

# CAHPS Hospital Survey Podcast Series—Transcript

## Recommended HCAHPS Data Quality Checks

Note: The information covered in this podcast was current at the time of posting. CMS will occasionally update guidelines and calculations.

### *Slide 1-Recommended HCAHPS Data Quality Checks*

Welcome to the CAHPS Hospital Survey Podcast Series. This podcast will review recommended HCAHPS data quality checks.

### *Slide 2-Primary Goal of Data Quality Checks*

The primary goal of HCAHPS data quality checks (QCs) is to ensure the integrity and accuracy of data collected and submitted by HCAHPS survey vendors and self-administering hospitals.

### *Slide 3-Recommended Quality Checks*

CMS suggests two broad data quality check areas. First, maintaining a traceable data trail will improve the validity of collected HCAHPS data. Second, a focus on data processing accuracy will minimize and identify data handling errors that can occur during sampling and preparation of final data files.

### *Slide 4-Traceable Data Trail*

Saving both original and processed HCAHPS data files allows for easier identification of processes that may have caused errors.

Version control, such as naming conventions and rules, will improve accuracy of data files, reports, and software code changes.

Note, that CMS requires that hospitals and survey vendors keep data files for at least three years.

### *Slide 5- Traceable Data Trail, cont'd*

Use of summary tables to track receipt of raw data files is helpful for identification of possible errors by tracking expected patient counts for each file.

This example shows four data files submitted by three different hospitals to a survey vendor.

Notice the second file received for CCN A had fewer patients than the original file.

Including a comment column allows for notes and updates to be recorded as data files are received.

*Slide 6-Data Processing Accuracy*

The next focus for quality checks is ensuring the accuracy of data processing activities by closely following required HCAHPS protocols.

These protocols include quality checks for random sampling, evaluation of break-off surveys and unanswered questions, and use of HCAHPS Data Warehouse reports provided by CMS.

*Slide 7-Data Processing Accuracy, cont'd*

Survey vendors and self-administering hospitals must conduct sampling so that each eligible discharge has a chance of being sampled.

When utilizing the CMS-approved Simple Random Sample or Proportionate Random Sample methodologies, all eligible discharges must have an equal chance of being included in the random sample.

If using the Disproportionate Stratified Random Sample methodology, CMS allows unequal probabilities among eligible discharges within a hospital; however, each individual stratum must contain at least 10 sampled patients per discharge month.

*Slide 8-Data Processing Accuracy, cont'd*

Another useful data quality check is tracking and verifying hospital response rates. Recall, the response rate measures the proportion of eligible and sampled patients that completed the HCAHPS survey. Significant changes in response rates may indicate an error in data processing.

In this example, there is a large increase in response rate in the last month, March 2019. After closer review of the table, it appears there was a large decrease in sampled patients during that month. This change should be investigated and the sample size corrected if an error did occur.

*Slide 9-Data Processing Accuracy, cont'd*

CMS provides automated reports after an HCAHPS Survey Vendor or self-administering hospital submit data to the HCAHPS warehouse. These reports are intended to assist hospitals in verifying that their submission processed accurately.

The Warehouse Submission Reports provide detailed information for each data file submitted.

The Warehouse Feedback Reports are for hospitals to verify if their survey vendors have submitted data on their behalf.

*Slide 10-Data Processing Accuracy, cont'd*

CMS also provides the HCAHPS Review and Correction Report which displays detailed frequencies and percentages for each HCAHPS data element for each discharge month. This report is available within 48 hours after every upload of HCAHPS data files by a survey vendor or self-administering hospital.

Additionally, CMS provides a Review and Correction Period for seven days after the close of the HCAHPS warehouse. During this period, data may be re-submitted to correct or update specific data elements previously submitted for sampled patients.

*Slide 11-Data Processing Accuracy, cont'd*

This slide is an example screenshot from the Review and Correction Report. Notice the detailed counts and percentages shown for the 132 submitted responses to Question 1 for this example hospital. These frequencies and percentages can be verified by the survey vendor or self-administering hospital during the Review and Correction Period.

*Slide 12-Summary of Recommended Data Quality Checks*

In summary, this podcast has reviewed recommended data quality checks to ensure integrity of collected data elements utilized in CMS' HCAHPS score calculations.

Maintaining a traceable data trail includes recording and monitoring data file receipts. Also, original data files must be retained for at least three years and appropriate naming conventions applied.

HCAHPS protocols for random sampling should be followed closely and response rates monitored over time for possible errors during sampling. Finally, CMS provides useful reports from the HCAHPS data warehouse to assist hospitals and survey vendors in verifying data submissions.

*Slide 13- Questions and HCAHPS Technical Support*

Please contact HCAHPS technical assistance at [HCAHPS@hsag.com](mailto:HCAHPS@hsag.com) or 1-888-884-4007 for any questions. For more information about the HCAHPS survey, you can visit the HCAHPS website at: <https://www.hcahponline.org/>.

Thank you for listening to the HCAHPS podcast Recommended HCAHPS Data Quality Checks.

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