



Provider offices are crucial to Medicare CAHPS and HOS survey performance

Each spring, some of your patients are asked to complete a **CAHPS®** or **HOS** survey. These surveys are an important tool to help us monitor how our members think we are doing. The results of these surveys are available to the public on the Medicare Plan Finder website and have a direct impact on the plan's Star rating. It is important to remember that our performance on these surveys is based on patients' **perceptions**, not clinical outcomes.

CAHPS

CAHPS, also known as the Consumer Assessment of Healthcare Providers and Systems, is a survey that assesses satisfaction with services provided by the health plan, patient perception of provider accessibility, the patient-provider relationship and provider communication.

HOS

HOS, also known as the Health Outcomes Survey, is a survey that gathers health status data from members. A random sample of members receives the baseline survey. Two years later, the same members are surveyed for follow-up measurement. The difference in the scores for the two-year period shows if members perceive their physical and mental health status as better, the same or worse than expected.

HOS survey questions assess patient-physician relationships and member health outcomes. Patients also are asked if they and their provider have discussed the management of urinary incontinence, physical activity and fall risks.

CAHPS and HOS data for Simply Healthcare Plans, Inc. is compared against the national average and against Simply's previous results.

The surveys ask your patients about their experience regarding:

- Getting care quickly.
- How well doctors communicate.
- Coordination of care.
- Rating of personal doctor.
- Rating of specialist.
- Rating of health care.
- Getting needed care.
- Coordination of care from the doctor's office.
- Flu shots.
- Pneumonia shots.

CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Simply Healthcare Plans, Inc. is a Medicare-contracted coordinated care plan that has a Medicaid contract with the State of Florida Agency for Health Care Administration to provide benefits or arrange for benefits to be provided to enrollees.

Enrollment in Simply Healthcare Plans, Inc. depends on contract renewal.

What can provider offices do?

Providers' offices should:

- Communicate thoroughly and completely using language the patient can understand.
- Converse with patients regarding their status, tests, medications, outcomes, etc. in their specialty/PCP appointments.
- Process referrals and authorizations efficiently and as appropriate.
- Provide appointments convenient to patients.
- Be aware of and limit the amount of time patients wait.
- Listen to patients and make sure they understand your recommendations.
- Encourage preventive care, such as influenza and pneumococcal vaccines.
- Discuss and assess as appropriate mental health, physical activity and risk for falls.