

# HCAHPS Quality Assurance Guidelines V12.0

## Change Matrix: Updates and Emphasis

This document is a reference tool that highlights the major changes from the HCAHPS *Quality Assurance Guidelines V11.0 to V12.0*, effective upon the release of the HCAHPS *Quality Assurance Guidelines V12.0* (QAG) in March 2017. This document is not a substitute for reviewing the QAG in its entirety. General format and minor wording revisions have occurred throughout the manual and are not included in this change matrix. Please contact HCAHPS Technical Assistance at [hcahps@hcqis.org](mailto:hcahps@hcqis.org) for any specific questions.

QAG V12.0 Section	Summary of Key Changes
<b>Miscellaneous</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Revised V11.0 to V12.0</li> <li>○ Revised dates as necessary (e.g., 2016 to 2017)</li> <li>○ Updated references to V.34 MS-DRG codes</li> <li>○ Updated to HCAHPS File Specifications V3.9</li> <li>○ Minor wording revisions throughout the manual</li> <li>○ Revised hyperlinks/website URLs as needed</li> <li>○ Standardized web references to comply with APA style (<a href="http://www.apastyle.org">http://www.apastyle.org</a>)</li> </ul> </li> </ul>
<b>Acknowledgements</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Updated Official UB-04, Data Specifications Manual by permission, Copyright to reflect 2016 reference</li> </ul> </li> </ul>
<b>Table of Contents</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added Appendices: <ul style="list-style-type: none"> <li>▪ Telephone Script (Chinese – Appendix I)</li> <li>▪ Telephone Script (Russian – Appendix J)</li> <li>▪ Attestation Statement Form (Appendix X)</li> <li>▪ Use of HCAHPS with Other Hospital Inpatient Surveys (Appendix Y)</li> </ul> </li> </ul> </li> </ul>
<b>I. Reader’s Guide</b>	<ul style="list-style-type: none"> <li>• Minor wording revisions</li> </ul>

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<b>II. Introduction and Overview</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added note of removal of Pain Management Dimension and addition of Care Transition Dimension to the Hospital VBP program beginning in FY 2018</li> <li>○ Added HCAHPS Mode Experiment IV information</li> <li>○ Revised Hospital Compare numbers</li> <li>○ Added expanded use of HCAHPS results</li> <li>○ Added links to the HCAHPS Bulletins</li> <li>○ Updated currently available HCAHPS Surveys to include Telephone Only and Mixed Modes for the Chinese and Russian language translations</li> <li>○ Added 2016 and 2017 milestone dates to <i>HCAHPS Development, Data Collection and Public Reporting Timeline</i></li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified official HCAHPS scores are reported on the Hospital Compare Web site, and reporting of unofficial scores must include mandatory text in the introduction or executive summary and on each page of the report</li> <li>○ Clarified any other organizations, in addition to subcontractors, responsible for major functions of survey administration must attend training</li> </ul> </li> </ul>
<b>III. Program Requirements</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added guidance on the nonofficial use of HCAHPS</li> <li>○ Added link to the HCAHPS Bulletins</li> <li>○ Added requirement to complete and submit an annual Attestation Statement</li> <li>○ Added requirement to develop disaster recovery plan</li> <li>○ Added requirement to execute Business Associate Agreement(s) in accordance with HIPAA regulations</li> <li>○ Added information if a hospital excludes patients from the discharge list, they must submit a count of patients by exclusion category to the survey vendor, <b>at a minimum on a monthly basis</b></li> <li>○ Added any <b>other organizations</b>, in addition to subcontractors, that are responsible for major functions of survey administration must attend training, and should be included in the QAP and meet Minimum Business Requirements</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified that HCAHPS results are not to be used for marketing or promotional activities</li> <li>○ Clarified confidentiality agreements must include language related to HIPAA regulations</li> </ul> </li> </ul>

