



Patients' Experiences in CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS

- The percent of CAHs reporting HCAHPS survey data increased from 84.4% in 2017 to 85.7% in 2018.
- While the reporting rate has increased, the proportion of CAHs with over 300 completed surveys has decreased over time from 13.8% in 2012 to 4.7% in 2018.
- National performance was highest for measures related to provision of recovery information and communication from doctors and nurses. Ratings were lowest for measures related to medication explanations, understanding post-discharge care, and hospital environment.

BACKGROUND

The Hospital Compare 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.

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

This report summarizes reporting rates and performance among all U.S. Critical Access Hospitals (CAHs) on the HCAHPS survey for calendar year 2018. The Flex Monitoring Team (FMT) also produces state-specific HCAHPS reports with more detailed results.



APPROACH

This study used data publicly reported to Hospital Compare by CAHs for discharges during CY 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 they had 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. Weights were applied to all calculations.

For the comparison of hospital inpatient volume and HCAHPS reporting, data on the number of completed surveys from calendar year 2018 were merged with data on hospital inpatient volume from the fiscal year 2017 American Hospital Association (AHA) Annual Survey.

RESULTS

Nationally, HCAHPS participation among CAHs has continued to increase over time, from 49.0% in 2012 to 85.7% in 2018 (Figure 1). However, the number of completed surveys per reporting CAH has also changed over time as the proportion of CAHs reporting less than 100 surveys continues to increase from

34.6% in 2012 to 62.7% in 2018 and the percentage reporting more than 300 surveys decreased from 13.8% in 2012 to 4.7% in 2018 (Figure 2).

Hospitals with 100 or more completed HCAHPS surveys over a four-quarter period receive HCAHPS Star Ratings from CMS. Figure 3 provides additional insight into the large group of CAHs reporting fewer than 100 surveys. Roughly 16% of CAHs reported fewer than 25 surveys in 2018 and 21.4% reported 25–49 surveys.

Table 1 shows the wide variation in the number of completed HCAHPS surveys per CAH when compared to the annual volume of inpatient admissions. Nine hospitals with over 800 admissions had less than 50 completed surveys—two of the hospitals had less than 25 surveys. Only one CAH with 0–250 admissions had more than 99 surveys. Variation in the number of completed surveys may be due in part to the number of discharged patients who are eligible for the HCAHPS and in part to differences in response rates among surveyed patients. CMS requires hospitals to exclude some patients from HCAHPS, including patients discharged to swing-beds, nursing homes, or hospice care. While the majority of CAHs have swing-beds, the volume of patients discharged to swing-beds varies by CAH.

Table 2 ranks the 45 Flex Program states by their CAHs' HCAHPS participation rates. 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.

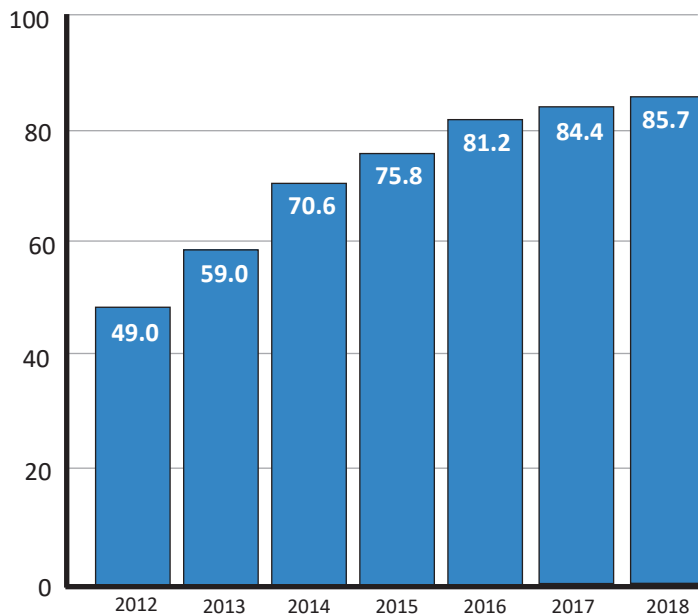


Table 3 provides the number of CAHs reporting HCAHPS survey data for each of the 45 states in the Flex Program, as well as the number of CAHs in each of the five survey completion and three survey response rate categories. Table 4 provides performance rates for each state's reporting CAHs on the ten HCAHPS measures publicly reported on Hospital Compare.

Overall, the number of CAHs reporting HCAHPS data increased each year since 2012. However, the proportion of reporting CAHs with more than 300 completed surveys decreased over the past three years and is nine percentage points% lower than in 2012. This may be due to an increased focus on encouraging CAHs to report HCAHPS data. CAHs that have just begun to report HCAHPS data may be less familiar with strategies to increase the number of completed surveys.

The highest national performance rates for individual HCAHPS measures were related to staff providing recovery information ("yes, staff gave patient information about recovery at home"), doctor communication ("doctors always communicated well"), and nurse communication ("nurses always communicated well"). Notably lower were three measures: explanations for medications ("staff always explained medications before giving them"), understanding of post-discharge instructions ("strongly agree care understood when left hospital"), and patient rating of the hospital environment ("area around patient's room was always quiet at night").

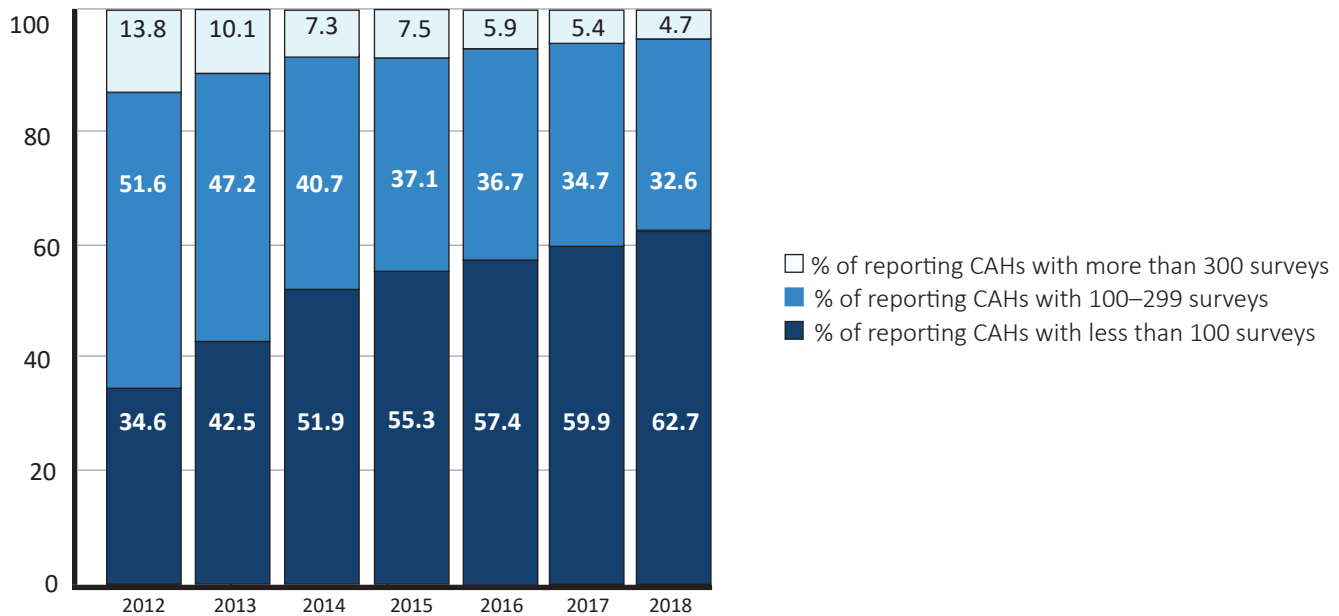
FIGURE 1. Percent of CAHs Reporting HCAHPS Survey Data, 2012–18



Note: Data for Q1 2012 are unavailable due to a federal government shutdown. Data for years 2012, 2013, and 2014 are offset by one quarter, from April to the following March (e.g. Year 2013 includes April 2013–March 2014 data). Q1 2015 data are included for both 2014 and 2015 rates.



FIGURE 2. Completed HCAHPS Surveys among CAHs Reporting Data, 2012–18



Note: Data for Q1 2012 are unavailable due to a federal government shutdown. Data for years 2012, 2013, and 2014 are offset by one quarter, from April to the following March (e.g. Year 2013 includes April 2013–March 2014 data). Q1 2015 data are included for both 2014 and 2015 rates.

FIGURE 3. Detail of HCAHPS Survey Completion Rates among CAHs Reporting Data, 2018

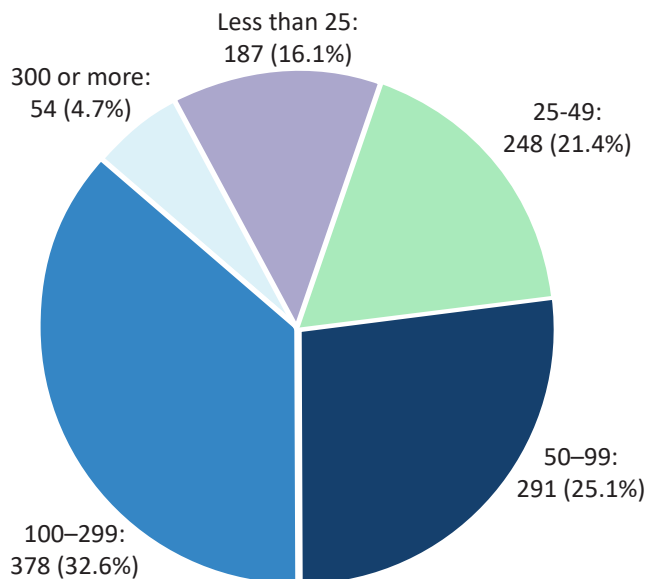




TABLE 1. CAHs by Number of Completed HCAHPS Surveys and Hospital Admissions, 2018

# Completed Surveys	Total CAH Inpatient Admissions				Total
	0–250 Admissions	251–500 Admissions	501–800 Admissions	>800 Admissions	
Less than 25	146	29	9	2	186
25–49	109	106	26	7	248
50–99	25	142	89	35	291
100–299	1	36	125	215	377
300 and higher	0	0	0	54	54
Total	281	313	249	313	1,156

Note: Two CAHs did not have AHA annual survey data and are excluded from this table.

Data sources: Hospital Compare and MBQIP, CY2018; AHA Annual Survey data, FY2017

TABLE 2. 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 3. Number of Completed HCAHPS Surveys and Response Rates for CAHs, 2018

State (# of CAHs)	CAHs reporting	Number of completed HCAHPS surveys					HCAHPS survey response rates		
		<25	25–49	50–99	100–299	≥ 300	< 25%	25–50%	> 50%
National (1,351)	1,158	187	248	291	378	54	330	801	27
Alabama (4)	4	1	1	1	1	0	0	4	0
Alaska (14)	8	3	2	1	2	0	7	1	0
Arizona (15)	11	0	3	1	6	1	5	6	0
Arkansas (29)	26	3	8	9	6	0	11	15	0
California (34)	29	3	8	4	13	1	16	13	0
Colorado (32)	26	6	4	6	10	0	6	20	0
Florida (12)	7	0	2	1	4	0	5	2	0
Georgia (30)	26	4	8	7	6	1	16	10	0
Hawaii (9)	3	2	0	1	0	0	2	1	0
Idaho (27)	25	3	4	5	10	3	6	18	1
Illinois (51)	51	0	8	22	20	1	5	46	0
Indiana (35)	28	1	4	6	15	2	4	24	0
Iowa (82)	77	5	19	26	25	2	9	66	2
Kansas (84)	71	21	21	17	12	0	18	50	3
Kentucky (27)	19	1	3	7	8	0	9	10	0
Louisiana (27)	19	6	2	9	2	0	11	8	0
Maine (16)	16	0	1	4	10	1	2	14	0
Massachusetts (3)	3	0	0	1	2	0	1	2	0
Michigan (36)	34	4	6	5	16	3	3	31	0
Minnesota (78)	74	7	16	18	26	7	4	65	5
Mississippi (31)	27	7	12	6	2	0	14	12	1
Missouri (36)	27	2	3	6	15	1	7	20	0
Montana (48)	44	23	7	3	10	1	9	32	3
Nebraska (64)	62	15	14	15	17	1	7	50	5
Nevada (13)	11	3	2	1	4	1	7	4	0
New Hampshire (13)	13	0	2	0	9	2	4	9	0
New Mexico (10)	9	1	2	1	5	0	7	2	0
New York (18)	16	3	6	4	2	1	6	10	0
North Carolina (20)	14	0	3	3	3	5	7	7	0
North Dakota (36)	31	11	9	8	3	0	6	21	4
Ohio (33)	32	2	0	12	15	3	7	25	0
Oklahoma (40)	23	7	10	6	0	0	12	11	0
Oregon (25)	24	1	1	7	14	1	10	14	0
Pennsylvania (15)	15	1	1	1	10	2	0	15	0
South Carolina (4)	4	2	0	1	1	0	3	1	0
South Dakota (38)	34	9	12	10	3	0	12	21	1
Tennessee (16)	12	1	4	4	3	0	4	8	0
Texas (85)	55	16	19	12	8	0	32	23	0
Utah (13)	12	2	2	5	3	0	6	6	0
Vermont (8)	8	1	0	1	4	2	2	6	0
Virginia (7)	7	1	1	0	4	1	4	3	0
Washington (39)	31	4	6	7	11	3	15	16	0
West Virginia (20)	18	1	5	2	10	0	3	15	0
Wisconsin (58)	57	0	5	19	25	8	0	55	2
Wyoming (16)	15	4	2	6	3	0	6	9	0



TABLE 4. HCAHPS Performance Rates for CAHs by State, 2018

State (# of CAHs reporting)	Nurses always communicated well	Doctors always communicated well	Patient always received help as soon as wanted	Staff always explained medications before giving them	Yes, staff gave patient info. about recovery at home	Strongly agree care understood when left hospital	Patient's room and bathroom were always clean	Area around patient's room was always quiet at night	Overall hospital rating of 9 or 10 (high)	Would definitely recommend hospital to others
National (1,158)	84.0	84.8	77.2	69.5	88.9	56.7	81.3	65.5	77.5	75.6
Alabama (4)	84.0	82.9	79.1	73.7	84.3	55.5	85.1	73.1	79.7	74.9
Alaska (8)	79.7	80.3	76.1	66.1	89.2	56.3	76.6	59.8	73.1	72.4
Arizona (11)	79.7	77.3	75.2	67.4	86.9	52.4	73.7	59.5	69.2	68.6
Arkansas (26)	85.1	86.7	77.8	71.0	86.9	56.0	82.0	68.4	78.0	74.0
California (29)	82.6	82.9	76.1	68.2	88.3	55.1	79.2	59.3	74.7	75.0
Colorado (26)	81.2	83.6	76.9	67.1	88.4	54.2	78.8	66.0	73.6	71.2
Florida (7)	80.4	77.4	67.9	68.3	89.4	56.2	80.1	66.7	72.0	71.5
Georgia (26)	84.5	85.7	74.3	69.5	87.4	57.5	79.2	72.6	76.3	76.7
Hawaii (3)	81.5	84.7	79.6	78.9	92.2	49.0	86.4	72.8	79.2	83.4
Idaho (25)	82.4	84.9	76.1	67.6	89.8	54.9	81.0	59.6	76.3	75.4
Illinois (51)	86.3	86.9	78.7	71.7	90.4	58.3	84.4	66.9	80.6	77.8
Indiana (28)	83.6	83.6	76.7	66.5	88.2	54.1	82.0	62.6	77.4	72.4
Iowa (77)	84.4	86.3	75.8	69.2	88.8	57.7	82.9	70.0	81.3	78.0
Kansas (71)	84.1	86.3	76.0	69.1	87.5	58.9	81.5	65.1	79.9	79.5
Kentucky (19)	83.3	87.7	72.8	71.4	88.7	59.1	80.9	69.0	74.6	73.1
Louisiana (19)	89.5	89.8	82.2	77.4	90.6	62.5	86.6	74.9	82.5	80.8
Maine (16)	87.3	85.0	78.6	70.8	89.6	57.6	84.8	64.4	79.9	78.1
Massachusetts (3)	87.2	85.6	80.5	71.9	92.3	62.0	76.0	59.2	80.0	82.2
Michigan (34)	85.5	83.8	82.3	72.0	91.3	58.5	80.8	64.6	79.1	76.5
Minnesota (74)	84.6	85.5	78.3	69.3	89.2	57.7	81.9	71.5	79.9	78.5
Mississippi (27)	86.8	91.5	75.6	73.0	85.5	54.7	83.4	76.7	77.1	74.4
Missouri (27)	80.8	83.9	72.7	65.6	87.9	54.7	79.2	62.5	74.3	70.2
Montana (44)	81.6	83.3	75.7	67.5	87.0	54.4	75.0	63.1	72.8	73.1
Nebraska (62)	84.6	87.1	78.4	69.0	89.3	58.5	85.4	70.7	80.2	78.6
Nevada (11)	78.0	77.6	71.7	65.9	85.8	50.5	75.2	53.7	68.7	66.3
New Hampshire (13)	83.9	82.7	75.2	67.0	89.1	55.1	82.0	56.4	75.4	75.3
New Mexico (9)	82.8	83.4	77.4	68.5	84.6	49.9	78.4	65.9	71.8	70.1
New York (16)	83.7	83.7	74.8	70.7	90.2	55.4	79.8	60.5	75.5	73.2
North Carolina (14)	84.6	83.4	78.8	69.8	88.6	57.1	78.8	65.3	76.1	75.8
North Dakota (31)	83.5	83.6	77.9	67.5	85.6	54.3	79.2	70.1	75.8	73.9
Ohio (32)	84.5	83.0	77.0	69.0	90.6	56.9	81.6	60.5	78.4	74.6
Oklahoma (23)	82.7	82.6	76.6	70.9	84.7	54.0	78.8	68.9	72.4	71.9
Oregon (24)	83.1	83.9	78.8	70.7	89.6	55.6	79.7	59.2	75.4	72.9
Pennsylvania (15)	83.8	83.7	77.0	67.1	90.1	55.2	82.4	59.0	74.9	72.4
South Carolina (4)	85.1	87.8	81.2	72.8	88.5	57.8	82.6	72.7	77.7	76.5
South Dakota (34)	83.2	83.8	78.6	70.6	85.7	55.4	81.0	69.2	76.2	76.4
Tennessee (12)	85.1	86.3	78.1	72.7	86.8	55.9	80.6	70.6	75.0	71.9
Texas (55)	85.5	87.7	80.3	74.0	87.6	57.3	83.8	69.9	78.2	76.7
Utah (12)	84.7	88.9	82.2	70.6	90.2	60.0	81.6	69.1	82.2	80.7
Vermont (8)	82.1	84.7	71.6	68.6	89.9	56.2	78.4	58.7	73.5	73.6
Virginia (7)	83.3	84.3	69.5	66.1	89.5	54.9	80.9	62.5	76.3	72.3
Washington (31)	81.1	81.9	74.7	68.1	89.0	55.3	79.7	56.4	75.6	75.4
West Virginia (18)	85.2	85.9	78.3	71.3	89.9	55.2	81.9	64.6	76.1	73.7
Wisconsin (57)	85.8	85.9	79.4	71.6	90.9	59.4	83.6	70.0	80.5	78.3
Wyoming (15)	80.6	82.5	77.7	68.1	87.5	56.5	79.0	62.6	73.4	73.5



Links to State-Specific HCAHPS Reports

<u>Alabama</u>	<u>Louisiana</u>	<u>Ohio</u>
<u>Alaska</u>	<u>Maine</u>	<u>Oklahoma</u>
<u>Arizona</u>	<u>Massachusetts</u>	<u>Oregon</u>
<u>Arkansas</u>	<u>Michigan</u>	<u>Pennsylvania</u>
<u>California</u>	<u>Minnesota</u>	<u>South Carolina</u>
<u>Colorado</u>	<u>Mississippi</u>	<u>South Dakota</u>
<u>Florida</u>	<u>Missouri</u>	<u>Tennessee</u>
<u>Georgia</u>	<u>Montana</u>	<u>Texas</u>
<u>Hawaii</u>	<u>Nebraska</u>	<u>Utah</u>
<u>Idaho</u>	<u>Nevada</u>	<u>Vermont</u>
<u>Illinois</u>	<u>New Hampshire</u>	<u>Virginia</u>
<u>Indiana</u>	<u>New Mexico</u>	<u>Washington</u>
<u>Iowa</u>	<u>New York</u>	<u>West Virginia</u>
<u>Kansas</u>	<u>North Carolina</u>	<u>Wisconsin</u>
<u>Kentucky</u>	<u>North Dakota</u>	<u>Wyoming</u>

For more information on this study, please contact Megan Lahr at lahrx074@umn.edu.

