

FREQUENTLY ASKED QUESTIONS FOR HOSPITALS AND ASCS OAS CAHPS®

How do I know if my hospital or ASC is eligible to participate in the OAS CAHPS Survey?

- An eligible hospital outpatient department (HOPD) is an outpatient surgery department or other specialized department of a hospital that performs outpatient surgeries and procedures. An HOPD is eligible to participate in the OAS CAHPS Survey if it meets all of the following criteria:
 - Performs procedures that are within the OAS CAHPS-eligible range of CPT-4 Codes for Surgery (i.e., CPT codes between 10021-69990) or one of the following G-Codes: G0104, G0105, G0121 or G0260.
 - Bills under the OPPOS (Outpatient Prospective Payment System).
 - The OAS CAHPS-eligible procedures are **not** performed in an office setting (doctor's office) or the emergency department.

Additionally, outpatient-focused units that are within critical access hospitals (CAHs) are also eligible as HOPDs even though CAHs do not bill under OPPOS.

There can be more than one HOPD in a hospital. Not every hospital has an HOPD.

- An eligible ASC is a freestanding medical facility that performs outpatient surgeries and procedures. An ASC is eligible to participate in the OAS CAHPS Survey if it meets all of the following criteria:
 - Operates exclusively for the purposes of furnishing outpatient surgical services to patients.
 - Is Medicare-certified and has a CMS Certification Number (CCN).
 - Bills under one of the following:
 - ASC Payment System and meet the general conditions and requirements in accordance with 42 CFR 416 subpart B, or
 - Outpatient Prospective System (OPPOS) but not in an office setting (doctor's office) or emergency department.

- For more information, please see any of the following documents:
 - Chapter III (Survey Participation Requirements) and IV (Sampling Procedures) in the *OAS CAHPS Survey Protocols and Guidelines Manual*.
 - *Getting Started* document available in the Quick Links box on the Home page of OAS CAHPS website (direct link: https://oascahps.org/OAS_Facility_Outreach.pdf).
 - Hospital eligibility announcement posted on 9/23/16—<https://oascahps.org/General-Information/Announcements/EntryId/43/Updated-Protocol-Determining-Eligibility-within-Hospitals>

My hospital has more than one eligible department. / My ASC has more than one eligible location. Should all eligible departments / ASC locations participate in OAS CAHPS?

Participation in the OAS CAHPS Survey occurs at the CCN-level. Therefore, all eligible hospital departments that bill under the same CCN should participate, and all eligible ASC locations that bill under the same CCN should participate.

What are the notable differences between Hospital CAHPS (HCAHPS) and OAS CAHPS?

- **Patient Population:** The OAS CAHPS Survey includes only outpatients. The HCAHPS survey includes only inpatients.
- **Survey Administration:** The OAS CAHPS Survey must be administered by CMS-approved survey vendors on the facilities' behalf. The survey vendor will submit survey data to the OAS CAHPS Data Center on the facilities' behalf. On HCAHPS, the survey can be administered either by an approved vendor (on behalf of a hospital) or directly by the hospital itself.

When will the OAS CAHPS Survey be linked to reimbursement as directed in a Final Rule?

The OAS CAHPS Survey will be voluntary (that is, not linked to reimbursement) for CY 2017. The first participation linked to payment reimbursement will be data collected in CY 2018, which will affect the payment determination period for the CY 2020.

Please see a link to the Final Rule here: https://oascahps.org/OAS_CY2017FinalRule.pdf

What will be the survey participation requirements starting in 2018?

When participation in the OAS CAHPS Survey is linked to HOPDs' and ASCs' payment determination in 2018, it will be the responsibility of Medicare-certified HOPDs and ASCs to participate every month in the OAS CAHPS Survey to obtain the full payment reimbursement from CMS. If an HOPD/ASC served fewer than 60 survey eligible patients during the year preceding the data collection period, the facility can request an exemption. To request an exemption, an HOPD/ASC must submit a Participation Exemption Request (PER) form for that payment determination period. This online form is available through the OAS CAHPS website. HOPDs and ASCs will need to submit a PER for every year for which they qualify and wish to seek an exemption from participation. HOPDs and ASCs are encouraged to monitor the OAS CAHPS website for announcements regarding the availability of the OAS CAHPS Survey PER form.

