CAHPS & HOS Surveys (Member Experience)

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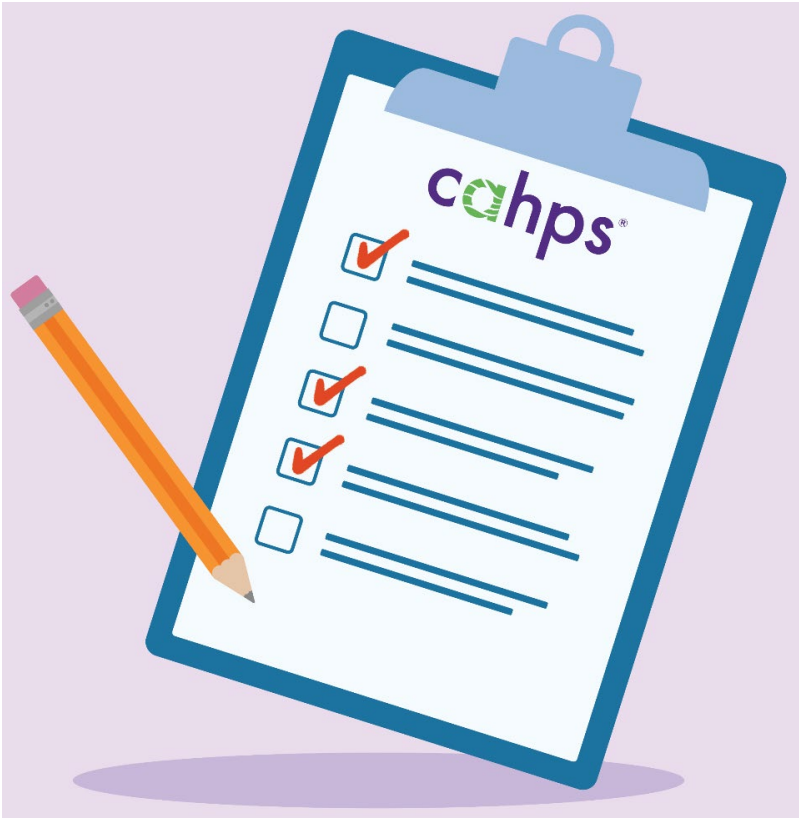
What is CAHPS?

The Centers for Medicare & Medicaid Services (**CMS**) develop, implement and administer several different patient experience surveys. These surveys ask patients (or in some cases their families) about their experiences with, and ratings of, their health care providers and plans, including hospitals, home health care agencies, doctors, and health and drug plans, among others. The surveys focus on matters that patients themselves say are important to them and for which patients are the best and/or only source of information. CMS publicly reports the results of its patient experience surveys, and some surveys affect payments to CMS providers. These surveys go out to members between **January and May** depending on the line of business.



WellCare of Kentucky Mock CAHPS Survey:

Since these surveys are important for a variety of reasons, we implement a "mock" CAHPS survey. Our surveys go out between **July and September**. We share the results of those surveys with providers in the 4th quarter to help them succeed on the CMS surveys in the spring.

*References for this slide: https://www.cms.gov/data-research/research/consumer-assessment-healthcare-providers-systems

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Why CAHPS is Important

Stars is a ratings system created by CMS (the Centers for Medicare and Medicaid Services) to help beneficiaries compare relative Medicare plan performance. They are publicly reported.