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KEY FINDINGS: ALABAMA

- The HCAHPS reporting rate of 100.0% for Alabama 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 Alabama scored significantly higher on 2 HCAHPS measures, significantly lower on 0 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.

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"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.

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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

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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 Alabama, 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 Alabama. The HCAHPS reporting rate of 100.0% for Alabama CAHs was higher than the national reporting rate of 85.7%.

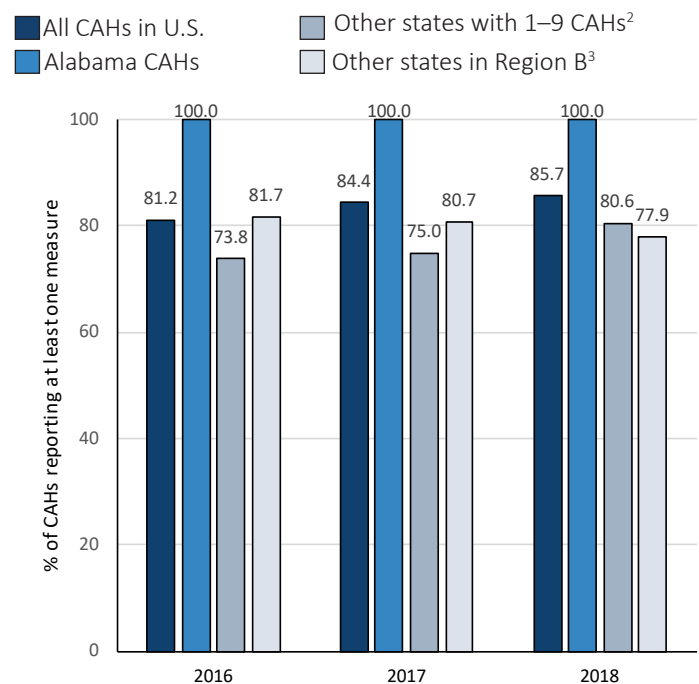
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Alabama ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Alabama 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, Alabama's CAHs scored significantly better on 2 of 10 HCAHPS measures, significantly worse on 0 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: HI (9), MA (3), SC (4), VA (7), VT (8)
3. HRSA Region B includes: FL (12), GA (30), KY (27), MS (31), NC (20), SC (4), TN (16)



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 Alabama, 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
Alabama	4	1	1	1	1	0	0	4	0

TABLE 3. HCAHPS Results for CAHs in Alabama 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”)	
	Alabama (n=4)	All Other Flex States (n=1,154)
Nurses always communicated well	84.0	83.6
Doctors always communicated well	82.9	84.5
Patient always received help as soon as wanted	79.1	76.8
Staff always explained medications before giving them to patient	73.7	69.8
Staff always provided information about what to do during recovery at home	84.3	88.6
Patient strongly understood their care when they left the hospital	55.5	56.1
Patient’s room and bathroom were always clean	85.1	80.7
Area around patient’s room was always quiet at night	73.1	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	79.7	76.4
Patient would definitely recommend the hospital to friends and family	74.9	74.9

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



Patients' Experiences in Alaska CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: ALASKA

- The HCAHPS reporting rate of 57.1% for Alaska CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #44 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Alaska scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 Alaska, 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 Alaska. The HCAHPS reporting rate of 57.1% for Alaska CAHs was lower than the national reporting rate of 85.7%.

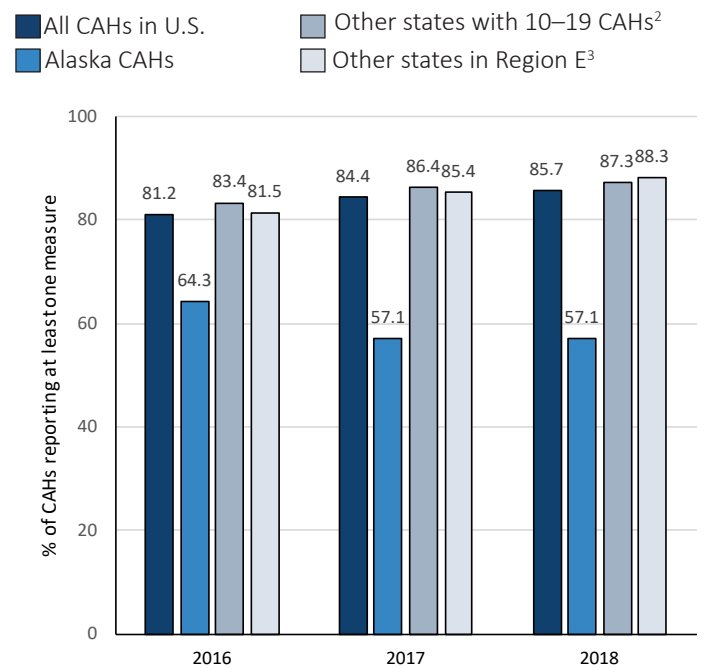
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Alaska ranked #44 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Alaska 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, Alaska's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 9 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 10–19 CAHs: AZ (15), FL (12), ME (16), NH (13), NM (10), NV (13), NY (18), PA (15), TN (16), UT (13), WY (16)

3. HRSA Region E includes: CO (32), ID (27), MT (48), ND (36), OR (25), SD (38), UT (13), WA (39), WY (16)



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 Alaska, 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
Alaska	8	3	2	1	2	0	7	1	0

TABLE 3. HCAHPS Results for CAHs in Alaska 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”)	
	Alaska (n=8)	All Other Flex States (n=1,150)
Nurses always communicated well	79.7	83.7
Doctors always communicated well	80.3	84.5
Patient always received help as soon as wanted	76.1	76.9
Staff always explained medications before giving them to patient	66.1	69.9
Staff always provided information about what to do during recovery at home	89.2	88.5
Patient strongly understood their care when they left the hospital	56.3	56.1
Patient’s room and bathroom were always clean	76.6	80.9
Area around patient’s room was always quiet at night	59.8	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	73.1	76.5
Patient would definitely recommend the hospital to friends and family	72.4	75.0

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



Patients' Experiences in Arizona CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: ARIZONA

- The HCAHPS reporting rate of 73.3% for Arizona CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #37 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Arizona scored significantly higher on 0 HCAHPS measures, significantly lower on 7 measures, and did not have significantly different performance on the remaining 3 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 Arizona, 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 Arizona. The HCAHPS reporting rate of 73.3% for Arizona CAHs was lower than the national reporting rate of 85.7%.

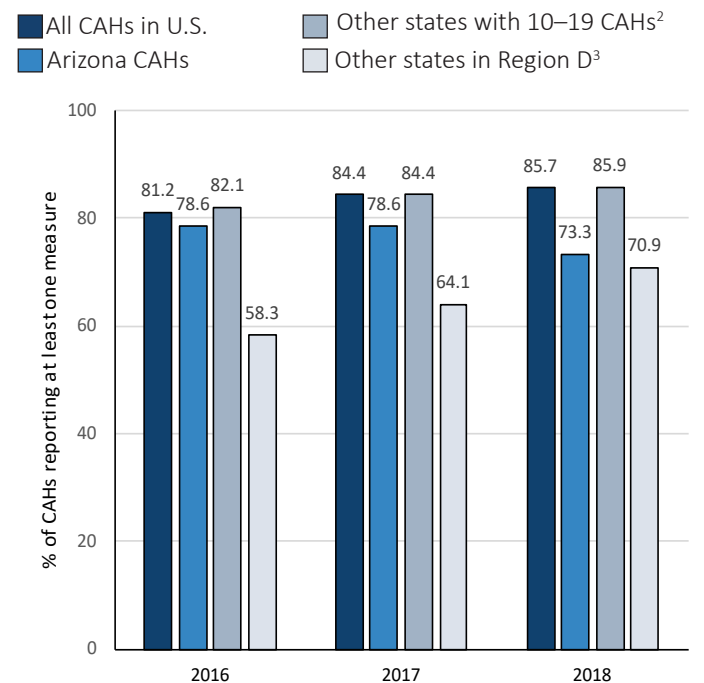
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Arizona ranked #37 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Arizona 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, Arizona's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 7 measures, and did not have significantly different performance on the remaining 3 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 10–19 CAHs: AK (14), FL (12), ME (16), NH (13), NM (10), NV (13), NY (18), PA (15), TN (16), UT (13), WY (16)
3. HRSA Region D includes: AR (29), CA (34), HI (9), LA (27), NM (10), NV (13), OK (40), TX (85)



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 Arizona, 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
Arizona	11	0	3	1	6	1	5	6	0

TABLE 3. HCAHPS Results for CAHs in Arizona 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”)	
	Arizona (n=11)	All Other Flex States (n=1,147)
Nurses always communicated well	79.7	83.7
Doctors always communicated well	77.3	84.6
Patient always received help as soon as wanted	75.2	76.9
Staff always explained medications before giving them to patient	67.4	69.9
Staff always provided information about what to do during recovery at home	86.9	88.6
Patient strongly understood their care when they left the hospital	52.4	56.2
Patient’s room and bathroom were always clean	73.7	81.0
Area around patient’s room was always quiet at night	59.5	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	69.2	76.6
Patient would definitely recommend the hospital to friends and family	68.6	75.1

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



Patients' Experiences in Arkansas CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: ARKANSAS

- The HCAHPS reporting rate of 89.7% for Arkansas CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #23 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Arkansas scored significantly higher on 2 HCAHPS measures, significantly lower on 0 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 Arkansas, 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 Arkansas. The HCAHPS reporting rate of 89.7% for Arkansas CAHs was higher than the national reporting rate of 85.7%.

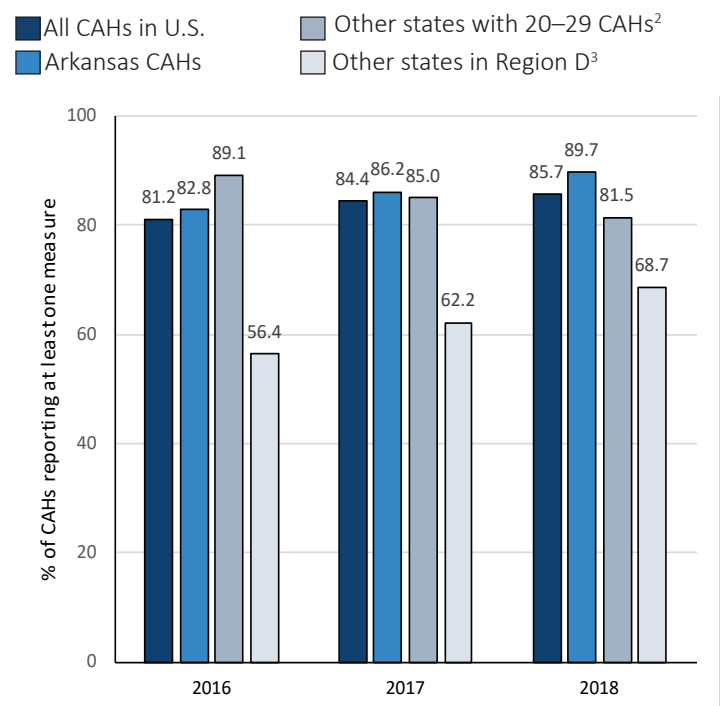
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Arkansas ranked #23 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Arkansas 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, Arkansas' CAHs scored significantly better on 2 of 10 HCAHPS measures, significantly worse on 0 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 20–29 CAHs: ID (27), KY (27), LA (27), NC (20), OR (25), WV (20)

3. HRSA Region D includes: AZ (15), CA (34), HI (9), LA (27), NM (10), NV (13), OK (40), TX (85)



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 Arkansas, 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
Arkansas	26	3	8	9	6	0	11	15	0

TABLE 3. HCAHPS Results for CAHs in Arkansas 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”)	
	Arkansas (n=26)	All Other Flex States (n=1,132)
Nurses always communicated well	85.1	83.6
Doctors always communicated well	86.7	84.4
Patient always received help as soon as wanted	77.8	76.9
Staff always explained medications before giving them to patient	71.0	69.8
Staff always provided information about what to do during recovery at home	86.9	88.6
Patient strongly understood their care when they left the hospital	56.0	56.1
Patient’s room and bathroom were always clean	82.0	80.8
Area around patient’s room was always quiet at night	68.4	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	78.0	76.4
Patient would definitely recommend the hospital to friends and family	74.0	74.9

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



Patients' Experiences in California CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: CALIFORNIA

- The HCAHPS reporting rate of 85.3% for California CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #29 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in California scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measures, and did not have significantly different performance on the remaining 9 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 California, 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 California. The HCAHPS reporting rate of 85.3% for California CAHs was lower than the national reporting rate of 85.7%.

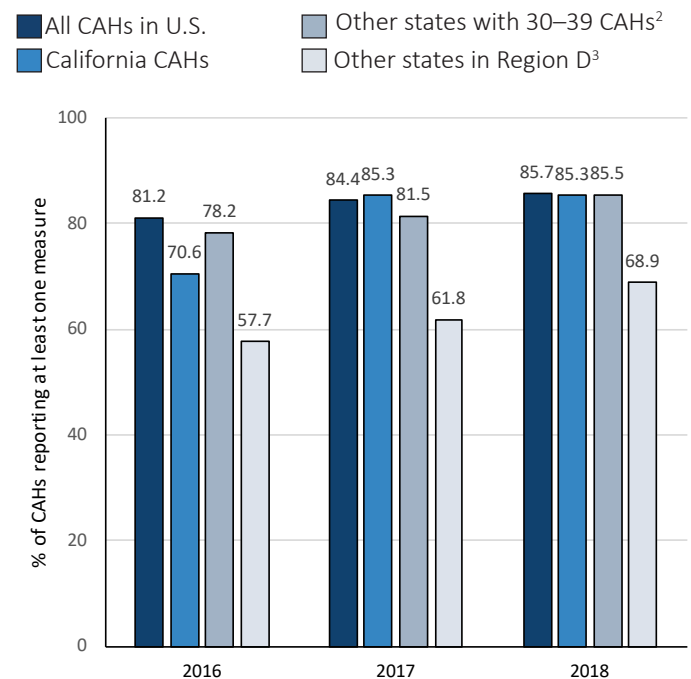
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. California ranked #29 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in California 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, California's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measures, and did not have significantly different performance on the remaining 9 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 30–39 CAHs: CO (32), GA (30), IN (35), MI (36), MO (36), MS (31), ND (36), OH (33), SD (38), WA (39)

3. HRSA Region D includes: AR (29), AZ (15), HI (9), LA (27), NM (10), NV (13), OK (40), TX (85)



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 California, 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
California	29	3	8	4	13	1	16	13	0

TABLE 3. HCAHPS Results for CAHs in California 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”)	
	California (n=29)	All Other Flex States (n=1,129)
Nurses always communicated well	82.6	83.6
Doctors always communicated well	82.9	84.5
Patient always received help as soon as wanted	76.1	76.9
Staff always explained medications before giving them to patient	68.2	69.9
Staff always provided information about what to do during recovery at home	88.3	88.5
Patient strongly understood their care when they left the hospital	55.1	56.1
Patient’s room and bathroom were always clean	79.2	80.8
Area around patient’s room was always quiet at night	59.3	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	74.7	76.5
Patient would definitely recommend the hospital to friends and family	75.0	74.9

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



Patients' Experiences in Colorado CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: COLORADO

- The HCAHPS reporting rate of 81.3% for Colorado CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #32 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Colorado scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 Colorado, 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 Colorado. The HCAHPS reporting rate of 81.3% for Colorado CAHs was lower than the national reporting rate of 85.7%.

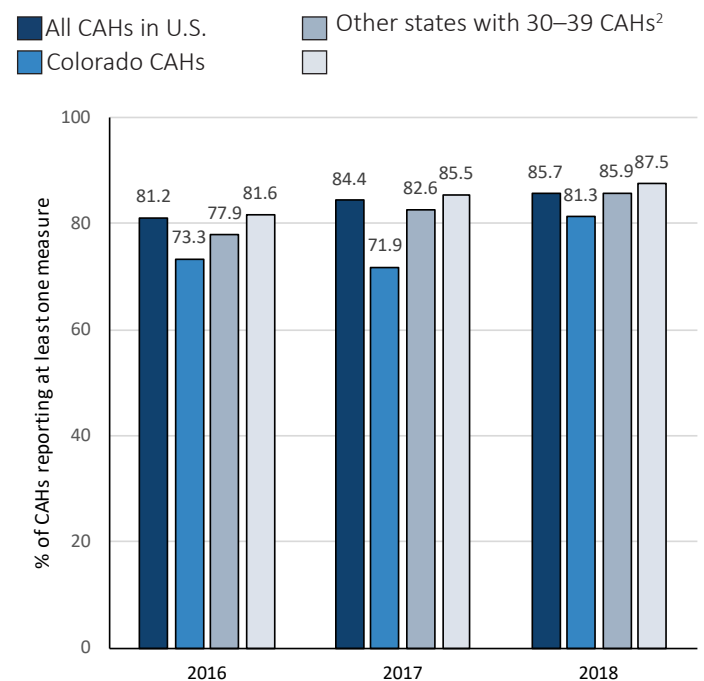
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Colorado ranked #32 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Colorado 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, Colorado's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 9 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 30–39 CAHs: CA (34), GA (30), IN (35), MI (36), MO (36), MS (31), ND (36), OH (33), SD (38), WA (39)

3. HRSA Region E includes: AK (14), ID (27), MT (48), ND (36), OR (25), SD (38), UT (13), WA (39), WY (16)



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



TABLE 2. Number of Completed HCAHPS Surveys and Response Rates for CAHs Nationally and in Colorado, 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
Colorado	26	6	4	6	10	0	6	20	0

TABLE 3. HCAHPS Results for CAHs in Colorado 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”)	
	Colorado (n=26)	All Other Flex States (n=1,132)
Nurses always communicated well	81.2	83.7
Doctors always communicated well	83.6	84.5
Patient always received help as soon as wanted	76.9	76.9
Staff always explained medications before giving them to patient	67.1	69.9
Staff always provided information about what to do during recovery at home	88.4	88.5
Patient strongly understood their care when they left the hospital	54.2	56.1
Patient’s room and bathroom were always clean	78.8	80.8
Area around patient’s room was always quiet at night	66.0	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	73.6	76.5
Patient would definitely recommend the hospital to friends and family	71.2	75.0

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



Patients' Experiences in Florida CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: FLORIDA

- The HCAHPS reporting rate of 58.3% for Florida CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #42 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Florida scored significantly higher on 0 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 10 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 Florida, 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 Florida. The HCAHPS reporting rate of 58.3% for Florida CAHs was lower than the national reporting rate of 85.7%.