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<b>IV. Communications and Technical Support</b>	<ul style="list-style-type: none"> <li>• Minor wording revisions</li> </ul>
<b>V. Survey Management</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added requirement to execute Business Associate Agreement(s) in accordance with HIPAA regulations</li> <li>○ Added requirement to develop a disaster recovery plan</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified any other organizations, in addition to subcontractors, responsible for major functions of survey administration must attend training</li> <li>○ Clarified that confidentiality agreements must include language related to HIPAA regulations</li> <li>○ Clarified requirement to store all survey administration related data</li> </ul> </li> </ul>
<b>VI. Sampling Protocol</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Updated Table of MS-DRG Codes and Service Line Categories to V.34</li> <li>○ Added combination MS-DRGs and APR-DRGs as approved method to determine the service line</li> <li>○ Added substance abuse to ineligible MS-DRGs</li> <li>○ Added information if a hospital excludes patients from the discharge list, they must submit a count of patients by exclusion category to the survey vendor, <b>at a minimum on a monthly basis</b></li> <li>○ Added public reporting of HCAHPS scores is restricted to hospitals with greater than 25 completed surveys in 12-month reporting period</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified service line must be crosswalked to methodology used</li> <li>○ Clarified hospital/survey vendor must retain the sample frame for a minimum of three years</li> </ul> </li> </ul>
<b>VII. Mail Only Survey Administration</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added requirement on the use and mailing of outgoing envelopes</li> <li>○ Added requirement to submit outgoing envelopes to the HCAHPS Project Team for review</li> <li>○ Updated language that may be added in the footer of the survey</li> <li>○ Added requirement that supplemental questions should be integrated into survey and not be a separate insert</li> <li>○ Updated requirement that the cover letters must not include any promotional or marketing text</li> </ul> </li> </ul>

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<b>VIII. Telephone Only Survey Administration</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Updated available telephone scripts to include Chinese and Russian</li> <li>○ Added requirement that survey administration must be conducted in accordance with the Telephone Consumer Protection Act (TCPA) regulations</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified guidance when interviewer gets a busy signal</li> <li>○ Clarified guidance that call monitoring must include all languages in which the survey is administered, and is performed on 10% of calls made by all HCAHPS interviewers</li> </ul> </li> </ul>
<b>IX. Mixed Mode Survey Administration</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ See Mail Only and Telephone Only Survey Administration</li> </ul> </li> </ul>
<b>X. Active Interactive Voice Response (IVR) Administration</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ See Telephone Only Survey Administration</li> </ul> </li> </ul>
<b>XI. Data Specifications and Coding</b>	<ul style="list-style-type: none"> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified that Administrative Data Record is to include the supplemental question count</li> <li>○ Clarified discharged patients to nursing facilities are considered ineligible and coded as 3 – Ineligible: Not in eligible population</li> </ul> </li> </ul>
<b>XII. Data Preparation and Submission</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added guidance for survey vendors to work with clients to complete authorizations at least 90 days prior to data submission deadlines</li> <li>○ Added requirement that discharge dates cannot overlap between old and new survey vendors</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified requirement that QualityNet users do not need to be verified in the presence of a Notary Public</li> <li>○ Clarified procedure for notification when QualityNet Security Administrator is leaving hospital/survey vendor</li> </ul> </li> </ul>
<b>XIII. Oversight Activities</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added requirement to complete and submit an Attestation Statement</li> <li>○ Added requirement to submit outgoing envelopes to the HCAHPS Project Team for review</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified HCAHPS-related data files must be retained for a minimum of three years</li> </ul> </li> </ul>