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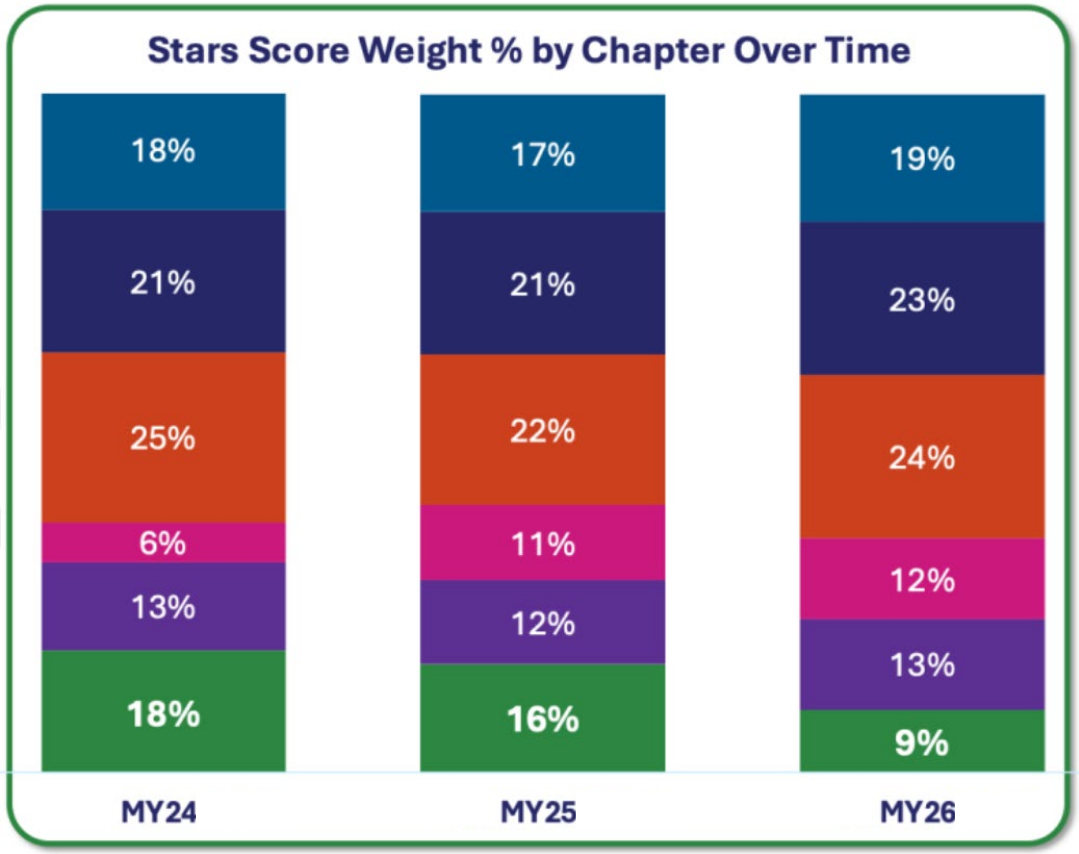
Why CAHPS is important

To calculate the Star Score for WellCare each of the 6 chapters below and the percentage of the score they account for are calculated together. Measures within each of these domains hold different weights.

As providers, you are most likely very familiar with **HEDIS** and **Pharmacy** measures since we (the quality team) provide reporting for those measures along with offering incentive programs for closing those gaps in care for our members. Together those chapters make up **33%** of our Star score for 2026.

The next largest percentage of our score comes from the **CAHPS** Survey with **23%**.



Chapters

- Admin/Ops
- CAHPS
- HEDIS
- HOS
- Improvement
- Pharmacy

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Why CAHPS should be important to you?

The CAHPS survey measures member experience. The results reflect patient loyalty, quality of care and financial viability.

1. Better CAHPS scores helps WellCare achieve higher star ratings and in turn allows us to implement and continue **incentive programs** like P4Q, COC and Value Based Payments that impact your revenue.

2. CAHPS is more than scores. Communication skills, access, better health outcomes, increased patient retention and improved patient trust are just a few benefits that come from implementing CAHPS improvement workflows. Use CAHPS training and workflows as **tools for improving the patient-provider relationship.**

A Members CAHPS Journey

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How Do You Impact CAHPS?

As a provider, you are the most critical component of patient experience.

We want to ensure that you know exactly how your patients are evaluating your care. It is beneficial to familiarize yourself with the topics included in the survey and how the smallest change might make a big impact on your patient's experience.

CAHPS Survey Domain Measures

Getting Needed Care

- Did the member receive the treatment, labs or tests needed with ease?
- Did they get an appointment as soon as they needed with a PCP or specialist?

Getting Appointments and Care Quickly

- Did the member receive needed care right away?
- Did the member get an appointment for check-up or routine care timely?
- How long did the member have to wait before being called back for their appointment?

Care Coordination

- Do you (the provider) know about the care the member receives from other providers?
- Do you follow up with test results and next steps if needed in a timely manor?
- Do you talk about and educate the member on their medications?