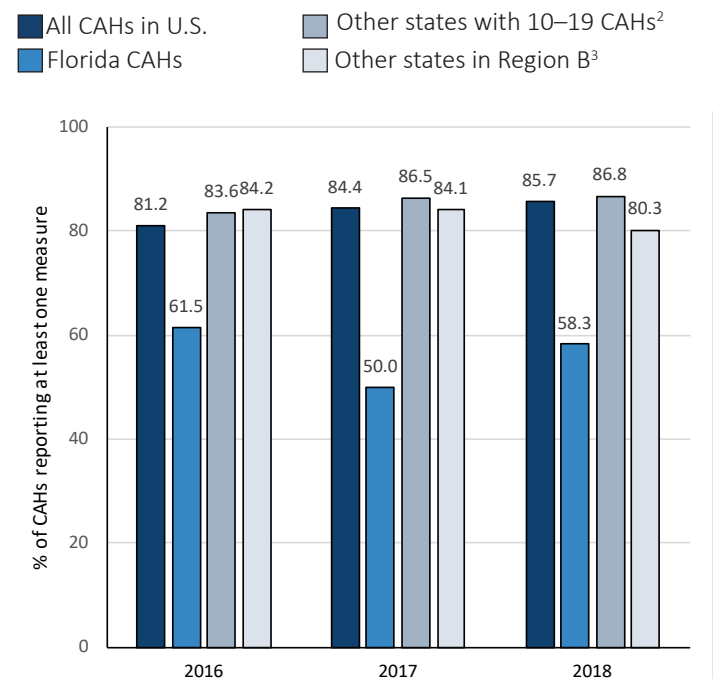
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Florida ranked #42 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Florida 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, Florida's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 10 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 10–19 CAHs: AK (14), AZ (15), ME (16), NH (13), NM (10), NV (13), NY (18), PA (15), TN (16), UT (13), WY (16)
3. HRSA Region B includes: AL (4), GA (30), KY (27), MS (31), NC (20), SC (4), TN (16)



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 Florida, 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
Florida	7	0	2	1	4	0	5	2	0

TABLE 3. HCAHPS Results for CAHs in Florida 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”)	
	Florida (n=7)	All Other Flex States (n=1,151)
Nurses always communicated well	80.4	83.7
Doctors always communicated well	77.4	84.6
Patient always received help as soon as wanted	67.9	77.1
Staff always explained medications before giving them to patient	68.3	69.9
Staff always provided information about what to do during recovery at home	89.4	88.5
Patient strongly understood their care when they left the hospital	56.2	56.1
Patient’s room and bathroom were always clean	80.1	80.8
Area around patient’s room was always quiet at night	66.7	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	72.0	76.6
Patient would definitely recommend the hospital to friends and family	71.5	75.0

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



Patients' Experiences in Georgia CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: GEORGIA

- The HCAHPS reporting rate of 86.7% for Georgia CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #27 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Georgia scored significantly higher on 1 HCAHPS measure, significantly lower on 0 measures, and did not have significantly different performance on the remaining 9 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 Georgia, 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 Georgia. The HCAHPS reporting rate of 86.7% for Georgia CAHs was higher than the national reporting rate of 85.7%.

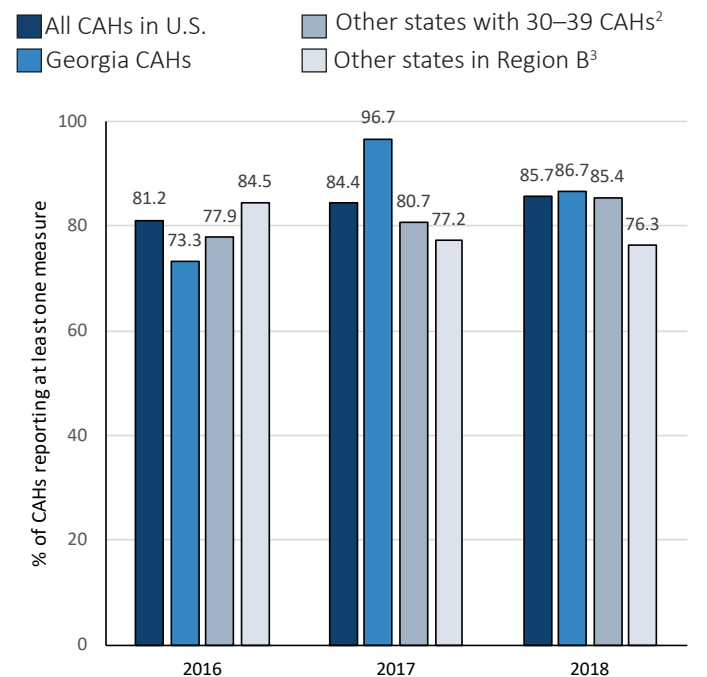
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Georgia ranked #27 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Georgia 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, Georgia's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 9 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 30–39 CAHs: CA (34), CO (32), IN (35), MI (36), MO (36), MS (31), ND (36), OH (33), SD (38), WA (39)
3. HRSA Region B includes: AL (4), FL (12), KY (27), MS (31), NC (20), SC (4), TN (16)



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 Georgia, 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
Georgia	26	4	8	7	6	1	16	10	0

TABLE 3. HCAHPS Results for CAHs in Georgia 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”)	
	Georgia (n=26)	All Other Flex States (n=1,132)
Nurses always communicated well	84.5	83.6
Doctors always communicated well	85.7	84.4
Patient always received help as soon as wanted	74.3	77.0
Staff always explained medications before giving them to patient	69.5	69.9
Staff always provided information about what to do during recovery at home	87.4	88.5
Patient strongly understood their care when they left the hospital	57.5	56.0
Patient’s room and bathroom were always clean	79.2	80.8
Area around patient’s room was always quiet at night	72.6	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	76.3	76.5
Patient would definitely recommend the hospital to friends and family	76.7	74.9

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



Patients' Experiences in Hawaii CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: HAWAII

- The HCAHPS reporting rate of 33.3% for Hawaii CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #45 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Hawaii scored significantly higher on 1 HCAHPS measure, significantly lower on 0 measures, and did not have significantly different performance on the remaining 9 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 Hawaii, 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 Hawaii. The HCAHPS reporting rate of 33.3% for Hawaii CAHs was lower than the national reporting rate of 85.7%.

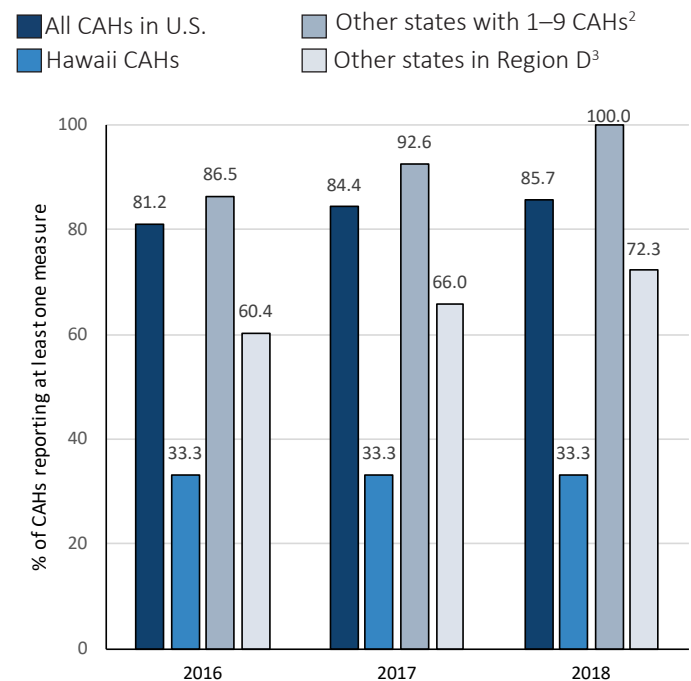
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Hawaii ranked #45 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Hawaii 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, Hawaii's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 9 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), MA (3), SC (4), VA (7), VT (8)
3. HRSA Region D includes: AR (29), AZ (15), CA (34), LA (27), NM (10), NV (13), OK (40), TX (85)



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 Hawaii, 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
Hawaii	3	2	0	1	0	0	2	1	0

TABLE 3. HCAHPS Results for CAHs in Hawaii 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”)	
	Hawaii (n=3)	All Other Flex States (n=1,155)
Nurses always communicated well	81.5	83.7
Doctors always communicated well	84.7	84.4
Patient always received help as soon as wanted	79.6	76.8
Staff always explained medications before giving them to patient	78.9	69.7
Staff always provided information about what to do during recovery at home	92.2	88.4
Patient strongly understood their care when they left the hospital	49.0	56.2
Patient’s room and bathroom were always clean	86.4	80.7
Area around patient’s room was always quiet at night	72.8	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	79.2	76.4
Patient would definitely recommend the hospital to friends and family	83.4	74.7

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



Patients' Experiences in Idaho CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: IDAHO

- The HCAHPS reporting rate of 92.6% for Idaho CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #18 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Idaho scored significantly higher on 1 HCAHPS measure, significantly lower on 2 measures, and did not have significantly different performance on the remaining 7 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 Idaho, 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 Idaho. The HCAHPS reporting rate of 92.6% for Idaho CAHs was higher than the national reporting rate of 85.7%.

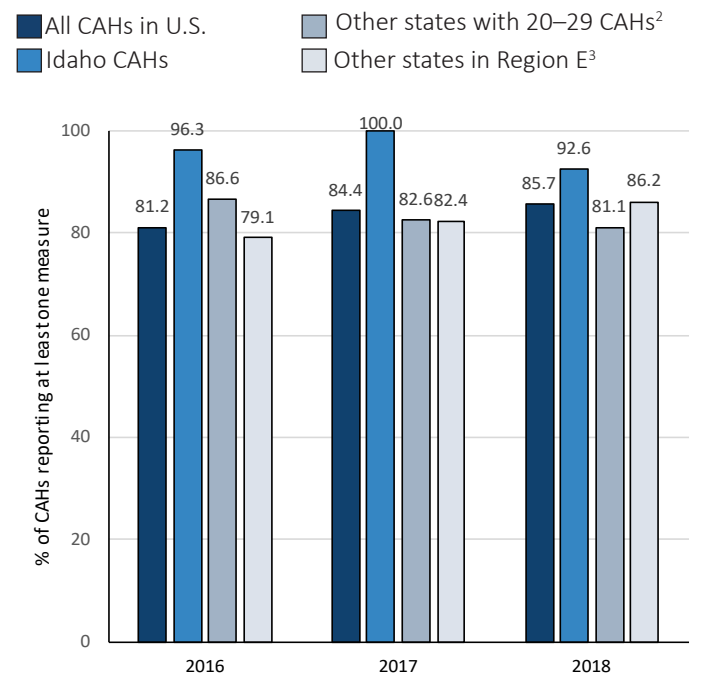
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Idaho ranked #18 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Idaho 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, Idaho's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 2 measures, and did not have significantly different performance on the remaining 7 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 20–29 CAHs: AR (29), KY (27), LA (27), NC (20), OR (25), WV (20)
3. HRSA Region E includes: AK (14), CO (32), MT (48), ND (36), OR (25), SD (38), UT (13), WA (39), WY (16)



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 Idaho, 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
Idaho	25	3	4	5	10	3	6	18	1

TABLE 3. HCAHPS Results for CAHs in Idaho 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”)	
	Idaho (n=25)	All Other Flex States (n=1,133)
Nurses always communicated well	82.4	83.6
Doctors always communicated well	84.9	84.4
Patient always received help as soon as wanted	76.1	76.9
Staff always explained medications before giving them to patient	67.6	69.9
Staff always provided information about what to do during recovery at home	89.8	88.5
Patient strongly understood their care when they left the hospital	54.9	56.1
Patient’s room and bathroom were always clean	81.0	80.8
Area around patient’s room was always quiet at night	59.6	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	76.3	76.5
Patient would definitely recommend the hospital to friends and family	75.4	74.9

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



Patients' Experiences in Illinois CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: ILLINOIS

- The HCAHPS reporting rate of 100.0% for Illinois 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 Illinois scored significantly higher on 8 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 2 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 Illinois, 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 Illinois. The HCAHPS reporting rate of 100.0% for Illinois CAHs was higher than the national reporting rate of 85.7%.

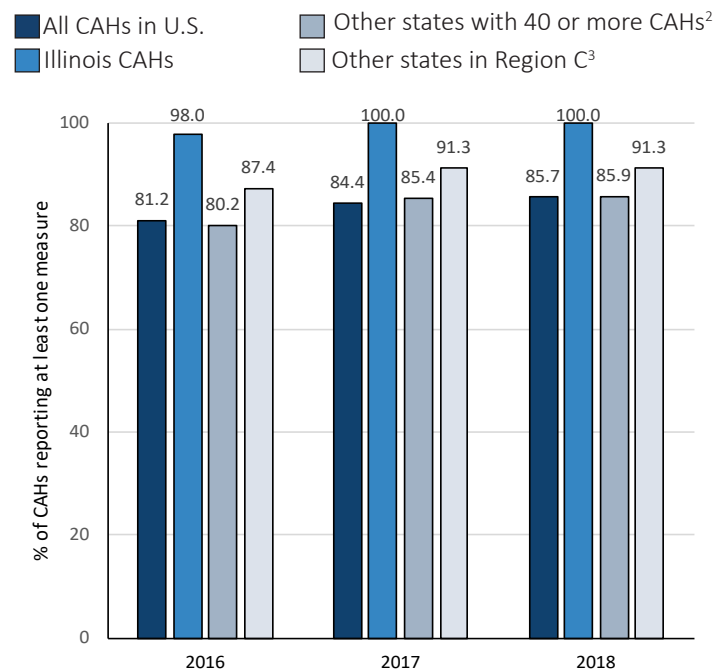
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Illinois ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Illinois 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, Illinois' CAHs scored significantly better on 8 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 2 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 40 or more CAHs: IA (82), KS (84), MN (78), MT(48), NE(64), OK(40), TX(85), WI(58)

3. HRSA Region C includes: IA (82), IN (35), KS (84), MI (36), MN (78), MO (36), NE (64), OH (33), WI (58)



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 Illinois, 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
Illinois	51	0	8	22	20	1	5	46	0

TABLE 3. HCAHPS Results for CAHs in Illinois 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”)	
	Illinois (n=51)	All Other Flex States (n=1,107)
Nurses always communicated well	86.3	83.6
Doctors always communicated well	86.9	84.4
Patient always received help as soon as wanted	78.7	76.8
Staff always explained medications before giving them to patient	71.7	69.8
Staff always provided information about what to do during recovery at home	90.4	88.5
Patient strongly understood their care when they left the hospital	58.3	56.0
Patient’s room and bathroom were always clean	84.4	80.7
Area around patient’s room was always quiet at night	66.9	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	80.6	76.4
Patient would definitely recommend the hospital to friends and family	77.8	74.9

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



Patients' Experiences in Indiana CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: INDIANA

- The HCAHPS reporting rate of 80.0% for Indiana CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #33 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Indiana 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 Indiana, 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 Indiana. The HCAHPS reporting rate of 80.0% for Indiana CAHs was lower than the national reporting rate of 85.7%.

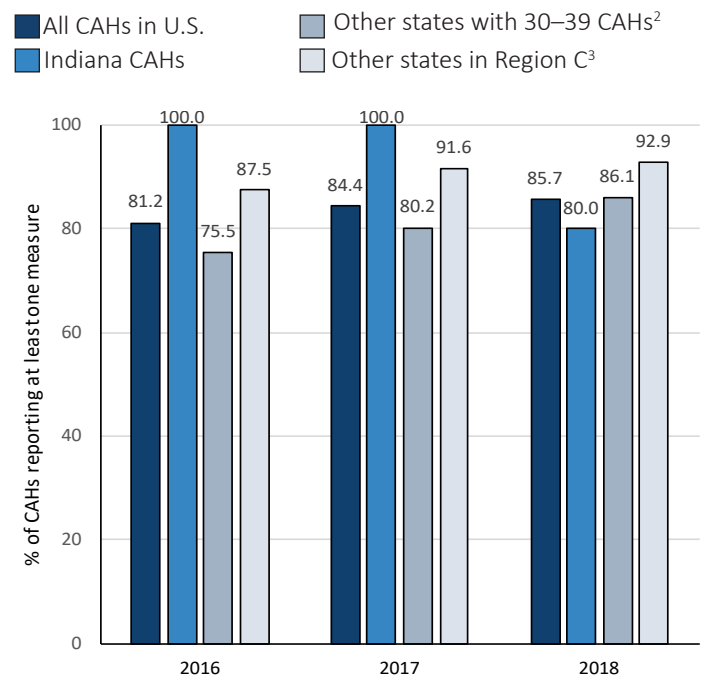
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Indiana ranked #33 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Indiana 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, Indiana'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 30–39 CAHs: CA(34), CO(32), GA(30), MI(36), MO(36), MS(31), ND(36), OH(33), SD(38), WA(39)

3. HRSA Region C includes: IA (82), IL (51), KS (84), MI (36), MN (78), MO (36), NE (64), OH (33), WI (58)



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



TABLE 2. Number of Completed HCAHPS Surveys and Response Rates for CAHs Nationally and in Indiana, 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
Indiana	28	1	4	6	15	2	4	24	0

TABLE 3. HCAHPS Results for CAHs in Indiana 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”)	
	Indiana (n=28)	All Other Flex States (n=1,130)
Nurses always communicated well	83.6	83.6
Doctors always communicated well	83.6	84.5
Patient always received help as soon as wanted	76.7	76.9
Staff always explained medications before giving them to patient	66.5	69.9
Staff always provided information about what to do during recovery at home	88.2	88.5
Patient strongly understood their care when they left the hospital	54.1	56.1
Patient’s room and bathroom were always clean	82.0	80.8
Area around patient’s room was always quiet at night	62.6	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	77.4	76.4
Patient would definitely recommend the hospital to friends and family	72.4	75.0

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



Patients' Experiences in Iowa CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: IOWA

- The HCAHPS reporting rate of 93.9% for Iowa CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #16 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Iowa scored significantly higher on 6 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 4 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 Iowa, 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 Iowa. The HCAHPS reporting rate of 93.9% for Iowa 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. Iowa ranked #16 for reporting rates of the 45 states that participate in the Flex program.

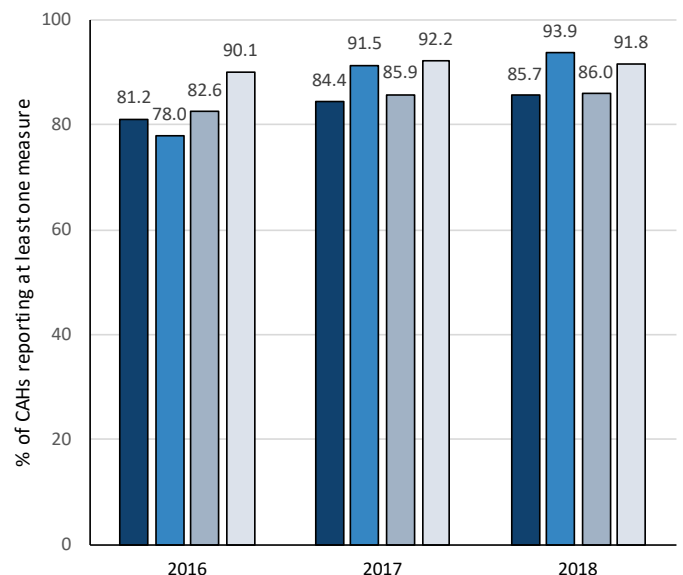
Table 2 shows the number of completed HCAHPS surveys per CAH in Iowa and nationally in the five survey completion and three survey response rate categories reported by CMS. Hospitals with 100 or more complet-

ed 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, Iowa's CAHs scored significantly better on 6 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 4 measures (Table 3).

