

Proposed PY 2018 Clinical Measure

Patient Experience of Care: ICH CAHPS Survey

ICH CAHPS Administration

Measure Description	<p>Percentage of patient responses to multiple testing tools.</p> <p>Composite Score: The proportion of respondents answering each of response options for each of the items summed across the items within a composite to yield the composite measure score. (Nephrologists’ Communication and Caring, Quality of Dialysis Center Care and Operations, Providing Information to Patients)</p> <p>Overall Rating: a summation of responses to the rating items grouped into 3 levels</p> <p>NQF #0258</p>
Exclusions	<ol style="list-style-type: none">1. Facilities treating fewer than 30 eligible in-center hemodialysis adult patients during the “eligibility period,” which is defined as the year prior to the performance period2. Facilities with a CCN open date on or after January 1, 20163. The following patients are excluded in the count of 30 eligible patients:<ol style="list-style-type: none">a) Patients less than 18 years on the last day of the sampling window for the semiannual surveyb) Patients receiving hemodialysis from their current facility for less than 3 monthsc) Patients receiving hospice cared) Patients currently residing in an institution, such as a residential nursing home or other long-term care facility, or a jail or prison
Data Sources	<ol style="list-style-type: none">1. ICH CAHPS2. REMIS, CROWNWeb, and other CMS ESRD administrative data (form 2744 to obtain certification date and facility type)
Additional Information	<ol style="list-style-type: none">1. Facilities are required to register on the https://ichcahps.org website in order to authorize a CMS-approved vendor to administer the survey and submit data on their behalf.2. Facilities are required to administer the survey twice during the performance period, using a CMS-approved vendor.3. Facilities are required to ensure that vendors submit survey data to CMS by the date specified at https://ichcahps.org.4. Facilities that do not administer two surveys during the performance period will receive a score of 0 on the measure.5. Facilities that administer two surveys during the performance period but receive less than 30 completed surveys will not receive a score on the measure.6. Additional specifications may be found at https://ichcahps.org.