How Well Doctors Communicate

- Did you (the provider) explain things in a way the member can understand?
- Did you and your staff listen to your patient and allow them to ask questions? Share in decision making?
- Did you connect with compassion and empathy?

Rating of Health Care Quality

The members rating of PCP, Specialist and Health Care satisfaction on a 0-10 scale.

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CAHPS: Getting Needed Care

The Getting Needed Care measure assesses the ease with which patients received their care, tests, or treatment. It also assesses how often patients were able to get specialist appointments scheduled when needed.

- Help **coordinate specialty appointments** for urgent cases
- Make it easy for patients to locate office hours and what options patient's have **outside of office hours**
- If available, encourage patients to register for **provider portals** where they can view lab results and follow-up instructions
- Offer appointments or refills via **text or email**; send refills directly to patient's choice of pharmacy.
- Offer **telehealth** visits versus in-person visits, if appropriate.

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CAHPS: Getting Appointments and Care Quickly

The Getting Appointments and Care Quickly measure assesses how often patients got the care they needed as soon as they needed it, and how often appointment wait times exceeded 15 minutes.

- Schedule patients for appointments **based on complexity of condition**.
- Have **a few appointments available** to accommodate sick or urgent care visits.
- Offer appointments with a **nurse practitioner or physicians assistant** for short-notice appointments.
- Transparency around wait times: **Keep patients informed** if there's a longer wait time than expected and give them the option to reschedule.
- Encourage patients to **schedule their AWV** each year (at the beginning of the year) and follow-up visits as soon as possible (in advance). Scheduling before the patient leave's your office for their follow up appointment is also a best practice.

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CAHPS: Care Coordination

The Care Coordination measure assesses providers' assistance with managing the healthcare system, including access to medical records, timely follow-up on test results, and education on prescription medications.

- Ensure there are **open appointments for patients recently discharged** from facilities.
- Integrate PCP and specialty practices through **EMR or fax** to get reports promptly.
- Review patient's medical records from other **specialty practices** they may have visited and ask if they have seen any other providers.
- Assist patients with **scheduling tests**.
- **Call patients post-visit** to ensure they know when they are scheduled for tests or specialist visits.
- For some patients, asking them to **bring in the medications** they are taking might help if they can't remember when you ask.

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CAHPS: How Well Doctors Communicate

The How Well Doctors Communicate measure assesses patients' perception of the quality of communication with their doctor. Consider using the teach-back method to ensure patients understand their health information.

- The **teach-back method** is a communication confirmation method used by healthcare providers to confirm whether a patient (or caretaker) understands what is being explained to them. If they understand then they can "teach-back" the information accurately. **It is not a test or quiz**; rather a way to ask the patient (or caretaker) to explain in their own words what they need to know or do. If needed, re-explain and check again.
- Use patient-centered communication techniques. Show interest as a person and connect with compassion and empathy. Allow patients time to tell their story, listen and tailor communication based on the individual.
- Collect concerns and invite participation by providing opportunity for questions.
- Avoid jargon, use language they can understand and use visual aids if necessary.

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CAHPS: Rating of Health Care Quality

The CAHPS survey asks patients to rate the overall quality of their healthcare on a 0-10 scale

Incorporate the following into your daily practice:

- Encourage patients to make their **routine appointments** for checkups or follow-up visits as soon as they can – weeks or even months in advance
- Ensure that **open care gaps** are addressed during each patient visit.
- Make use of the **provider portal** when requesting prior authorizations.

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CAHPS: Flu Vaccine

CAHPS measures flu vaccine awareness

Getting a flu shot will often protect patients from getting a serious case of the flu. Vaccination may not always prevent infection, but it can make symptoms less severe and reduce the risk of patient hospitalization.

- Find out if the patient has received a flu shot within the last **6 months**.
- Document if a flu shot was received **outside the PCP office** and indicate the name of the facility.
- **Remind the patient** when the flu shot was last given to them.
- Use the "**presumptive approach**" to set the tone that getting a flu vaccine is routine.
- The CDC recommends that everyone **over 6 months old** receive the flu shot.