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

■ All CAHs in U.S. ■ Other states with 40 or more CAHs²
■ Iowa CAHs ■ Other states in Region C³



1. Percentage of CAHs in each state or group of states reporting HCAHPS data.

2. Group includes states with 40 or more CAHs: IL (51), KS (84), MN (78), MT (48), NE (64), OK (40), TX (85), WI (58)

3. HRSA Region C includes: IL (51), IN (35), KS (84), MI (36), MN (78), MO (36), NE (64), OH (33), WI (58)



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 Iowa, 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
Iowa	77	5	19	26	25	2	9	66	2

TABLE 3. HCAHPS Results for CAHs in Iowa 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”)	
	Iowa (n=77)	All Other Flex States (n=1,081)
Nurses always communicated well	84.4	83.6
Doctors always communicated well	86.3	84.4
Patient always received help as soon as wanted	75.8	76.9
Staff always explained medications before giving them to patient	69.2	69.9
Staff always provided information about what to do during recovery at home	88.8	88.5
Patient strongly understood their care when they left the hospital	57.7	56.0
Patient’s room and bathroom were always clean	82.9	80.8
Area around patient’s room was always quiet at night	70.0	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	81.3	76.4
Patient would definitely recommend the hospital to friends and family	78.0	74.9

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



Patients' Experiences in Kansas CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: KANSAS

- The HCAHPS reporting rate of 84.5% for Kansas CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #31 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Kansas scored significantly higher on 4 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 6 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 Kansas, 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 Kansas. The HCAHPS reporting rate of 84.5% for Kansas CAHs was lower than the national reporting rate of 85.7%.

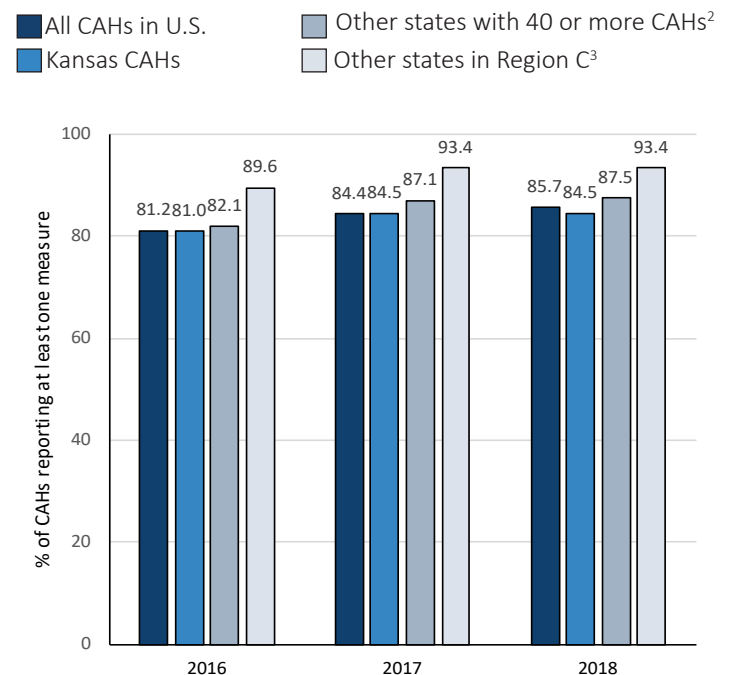
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Kansas ranked #31 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Kansas 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, Kansas' CAHs scored significantly better on 4 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 6 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 40 or more CAHs: IA (82), IL (51), MN (78), MT (48), NE (64), OK (40), TX (85), WI (58)
3. HRSA Region C includes: IA (82), IL (51), IN (35), MI (36), MN (78), MO (36), NE (64), OH (33), WI (58)



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 Kansas, 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
Kansas	71	21	21	17	12	0	18	50	3

TABLE 3. HCAHPS Results for CAHs in Kansas 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”)	
	Kansas (n=71)	All Other Flex States (n=1,087)
Nurses always communicated well	84.1	83.6
Doctors always communicated well	86.3	84.4
Patient always received help as soon as wanted	76.0	76.9
Staff always explained medications before giving them to patient	69.1	69.9
Staff always provided information about what to do during recovery at home	87.5	88.5
Patient strongly understood their care when they left the hospital	58.9	56.0
Patient’s room and bathroom were always clean	81.5	80.8
Area around patient’s room was always quiet at night	65.1	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	79.9	76.4
Patient would definitely recommend the hospital to friends and family	79.5	74.8

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



Patients' Experiences in Kentucky CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: KENTUCKY

- The HCAHPS reporting rate of 70.4% for Kentucky CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #38 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Kentucky scored significantly higher on 2 HCAHPS measures, significantly lower on 0 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 Kentucky, 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 Kentucky. The HCAHPS reporting rate of 70.4% for Kentucky CAHs was lower than the national reporting rate of 85.7%.

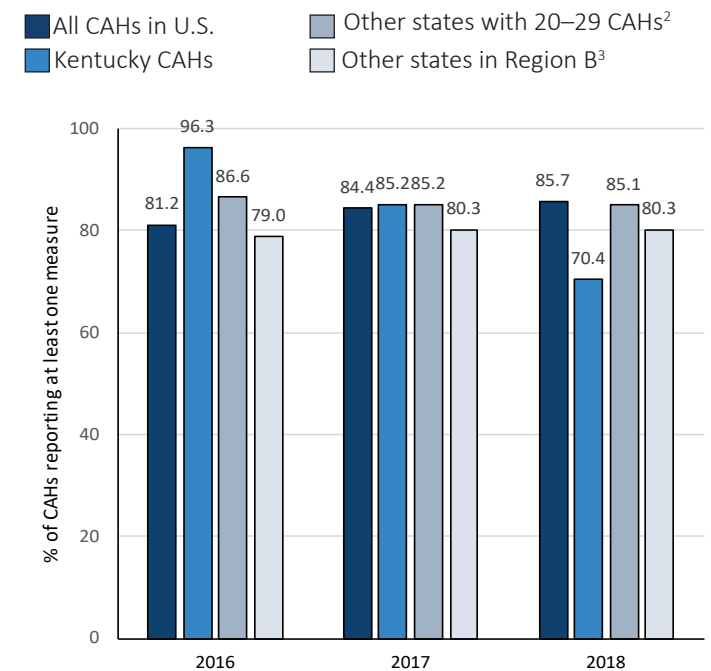
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Kentucky ranked #38 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Kentucky 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, Kentucky's CAHs scored significantly better on 2 of 10 HCAHPS measures, significantly worse on 0 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 20–29 CAHs: AR (29), ID (27), LA (27), NC (20), OR (25), WV (20)
3. HRSA Region B includes: AL (4), FL (12), GA (30), MS (31), NC (20), SC (4), TN (16)



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 Kentucky, 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
Kentucky	19	1	3	7	8	0	9	10	0

TABLE 3. HCAHPS Results for CAHs in Kentucky 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”)	
	Kentucky (n=19)	All Other Flex States (n=1,139)
Nurses always communicated well	83.3	83.6
Doctors always communicated well	87.7	84.4
Patient always received help as soon as wanted	72.8	77.0
Staff always explained medications before giving them to patient	71.4	69.8
Staff always provided information about what to do during recovery at home	88.7	88.5
Patient strongly understood their care when they left the hospital	59.1	56.0
Patient’s room and bathroom were always clean	80.9	80.8
Area around patient’s room was always quiet at night	69.0	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	74.6	76.5
Patient would definitely recommend the hospital to friends and family	73.1	75.0

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



Patients' Experiences in Louisiana CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: LOUISIANA

- The HCAHPS reporting rate of 70.4% for Louisiana CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #38 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Louisiana scored significantly higher on 10 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 0 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 Louisiana, 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 Louisiana. The HCAHPS reporting rate of 70.4% for Louisiana CAHs was lower than the national reporting rate of 85.7%.

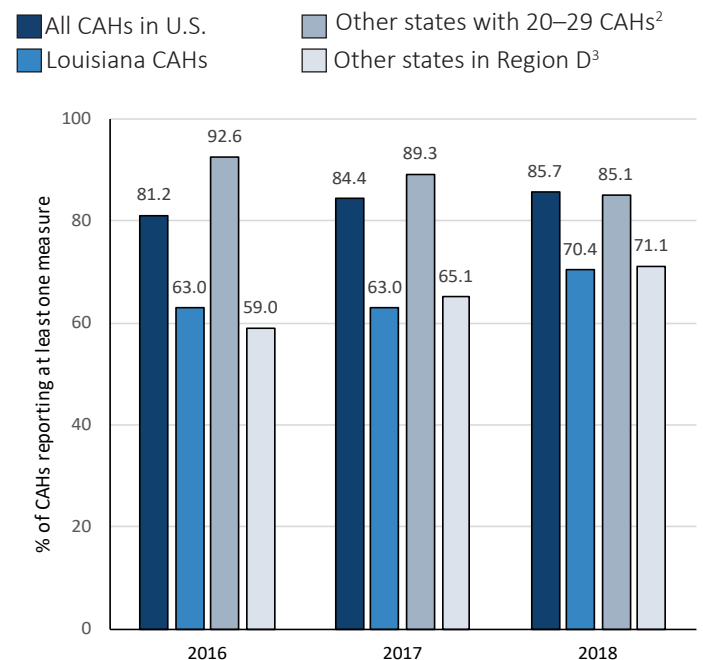
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Louisiana ranked #38 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Louisiana 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, Louisiana's CAHs scored significantly better on 10 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 0 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 20–29 CAHs: AR (29), ID (27), KY (27), NC (20), OR (25), WV (20)
3. HRSA Region D includes: AR (29), AZ (15), CA (34), HI (9), NM (10), NV (13), OK (40), TX (85)



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 Louisiana, 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
Louisiana	19	6	2	9	2	0	11	8	0

TABLE 3. HCAHPS Results for CAHs in Louisiana 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”)	
	Louisiana (n=19)	All Other Flex States (n=1,139)
Nurses always communicated well	89.5	83.5
Doctors always communicated well	89.8	84.3
Patient always received help as soon as wanted	82.2	76.8
Staff always explained medications before giving them to patient	77.4	69.7
Staff always provided information about what to do during recovery at home	90.6	88.5
Patient strongly understood their care when they left the hospital	62.5	55.9
Patient’s room and bathroom were always clean	86.6	80.7
Area around patient’s room was always quiet at night	74.9	65.2
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	82.5	76.3
Patient would definitely recommend the hospital to friends and family	80.8	74.8

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



Patients' Experiences in Maine CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MAINE

- The HCAHPS reporting rate of 100.0% for Maine 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 Maine scored significantly higher on 3 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 7 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 Maine, 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 Maine. The HCAHPS reporting rate of 100.0% for Maine CAHs was higher than the national reporting rate of 85.7%.

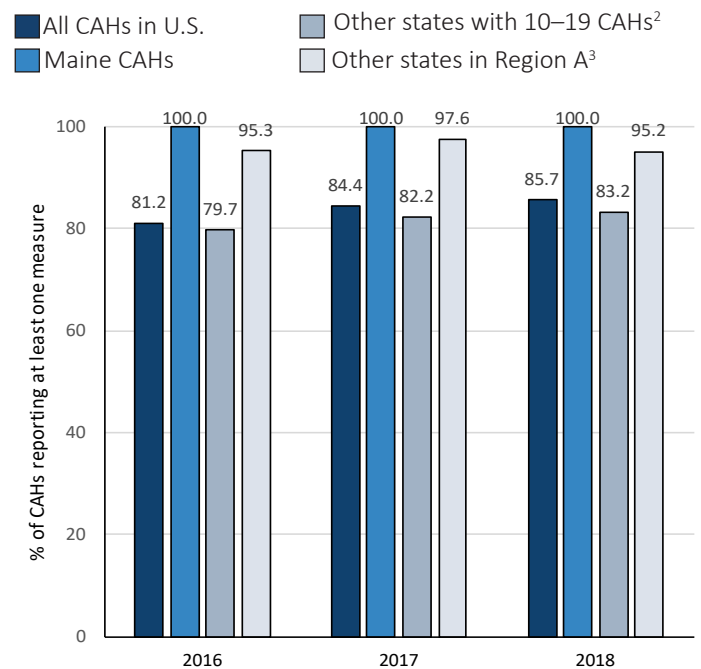
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Maine ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Maine 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, Maine's CAHs scored significantly better on 3 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 7 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 10–19 CAHs: AK (14), AZ (15), FL (12), NH (13), NM (10), NV (13), NY (18), PA (15), TN (16), UT (13), WY (16)

3. HRSA Region A includes: MA (3), NH (13), NY (18), PA (15), VA (7), VT (8), 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 Maine, 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
Maine	16	0	1	4	10	1	2	14	0

TABLE 3. HCAHPS Results for CAHs in Maine 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”)	
	Maine (n=16)	All Other Flex States (n=1,142)
Nurses always communicated well	87.3	83.5
Doctors always communicated well	85.0	84.4
Patient always received help as soon as wanted	78.6	76.9
Staff always explained medications before giving them to patient	70.8	69.8
Staff always provided information about what to do during recovery at home	89.6	88.5
Patient strongly understood their care when they left the hospital	57.6	56.0
Patient’s room and bathroom were always clean	84.8	80.7
Area around patient’s room was always quiet at night	64.4	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	79.9	76.4
Patient would definitely recommend the hospital to friends and family	78.1	74.9

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



Patients' Experiences in Massachusetts CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MASSACHUSETTS

- The HCAHPS reporting rate of 100.0% for Massachusetts 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 Massachusetts scored significantly higher on 1 HCAHPS measure, significantly lower on 2 measures, and did not have significantly different performance on the remaining 7 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 Massachusetts, 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 Massachusetts. The HCAHPS reporting rate of 100.0% for Massachusetts CAHs was higher than the national reporting rate of 85.7%.

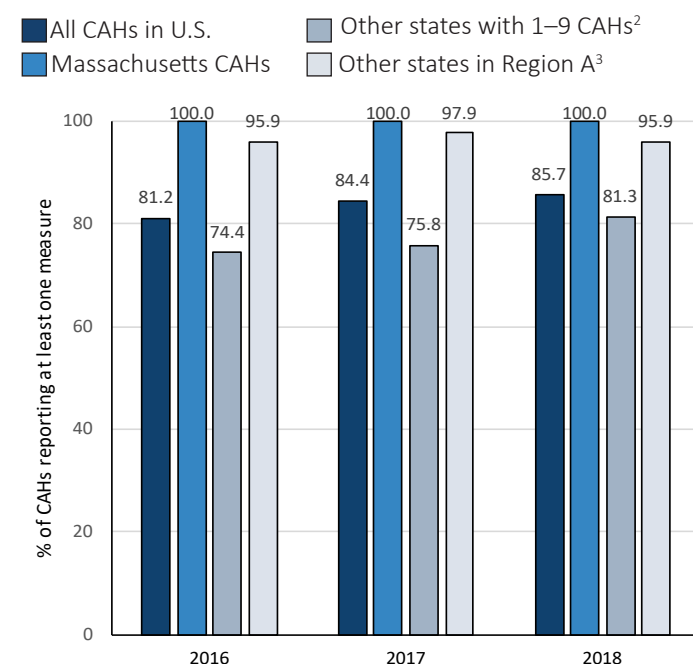
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Massachusetts ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Massachusetts 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, Massachusetts' CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 2 measures, and did not have significantly different performance on the remaining 7 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), SC (4), VA (7), VT (8)

3. HRSA Region A includes: ME (16), NH (13), NY (18), PA (15), VA (7), VT (8), 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 Massachusetts, 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
Massachusetts	3	0	0	1	2	0	1	2	0

TABLE 3. HCAHPS Results for CAHs in Massachusetts 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”)	
	Massachusetts (n=3)	All Other Flex States (n=1,155)
Nurses always communicated well	87.2	83.5
Doctors always communicated well	85.6	84.4
Patient always received help as soon as wanted	80.5	76.8
Staff always explained medications before giving them to patient	71.9	69.8
Staff always provided information about what to do during recovery at home	92.3	88.4
Patient strongly understood their care when they left the hospital	62.0	55.9
Patient’s room and bathroom were always clean	76.0	80.9
Area around patient’s room was always quiet at night	59.2	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	80.0	76.4
Patient would definitely recommend the hospital to friends and family	82.2	74.8

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



Patients' Experiences in Michigan CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MICHIGAN

- The HCAHPS reporting rate of 94.4% for Michigan CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #15 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Michigan scored significantly higher on 4 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 6 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 Michigan, 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 Michigan. The HCAHPS reporting rate of 94.4% for Michigan CAHs was higher than the national reporting rate of 85.7%.

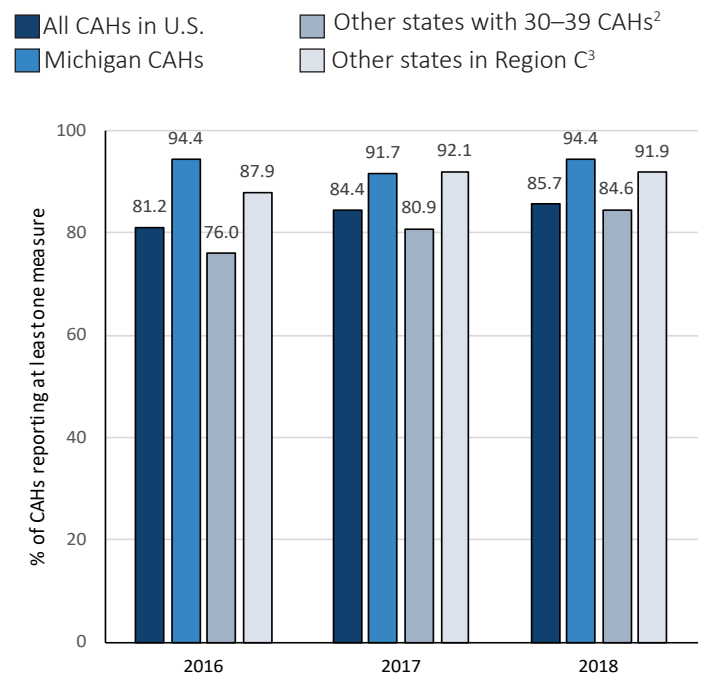
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Michigan ranked #15 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Michigan 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, Michigan's CAHs scored significantly better on 4 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 6 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MO (36), MS (31), ND (36), OH (33), SD (38), WA (39)

3. HRSA Region C includes: IA (82), IL (51), IN (35), KS (84), MN (78), MO (36), NE (64), OH (33), WI (58)



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 Michigan, 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
Michigan	34	4	6	5	16	3	3	31	0

TABLE 3. HCAHPS Results for CAHs in Michigan 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”)	
	Michigan (n=34)	All Other Flex States (n=1,124)
Nurses always communicated well	85.5	83.6
Doctors always communicated well	83.8	84.5
Patient always received help as soon as wanted	82.3	76.8
Staff always explained medications before giving them to patient	72.0	69.8
Staff always provided information about what to do during recovery at home	91.3	88.5
Patient strongly understood their care when they left the hospital	58.5	56.0
Patient’s room and bathroom were always clean	80.8	80.8
Area around patient’s room was always quiet at night	64.6	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	79.1	76.4
Patient would definitely recommend the hospital to friends and family	76.5	74.9

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



Patients' Experiences in Minnesota CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MINNESOTA

- The HCAHPS reporting rate of 94.9% for Minnesota CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #14 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Minnesota scored significantly higher on 5 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 5 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 Minnesota, 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 Minnesota. The HCAHPS reporting rate of 94.9% for Minnesota CAHs was higher than the national reporting rate of 85.7%.