Each payment determination period has an associated reference count period and participation period that corresponds to a calendar year (January to December). The reference count period (which HOPDs and ASCs should use to determine eligibility for the payment determination period) is the year preceding the data collection period. More information on participation requirements for the payment determination will be available on the OAS CAHPS website closer to 2018.

If an HOPD/ASC is eligible to participate, it must follow the participation requirements listed directly under this section's header. In addition, the HOPD/ASC must understand the payment determination periods, including key date ranges and deadline dates. Information about payment determination periods and other participation requirements will be provided in the Final Rule published for the *Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs for each calendar year*.

Are ASCs that are exempt from the ASC Quality Reporting Program also exempt from OAS CAHPS?

Yes. As per The Final Rule on page 79,810 of the Federal Register / Vol. 81, No. 219 / Monday, November 14, 2016 / Rules and Regulations ([Final Rule](#)), an ASC that qualifies for the exemption from the ASCQR Program because it had fewer than 240 Medicare claims (Medicare primary and secondary payer) in the year prior to the data collection year for the applicable payment determination, would also qualify for the exemption from the OAS CAHPS Survey for the same time period. In accordance with the Final Rule, these ASCs are not required to submit a participation exemption request form for the OAS CAHPS Survey for the same time period.

How do I register my HOPD(s) or ASC(s) on the OAS CAHPS website?

1. Register for login credentials on the OAS CAHPS website using this link:
<https://oascahps.org/For-Facilities/Facility-Registration>

2. Log onto the website using the login credentials provided after completing Step 1 above.
3. Navigate to the CCN Registration Form available from your customized dashboard (through the “Click here to register your HOPD facility or your ASC facility (by CCN)” link (under the Resource column)).
4. On this form, you will enter your facility’s CMS Certification Number (CCN, also known as the Medicare Provider Number). Do not include dashes in the CCN number. If you have multiple CCNs, you can enter them as a comma separated list, as shown in the example below. Do not include spaces or returns.

Example: 111111,222222,333333

5. Then, click the “Lookup Facility Names” button to confirm the information you entered.
6. After you submit this form, your customized dashboard will be updated to reflect the registered facilities.

How do I authorize a vendor for my HOPD(s) or ASC(s) on the OAS CAHPS website?

1. Log in to the private side of the OAS CAHPS website: <https://oascahps.org/> with your username and password.
2. Go to the “For Facilities” menu and select the “Vendor Authorization” link, and then select “Start an Authorization.”
3. Use the drop down list under “Select a Vendor” to select your survey vendor.
4. Use the drop down list under “Select Start Date” to select the first day of the calendar quarter for which you are authorizing this vendor to start submitting survey data on your behalf. For example, if your vendor will start administering the OAS CAHPS Survey for the January, February or March 2016 sample month, you should select 1/1/2016.
5. Under the “Select Facility” table, check the box next to each facility CCN/name for which you want to apply a vendor authorization. If you want to apply the vendor authorization to all facilities listed in the box, check the box on the top row of the grid (next to “CCN”).
6. Click “Save Checked Authorizations.”
7. After saving, the “Vendor Authorization Report” will display on your screen. It shows a list of all your facilities for which you are the Survey Administrator. Any authorizations or changes to authorizations you just saved will be displayed under the column, “Modified” indicated by a green check mark.

Additional information on vendor authorizations can be found in the document provided here: https://oascahps.org/OAS_Vendor_Auth_Instructions.pdf

Where can I find the Participation Exemption Request (PER) form?

- PER form will be an online form available on the OAS CAHPS website in 2018.
- On the form, HOPDs and ASCs will provide patient counts for a variety of eligibility criteria over a 12-month period (January to December) for a specified year.
- Calculate the number of OAS CAHPS-eligible patients over the 12-month period. If the total is fewer than 60, the PER form can be submitted. If the total is 60 or more, the facility is eligible for participation in the OAS CAHPS Survey and should follow the steps with getting started with the OAS CAHPS Survey linked here: https://oascahps.org/OAS_Facility_Outreach.pdf.

