Message from the HHCAHPS Team

Welcome to the October 2016 issue of the Home Health Care CAHPS (HHCAHPS) Coordination Team Quarterly Review (CTQR)! CTQR newsletters are posted on the HHCAHPS website under the General Information tab. Please visit the HHCAHPS website for more information on the items mentioned in this newsletter: https://homehealthcahps.org/Home.aspx.

What's New

The Home Health Prospective Payment System (HH PPS) Rate Update for Calendar Year (CY) 2017, Home Health Value-Based Purchasing Model, and Home Health Quality Reporting Requirements Proposed Rule was published in the Federal Register on July 5, 2016. It is available on the HHCAHPS website linked here.

Preview Reports for the period Q2, 2015–Q1, 2016 were posted on the HHCAHPS website on September 19, 2016. To access your agency’s Preview Report, log on to the HHCAHPS website and select Survey Preview Report under the “For HHAs” menu on the grey bar toward the top of the screen.

HHCAHPS vendors should keep an eye out for an upcoming e-mail requesting topics to include in the next Vendor Update training session—we want your input!

Important Dates to Remember

■ Next survey vendor data submission deadline, for CY16, Q2 data: October 20, 2016.
■ The Vendor Participation Form (vendor application) will be available on the HHCAHPS website in early November 2016.

Noteworthy Question of the Quarter

Q: “No Survey Results Available” appears in the Patient Survey Results tab on Home Health Compare on the Medicare.gov website for a particular client HHA. However, the vendor’s HHCAHPS Data Submission Summary Report confirms that all XML files submitted and passed validation, with a total of more than 40 completed interviews.

A: For an HHA to have its HHCAHPS Survey results publically reported, the HHA must have been participating in the HHCAHPS Survey for the full 12-month reporting period. HHAs with fewer than 12 months of survey data will not have their results reported regardless of the number of completed surveys. Publicly reported HHCAHPS Survey data are refreshed each calendar year quarter in the months of January, April, July, and October.

Focus Group and Telephone Interview Summary

In early 2016, RTI conducted focus groups and telephone interviews with patients receiving home health care to identify aspects of care that are important to them and how they define high-quality care. Participants were asked at the beginning of the focus groups and telephone interviews to identify what was important to them in receiving quality home health care. Results are shown below, with qualities that participants indicated were most important bolded.

- Staff who are caring, supportive, patient, empathetic, respectful, and considerate
- Good knowledge of patient condition
- Staff who are professional
- Staff provide education to patient and family members
- Sensitivity to / respect for diversity
- Cleanliness / hygiene of providers
- Accessible to answering questions
- Attention to detail
- Staff with a sense of humanity
- Staff who advocate for the patient
- Medication management
- Communication of medical progress
- Staff arrive on time for appointments
- Post-hospital support (HHAs becoming more essential as hospital stays are shorter)
- Good communication between staff members
- Receiving care in home vs. in a facility
- Staff provide transportation
- Caregiver spending time with patient / not rushed
- Knowledge of Medicare/Medicaid processes
- Agency has proper equipment

Contact Us

The HHCAHPS Coordination Team can be reached by e-mail (hhcahps@rti.org) or by telephone (1-866-354-0985).