

GETTING STARTED WITH THE OAS CAHPS SURVEY

The Centers for Medicare & Medicaid Services (CMS) initiated the **voluntary** national implementation phase of the Consumer Assessment of Healthcare Providers and Systems Outpatient and Ambulatory Surgery (OAS CAHPS®) Survey in January 2016. Below are highlights about the voluntary national implementation phase:

- Participation is open to any interested Medicare-certified hospitals (specifically targeting the hospitals' outpatient departments, also known as HOPDs) and free-standing ambulatory surgery centers (ASCs) that meet the definitions provided below.
- Guidelines for administration of the survey instrument are documented in the *OAS CAHPS Survey Protocols and Guidelines Manual* (under "Survey Materials" menu).
- CMS-approved survey vendors administer the survey on behalf of HOPDs and ASCs and submit the data to the OAS CAHPS Data Center.
- Results are publicly reported on a CMS website (direct link: <https://data.cms.gov/provider-data/>) after four consecutive quarters of data are collected.
- The *target* minimum number of surveys for the OAS CAHPS survey is 300 completed surveys for HOPDs and 200 completed surveys for ASCs over each 12-month reporting period.

CMS plans to continue voluntary implementation of the OAS CAHPS Survey through CY 2023 for HOPDs and CY 2024 for ASCs. Therefore, participation in the OAS CAHPS Survey will be linked to reimbursement beginning with CY 2024 for HOPDs and CY 2025 for ASCs. These plans were detailed in the [CY 2022 Final Rule](#) and reaffirmed in the [CY 2023 Final Rule](#).

Definitions

- An **HOPD** is an outpatient surgery department or specialized department of a hospital that performs outpatient surgeries and procedures. A hospital is eligible to participate in the OAS CAHPS Survey if it has an HOPD or any department that meets **all** of the following criteria:
 - performs procedures that are within the OAS CAHPS-eligible range of CPT-4¹ Codes for Surgery (i.e., CPT codes between 10004 and 69990) or one of the following G-codes: G0104, G0105, G0121, or G0260;
 - is Medicare-certified and has a CMS Certification Number (CCN);
 - bills under the Outpatient Payment Prospective System (OPPS) using CMS-1450 claim form for provider-based offices (not CMS-1500 claim form used for the Physician Fee Schedule), with the exclusion of emergency department procedures;
 - participates in the Hospital Outpatient Quality Reporting Program (Hospital OQR); and
 - has an agreement with CMS and meets the general conditions and requirements in accordance with 42 CFR 419 subpart B.

Critical access hospitals (CAHs) are also eligible for OAS CAHPS even though CAHs do not bill under OPPS; however, participation for CAHs is voluntary.

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

- An **ASC** is a freestanding medical facility that performs outpatient surgeries and procedures. CMS specifically defines eligible ASCs as distinct entities that operate exclusively for the

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purpose of furnishing outpatient services to patients. An ASC 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-4² Codes for Surgery (i.e., CPT codes between 10004 and 69990) or one of the following G-codes: G0104, G0105, G0121, or G0260;
- is Medicare-certified and has a CCN;
- bills under ASC Payment System;
- participates in the Ambulatory Surgical Center Quality Reporting (ASCQR) Program; and
- has an agreement with CMS and meets the general conditions and requirements in accordance with 42 CFR 416 subpart B.

Some ASCs have more than one location, typically in a geographic region.

- **Facility** is a generic term used on the OAS CAHPS Survey when referencing eligible hospitals and ASCs.
- **Survey Vendor** refers to a CMS-approved survey organization that has met the qualifications and requirements to administer the OAS CAHPS Survey on behalf of hospitals and/or ASCs.

How to Participate

To participate in the OAS CAHPS survey, with the intention of publicly reporting data from your facility, see the steps provided in the “OAS CAHPS Participation Overview” document available in the Quick Links box on the Home page, and directly linked here: https://oascahps.org/OAS_Part_Overview.pdf .

Benefits to Participating

- Participating HOPDs and ASCs will provide valuable information to consumers and stakeholders about the quality of outpatient care provided at their facility. The survey findings also can be used by HOPDs, ASCs, and other stakeholders for internal quality improvement and benchmarking efforts.
- HOPDs and ASCs can compare performance against their state and the national average. Results and links to these datasets will be available for download on CMS’ website.
- HOPDs and ASCs may add supplemental questions to the survey and can choose to replace their internal patient experience of care surveys with the OAS CAHPS Survey; however, HOPDs and ASCs may not change the wording or order of the OAS CAHPS Survey questions or response options.
- The OAS CAHPS Survey may be used to meet state or other regulations that require a patient satisfaction survey to be conducted regularly. Check with your state or accreditation bodies on such regulations.

Questions About the OAS CAHPS Survey?

We welcome questions and comments via our email address at oascahps@rti.org or our toll-free number 1-866-590-7468 (please leave a message).

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