

Patients' Experiences in Vermont CAHs: HCAHPS Results, 2018

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KEY FINDINGS: VERMONT

- The HCAHPS reporting rate of 100.0% for Vermont CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #1 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Vermont scored significantly higher on 0 HCAHPS measures, significantly lower on 2 measures, and did not have significantly different performance on the remaining 8 measures.

BACKGROUND

The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) is a national, standardized survey of patients' perspectives of hospital care. It was developed by the Agency for Healthcare Research and Quality and the Centers for Medicare & Medicaid Services (CMS) to complement other hospital tools designed to support quality improvement. The survey is administered to a random sample of adult patients following discharge from the hospital for inpatient medical, surgical, or maternity care.

Ten HCAHPS measures are publicly reported on Hospital Compare. Six are composite measures that address how well doctors and nurses communicate with patients, the responsiveness of hospital staff, communication about medicines, and patient understanding of their care when they left the hospital. The provision of discharge information is reported as "yes/no." The other five composite measures, along with two measures regarding the hospital environment, are reported in response categories of "always," "usually," and "sometimes/never." Additional measures address the overall rating of the hospital on a 1–10 scale ("high" = 9 or 10,

"medium" = 7 or 8, "low" ≤ 6) and the patient's willingness to recommend the hospital ("definitely would," "probably would," and "probably/definitely would not"). CMS adjusts the publicly reported HCAHPS results for patient-mix, mode of data collection, and non-response bias.

Critical Access Hospitals (CAHs) may voluntarily report HCAHPS measures to Hospital Compare. HCAHPS data are a core measure in the Medicare Beneficiary Quality Improvement Project (MBQIP).

The Flex Monitoring Team (FMT) also produces a national HCAHPS report.

APPROACH

This study used data publicly reported to Hospital Compare by CAHs for discharges during calendar year 2018 as well as suppressed data from MBQIP. In 2016, CMS began suppressing HCAHPS results from Hospital Compare for hospitals with fewer than 25 completed surveys. The FMT national and state HCAHPS reports include MBQIP HCAHPS data from 187 CAHs that agreed to participate in Hospital Compare,



but whose results were suppressed from Hospital Compare because of having fewer than 25 completed surveys. Although some CAHs had very few surveys, the results are reported in aggregate for all CAHs in each state, and no states had fewer than 25 surveys for all CAHs in the state

The national and state HCAHPS reports exclude results from 19 CAHs that did not agree to publicly report to Hospital Compare, though 14 of these submitted HCAHPS data to MBQIP. The reports include data from two CAHs that reported HCAHPS data to Hospital Compare, but not to MBQIP.

For each HCAHPS measure, the percentages of patients reporting the highest response (e.g., "always") on each measure were summed and averaged across all reporting CAHs within a state and all other states. Two-sample t-tests were used to compare whether the mean scores on each measure are significantly different between CAHs in each state and all other CAHs. Weights were applied to all calculations.

RESULTS

Figure 1 compares participation rates in HCAHPS over time among four groups of CAHs: those in Vermont, all CAHs nationally, those located in other states with a similar number of CAHs, and those located in the same Health Resources and Services Administration (HRSA) geographic region as Vermont. The HCAHPS reporting rate of 100.0% for Vermont CAHs was higher than the national reporting rate of 85.7%.

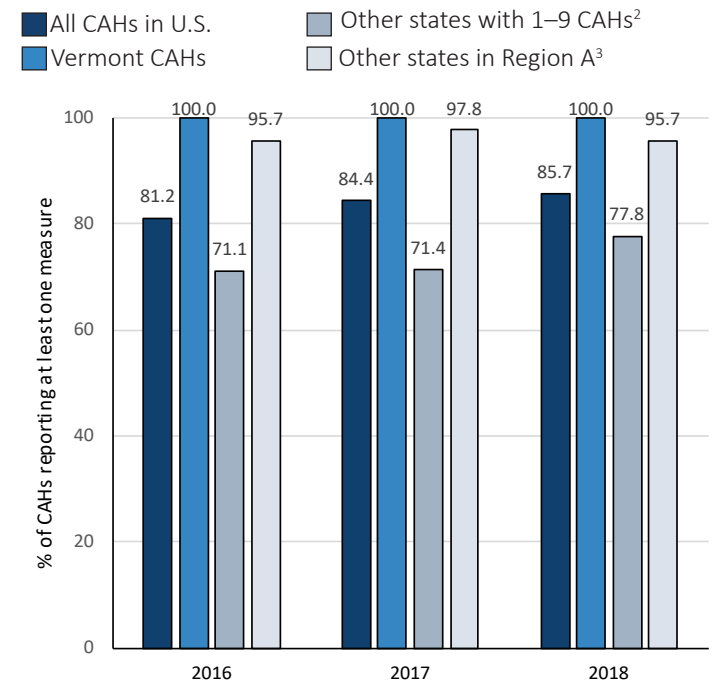
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Vermont ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Vermont and nationally in the five survey completion and three survey response rate categories reported by CMS. Hospitals with 100 or