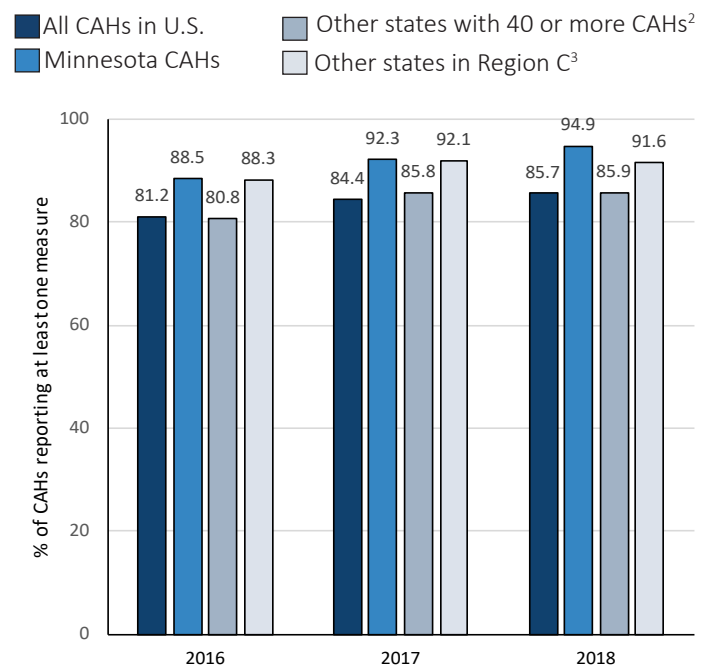
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Minnesota ranked #14 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Minnesota 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, Minnesota's CAHs scored significantly better on 5 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 5 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 40 or more CAHs: IA (82), IL (51), KS (84), MT (48), NE (64), OK (40), TX (85), WI (58)
3. HRSA Region C includes: IA (82), IL (51), IN (35), KS (84), MI (36), MO (36), NE (64), OH (33), WI (58)



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 Minnesota, 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
Minnesota	74	7	16	18	26	7	4	65	5

TABLE 3. HCAHPS Results for CAHs in Minnesota 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”)	
	Minnesota (n=74)	All Other Flex States (n=1,084)
Nurses always communicated well	84.6	83.6
Doctors always communicated well	85.5	84.4
Patient always received help as soon as wanted	78.3	76.9
Staff always explained medications before giving them to patient	69.3	69.9
Staff always provided information about what to do during recovery at home	89.2	88.5
Patient strongly understood their care when they left the hospital	57.7	56.0
Patient’s room and bathroom were always clean	81.9	80.8
Area around patient’s room was always quiet at night	71.5	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	79.9	76.4
Patient would definitely recommend the hospital to friends and family	78.5	74.8

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



Patients' Experiences in Mississippi CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MISSISSIPPI

- The HCAHPS reporting rate of 87.1% for Mississippi CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #26 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Mississippi scored significantly higher on 3 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 6 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 Mississippi, 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 Mississippi. The HCAHPS reporting rate of 87.1% for Mississippi CAHs was higher than the national reporting rate of 85.7%.

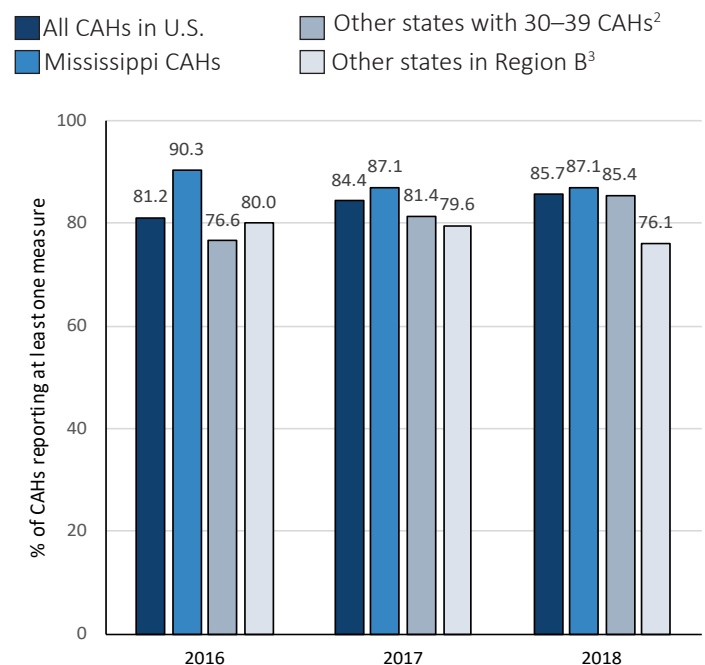
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Mississippi ranked #26 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Mississippi 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, Mississippi's CAHs scored significantly better on 3 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 6 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MI (36), MO (36), ND (36), OH (33), SD (38), WA (39)
3. HRSA Region B includes: AL (4), FL (12), GA (30), KY (27), NC (20), SC (4), TN (16)



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 Mississippi, 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
Mississippi	27	7	12	6	2	0	14	12	1

TABLE 3. HCAHPS Results for CAHs in Mississippi 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”)	
	Mississippi (n=27)	All Other Flex States (n=1,131)
Nurses always communicated well	86.8	83.5
Doctors always communicated well	91.5	84.3
Patient always received help as soon as wanted	75.6	76.9
Staff always explained medications before giving them to patient	73.0	69.8
Staff always provided information about what to do during recovery at home	85.5	88.6
Patient strongly understood their care when they left the hospital	54.7	56.1
Patient’s room and bathroom were always clean	83.4	80.7
Area around patient’s room was always quiet at night	76.7	65.2
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	77.1	76.4
Patient would definitely recommend the hospital to friends and family	74.4	74.9

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



Patients' Experiences in Missouri CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MISSOURI

- The HCAHPS reporting rate of 75.0% for Missouri CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #35 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Missouri scored significantly higher on 0 HCAHPS measures, significantly lower on 5 measures, and did not have significantly different performance on the remaining 5 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 Missouri, 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 Missouri. The HCAHPS reporting rate of 75.0% for Missouri CAHs was lower than the national reporting rate of 85.7%.

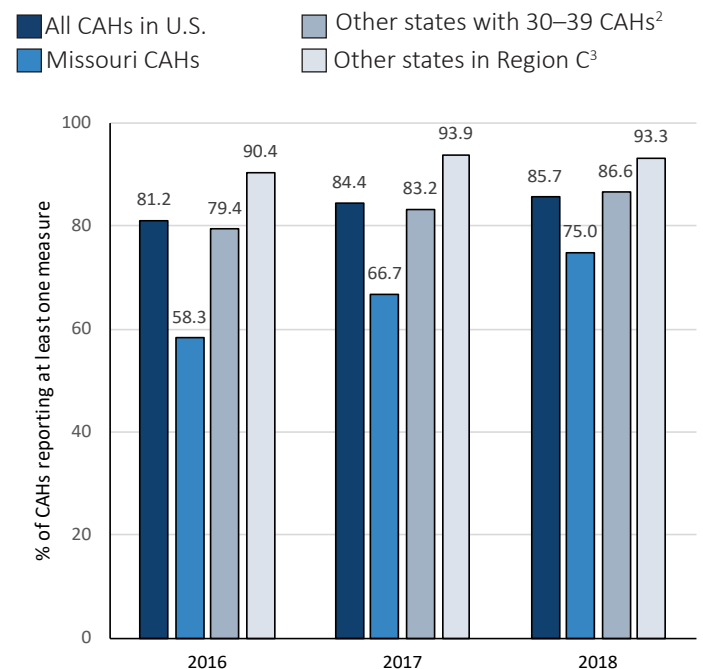
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Missouri ranked #35 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Missouri 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, Missouri's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 5 measures, and did not have significantly different performance on the remaining 5 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MI (36), MS (31), ND (36), OH (33), SD (38), WA (39)
3. HRSA Region C includes: IA (82), IL (51), IN (35), KS (84), MI (36), MN (78), NE (64), OH (33), WI (58)



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 Missouri, 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
Missouri	27	2	3	6	15	1	7	20	0

TABLE 3. HCAHPS Results for CAHs in Missouri 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”)	
	Missouri (n=27)	All Other Flex States (n=1,131)
Nurses always communicated well	80.8	83.7
Doctors always communicated well	83.9	84.5
Patient always received help as soon as wanted	72.7	77.0
Staff always explained medications before giving them to patient	65.6	69.9
Staff always provided information about what to do during recovery at home	87.9	88.5
Patient strongly understood their care when they left the hospital	54.7	56.1
Patient’s room and bathroom were always clean	79.2	80.8
Area around patient’s room was always quiet at night	62.5	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	74.3	76.5
Patient would definitely recommend the hospital to friends and family	70.2	75.0

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



Patients' Experiences in Montana CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: MONTANA

- The HCAHPS reporting rate of 91.7% for Montana CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #20 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Montana scored significantly higher on 0 HCAHPS measures, significantly lower on 5 measures, and did not have significantly different performance on the remaining 5 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 Montana, 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 Montana. The HCAHPS reporting rate of 91.7% for Montana CAHs was higher than the national reporting rate of 85.7%.

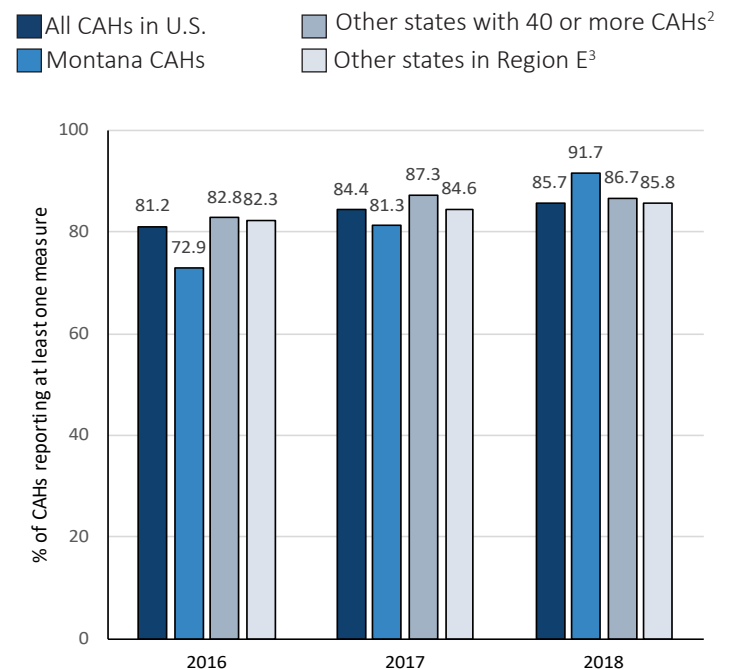
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Montana ranked #20 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Montana 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, Montana's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 5 measures, and did not have significantly different performance on the remaining 5 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 40 or more CAHs: IA (82), IL (51), KS (84), MN (78), NE (64), OK (40), TX (85), WI (58)

3. HRSA Region E includes: AK (14), CO (32), ID (27), ND (36), OR (25), SD (38), UT (13), WA (39), WY (16)



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 Montana, 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
Montana	44	23	7	3	10	1	9	32	3

TABLE 3. HCAHPS Results for CAHs in Montana 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”)	
	Montana (n=44)	All Other Flex States (n=1,114)
Nurses always communicated well	81.6	83.7
Doctors always communicated well	83.3	84.5
Patient always received help as soon as wanted	75.7	76.9
Staff always explained medications before giving them to patient	67.5	69.9
Staff always provided information about what to do during recovery at home	87.0	88.6
Patient strongly understood their care when they left the hospital	54.4	56.1
Patient’s room and bathroom were always clean	75.0	80.9
Area around patient’s room was always quiet at night	63.1	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	72.8	76.5
Patient would definitely recommend the hospital to friends and family	73.1	75.0

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



Patients' Experiences in Nebraska CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NEBRASKA

- The HCAHPS reporting rate of 96.9% for Nebraska CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #12 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Nebraska scored significantly higher on 6 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 4 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 Nebraska, 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 Nebraska. The HCAHPS reporting rate of 96.9% for Nebraska CAHs was higher than the national reporting rate of 85.7%.

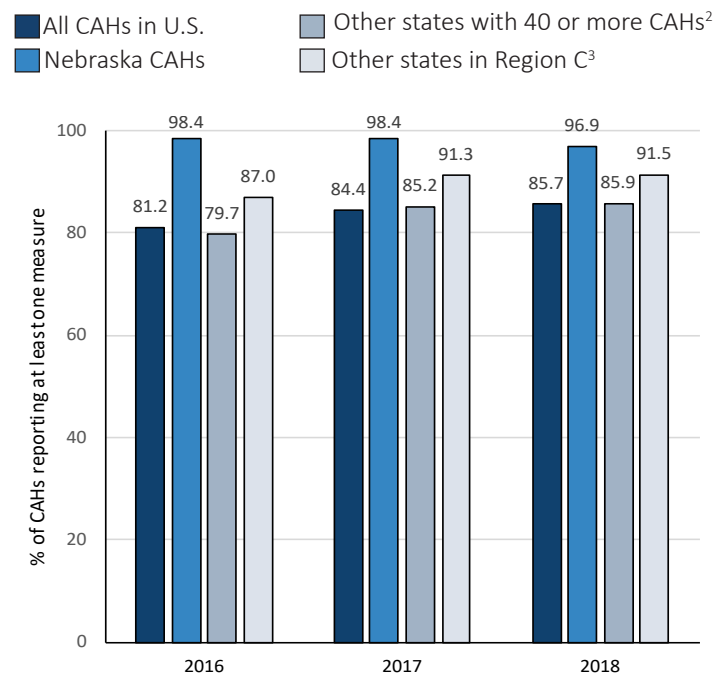
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Nebraska ranked #12 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Nebraska 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, Nebraska's CAHs scored significantly better on 6 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 4 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 40 or more CAHs: IA (82), IL (51), KS (84), MN (78), MT (48), OK (40), TX (85), WI (58)

3. HRSA Region C includes: IA (82), IL (51), IN (35), KS (84), MI (36), MN (78), MO (36), OH (33), WI (58)



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 Nebraska, 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
Nebraska	62	15	14	15	17	1	7	50	5

TABLE 3. HCAHPS Results for CAHs in Nebraska 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”)	
	Nebraska (n=62)	All Other Flex States (n=1,096)
Nurses always communicated well	84.6	83.6
Doctors always communicated well	87.1	84.4
Patient always received help as soon as wanted	78.4	76.9
Staff always explained medications before giving them to patient	69.0	69.9
Staff always provided information about what to do during recovery at home	89.3	88.5
Patient strongly understood their care when they left the hospital	58.5	56.0
Patient’s room and bathroom were always clean	85.4	80.7
Area around patient’s room was always quiet at night	70.7	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	80.2	76.4
Patient would definitely recommend the hospital to friends and family	78.6	74.8

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



Patients' Experiences in Nevada CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NEVADA

- The HCAHPS reporting rate of 84.6% for Nevada CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #30 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Nevada scored significantly higher on 0 HCAHPS measures, significantly lower on 9 measures, and did not have significantly different performance on the remaining 1 measure.

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 Nevada, 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 Nevada. The HCAHPS reporting rate of 84.6% for Nevada CAHs was lower than the national reporting rate of 85.7%.

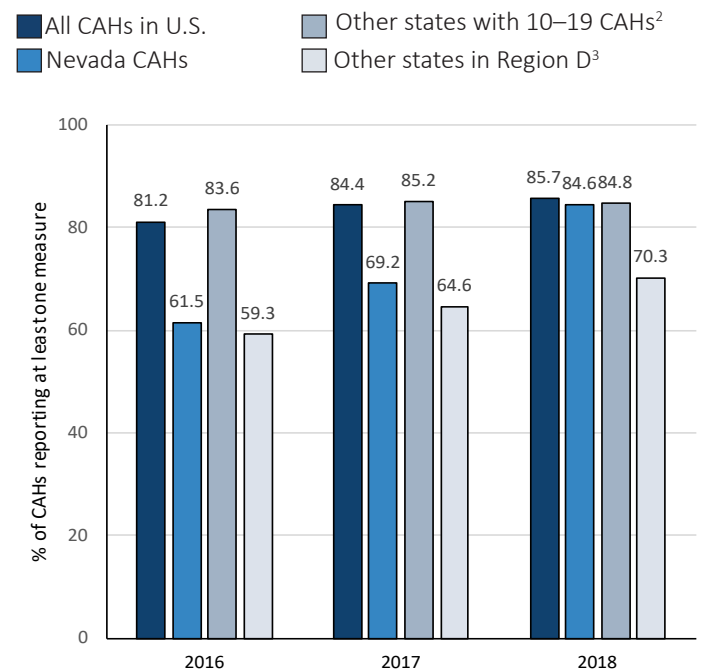
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Nevada ranked #30 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Nevada 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, Nevada's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 9 measures, and did not have significantly different performance on the remaining 1 measure (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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NM (10), NY (18), PA (15), TN (16), UT (13), WY (16)
3. HRSA Region D includes: AR (29), AZ (15), CA (34), HI (9), LA (27), NM (10), OK (40), TX (85)



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 Nevada, 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
Nevada	11	3	2	1	4	1	7	4	0

TABLE 3. HCAHPS Results for CAHs in Nevada 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”)	
	Nevada (n=11)	All Other Flex States (n=1,147)
Nurses always communicated well	78.0	83.7
Doctors always communicated well	77.6	84.6
Patient always received help as soon as wanted	71.7	77.0
Staff always explained medications before giving them to patient	65.9	69.9
Staff always provided information about what to do during recovery at home	85.8	88.6
Patient strongly understood their care when they left the hospital	50.5	56.2
Patient’s room and bathroom were always clean	75.2	80.9
Area around patient’s room was always quiet at night	53.7	65.7
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	68.7	76.6
Patient would definitely recommend the hospital to friends and family	66.3	75.1

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



Patients' Experiences in New Hampshire CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NEW HAMPSHIRE

- The HCAHPS reporting rate of 100.0% for New Hampshire 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 New Hampshire scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 New Hampshire, 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 New Hampshire. The HCAHPS reporting rate of 100.0% for New Hampshire CAHs was higher than the national reporting rate of 85.7%.

