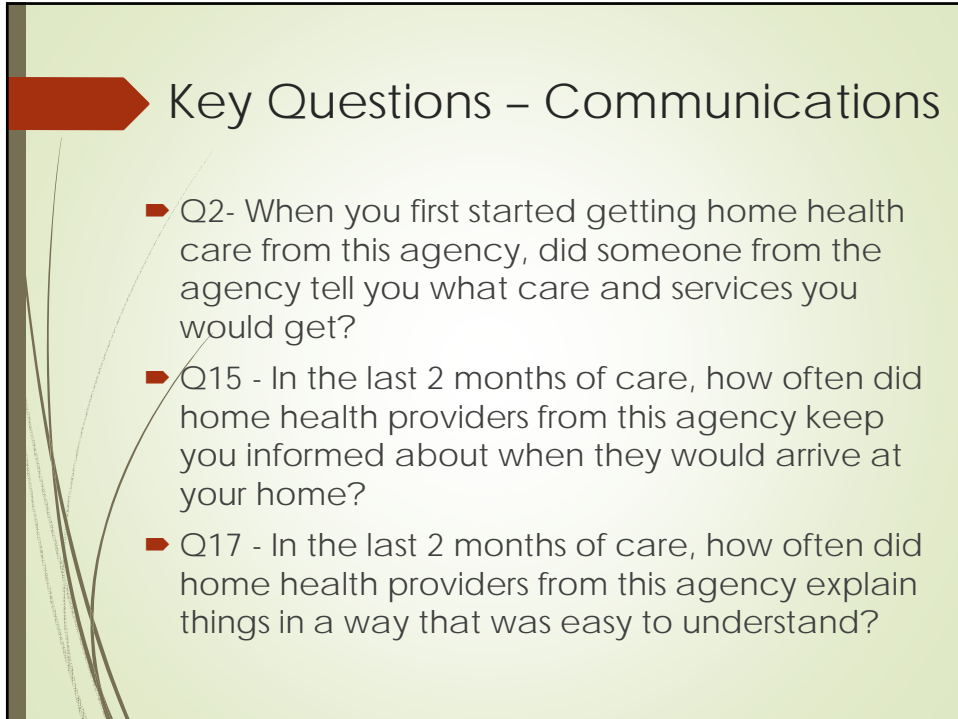
- Tell the patients that the agency hopes or expects that its patients will give it the best or highest rating or to respond in a certain way to the survey questions;
- Offer incentives of any kind to the patients for participating (or not) in the survey;
- Help the patient answer the survey questions, even if the patient asks for the home care provider's help;
- Ask patients why they gave a certain response or rating to any of the HHCAHPS Survey questions; and
- Include any messages or materials promoting the HHA or the services it provides in survey materials, including mail survey cover letters and questionnaires and telephone interview scripts.

## Key Questions – Care of Patients

- Q9 – In the last 2 months of care, how often did home health providers from this agency seem informed and up-to-date about all the care or treatment you got at home?
- Q16 – In the last 2 months of care, how often did the home health providers from this agency treat you as gently as possible?
- Q19 – In the last 2 months of care, how often did the home health providers from this agency treat you with courtesy and respect?
- Q24 – In the last 2 months of care, did you have any problems with the care you got through this agency?

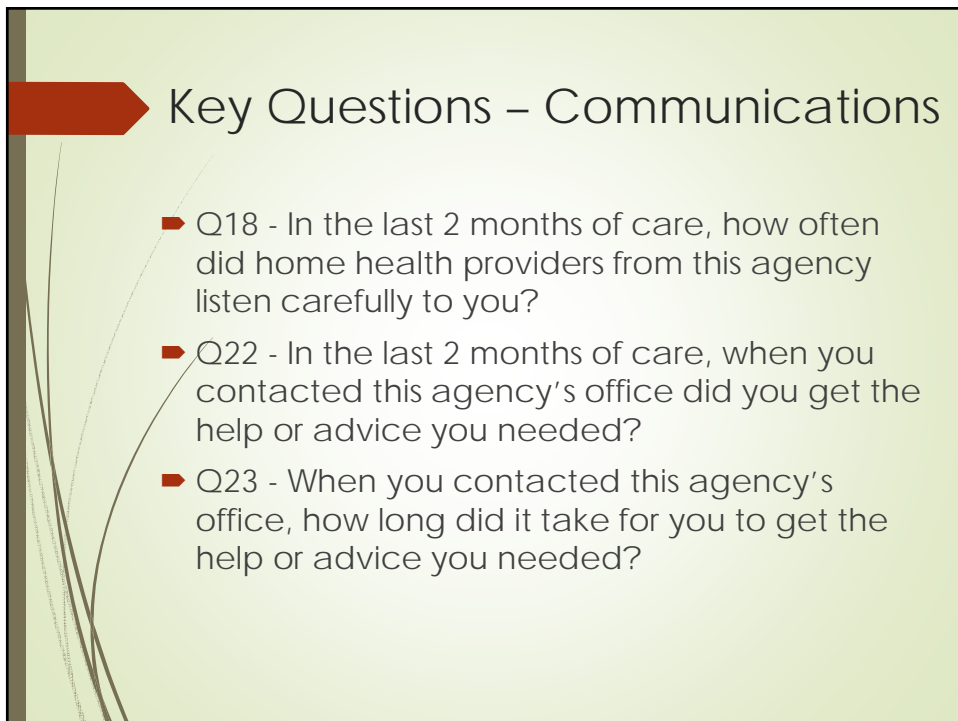
## Key Questions – Care of Patients

- How many caregivers has the patient had?
- Case conferences effective?
  - Is the patient asked what another clinician may or may not have done on previous visits?
- Are clinicians proactive about the patient feeling like they are the only patient that clinician treats? Does the patient know they are not just a medical record number?
- Do you have clinicians that are not courteous or respectful to supervisors or co-workers?
- Do you follow-up on every complaint?
  - Do you hold clinicians accountable?



## Key Questions – Communications

- Q2- When you first started getting home health care from this agency, did someone from the agency tell you what care and services you would get?
- Q15 - In the last 2 months of care, how often did home health providers from this agency keep you informed about when they would arrive at your home?
- Q17 - In the last 2 months of care, how often did home health providers from this agency explain things in a way that was easy to understand?



## Key Questions – Communications

- Q18 - In the last 2 months of care, how often did home health providers from this agency listen carefully to you?
- Q22 - In the last 2 months of care, when you contacted this agency's office did you get the help or advice you needed?
- Q23 - When you contacted this agency's office, how long did it take for you to get the help or advice you needed?

## Key Questions – Communications

- Do you know you have OUTSTANDING SOC/Admissions staff that understanding the importance of getting started on the right foot and spend the time with patient?
- Do your field staff call ahead of time on visit day?
- Do you have constant schedule changes and rescheduling of visits and do you make patients aware when this is necessary?
- Do you have staff that you consider to be patient and good listeners and provide education and training that is understandable?
- What is the protocol for taking patient phone calls, including mandated response time to requests?





# Melinda A. Gaboury, COS-C

**Chief Executive Officer**  
Healthcare Provider Solutions, Inc.  
810 Royal Parkway, Suite 200  
Nashville, TN 37214  
615.399.7499  
615.399.7790

[info@healthcareprovidersolutions.com](mailto:info@healthcareprovidersolutions.com)  
[www.healthcareprovidersolutions.com](http://www.healthcareprovidersolutions.com)

