

# New Perspectives For CAHPS Performance

**Presented By:**

*Amy Weiser, Managing Director of Stars and HEDIS Operations - **Advantasure***





THE RISE  
ASSOCIATION

We are a network of health care professionals addressing the challenges posed by the emerging landscape of value-based care and government health care reform.

## OUR MISSION

Our mission is to provide a community for like-minded professionals to come together for networking, education, and industry collaboration to stay ahead and advance their careers.

ONE ASSOCIATION  
**THREE COMMUNITIES**



**LEARN MORE AT THE [RISEHEALTH.ORG/MEMBERSHIP](https://risehealth.org/membership)**

# Discussion Board

[Dashboard](#) [Log out](#)

Select your community

Quality & Revenue

Search posts

SEARCH

## Risk Adjustment

SEE ALL

Post

Replies

**July 15, 2021 Meeting Notes: HCC Coding User Group #3**  
started by Tracy Anderson 10 days ago

22

**Current Trends and Topics: What keeps you up at night?**  
started by Marina Adamsky 14 days ago

8

**Strategies for RADV Audit Success with a Remote Team**  
started by Tim Hart 29 days ago

4

NEW POST

## Quality & Stars

SEE ALL

Post

Replies

**Breaking news: CMS finalizes telehealth, ESRD changes to Medicare Advantage**  
started by Ilene MacDonald 440 days ago

2

**The impact of COVID-19 on Quality and Stars**  
started by Ilene MacDonald 489 days ago

12

ASK YOUR QUESTIONS IN OUR DISCUSSION BOARD

# IN THIS PRESENTATION YOU'LL LEARN TO:

---

- Identify and leverage data across business units for improved CAHPS performance
- Understand your member population and identify areas of member dissatisfaction
- Implement controls across business units to level-set the member experience

# HISTORY OF THE CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS

---

Agency for Healthcare Research and Quality(AHRQ) developed this evidence-based survey

There are multiple types of CAHPS surveys that assess patients' experiences with providers, care delivered in different settings, health conditions, and health plans

