## What are PRC's sampling and interviewing processes for HCAHPS studies?

CMS has clearly-outlined guidelines for every aspect of data collection and PRC has worked very hard over the last eight years to develop processes that adhere to these guidelines. Each week, clients send files that contain records of the patients who were discharged for a given 7-day range. It is important for clients to send the complete, unaltered versions of these records so PRC can control the filters and randomization. The first step for the Sample Managers at PRC is to filter out all of the patients who are excluded by the official HCAHPS rules. The remainder is eligible for participation in the HCAHPS study, and each of these patients is assigned a random number. Patients that fall into these respective categories are listed below.

| HCAHPS Sampling  |  |  |
|--|--|--|
| Excluded Patients  | Eligible Patients  |  |
| No-publicity patients  | Over 18 years  |  |
| Court/law enforcement patients   | At least one overnight stay in the hospital                |  |
| Patients with a foreign home address                                     | Non-psychiatric MS-DRG or principal diagnosis at discharge |  |
| Patients discharge to hospice, nursing home, or skilled nursing facility | Alive at time of discharge                                 |  |
| State regulations  |  |  |

Each client determines the annual target of completions based on their own reporting needs for each facility or CCN (CMS Certification Number). CMS recommends that annual targets be greater than 335 to ensure that the required minimum of 300 completed surveys is submitted annually for public reporting. For each calendar month, the Sample Managers convert the target to a monthly target, and then use that value, along with an expected response rate and a projected number of HCAHPS-eligible patients, to determine a Sampling Ratio for the month. (The expected response rate and projected number of HCAHPS-eligible patients are determined using data from the previous 6 months.) The Sampling Ratio may be adjusted on a case-by-case basis by the Sample Manager to incorporate other trends and information not reflected in the historical data. Ultimately, the Sampling Ratio is a value such as 0.03 or 0.24, indicating that approximately 3% or 24% of the month's eligible patients will be selected for the sample.

As the final step, eligible records are randomly selected according to the calculated Sampling Ratio, and these records are sent to Interviewing. The patient information is automatically inserted in the script when the corresponding phone number is dialed. Patients will not be called any sooner than 48 hours after discharge, in accordance with CMS guidelines. Call attempts for each patient must occur on different days of the week, different times of day, and these must take place over more than one week.





The Quality Assurance Guidelines (QAG) state, "Repeated attempts must be made until the patient is contacted, found ineligible, or five attempts have been made" (Version 9.0, 2014, p. 88). Terminal dispositions for a sampled patient record are listed below.

| Terminal Dispositions                   |   |  |
|---|---|--|
| Complete                                | Ineligible – language barrier           | Non-response – refusal                       |
| Ineligible – deceased                   | Ineligible – mental/physical incapacity | Non-response – non-response after 5 attempts |
| Ineligible – not in eligible population | Non-response – break off                | Non-response – bad phone number              |

Even if the interviewing target was met or exceeded, the interviewing team must continue making attempts to reach EVERY sampled patient until a terminal disposition is identified. All valid attempts must be made within 42 days of the first attempt. If a survey vendor attains at least the targeted number of completed surveys while some surveys are yet to be administered, the survey vendor must continue to sample and survey using the chosen protocol at the chosen rate (QAG, Version 9.0, 2014, p. 55).

PRC's processes are regularly reviewed by the HCAHPS Administration Team and are found to be compliant. Accurate sampling and strict adherence to the interviewing protocols are critical to the integrity of the survey results when comparing them to other participating hospitals.