We do not serve enough patients to get 300 completes. What do we do?

The target for the statistical precision of OAS CAHPS Survey results that will be publicly reported is based on a reliability criterion. The reliability target for the OAS CAHPS Survey ratings and most of the composites is 0.8 or higher. For reasons of statistical precision, a target minimum of 300 completed OAS CAHPS Surveys has been set for each HOPD or ASC over each 12-month reporting period. This is an average of 25 completed surveys per month.

For small facilities with low patient volumes, the number of survey-eligible patients served may be less than the number required by the sampling rate. In this case, it is acceptable to sample, and then survey, all survey-eligible patients served during that sample month. For small facilities that sample all eligible patients (i.e., conducting a census), the survey measures the true value of the patient population. The survey measures the *true* value because *all* patients were selected for the survey. Large facilities target 300 completed surveys to achieve sufficient statistical precision to reflect their population of patients. Thus, the ratings for large facilities and the ratings for small facilities both achieve the statistical precision for the OAS CAHPS Survey results based on the reliability criterion targeted.

Please see a link to the Final Rule here: https://oascahps.org/OAS_CY2017FinalRule.pdf

We currently administer our own survey to patients. How do we implement both our internal survey and the OAS CAHPS Survey?

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 surveys must follow the guidelines below.

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

- For each sample month, the survey vendor *must select* the OAS CAHPS Survey sample *prior* to selecting the samples for any other HOPD or ASC survey.
- The HOPDs and ASCs cannot select the sample for the other facility survey. The vendor must select the sample because the sample selection for OAS CAHPS cannot be disclosed to the facility.
- If another CMS- or other federally sponsored effort is also conducting a survey of patients in the HOPD/ASC that month, the facility must contact the OAS CAHPS Survey Coordination Team to make arrangements for both surveys.

With regard to questionnaire content of other outpatient surveys:

- In other surveys that an HOPD or ASC conducts, the facility can include any of the OAS CAHPS questions or similar questions.
- They can also include questions that ask for more in-depth information about OAS CAHPS issues.

Is there an OAS CAHPS training we are required to attend?

OAS CAHPS Survey does not have a training program required for hospitals and ASCs to attend. The annual OAS CAHPS webinar trainings are required for survey vendors. Hospitals and ASCs can voluntarily attend the webinar trainings, however, the webinars focus on the vendors' responsibilities and include more detail than what a facility would need to know.

Has administering the OAS CAHPS Survey via web mode been considered?

CMS is considering other modes of survey administration. The only modes tested in the mode experiment were telephone, mail, and mixed mode. However, no new modes will be available until they are fully tested and documented in a Proposed Rule.

Where can I go for additional information about the OAS CAHPS Survey?

More information about the OAS CAHPS Survey and ambulatory and outpatient surgical care is available at three websites—the OAS CAHPS Survey Website (<https://oascahps.org/>), the CMS Website (<https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/CAHPS/OAS-CAHPS.html>), and the Medicare Website (<http://www.medicare.gov>).

1. OAS CAHPS Survey Website (<https://oascahps.org/>)—This website is maintained by the OAS CAHPS Survey Coordination Team. It provides general information about the OAS CAHPS Survey, contains the protocols and materials needed for survey implementation, and is one of the main vehicles for communicating information about the survey to HOPDs, ASCs, and survey vendors. The website has both public and secure pages.
2. CMS Website (<https://www.cms.gov/Research-Statistics-Data-and-Systems/Research/CAHPS/OAS-CAHPS.html>)—This website is maintained by CMS and contains high-level information about the OAS CAHPS Survey.
3. Medicare Website (<http://www.medicare.gov>)—This website is maintained by CMS and contains information on the services Medicare provides. It provides information to the public on various quality measures. Viewers can obtain comparative information about HOPDs and ASCs by state, ZIP code, and county.

Who do we contact if we have questions about the OAS CAHPS Survey?

The OAS CAHPS Survey Coordination Team via telephone (1-866-590-7468) or email (oascahps@rti.org), Monday through Friday between 8:30 AM and 5:00 PM (Eastern Time).