

SUPPORTING STATEMENT CAHPS® HOSPICE SURVEY

B. Collection of Information Employing Statistical Methods

B1. Respondent Universe and Respondent Selection

National implementation of the CAHPS® Hospice Survey started in 2015. Hospices are required to participate in the survey in order to receive their full Annual Payment Update (APU). There are two exceptions to this requirement. The first exception is for size. Hospices with fewer than 50 survey-eligible decedents/caregivers during the prior calendar year are exempt from the CAHPS® Hospice Survey data collection and reporting requirements for payment determination. The second exemption is for newness. A hospice that received its Medicare provider number in a given calendar year is exempt from conducting the CAHPS® Hospice Survey for that year. For example, any hospice that received its provider number during calendar year 2017 would be exempt from conducting the survey in 2017. That exemption would impact the 2019 APU.

Among hospices that are not exempt, those with 700 or more survey-eligible decedents/caregivers in the prior year can elect to conduct a simple random sample of at least 700, or they may survey all cases (i.e., conduct a census). Those with 50 to 699 survey-eligible decedents/caregivers in the prior year are required to survey all cases (i.e., conduct a census). Hospices with fewer than 50 survey-eligible decedents/caregivers may elect to participate in the survey voluntarily.

From Quarter 2 2015 through Quarter 1 2016, 3,414 hospices participated in national implementation of the CAHPS® Hospice Survey, including 208 hospices with 700 or more survey-eligible decedents/caregivers in the prior year, 2,434 hospices with 50-699 survey-eligible decedents/caregivers in the prior year, and 699 hospices with fewer than 50 survey-eligible decedents/caregivers in the prior year that participated voluntarily. Among the 2,642 hospices required to participate (i.e., hospices with 50 or more survey-eligible decedents/caregivers in the prior year), the average number of surveys fielded per hospice over four quarters was 348. CMS proposes to calculate CAHPS Hospice Survey measure scores over eight calendar quarters for the purpose of public reporting; over eight quarters, the average number of surveys fielded per hospice (for hospices required to participate) is anticipated to be 696.

For national implementation, we have assumed a response rate of 33%, based on experience with the 2015 and 2016 national implementation of the CAHPS® Hospice Survey. This rate will result in an estimated 232 completes for each hospice required to participate in the implementation over eight calendar quarters (696×0.33). In Quarter 2 2015 through Quarter 1 2016 CAHPS Hospice Survey data, the intraclass correlation coefficients (ICCs) of the eight National Quality Forum-endorsed CAHPS Hospice Survey measures ranged from 0.011 to 0.023. At 200 completes within each hospice, these ICCs – which measure the amount of variability between hospices – would allow us to achieve reliability of 0.70 to 0.83 across measures. Composite reliability greater than

0.70 is commonly considered adequate when entities such as hospices are being compared.

Eligibility criteria for hospice patients and their primary caregivers were determined in consultation with a Technical Expert Panel, and closely parallel the criteria used in the field test of the survey. The following groups of hospice patients and the primary caregivers noted in their hospice's administrative records are eligible for inclusion in the sampling universe:

- Patients over the age of 18
- Patients with death at least 48 hours following last admission to hospice care
- Patients for whom a caregiver is listed or available and for whom caregiver contact information is known
- Patients whose primary caregiver is someone other than a non-familial legal guardian
- Patients for whom the primary caregiver has a U.S. or U.S. Territory home address

Patients or caregivers of patients who voluntarily request that they not be contacted (those who sign "no publicity" requests while under the care of hospice or otherwise directly request not to be contacted) are excluded.

The results of the mode experiment were used to create mode adjustment factors which will be applied to the publicly reported data.

B2. Data Collection Procedures

The CAHPS Hospice Survey uses three survey modes: (1) mail-only, including a mailed survey followed by a second survey mailed 21 days later; (2) telephone-only, including up to 5 telephone attempts; and (3) mixed mode, including a mailed survey followed by up to 5 telephone attempts beginning 21 days later. In keeping with HCAHPS guidelines, the entirety of the field period is no longer than 42 days (six weeks), regardless of survey mode.

The survey is administered between 2 and 4.5 months following the death of the hospice patient. The survey is available in English and Spanish for the telephone mode of administration. For the mail mode of administration the survey is available in English, Spanish, Traditional Chinese, Simplified Chinese, Russian, Portuguese, Vietnamese, Polish, and Korean. Based on CAHPS Hospice Survey data collected and submitted from Quarter 2 2015 and through Quarter 1 2016, we assume that 1 percent of the sample will complete a survey in Spanish or another language. The low estimated proportion of Spanish and other-language surveys reflects the low representation of Hispanics and other subgroups among hospice patients.

B3. Response Rates and Non-Response

We anticipate a response rate of 33 percent, based on experience with national implementation of the CAHPS® Hospice Survey in Quarter 2 2015 through Quarter 1 2016. To minimize non-response, we employ multiple mail contacts in the mail-only mode, multiple telephone contacts in the telephone-only mode, and both mail and telephone contacts in the mixed mode.

B4. Tests of Procedures or Methods

No tests of procedures or methods will be undertaken as part of this data collection.

B5. Statistical and Data Collection Consultants

The survey, sampling approach, and data collection procedures were designed by the RAND Corporation under the leadership of:

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Data for national implementation will be collected by survey vendors, to be determined.

ATTACHMENT

Attachment A: CAHPS[®] Hospice Survey