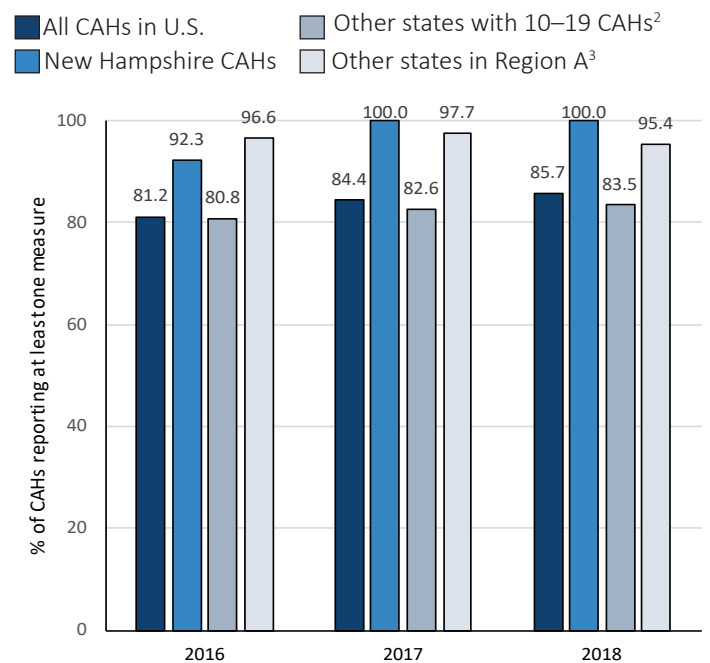
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. New Hampshire ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in New Hampshire 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, New Hampshire's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 9 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NM (10), NV (13), NY (18), PA (15), TN (16), UT (13), WY (16)
3. HRSA Region A includes: MA(3), ME(16), NY(18), PA(15), VA(7), VT(8), 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 New Hampshire, 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
New Hampshire	13	0	2	0	9	2	4	9	0

TABLE 3. HCAHPS Results for CAHs in New Hampshire 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”)	
	New Hampshire (n=13)	All Other Flex States (n=1,145)
Nurses always communicated well	83.9	83.6
Doctors always communicated well	82.7	84.5
Patient always received help as soon as wanted	75.2	76.9
Staff always explained medications before giving them to patient	67.0	69.9
Staff always provided information about what to do during recovery at home	89.1	88.5
Patient strongly understood their care when they left the hospital	55.1	56.1
Patient’s room and bathroom were always clean	82.0	80.8
Area around patient’s room was always quiet at night	56.4	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	75.4	76.5
Patient would definitely recommend the hospital to friends and family	75.3	74.9

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



Patients' Experiences in New Mexico CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NEW MEXICO

- The HCAHPS reporting rate of 90.0% for New Mexico CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #21 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in New Mexico scored significantly higher on 0 HCAHPS measures, significantly lower on 3 measures, and did not have significantly different performance on the remaining 7 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 New Mexico, 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 New Mexico. The HCAHPS reporting rate of 90.0% for New Mexico CAHs was higher than the national reporting rate of 85.7%.

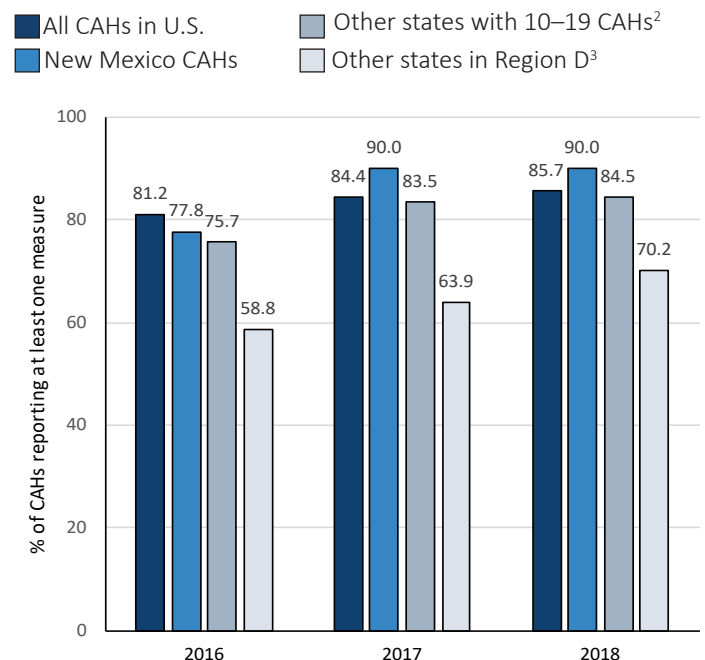
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. New Mexico ranked #21 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in New Mexico 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, New Mexico's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 3 measures, and did not have significantly different performance on the remaining 7 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NV (13), NY (18), PA (15), TN (16), UT (13), WY (16)
3. HRSA Region D includes: AR (29), AZ (15), CA (34), HI (9), LA (27), NV (13), OK (40), TX (85)



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 New Mexico, 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
New Mexico	9	1	2	1	5	0	7	2	0

TABLE 3. HCAHPS Results for CAHs in New Mexico 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”)	
	New Mexico (n=9)	All Other Flex States (n=1,149)
Nurses always communicated well	82.8	83.6
Doctors always communicated well	83.4	84.5
Patient always received help as soon as wanted	77.4	76.9
Staff always explained medications before giving them to patient	68.5	69.9
Staff always provided information about what to do during recovery at home	84.6	88.6
Patient strongly understood their care when they left the hospital	49.9	56.2
Patient’s room and bathroom were always clean	78.4	80.9
Area around patient’s room was always quiet at night	65.9	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	71.8	76.6
Patient would definitely recommend the hospital to friends and family	70.1	75.0

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



Patients' Experiences in New York CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NEW YORK

- The HCAHPS reporting rate of 88.9% for New York CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #25 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in New York scored significantly higher on 0 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 10 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 New York, 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 New York. The HCAHPS reporting rate of 88.9% for New York CAHs was higher than the national reporting rate of 85.7%.

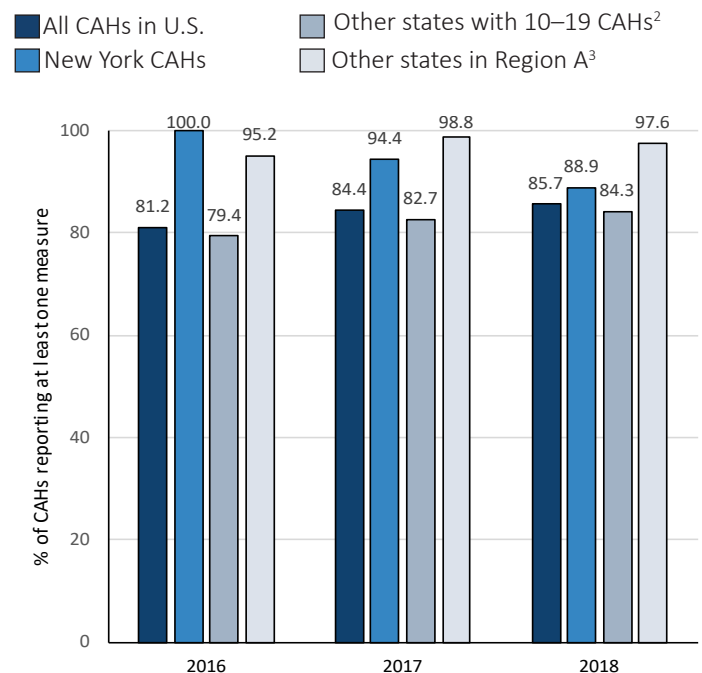
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. New York ranked #25 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in New York 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, New York's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 10 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NM (10), NV (13), PA (15), TN (16), UT (13), WY (16)
3. HRSA Region A includes: MA(3), ME(16), NH(13), PA(15), VA(7), VT(8), 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 New York, 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
New York	16	3	6	4	2	1	6	10	0

TABLE 3. HCAHPS Results for CAHs in New York 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”)	
	New York (n=16)	All Other Flex States (n=1,142)
Nurses always communicated well	83.7	83.6
Doctors always communicated well	83.7	84.5
Patient always received help as soon as wanted	74.8	76.9
Staff always explained medications before giving them to patient	70.7	69.8
Staff always provided information about what to do during recovery at home	90.2	88.5
Patient strongly understood their care when they left the hospital	55.4	56.1
Patient’s room and bathroom were always clean	79.8	80.8
Area around patient’s room was always quiet at night	60.5	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	75.5	76.5
Patient would definitely recommend the hospital to friends and family	73.2	75.0

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



Patients' Experiences in North Carolina CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NORTH CAROLINA

- The HCAHPS reporting rate of 70.0% for North Carolina CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #40 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in North Carolina scored significantly higher on 0 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 10 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 North Carolina, 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 North Carolina. The HCAHPS reporting rate of 70.0% for North Carolina CAHs was lower than the national reporting rate of 85.7%.

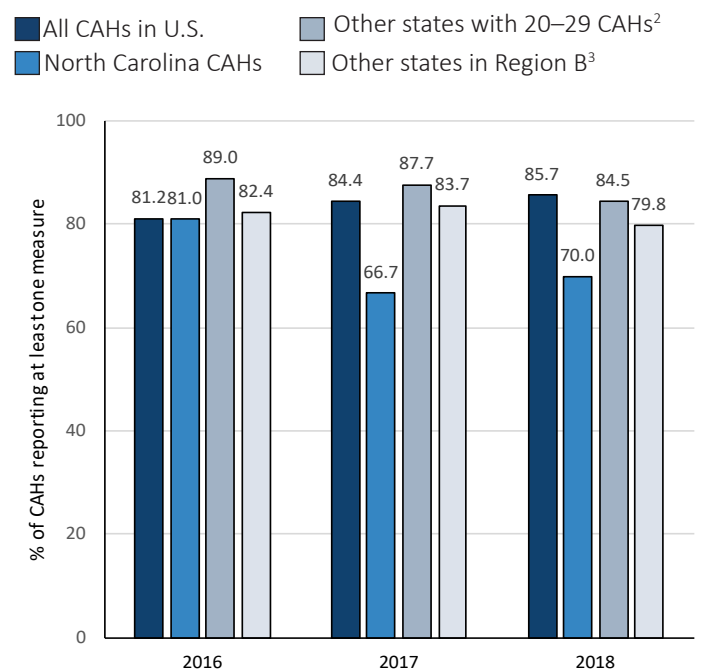
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. North Carolina ranked #40 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in North Carolina 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, North Carolina's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 10 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 20–29 CAHs: AR (29), ID (27), KY (27), LA (27), OR (25), WV (20)

3. HRSA Region B includes: AL (4), FL (12), GA (30), KY (27), MS (31), SC (4), TN (16)



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



TABLE 2. Number of Completed HCAHPS Surveys and Response Rates for CAHs Nationally and in North Carolina, 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
North Carolina	14	0	3	3	3	5	7	7	0

TABLE 3. HCAHPS Results for CAHs in North Carolina 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”)	
	North Carolina (n=14)	All Other Flex States (n=1,144)
Nurses always communicated well	84.6	83.6
Doctors always communicated well	83.4	84.5
Patient always received help as soon as wanted	78.8	76.8
Staff always explained medications before giving them to patient	69.8	69.8
Staff always provided information about what to do during recovery at home	88.6	88.5
Patient strongly understood their care when they left the hospital	57.1	56.1
Patient’s room and bathroom were always clean	78.8	80.8
Area around patient’s room was always quiet at night	65.3	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	76.1	76.5
Patient would definitely recommend the hospital to friends and family	75.8	74.9

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



Patients' Experiences in North Dakota CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: NORTH DAKOTA

- The HCAHPS reporting rate of 86.1% for North Dakota CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #28 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in North Dakota scored significantly higher on 1 HCAHPS measure, significantly lower on 1 measure, 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 North Dakota, 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 North Dakota. The HCAHPS reporting rate of 86.1% for North Dakota CAHs was higher than the national reporting rate of 85.7%.

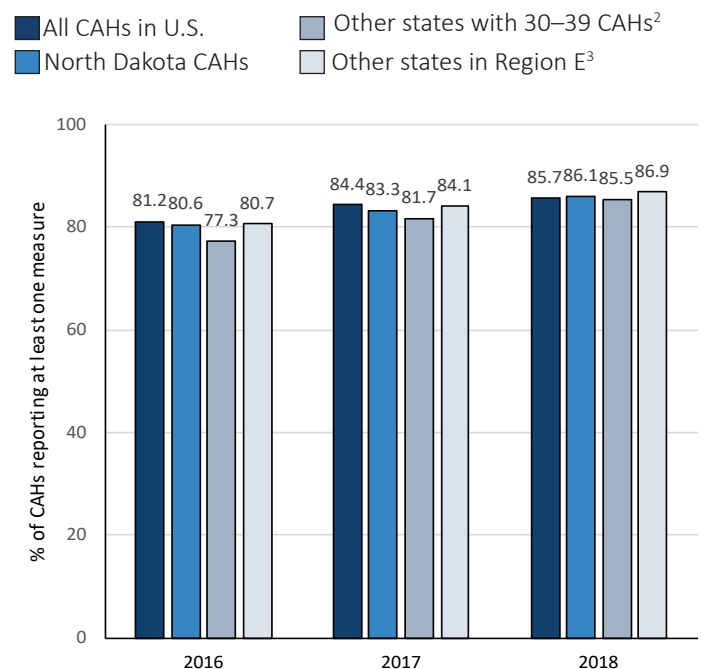
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. North Dakota ranked #28 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in North Dakota 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, North Dakota's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 1 measure, 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MI (36), MO (36), MS (31), OH (33), SD (38), WA (39)

3. HRSA Region E includes: AK (14), CO (32), ID (27), MT (48), OR (25), SD (38), UT (13), WA (39), WY (16)



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 North Dakota, 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
North Dakota	31	11	9	8	3	0	6	21	4

TABLE 3. HCAHPS Results for CAHs in North Dakota 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”)	
	North Dakota (n=31)	All Other Flex States (n=1,127)
Nurses always communicated well	83.5	83.6
Doctors always communicated well	83.6	84.5
Patient always received help as soon as wanted	77.9	76.9
Staff always explained medications before giving them to patient	67.5	69.9
Staff always provided information about what to do during recovery at home	85.6	88.6
Patient strongly understood their care when they left the hospital	54.3	56.1
Patient’s room and bathroom were always clean	79.2	80.8
Area around patient’s room was always quiet at night	70.1	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	75.8	76.5
Patient would definitely recommend the hospital to friends and family	73.9	75.0

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



Patients' Experiences in Ohio CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: OHIO

- The HCAHPS reporting rate of 97.0% for Ohio CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #11 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Ohio scored significantly higher on 1 HCAHPS measure, significantly lower on 1 measure, 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 Ohio, 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 Ohio. The HCAHPS reporting rate of 97.0% for Ohio CAHs was higher than the national reporting rate of 85.7%.

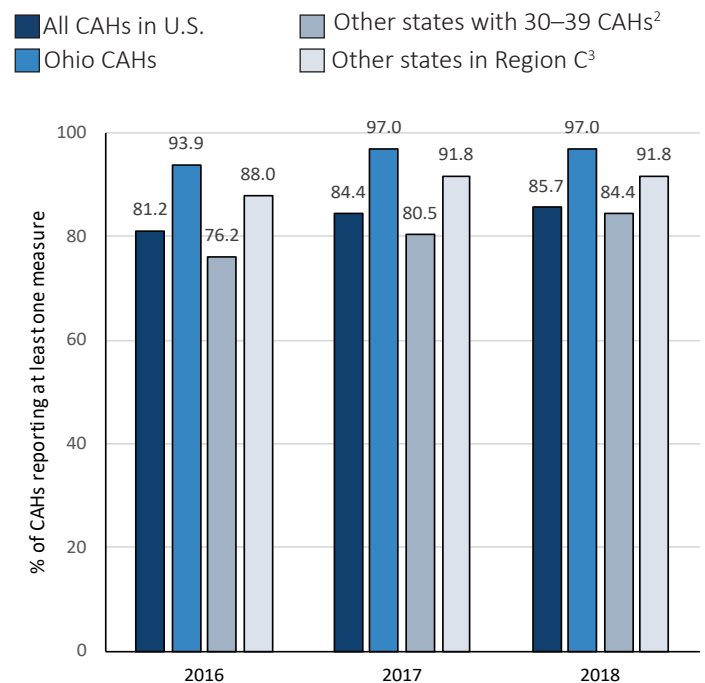
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Ohio ranked #11 for reporting rates of the 45 states that participate in the Flex program.

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

ed 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, Ohio's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 1 measure, 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MI (36), MO (36), MS (31), ND (36), SD (38), WA (39)

3. HRSA Region C includes: IA (82), IL (51), IN (35), KS (84), MI (36), MN (78), MO (36), NE (64), WI (58)



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 Ohio, 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
Ohio	32	2	0	12	15	3	7	25	0

TABLE 3. HCAHPS Results for CAHs in Ohio 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”)	
	Ohio (n=32)	All Other Flex States (n=1,126)
Nurses always communicated well	84.5	83.6
Doctors always communicated well	83.0	84.5
Patient always received help as soon as wanted	77.0	76.9
Staff always explained medications before giving them to patient	69.0	69.9
Staff always provided information about what to do during recovery at home	90.6	88.5
Patient strongly understood their care when they left the hospital	56.9	56.1
Patient’s room and bathroom were always clean	81.6	80.8
Area around patient’s room was always quiet at night	60.5	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	78.4	76.4
Patient would definitely recommend the hospital to friends and family	74.6	74.9

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



Patients' Experiences in Oklahoma CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: OKLAHOMA

- The HCAHPS reporting rate of 57.5% for Oklahoma CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #43 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Oklahoma 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 Oklahoma, 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 Oklahoma. The HCAHPS reporting rate of 57.5% for Oklahoma CAHs was lower than the national reporting rate of 85.7%.

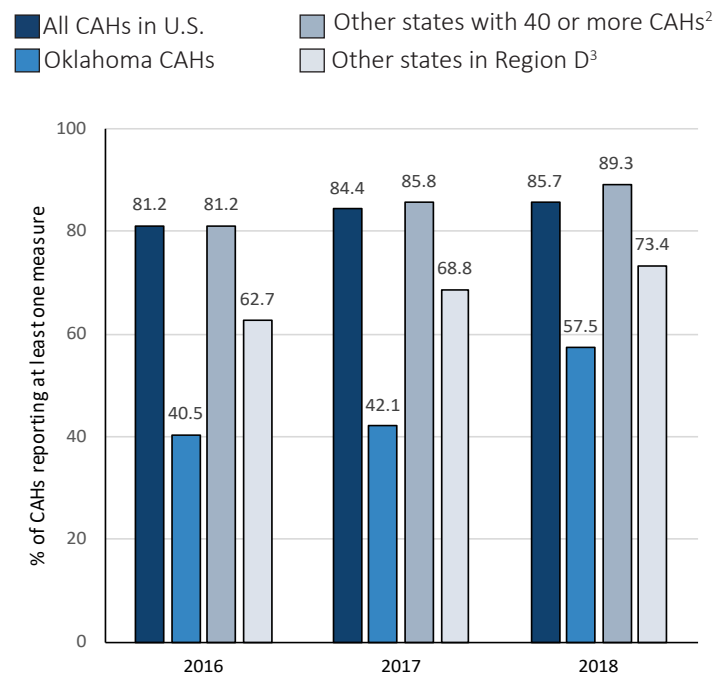
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Oklahoma ranked #43 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Oklahoma 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, Oklahoma'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 40 or more CAHs: IA (82), IL (51), KS (84), MN (78), MT (48), NE (64), TX (85), WI (58)

3. HRSA Region D includes: AR (29), AZ (15), CA (34), HI (9), LA (27), NM (10), NV (13), TX (85)



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 Oklahoma, 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
Oklahoma	23	7	10	6	0	0	12	11	0

TABLE 3. HCAHPS Results for CAHs in Oklahoma 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”)	
	Oklahoma (n=23)	All Other Flex States (n=1,135)
Nurses always communicated well	82.7	83.6
Doctors always communicated well	82.6	84.5
Patient always received help as soon as wanted	76.6	76.9
Staff always explained medications before giving them to patient	70.9	69.8
Staff always provided information about what to do during recovery at home	84.7	88.6
Patient strongly understood their care when they left the hospital	54.0	56.1
Patient’s room and bathroom were always clean	78.8	80.8
Area around patient’s room was always quiet at night	68.9	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	72.4	76.6
Patient would definitely recommend the hospital to friends and family	71.9	75.0

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



Patients' Experiences in Oregon CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: OREGON

- The HCAHPS reporting rate of 96.0% for Oregon CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #13 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Oregon scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 Oregon, 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 Oregon. The HCAHPS reporting rate of 96% for Oregon CAHs was higher than the national reporting rate of 85.7%.