more completed HCAHPS surveys over a four-quarter period receive HCAHPS Star Ratings from CMS. CMS recommends that each hospital obtain 300 completed HCAHPS surveys annually, in order to be more confident that the survey results are reliable for assessing the hospital's performance. However, some smaller hospitals may sample all of their HCAHPS-eligible discharges and still have fewer than 300 completed surveys. Caution should be exercised in comparing HCAHPS results for states that have few CAHs reporting results and/or CAHs whose results are based on fewer than 100 completed surveys.

Compared to all other CAHs nationally, Vermont's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 2 measures, and did not have significantly different performance on the remaining 8 measures (Table 3).

FIGURE 1. CAH Participation in HCAHPS,¹ 2016–18



1. Percentage of CAHs in each state or group of states reporting HCAHPS data.
 2. Group includes states with 1–9 CAHs: AL (4), HI (9), MA (3), SC (4), VA (7)
 3. HRSA Region A includes: MA(3), ME(16), NH(13), NY(18), PA(15), VA(7), WV(20)



TABLE 1. State Rankings of HCAHPS Participation Rates for CAHs, 2018

Rank	State	# of participating CAHs	% of CAHs	Rank	State	# of participating CAHs	% of CAHs
	National	1,158	85.7	23	Arkansas	26	89.7
1	Illinois	51	100.0	24	South Dakota	34	89.5
1	Maine	16	100.0	25	New York	16	88.9
1	Pennsylvania	15	100.0	26	Mississippi	27	87.1
1	New Hampshire	13	100.0	27	Georgia	26	86.7
1	Vermont	8	100.0	28	North Dakota	31	86.1
1	Virginia	7	100.0	29	California	29	85.3
1	Alabama	4	100.0	30	Nevada	11	84.6
1	South Carolina	4	100.0	31	Kansas	71	84.5
1	Massachusetts	3	100.0	32	Colorado	26	81.3
10	Wisconsin	57	98.3	33	Indiana	28	80.0
11	Ohio	32	97.0	34	Washington	31	79.5
12	Nebraska	62	96.9	35	Missouri	27	75.0
13	Oregon	24	96.0	35	Tennessee	12	75.0
14	Minnesota	74	94.9	37	Arizona	11	73.3
15	Michigan	34	94.4	38	Kentucky	19	70.4
16	Iowa	77	93.9	38	Louisiana	19	70.4
17	Wyoming	15	93.8	40	North Carolina	14	70.0
18	Idaho	25	92.6	41	Texas	55	64.7
19	Utah	12	92.3	42	Florida	7	58.3
20	Montana	44	91.7	43	Oklahoma	23	57.5
21	West Virginia	18	90.0	44	Alaska	8	57.1
21	New Mexico	9	90.0	45	Hawaii	3	33.3



TABLE 2. Number of Completed HCAHPS Surveys and Response Rates for CAHs Nationally and in Vermont, 2018

	Total CAHs reporting	Number of completed HCAHPS surveys					HCAHPS survey response rates		
		< 25	25–49	50–99	100–299	≥ 300	< 25%	25–50%	>50%
National	1,158	187	248	291	378	54	330	801	27
Vermont	8	1	0	1	4	2	2	6	0

TABLE 3. HCAHPS Results for CAHs in Vermont and All Other Flex States, 2018

■ Significantly better than rate for all other CAHs nationally (p<.05)
 ■ Significantly worse than rate for all other CAHs nationally (p<.05)

HCAHPS Measure	Average percentage of patients that gave the highest level of response (e.g., “always”)	
	Vermont (n=8)	All Other Flex States (n=1,150)
Nurses always communicated well	82.1	83.7
Doctors always communicated well	84.7	84.4
Patient always received help as soon as wanted	71.6	77.0
Staff always explained medications before giving them to patient	68.6	69.9
Staff always provided information about what to do during recovery at home	89.9	88.5
Patient strongly understood their care when they left the hospital	56.2	56.1
Patient’s room and bathroom were always clean	78.4	80.9
Area around patient’s room was always quiet at night	58.7	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	73.5	76.5
Patient would definitely recommend the hospital to friends and family	73.6	75.0

Note: Rates without highlights were not significantly different from comparable rates among all other reporting CAHs nationally.