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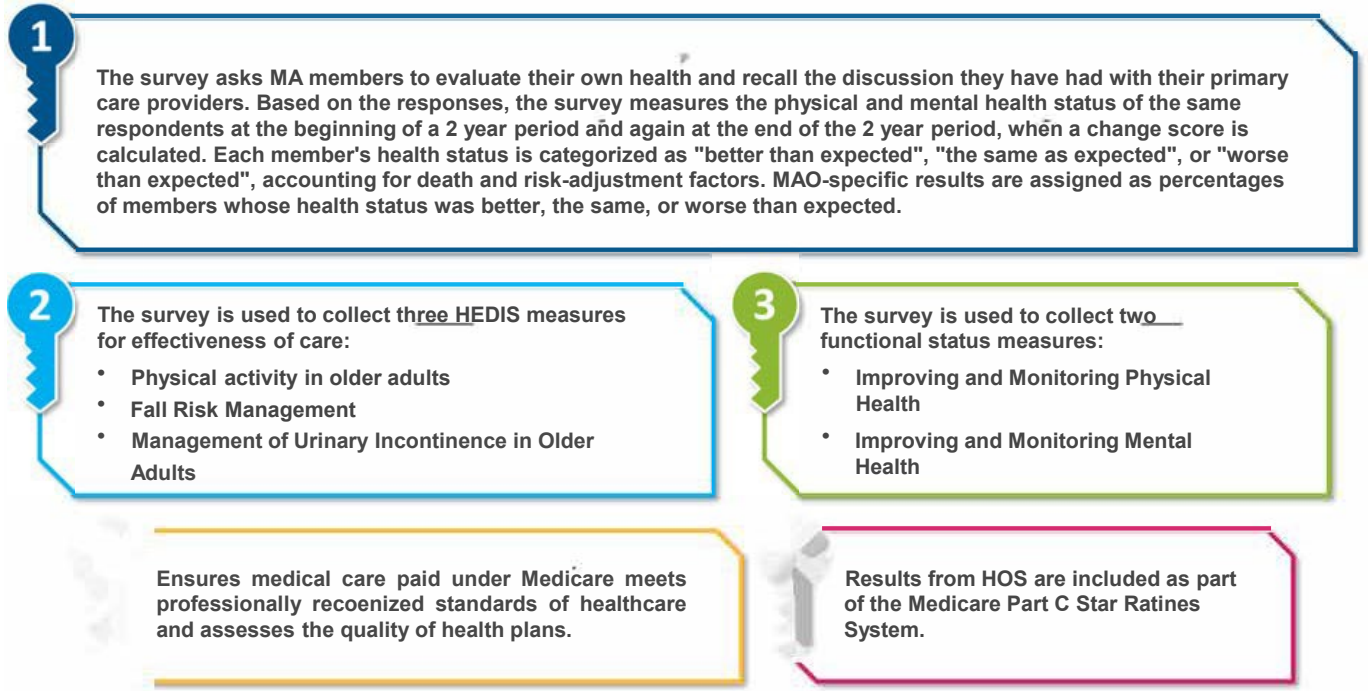
HOS - Medicare Health Outcomes Survey

The **HOS** survey is one way CMS monitors the quality-of-care Medicare Advantage Organizations (like WellCare) provide to its Medicare members. The HOS Survey assesses these organizations' ability to maintain or improve the physical and mental health of its Medicare members over time.

Key Aspects of HOS



12%

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HOS Example Questions

HOS Measure	HOS Survey Question
Improving or Maintaining Physical Health	“During the past four weeks, have you accomplished less than you would like or been limited in your work or other regular daily activities as a result of your physical health?”
Improving or Maintaining Health Mental Health	“During the past four weeks, how much of the time has your physical health or emotional problems interfered with your social activities?”
Monitoring Physical Activity	“In the past 12 months, did you talk with a doctor or other health provider about your level of exercise of physical activity?”
Improving Bladder Control	“Many people experience leakage of urine, also called urinary incontinence. In the past six months have you experienced leaking of urine?”
Reducing the Risk of Falling	“Has your doctor or other health provider done anything to prevent falls or treat problems with balance or walking?”