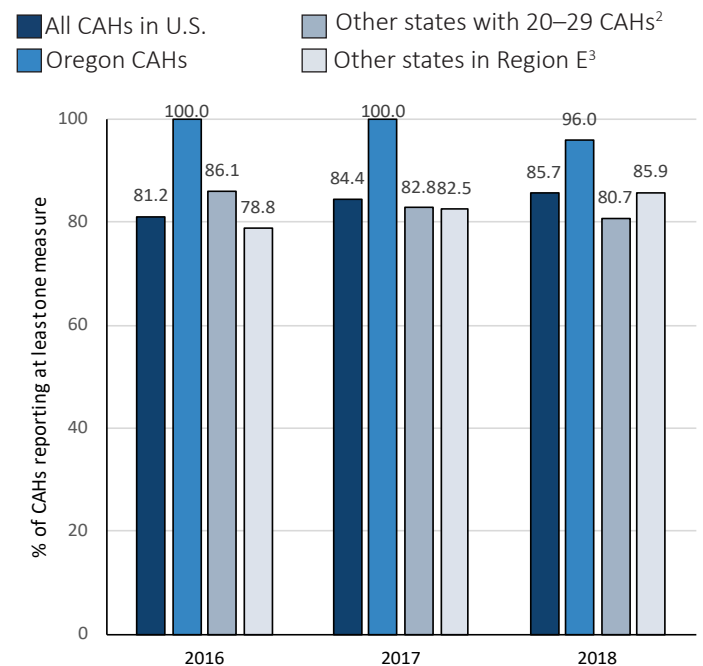
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Oregon ranked #13 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Oregon 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, Oregon's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 9 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 20–29 CAHs: AR (29), ID (27), KY (27), LA (27), NC (20), WV (20)

3. HRSA Region E includes: AK (14), CO (32), ID (27), MT (48), ND (36), SD (38), UT (13), WA (39), WY (16)



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 Oregon, 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
Oregon	24	1	1	7	14	1	10	14	0

TABLE 3. HCAHPS Results for CAHs in Oregon 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”)	
	Oregon (n=24)	All Other Flex States (n=1,134)
Nurses always communicated well	83.1	83.6
Doctors always communicated well	83.9	84.5
Patient always received help as soon as wanted	78.8	76.8
Staff always explained medications before giving them to patient	70.7	69.8
Staff always provided information about what to do during recovery at home	89.6	88.5
Patient strongly understood their care when they left the hospital	55.6	56.1
Patient’s room and bathroom were always clean	79.7	80.8
Area around patient’s room was always quiet at night	59.2	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	75.4	76.5
Patient would definitely recommend the hospital to friends and family	72.9	75.0

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



Patients' Experiences in Pennsylvania CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: PENNSYLVANIA

- The HCAHPS reporting rate of 100.0% for Pennsylvania 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 Pennsylvania scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 Pennsylvania, 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 Pennsylvania. The HCAHPS reporting rate of 100.0% for Pennsylvania CAHs was higher than the national reporting rate of 85.7%.

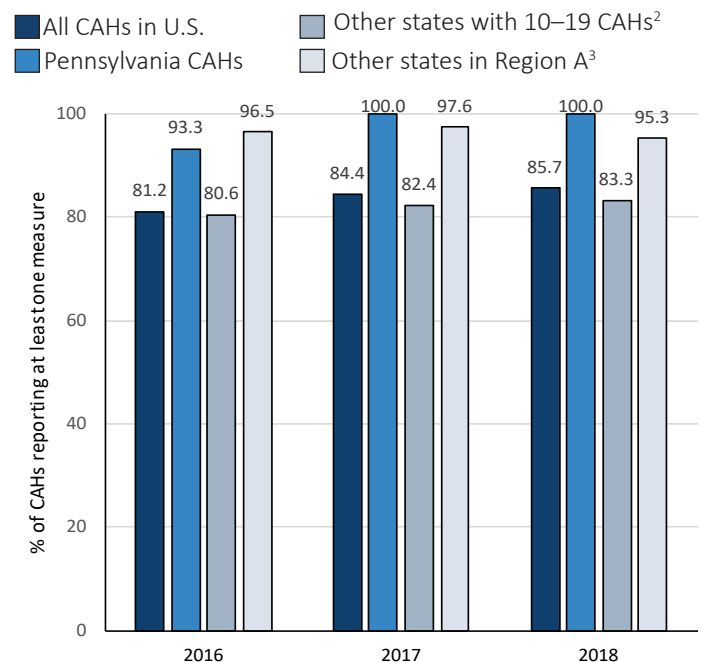
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Pennsylvania ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Pennsylvania 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, Pennsylvania's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 9 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NM (10), NV (13), NY (18), TN (16), UT (13), WY (16)

3. HRSA Region A includes: MA(3), ME(16), NH(13), NY(18), VA(7), VT(8), 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 Pennsylvania, 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
Pennsylvania	15	1	1	1	10	2	0	15	0

TABLE 3. HCAHPS Results for CAHs in Pennsylvania 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”)	
	Pennsylvania (n=15)	All Other Flex States (n=1,143)
Nurses always communicated well	83.8	83.6
Doctors always communicated well	83.7	84.5
Patient always received help as soon as wanted	77.0	76.9
Staff always explained medications before giving them to patient	67.1	69.9
Staff always provided information about what to do during recovery at home	90.1	88.5
Patient strongly understood their care when they left the hospital	55.2	56.1
Patient’s room and bathroom were always clean	82.4	80.8
Area around patient’s room was always quiet at night	59.0	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	74.9	76.5
Patient would definitely recommend the hospital to friends and family	72.4	75.0

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



Patients' Experiences in South Carolina CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: SOUTH CAROLINA

- The HCAHPS reporting rate of 100.0% for South Carolina 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 South Carolina scored significantly higher on 1 HCAHPS measure, significantly lower on 0 measures, and did not have significantly different performance on the remaining 9 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 South Carolina, 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 South Carolina. The HCAHPS reporting rate of 100.0% for South Carolina CAHs was higher than the national reporting rate of 85.7%.

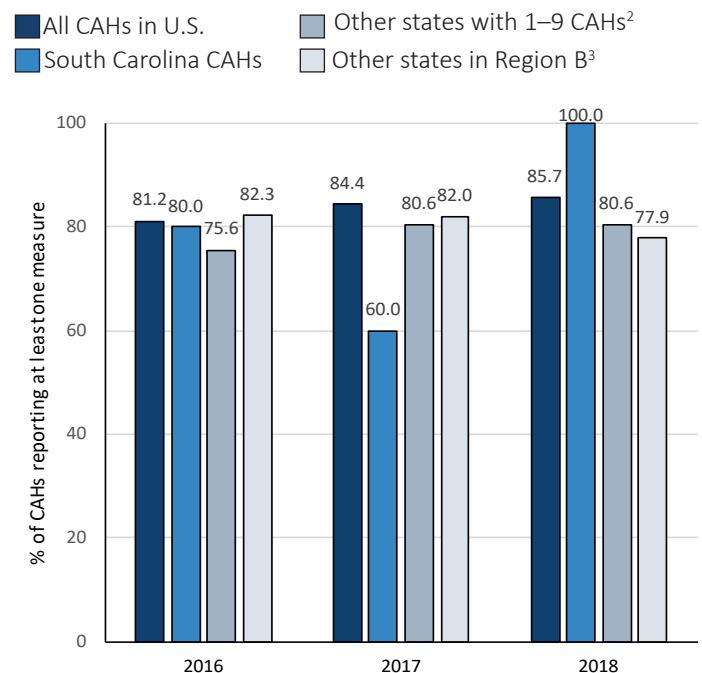
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. South Carolina ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in South Carolina 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, South Carolina's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 9 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), VA (7), VT (8)
3. HRSA Region B includes: AL (4), FL (12), GA (30), KY (27), MS (31), NC (20), TN (16)



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 South Carolina, 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
South Carolina	4	2	0	1	1	0	3	1	0

TABLE 3. HCAHPS Results for CAHs in South Carolina 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”)	
	South Carolina (n=4)	All Other Flex States (n=1,154)
Nurses always communicated well	85.1	83.6
Doctors always communicated well	87.8	84.4
Patient always received help as soon as wanted	81.2	76.8
Staff always explained medications before giving them to patient	72.8	69.8
Staff always provided information about what to do during recovery at home	88.5	88.5
Patient strongly understood their care when they left the hospital	57.8	56.0
Patient’s room and bathroom were always clean	82.6	80.8
Area around patient’s room was always quiet at night	72.7	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	77.7	76.4
Patient would definitely recommend the hospital to friends and family	76.5	74.9

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



Patients' Experiences in South Dakota CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: SOUTH DAKOTA

- The HCAHPS reporting rate of 89.5% for South Dakota CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #24 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in South Dakota scored significantly higher on 1 HCAHPS measure, significantly lower on 1 measure, 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 South Dakota, 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 South Dakota. The HCAHPS reporting rate of 89.5% for South Dakota CAHs was higher than the national reporting rate of 85.7%.

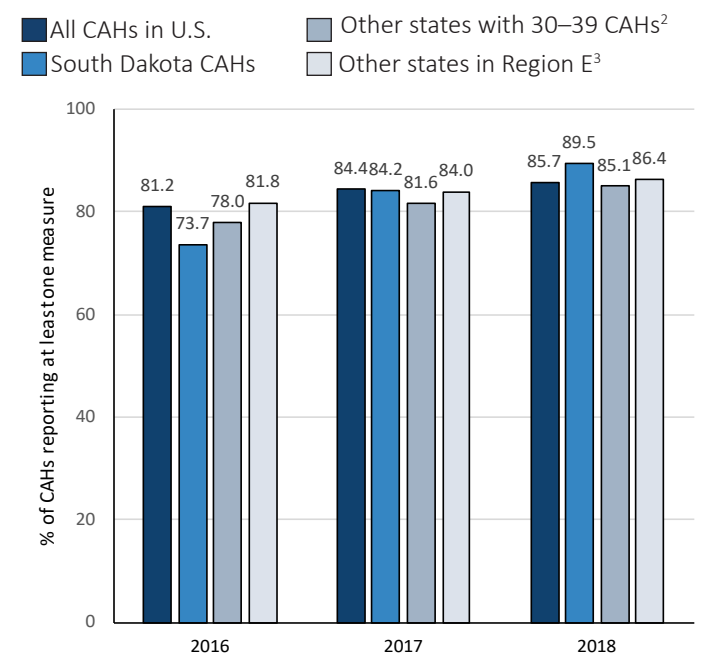
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. South Dakota ranked #24 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in South Dakota 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, South Dakota's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 1 measure, 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MI (36), MO (36), MS (31), ND (36), OH (33), WA (39)

3. HRSA Region E includes: AK (14), CO (32), ID (27), MT (48), ND (36), OR (25), UT (13), WA (39), WY (16)



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 South Dakota, 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
South Dakota	34	9	12	10	3	0	12	21	1

TABLE 3. HCAHPS Results for CAHs in South Dakota 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”)	
	South Dakota (n=34)	All Other Flex States (n=1,124)
Nurses always communicated well	83.2	83.6
Doctors always communicated well	83.8	84.5
Patient always received help as soon as wanted	78.6	76.9
Staff always explained medications before giving them to patient	70.6	69.8
Staff always provided information about what to do during recovery at home	85.7	88.6
Patient strongly understood their care when they left the hospital	55.4	56.1
Patient’s room and bathroom were always clean	81.0	80.8
Area around patient’s room was always quiet at night	69.2	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	76.2	76.5
Patient would definitely recommend the hospital to friends and family	76.4	74.9

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



Patients' Experiences in Tennessee CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: TENNESSEE

- The HCAHPS reporting rate of 75.0% for Tennessee CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #35 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Tennessee scored significantly higher on 1 HCAHPS measure, significantly lower on 0 measures, and did not have significantly different performance on the remaining 9 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 Tennessee, 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 Tennessee. The HCAHPS reporting rate of 75.0% for Tennessee CAHs was lower than the national reporting rate of 85.7%.

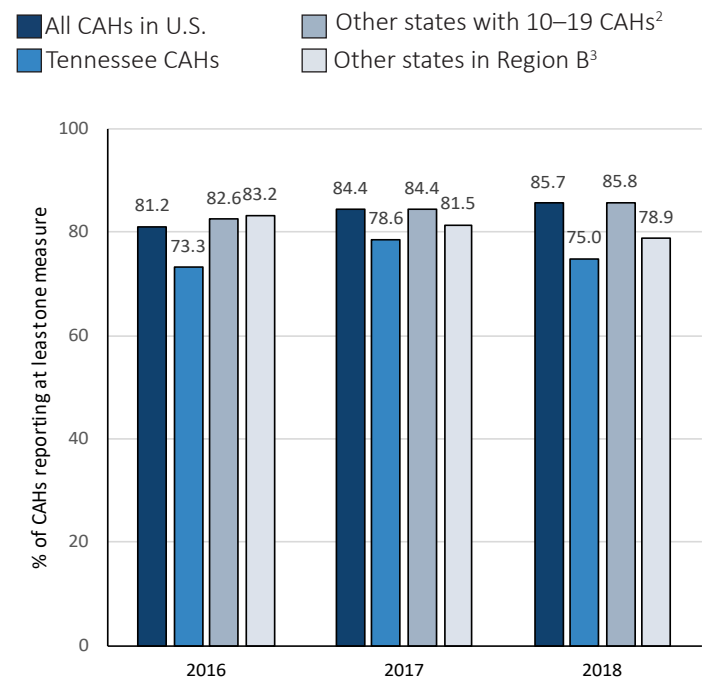
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Tennessee ranked #35 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Tennessee 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, Tennessee's CAHs scored significantly better on 1 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 9 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NM (10), NV (13), NY (18), PA (15), UT (13), WY (16)
3. HRSA Region B includes: AL (4), FL (12), GA (30), KY (27), MS (31), NC (20), SC (4)



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 Tennessee, 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
Tennessee	12	1	4	4	3	0	4	8	0

TABLE 3. HCAHPS Results for CAHs in Tennessee 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”)	
	Tennessee (n=12)	All Other Flex States (n=1,146)
Nurses always communicated well	85.1	83.6
Doctors always communicated well	86.3	84.4
Patient always received help as soon as wanted	78.1	76.9
Staff always explained medications before giving them to patient	72.7	69.8
Staff always provided information about what to do during recovery at home	86.8	88.6
Patient strongly understood their care when they left the hospital	55.9	56.1
Patient’s room and bathroom were always clean	80.6	80.8
Area around patient’s room was always quiet at night	70.6	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	75.0	76.5
Patient would definitely recommend the hospital to friends and family	71.9	75.0

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



Patients' Experiences in Texas CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: TEXAS

- The HCAHPS reporting rate of 64.7% for Texas CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #41 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Texas scored significantly higher on 6 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 4 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 Texas, 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 Texas. The HCAHPS reporting rate of 64.7% for Texas CAHs was lower than the national reporting rate of 85.7%.

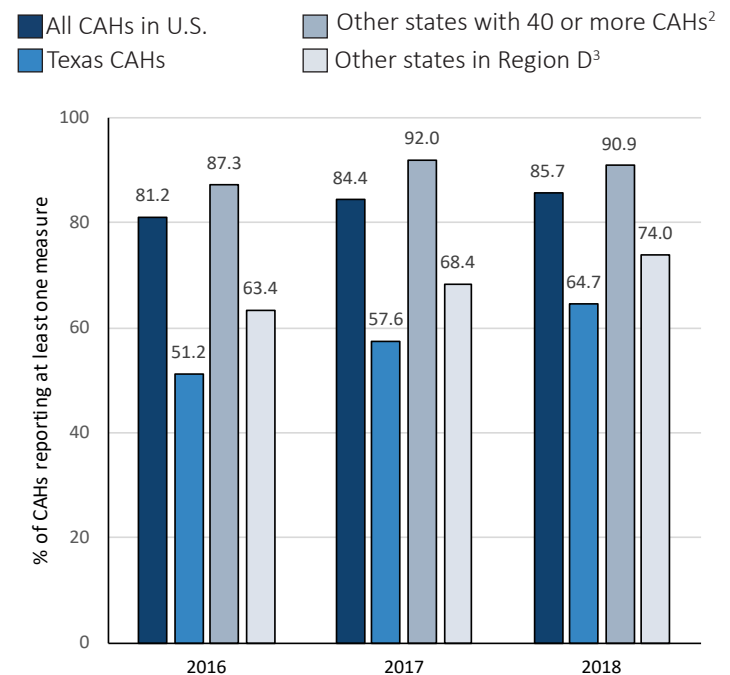
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Texas ranked #41 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Texas 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, Texas' CAHs scored significantly better on 6 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 4 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 40 or more CAHs: IA (82), IL (51), KS (84), MN (78), MT (48), NE (64), OK (40), WI (58)

3. HRSA Region D includes: AR (29), AZ (15), CA (34), HI (9), LA (27), NM (10), NV (13), OK (40)



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 Texas, 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
Texas	55	16	19	12	8	0	32	23	0

TABLE 3. HCAHPS Results for CAHs in Texas 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”)	
	Texas (n=55)	All Other Flex States (n=1,103)
Nurses always communicated well	85.5	83.6
Doctors always communicated well	87.7	84.4
Patient always received help as soon as wanted	80.3	76.8
Staff always explained medications before giving them to patient	74.0	69.7
Staff always provided information about what to do during recovery at home	87.6	88.5
Patient strongly understood their care when they left the hospital	57.3	56.0
Patient’s room and bathroom were always clean	83.8	80.7
Area around patient’s room was always quiet at night	69.9	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	78.2	76.4
Patient would definitely recommend the hospital to friends and family	76.7	74.9

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



Patients' Experiences in Utah CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: UTAH

- The HCAHPS reporting rate of 92.3% for Utah CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #19 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Utah scored significantly higher on 6 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 4 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 Utah, 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 Utah. The HCAHPS reporting rate of 92.3% for Utah CAHs was higher than the national reporting rate of 85.7%.

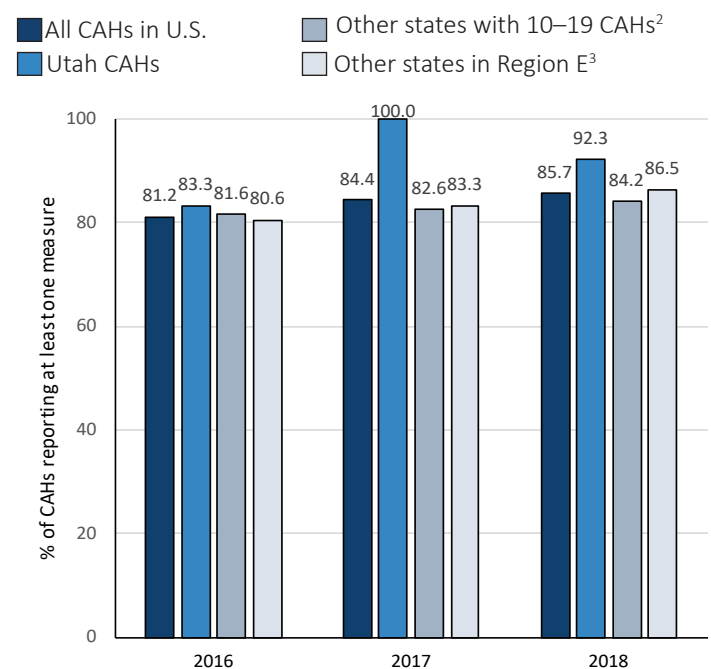
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Utah ranked #19 for reporting rates of the 45 states that participate in the Flex program.