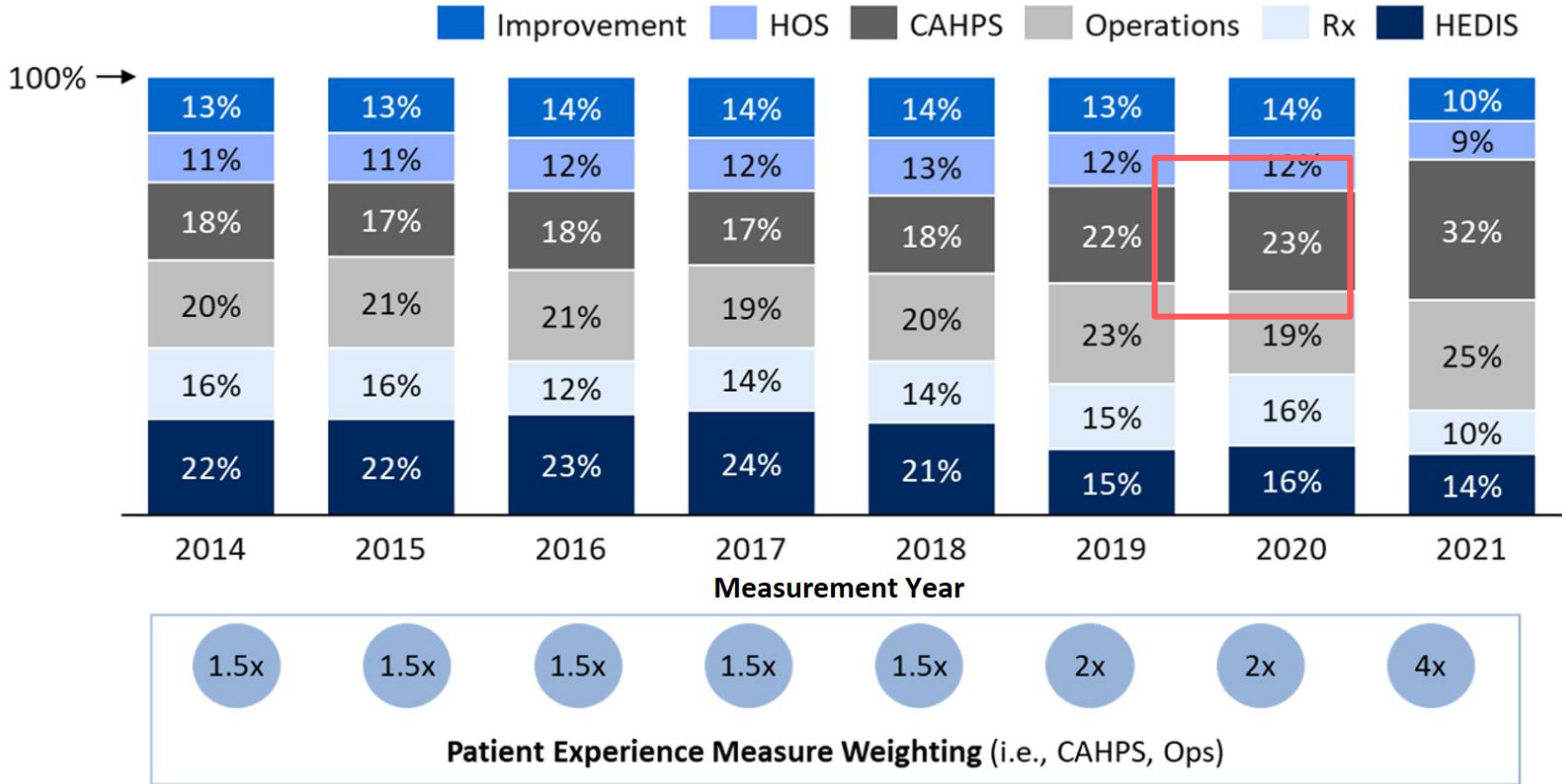
The CAHPS program was launched in 1995

The Healthlan survey was launched in 1997

# INCREASING IMPORTANCE OF CAHPS

CMS has placed an increasingly higher importance on the member experience and has shifted the contribution to the Star program by increasing the weight of the measures in the Star program over the past few years.

### Star Rating Contribution by Measure Category



# UNDERSTAND YOUR POPULATION

## **Member 1**

Regular PCP visits, up to date preventive screenings & average out of pocket costs

### **Overall Rating of the Plan – 6**

(The last time the member went to their PCP, their claim was denied and it took multiple calls to customer service and their provider to resolved)

## **Member 3**

Does not see a PCP regularly, uses the ER, has lower than average out of pocket costs

### **Overall Rating the Plan - 9**

(Although not a high healthcare consumer, appreciates their coverage when they do need to use it)

## **Member 2**

Regular PCP visits, up to date preventive screenings & average out of pocket costs

### **Overall Rating of the Plan – 10**

(Member appreciates the incentive programs to stay healthy and that preventive screenings are offered at no cost)

## **Member 4**

Does not see a PCP regularly, uses the ER, has a lower than average out of pocket costs

### **Overall Rating of the Plan – 3**

(The one medication the member is taking increased \$50 per month and the member is on a fixed budget and is concerned about being able to afford their medication)





# CREATING A BEST-IN-CLASS MEMBER EXPERIENCE



## Communication Essentials:

- Build trust *before* you have an ask/call to action
- Respect contact preferences: Gather at enrollment, confirm at customer service
- Remember that social isolation continues to challenge seniors
- Bonus: Text/E-mail prior to a mailing to add validity/trust, building “anticipation”

## Provider-Facing:

- Wide range of CAHPS knowledge
- Educate/communicate importance
- Present opportunities- readmits, grievances
- Actionable interventions (i.e. modify room setup)
- Message to Provider: “The plan is here for you, what do you need to best care for our patients?”