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Remember... Every Patient is Unique

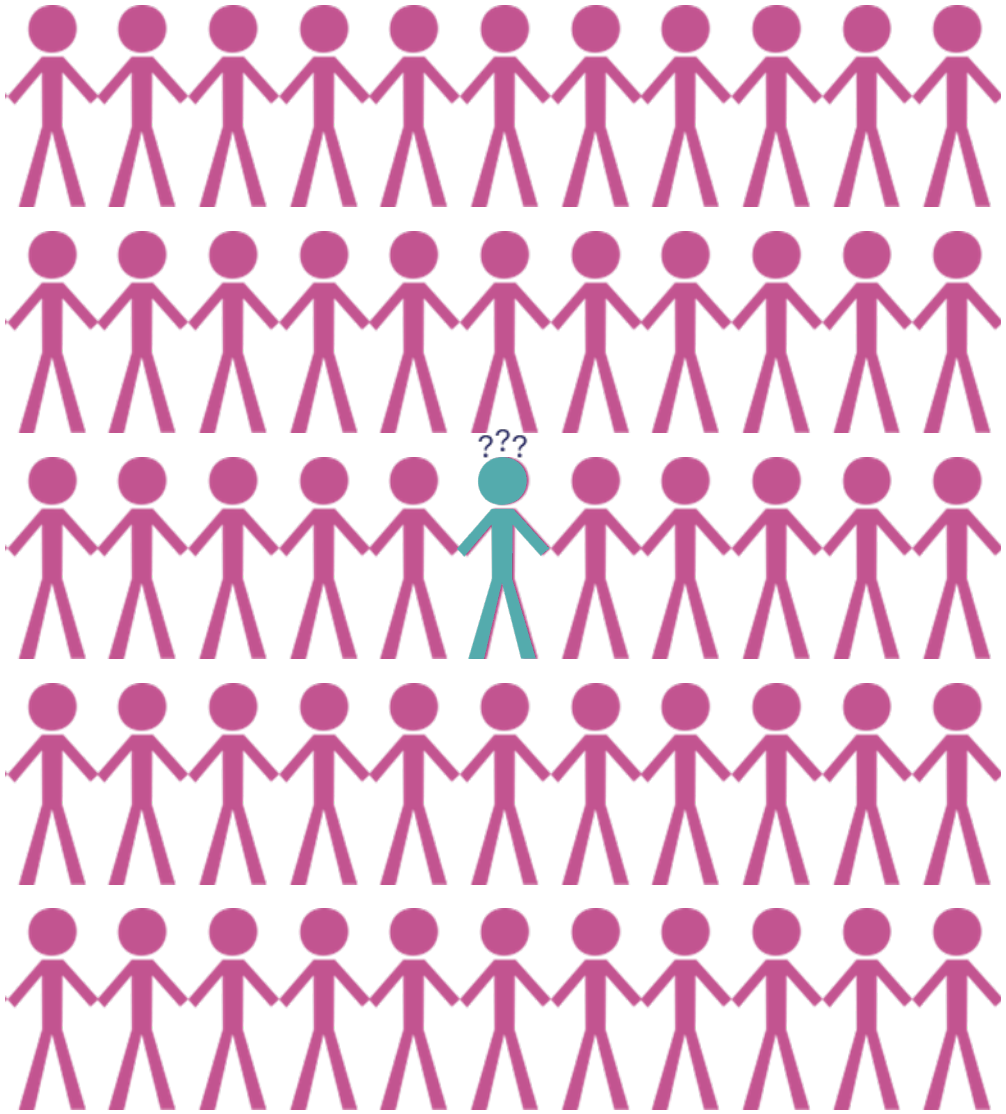
You may answer the same patient questions 10x/day, which equates to 2,500 times a year, so it's easy to feel overburdened and get impatient from these repetitive questions.

- BUT **just because we answered Patient A doesn't mean Patient B knows**!

At visits, patients may be uncomfortable, hear terminology they don't understand, and be in spaces that are totally unfamiliar. Many may not even have initial questions because they don't know where to start and feel overwhelmed.

- BUT **all patients have questions or concerns.**

What the patient thinks or remembers is what they report on the surveys. That's why it's so important to leave a good impression and provide quality care to your patients.



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Interactive Q&A

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Thank you for attending.
Any questions?

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