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

ed 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, Utah's CAHs scored significantly better on 6 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 4 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NM (10), NV (13), NY (18), PA (15), TN (16), WY (16)

3. HRSA Region E includes: AK (14), CO (32), ID (27), MT (48), ND (36), OR (25), SD (38), WA (39), WY (16)



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 Utah, 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
Utah	12	2	2	5	3	0	6	6	0

TABLE 3. HCAHPS Results for CAHs in Utah 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”)	
	Utah (n=12)	All Other Flex States (n=1,146)
Nurses always communicated well	84.7	83.6
Doctors always communicated well	88.9	84.3
Patient always received help as soon as wanted	82.2	76.8
Staff always explained medications before giving them to patient	70.6	69.8
Staff always provided information about what to do during recovery at home	90.2	88.5
Patient strongly understood their care when they left the hospital	60.0	56.0
Patient’s room and bathroom were always clean	81.6	80.8
Area around patient’s room was always quiet at night	69.1	65.4
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	82.2	76.3
Patient would definitely recommend the hospital to friends and family	80.7	74.8

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



Patients' Experiences in Vermont CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

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%.

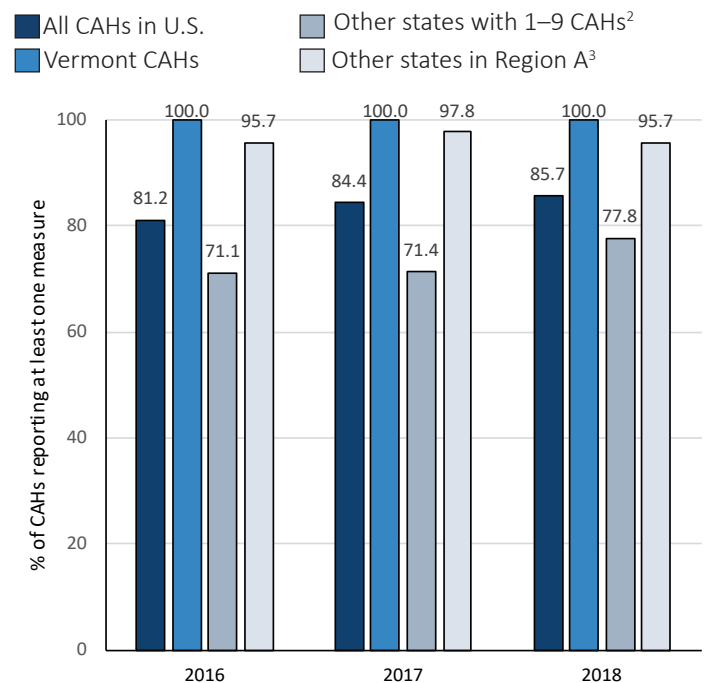
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Vermont ranked #1 for reporting rates of the 45 states that participate in the Flex program.

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.



Patients' Experiences in Virginia CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: VIRGINIA

- The HCAHPS reporting rate of 100.0% for Virginia 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 Virginia scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 Virginia, 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 Virginia. The HCAHPS reporting rate of 100.0% for Virginia CAHs was higher than the national reporting rate of 85.7%.

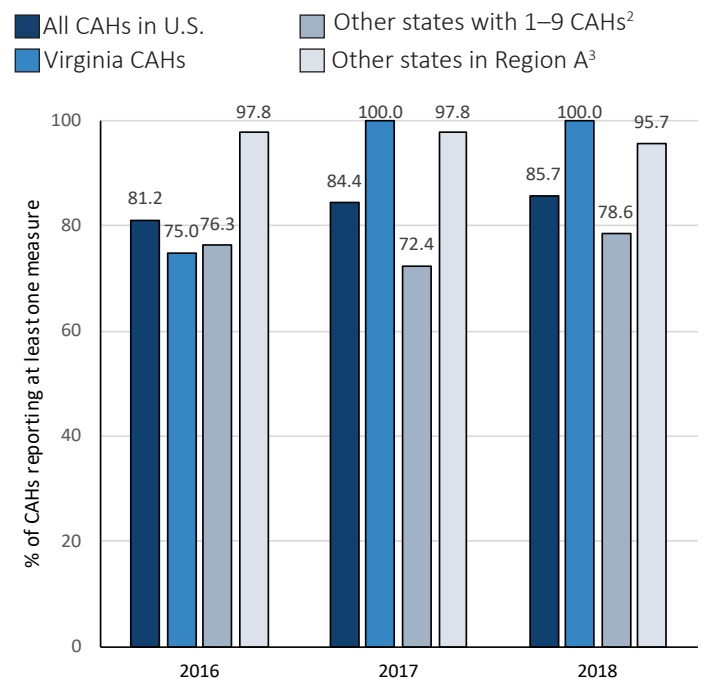
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Virginia ranked #1 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Virginia 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, Virginia's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measure, and did not have significantly different performance on the remaining 9 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), VT (8)

3. HRSA Region A includes: MA(3), ME(16), NH(13), NY(18), PA(15), VT(8), 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 Virginia, 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
Virginia	7	1	1	0	4	1	4	3	0

TABLE 3. HCAHPS Results for CAHs in Virginia 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”)	
	Virginia (n=7)	All Other Flex States (n=1,151)
Nurses always communicated well	83.3	83.6
Doctors always communicated well	84.3	84.4
Patient always received help as soon as wanted	69.5	77.1
Staff always explained medications before giving them to patient	66.1	69.9
Staff always provided information about what to do during recovery at home	89.5	88.5
Patient strongly understood their care when they left the hospital	54.9	56.1
Patient’s room and bathroom were always clean	80.9	80.8
Area around patient’s room was always quiet at night	62.5	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	76.3	76.5
Patient would definitely recommend the hospital to friends and family	72.3	75.0

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



Patients' Experiences in Washington CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: WASHINGTON

- The HCAHPS reporting rate of 79.5% for Washington CAHs in 2018 was lower than the national reporting rate of 85.7% and ranks #34 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Washington scored significantly higher on 0 HCAHPS measures, significantly lower on 5 measures, and did not have significantly different performance on the remaining 5 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 Washington, 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 Washington. The HCAHPS reporting rate of 79.5% for Washington CAHs was lower than the national reporting rate of 85.7%.

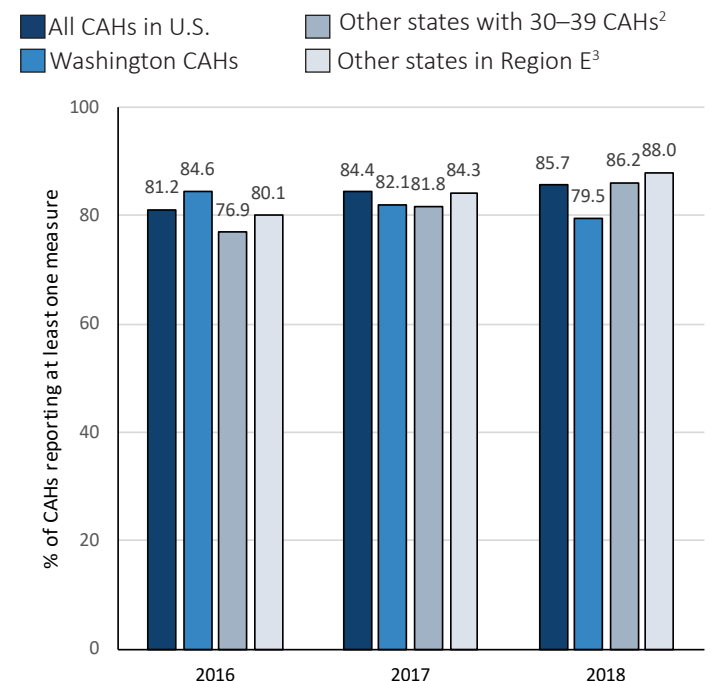
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Washington ranked #34 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Washington 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, Washington's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 5 measures, and did not have significantly different performance on the remaining 5 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 30–39 CAHs: CA (34), CO (32), GA (30), IN (35), MI (36), MO (36), MS (31), ND (36), OH (33), SD (38)

3. HRSA Region E includes: AK (14), CO (32), ID (27), MT (48), ND (36), OR (25), SD (38), UT (13), WY (16)



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 Washington, 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
Washington	31	4	6	7	11	3	15	16	0

TABLE 3. HCAHPS Results for CAHs in Washington 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”)	
	Washington (n=31)	All Other Flex States (n=1,127)
Nurses always communicated well	81.1	83.7
Doctors always communicated well	81.9	84.5
Patient always received help as soon as wanted	74.7	76.9
Staff always explained medications before giving them to patient	68.1	69.9
Staff always provided information about what to do during recovery at home	89.0	88.5
Patient strongly understood their care when they left the hospital	55.3	56.1
Patient’s room and bathroom were always clean	79.7	80.8
Area around patient’s room was always quiet at night	56.4	65.6
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	75.6	76.5
Patient would definitely recommend the hospital to friends and family	75.4	74.9

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



Patients' Experiences in West Virginia CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: WEST VIRGINIA

- The HCAHPS reporting rate of 90.0% for West Virginia CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #21 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in West Virginia scored significantly higher on 0 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 10 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 West Virginia, 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 West Virginia. The HCAHPS reporting rate of 90.0% for West Virginia CAHs was higher than the national reporting rate of 85.7%.

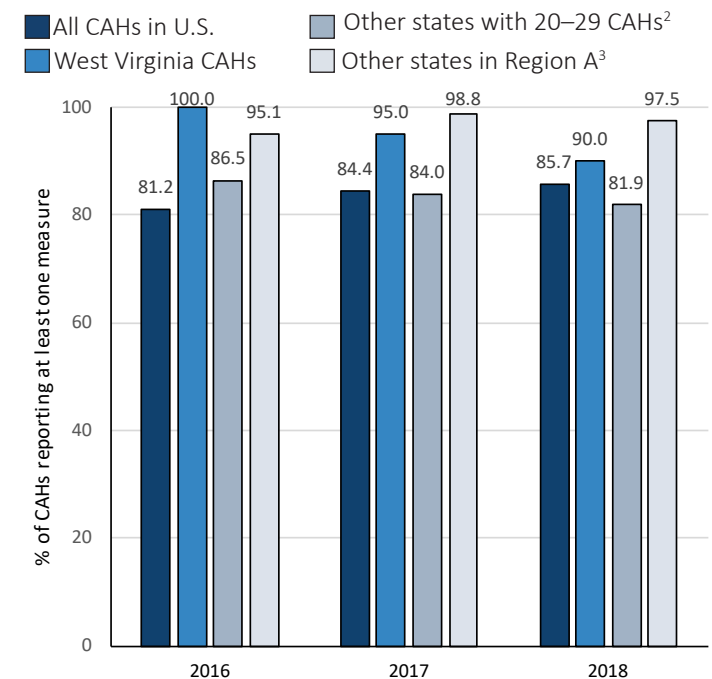
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. West Virginia ranked #21 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in West Virginia 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, West Virginia's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 10 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 20–29 CAHs: AR (29), ID (27), KY (27), LA (27), NC (20), OR (25)
3. HRSA Region A includes: MA(3), ME(16), NH(13), NY(18), PA(15), VA(7), VT(8)



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 West Virginia, 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
West Virginia	18	1	5	2	10	0	3	15	0

TABLE 3. HCAHPS Results for CAHs in West Virginia 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”)	
	West Virginia (n=18)	All Other Flex States (n=1,140)
Nurses always communicated well	85.2	83.6
Doctors always communicated well	85.9	84.4
Patient always received help as soon as wanted	78.3	76.9
Staff always explained medications before giving them to patient	71.3	69.8
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	55.2	56.1
Patient’s room and bathroom were always clean	81.9	80.8
Area around patient’s room was always quiet at night	64.6	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	76.1	76.5
Patient would definitely recommend the hospital to friends and family	73.7	75.0

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



Patients' Experiences in Wisconsin CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: WISCONSIN

- The HCAHPS reporting rate of 98.3% for Wisconsin CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #10 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Wisconsin scored significantly higher on 10 HCAHPS measures, significantly lower on 0 measures, and did not have significantly different performance on the remaining 0 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 Wisconsin, 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 Wisconsin. The HCAHPS reporting rate of 98.3% for Wisconsin CAHs was higher than the national reporting rate of 85.7%.

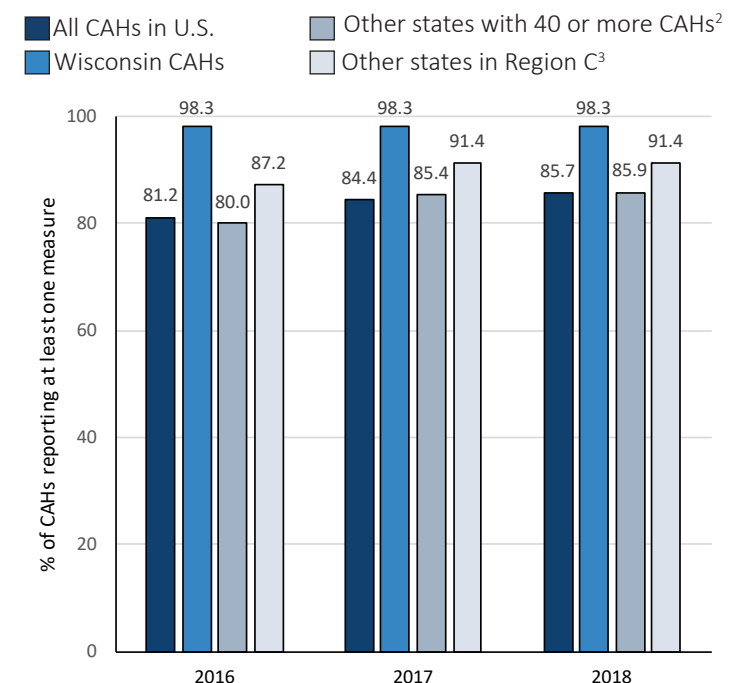
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Wisconsin ranked #10 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Wisconsin 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, Wisconsin's CAHs scored significantly better on 10 of 10 HCAHPS measures, significantly worse on 0 measures, and did not have significantly different performance on the remaining 0 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 40 or more CAHs: IA (82), IL (51), KS (84), MN (78), MT (48), NE (64), OK (40), TX (85)

3. HRSA Region C includes: IA (82), IL (51), IN (35), KS (84), MI (36), MN (78), MO (36), NE (64), OH (33)



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 Wisconsin, 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
Wisconsin	57	0	5	19	25	8	0	55	2

TABLE 3. HCAHPS Results for CAHs in Wisconsin 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”)	
	Wisconsin (n=57)	All Other Flex States (n=1,101)
Nurses always communicated well	85.8	83.6
Doctors always communicated well	85.9	84.4
Patient always received help as soon as wanted	79.4	76.8
Staff always explained medications before giving them to patient	71.6	69.8
Staff always provided information about what to do during recovery at home	90.9	88.5
Patient strongly understood their care when they left the hospital	59.4	56.0
Patient’s room and bathroom were always clean	83.6	80.7
Area around patient’s room was always quiet at night	70.0	65.3
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	80.5	76.4
Patient would definitely recommend the hospital to friends and family	78.3	74.8

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



Patients' Experiences in Wyoming CAHs: HCAHPS Results, 2018

Mariah Quick, MPH; Megan Lahr, MPH; Tongtan Chantararat, MPH; Ira Moscovice, PhD

KEY FINDINGS: WYOMING

- The HCAHPS reporting rate of 93.8% for Wyoming CAHs in 2018 was higher than the national reporting rate of 85.7% and ranks #17 among 45 states that participate in the Flex Program.
- Compared with all other CAHs nationally, CAHs in Wyoming scored significantly higher on 0 HCAHPS measures, significantly lower on 1 measure, and did not have significantly different performance on the remaining 9 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 Wyoming, 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 Wyoming. The HCAHPS reporting rate of 93.8% for Wyoming CAHs was higher than the national reporting rate of 85.7%.

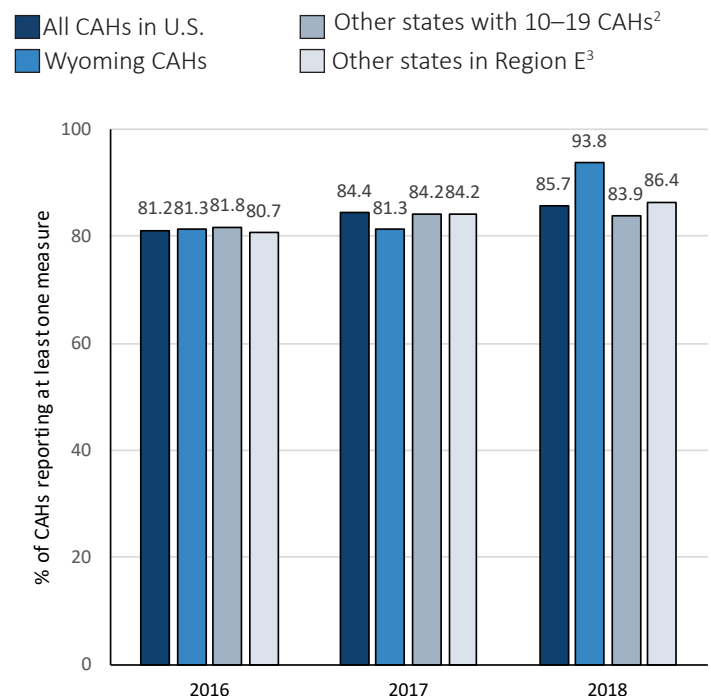
Table 1 ranks the states by their CAHs' respective HCAHPS reporting rate for 2018. Wyoming ranked #17 for reporting rates of the 45 states that participate in the Flex program.

Table 2 shows the number of completed HCAHPS surveys per CAH in Wyoming 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, Wyoming's CAHs scored significantly better on 0 of 10 HCAHPS measures, significantly worse on 1 measures, and did not have significantly different performance on the remaining 9 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 10–19 CAHs: AK (14), AZ (15), FL (12), ME (16), NH (13), NM (10), NV (13), NY (18), PA (15), TN (16), UT (13)

3. HRSA Region E includes: AK (14), CO (32), ID (27), MT (48), ND (36), OR (25), SD (38), UT (13), WA (39)



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 Wyoming, 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
Wyoming	15	4	2	6	3	0	6	9	0

TABLE 3. HCAHPS Results for CAHs in Wyoming 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”)	
	Wyoming (n=15)	All Other Flex States (n=1,143)
Nurses always communicated well	80.6	83.7
Doctors always communicated well	82.5	84.5
Patient always received help as soon as wanted	77.7	76.9
Staff always explained medications before giving them to patient	68.1	69.9
Staff always provided information about what to do during recovery at home	87.5	88.5
Patient strongly understood their care when they left the hospital	56.5	56.1
Patient’s room and bathroom were always clean	79.0	80.8
Area around patient’s room was always quiet at night	62.6	65.5
Patient gave a rating of 9 or 10 [high] on a 1–10 scale	73.4	76.5
Patient would definitely recommend the hospital to friends and family	73.5	75.0

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