

OAS CAHPS Communication Guidelines

The Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) Survey, like all patient surveying, is meant to provide unbiased feedback from your patients about the care they experienced. To help ensure that all facilities are being rated fairly based on the care they provide, CMS has created guidelines for communicating with patients both verbally and in written form about the survey. In addition, CMS has provided guidelines for administering other surveys in conjunction with the OAS CAHPS survey.

The following communication guidelines are included in the OAS CAHPS Quality Assurance Guidelines published by CMS.

Purpose of the OAS CAHPS Survey

The OAS CAHPS Survey seeks to provide information about patients' perception of the care they receive from Medicare-certified HOPDs and ASCs. The OAS CAHPS Survey instrument contains 37 items that cover topics such as access to care, communications, and experience of the facility and interactions with facility staff. There are two global items: one asks the patient to rate the care provided by the HOPD or ASC, and the second asks the patient about his or her willingness to recommend the HOPD or ASC to family and friends. The survey also contains items that ask for self-reported health status and basic demographic information (race/ethnicity, education attainment level, language spoken in the home, etc.).

Administering the OAS CAHPS Survey in Conjunction With Other Surveys

Some HOPDs and ASCs may wish to conduct other patient surveys to support internal quality improvement activities. A "survey," for purposes of this project, is defined as a formal, patient experience/satisfaction survey. A formal survey, regardless of the data collection mode employed, is one in which the primary goal is to ask standardized questions of a sample of the patient population. Contacting patients to assess their care at any time or calling a patient to check on services received are both considered to be routine patient contacts, not surveys. HOPDs and ASCs that are administering other outpatient care patient surveys must follow the following guidelines.

With regard to sampling and ensuring that patients are not overburdened by multiple surveys:

- HOPDs and ASCs (working in conjunction with their survey vendor) *must select* the OAS CAHPS Survey sample *prior* to selecting the samples for any other HOPD or ASC survey.
- In the event that another CMS-sponsored effort is also conducting a survey of patients in the ASC/HOPD, the facility must contact the OAS CAHPS Survey Coordination Team to make arrangements for both surveys.

With regard to questionnaire content:

- In other surveys that an HOPD or ASC conducts, the facility can include questions that ask for more in-depth information about OAS CAHPS issues, but should not repeat the OAS CAHPS questions or include questions that are very similar.
- The following are some examples of the types of questions that should not be included in any other surveys the facility conducts:

- “On a scale of 0 to 10, how would you rate the outpatient surgery care you received?” (This question is the same as Q23 in the OAS CAHPS Survey Questionnaire.)
- “Would you recommend this facility to your family or friends?” and “Would you recommend our services or call us in the future?” (These questions are similar to Q24 in the OAS CAHPS Survey Questionnaire.)
- “Was our staff friendly, professional, and courteous?” (This question is similar to Q7 in the OAS CAHPS Survey Questionnaire.)

Communicating with Patients about the OAS CAHPS Survey

It is important to avoid influencing patient responses to the OAS CAHPS Survey. Any information or communication about the survey from HOPDs and ASCs may introduce bias to the survey. It is acceptable for HOPDs and ASCs to inform patients that they may be asked to respond to a patient experience survey.

It is **not** acceptable, however, for HOPDs or ASCs to do any of the following:

- Send or provide information to patients in advance alerting them about the survey.
- Provide a copy of the OAS CAHPS Survey questionnaire or cover letters to the patients.
- Include words or phrases verbatim from the OAS CAHPS Survey in marketing or promotional materials.
- Attempt to influence their patients’ answers to the OAS CAHPS Survey questions.
- Tell the patients the facility hopes or expects their patients will give them the best or highest rating or to respond in a certain way to the survey questions.
- Offer incentives of any kind to the patients for participating (or not) in the survey.
- Help the patient answer the survey questions, even if the patient asks for the provider’s help.
- Ask patients why they gave a certain response or rating to any of the OAS CAHPS Survey question.
- Include any messages or materials promoting the HOPD or ASC or the services it provides in survey materials, including mail survey cover letters, questionnaires, and telephone interview scripts.

HOPDs and ASCs should never ask their patients if they would like to be included in the survey. All patients selected to participate in the OAS CAHPS Survey must be able to decide on their own whether they wish to participate and will be provided an opportunity to do so as part of the survey process.