

We received comments on the National Implementation of the Hospital CAHPS survey from one commenter. This commenter made two points: 1) the Hospital CAHPS tool is not effective in measuring the quality of care provided to patients because patients are not capable of evaluating the quality of care they received; and 2) that HCAHPS scores can be greatly influenced by the types of services provided and by the characteristics of the patients a hospital serves. On this latter point, the commenter states that the survey result should be normalized by risk adjusting the patient population.

Response to Comment 1: The HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) Survey is the first national, standardized, publicly reported survey of patients' perspectives of hospital care. While many hospitals have collected information on patient satisfaction for their own internal use, until HCAHPS there were no common metrics and no national standards for collecting and publicly reporting information about patient experience of care. Patient experience of care is an important aspect of quality healthcare.

The commenter notes that there are many other nationally reported healthcare metrics that the commenter believes more accurately reflect the quality of care provided than do the HCAHPS patient experience metrics. CMS agrees there are many other healthcare metrics which are important in measuring quality of care, some metrics being more focused on clinical aspects of care for which patients may not be uniquely qualified to judge. However, patients are uniquely suited to provide perspective on certain aspects of their hospital experiences. The HCAHPS standardized survey and implementation protocol produces data that allow objective and meaningful comparisons of hospitals on topics that are important to patients and consumers and for which patients are the best or only source for this information.

Response to Comment 2: Prior to public reporting, hospitals' HCAHPS results are adjusted for the effects of both mode of survey administration and patient-mix. In addition to results being adjusted by mode of survey administration (mail and telephone), survey results are also adjusted by education, self-rated health status, language, age, and service line (medical, surgical and maternity) by gender.

Actions taken: There are no actions to be taken on the basis of these two comments. No documents and no burden estimates will be revised.