

Overview and Best Practices

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey from CMS evaluates patient experience with healthcare services. The survey runs annually from March to June and factors into a health plan's star rating

What CAHPS Measures

The survey asks members to assess the following healthcare domains:

- Getting needed care
- Getting care quickly
- Physician communication
- Health plan customer service
- Overall ratings of health and drug plans
- Getting needed prescription drugs
- Care coordination
- Annual flu vaccine



Why CAHPS Matters to You

Positive healthcare experiences are associated with positive clinical and business outcomes, potentially lowering both malpractice risk and employee turnover.* Likewise, negative experiences can have the inverse effect. The CAHPS survey gives us invaluable insights into the experience of our shared Devoted Health patients.

Working together, we can use CAHPS to identify how to best improve the patient experience. When appropriate, we update our plans and services based on member responses. You might consider using the best practices listed in the next section.

*bit.ly/3vk3RxK

Best Practices



HEALTH PLANS

Use these tips to improve CAHPS provider measures and give your patients a better experience.

Getting Needed Care

Measures how easy members find it to get primary and specialist care

- Help patients make specialist appointments before they leave your office
- Set clear expectations about how long it might take to see a specialist

Rating of Healthcare Quality

Measures how members rate the quality of healthcare they received

Ask your patients for feedback on their healthcare experience and make changes when appropriate.

Annual Flu Vaccine

Percentage of members who got a flu shot prior to flu season

- Administer the flu shot as soon as it's available each fall
- Eliminate barriers to access by offering multiple ways to get the shot, like walk-in appointments and flu shot clinics

Getting Appointments and Care Quickly

Measures how quickly members feel they can get care they need

- Explain any long delays in getting appointments
- Offer to call the patient if an earlier appointment opens up
- Explain any waits longer than 15 minutes past the scheduled appointment time
- For urgent issues, offer appointments with a nurse or physician's assistant

Care Coordination

Measures how well members feel we coordinate care

- Before an appointment, review the reason for the visit and check if you need to follow up on any concerns from previous visits
- Implement a system, like a patient portal, to ensure timely notifications of test results
- Set clear expectations about when patients will receive test results