## Messaging Benefits:

- Align plan benefits with real life goals (i.e. being healthy for family events, getting better sleep). Remember member goals at customer service!
- Benefits to remove barriers, not solve the problems themselves i.e. Incentives, transportation
- Empower!
- Remember: People’s attention spans are short!

## Member-Facing:

- Encounter-based short surveys (i.e., after PCP visit)
  - i.e. Many recent visits? Ask about Care Coordination!
- Post call surveys
- Team to assist with escalated issues (multi-calls, etc)
- Influence *this moment*, as these drive CAHPS scores!
- Under-engaged members are generally not informed about processes

# WAYS TO LEVEL SET MEMBER EXPERIENCE

## Member Engagement Approaches

### “Just in Time” CAHPS Outreaches

- Target: Likely Negative CAHPS responders
  - *Content*: Personalized scripts based on specific issues (i.e. access), and member engagement profile
- Target: Likely Positive CAHPS responders
  - *Content*: Encourage survey response
- Method: Live Calls (Issue Resolution), Mailers (Response Promotion)
- Timing: Q1 before CAHPS survey administration period

## Integrated CAHPS Outreaches

- Method: Reinforce existing campaigns (i.e. vaccine education, HEDIS gap closure, retention campaigns) with added CAHPS analytics insights
- Timing: Beginning in May following in-depth CAHPS analysis

## Under Engaged vs Engaged

- Under-engaged members were generally not informed about plan benefits or expected processes
- Engaged members took opportunity to get help with questions/access
- Implement a proactive approach using the data you have gathered to prevent issues from escalating

## Start at the point of Sale

The sales team is part of your member experience team

- Members trust their sales agent
- If there's an issue, members will likely go to the agent
- Ensure agents know your benefits, can explain them & confirm providers are in the network accurately
- Provide a method for sales to escalate issues to the health plan
- Ask for their input on improvements

# IT'S MORE THAN A MEMBER EXPERIENCE

---

## **The Impact: Multi-Faceted Star Ratings Success**

CAHPS Responses drive performance in other categories

- 51% of negative CAHPS responders report 1 or more HOS issues
- Members with CAHPS issues demonstrate compounding higher rates of avoidable ED utilization/hospitalizations, lower medication adherence

# DATA, DATA, DATA

---

## Claims

- How are you processing- fast/slow?
- Consistently deny and then approve
- What are your competitors doing with prior authorizations that you are not?
- Bonus: provide a method for your members to see claims on line, ensure your EOBs are member friendly

## Appeals & Grievances :

- Are there trends in appeals for items that should have been approved?
- Are items being denied and approved after appeal consistently?
- Do you communicate to the member the decisions or are they calling in to find that information
- Are you explaining the process to the member

## CTMs:

- Review this information
- Where are the trends- really look at it
- Are you seeing issues YOY in the same months? What is happening at that time?
- Issues with sales? Are you training them on your benefits?

## Surveys

- Surveys can be quick just a few questions
- Look at the info
- Do a mock survey and analyze the data to create personas of who is and is not likely to be satisfied
- Ask your member advisory council for info- and if you do not have a MAC create one!

# OTHER STRATEGIES

---



## **Leverage Your Other Data**

You already know so much about your members—health history, provider preferences, Rx, and demographics

## **Competitive Analysis**

Gather intelligence on competitor outreach both traditional and digital to develop a picture of the competitors strategy and tactics.

## **Early Outreach**

People aren't retiring when the clock strikes 65. Talk to your members early and routinely to prepare them for the health plan transition



## KEY TAKEAWAYS

---

- Member Experience and the importance of connecting with members has surpassed the historical clinical HEDIS chart chase days in affecting Star Ratings
- CAHPS responses drive results in other areas - HOS, unavoidable ER utilization, low med adherence
- You have data- and more than you think. Look at it, compare it across the different sources for trends

**THANK YOU**



**RISE**