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<b>XIV. Data Reporting</b>	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Updated reporting period table</li> <li>○ Added public reporting of HCAHPS scores is restricted to hospitals with greater than 25 completed surveys in 12-month reporting period</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Updated process for submission of pledge form for suppression by a CAH</li> <li>○ Clarified official HCAHPS scores are reported on the Hospital Compare Web site, and reporting of unofficial scores must include mandatory text in the introduction or executive summary and on each page of the report</li> </ul> </li> </ul>
<b>XV. Exceptions Requests/Discrepancy Reports</b>	<ul style="list-style-type: none"> <li>• Minor wording revisions</li> </ul>
<b>XVI. Data Quality Checks</b>	<ul style="list-style-type: none"> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified hospitals/survey vendors should save both original and processed HCAHPS data files for a minimum of three years</li> </ul> </li> </ul>
Appendices	
<b>Appendices A – F</b> HCAHPS Survey Mail Materials	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Revised Spanish survey (Appendix B)</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified date of discharge in cover letters</li> </ul> </li> </ul>
<b>Appendices G – J</b> HCAHPS Survey Telephone Scripts	<ul style="list-style-type: none"> <li>• <b>New Appendices:</b> <ul style="list-style-type: none"> <li>○ Chinese and Russian translations of the telephone script (Appendices I and J, respectively)</li> </ul> </li> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Added proxy guidance</li> <li>○ Added optional start language</li> <li>○ Added optional identification of data collection contractor in Intro</li> <li>○ Revised Spanish script (Appendix H)</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified date of discharge in scripts</li> </ul> </li> </ul>

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<b>Appendices K – L</b> HCAHPS Survey IVR Scripts	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendices I (English) and J (Spanish)</li> <li>○ Added proxy guidance</li> <li>○ Added optional start language</li> <li>○ Added optional identification of data collection contractor in Intro</li> <li>○ Revised Spanish script (Appendix L)</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified date of discharge in scripts</li> </ul> </li> </ul>
<b>Appendix M</b> Interviewing Guidelines	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix K</li> <li>○ Added proxy guidance</li> </ul> </li> </ul>
<b>Appendix N</b> Frequently Asked Questions (FAQ)	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix L</li> <li>○ Minor wording revisions</li> </ul> </li> </ul>
<b>Appendix O</b> Sample Frame File Layout	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix M</li> <li>○ Minor wording revisions</li> </ul> </li> </ul>
<b>Appendix P</b> Data File Structure Version 3.9	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix N</li> <li>○ Minor wording revisions</li> </ul> </li> </ul>
<b>Appendix Q</b> XML File Specifications Version 3.9	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix O</li> <li>○ Minor wording revisions</li> </ul> </li> </ul>
<b>Appendix R</b> Quality Assurance Plan (QAP) Outline	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix P</li> <li>○ Added requirement to submit outgoing envelopes to the HCAHPS Project Team for review</li> <li>○ Added requirement to describe the disaster recovery plan for conducting ongoing business operations in the event of a disaster</li> </ul> </li> <li>• <b>Emphasis:</b> <ul style="list-style-type: none"> <li>○ Clarified that confidentiality agreements must include language related to HIPAA regulations</li> </ul> </li> </ul>

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<b>Appendices S – U</b> Participation Forms	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Participation Form for SA Hospital – Formerly Appendix Q</li> <li>○ Participation Form for Multisite – Formerly Appendix R</li> <li>○ Participation Form for Survey Vendors – Formerly Appendix S</li> <li>○ Revised forms to align with updates to Minimum Business Requirements</li> </ul> </li> </ul>
<b>Appendix V</b> Exceptions Request Form	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix T</li> <li>○ Added option for Exceptions Request, “Update of List of Applicable Hospitals”</li> </ul> </li> </ul>
<b>Appendix W</b> Discrepancy Report Form	<ul style="list-style-type: none"> <li>• <b>Updates:</b> <ul style="list-style-type: none"> <li>○ Formerly Appendix U</li> <li>○ Added a note to print Discrepancy Report before submission</li> </ul> </li> </ul>
<b>Appendix X</b> Attestation Statement Form	<ul style="list-style-type: none"> <li>• <b>New Appendix</b></li> </ul>
<b>Appendix Y</b> Use of HCAHPS with Other Hospital Inpatient Surveys	<ul style="list-style-type: none"> <li>• <b>New Appendix</b></li> </ul>