

IMPROVING CONSUMER UNDERSTANDING OF HOME COMPARE QUALITY DATA

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ABSTRACT

The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) measures patients' perceptions of clinician behavior to determine if a high-quality hospitalization experience has occurred. The Quality of Patient Care Star Ratings is based on 9 of 27 measures from the HCAHPS to make it easier for consumers to choose healthcare providers. We suggest that the Quality of Patient Care Star Ratings offer little value to consumers and may reflect a general trend to improve specific aspects of consumer healthcare and increases in Medicare reimbursement.

INTRODUCTION

Patient-centered care is the focus of government, healthcare leaders, and major insurance plans in an effort to improve patient outcomes and lower healthcare costs. This trend began more than 10 years ago, but has expanded considerably with a focus of new payment models that pay physicians and hospitals based on clinical outcomes and patient satisfaction. Healthcare administrators are increasingly placing great importance on the patient visit and the interaction with the care givers and support staff. The Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) measures patients' perceptions of clinician behavior to determine if a high-quality hospitalization experience has occurred [1]. This includes how well care givers communicate with and engage patients, care choices patients are given, patient involvement in decision-making, and the quality of overall care. For many reasons, HCAHPS, is becoming the national standard on evaluating the patient experience.

As the patient-centered movement has gained momentum, the government created the Quality of Patient Care Star Ratings based on 9 of 27 measures from the HCAHPS to make it easier for consumers to choose healthcare providers. The concept is based on summary scored HCAHPS measures in such a way that a star rating from 1 to 5 would be given. This would make it easier for consumers to choose providers

and provide for a competition between providers in order to attract new consumers and retain existing consumers. Despite criticism of patient-satisfaction measures, patient-experience surveys that are designed and administered appropriately, the HCAHPS does provide robust measures of quality health care and offers insight into a patient's perception of quality care experience just like any other customer satisfaction survey found in business [2]. We suggest however, that the summary HCAHPS scores used to create the star measures have little value and that more quality measures should be included to increase the variance of the ratings.

BACKGROUND

Patient-centered care has garnered new attention, as it is linked to health system reimbursement. The background for patient-centered care has 10 year history indicating that the patient experience matters [3]. HCAHPS measures are increasingly being used to routinely monitor the quality of care. With the increasing attention on such measures, hospital managers are seeking ways to systematically improve patient experience across hospital departments, in particular where outcomes are used for public reporting or reimbursement [4]. This focus on quality and successful patient outcomes provides an incentive for physicians and other healthcare professionals to make five-star service and everyday thing [5]. The government has created incentives for providers and health care organizations to inform patients about their healthcare treatment options and incorporate a patients' goals into a patients overall treatment. Patient surveys are needed to monitor the quality of this process. Healthcare information technology can help by collecting information from patients about their symptoms, how well they understand their options, and what is important to them, and sharing that information with providers [6].

Measurement of patient centeredness is described as a critical outcome for quality of care, and quality improvement approaches, incentive programs, and payment reform initiatives are all tied to patient-centered measures that are either in use or to be developed [7]. A number of studies borrow questions from the CAHPS in an effort to collect more specific information from healthcare departments or clinics [8]. Consumer Assessment of Healthcare Providers and Systems (CAHPS) validity is well documented [9]. Unfortunately, physicians are not currently directly rated by any specific patient survey [10]. The HCAHPS has been refined and tested over a 4-year period by the government. In an independent study separate from the government, Item-item correlations for 22 items on the survey ranged from .52 to .92, and the Cronbach's alpha coefficient was .87. Construct and predictive validity were also adequate. The HCAHPS survey has been test in several languages and is recommended for use in hospitals in Lebanon and other Middle Eastern countries to facilitate benchmarking and quality improvement [11, 12].

Adhering to the HCAHPS can earn big bonuses [13]. To qualify for incentive payouts, hospital executives need to look intently at ways to boost HCAHPS scores [14]. Conversely, hospitals face reductions in reimbursement from Medicare and Medicaid if they do not meet national benchmarks on the two global measures of care on the HCAHPS [15]. Hospital quality metrics now reflect patient satisfaction as measured by HCAHPS surveys. Understanding these metrics and drivers in the future will be integral in providing quality care. Thus, hospitals are improving the inpatient care experience. As a result, the HCAHPS is showing modest but meaningful gains [16].

HOSPITAL CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS (HCAHPS)

The Quality of Patient Care Star Ratings were first published in July, 2015, The Quality of Patient Care Star Rating is calculated using 9 of the quality measures currently reported to the Medicare Home Health Compare database on the [HTTPS://www.medicare.gov/HomehealthCompare](https://www.medicare.gov/HomehealthCompare) website. The 9 measures used in the Quality of patient Care Star Ratings are shown in Figure 1:

Process Measures	Outcome Measures
1. Timely Initiation of care.	4. Improvement in ambulation
2. Drug education on all medications provided to patient/Care Giver	5. Improvement in bed transferring
3. Influenza immunization received for current flu season.	6. Improvement in bathing
	7. Improvement in pain interfering with activity
	8. Improvement in shortness of breath
	9. Acute care hospitalization

Figure 1

There is a very specific process for calculating each star rating determined by the government statisticians. Briefly, for each of the 9 quality measures, all scores are sorted high to low and divided into approximately 10 equal groups. Each score is then assigned an initial ranking from 0.5 to 5.0 in 0.5 increments. The initial decile rating is adjusted according to a statistical test of difference between the care givers individual score and the national median score. If an individual score is anything other than 2.5 or 3.0 (the middle two decile categories), and the statistical test shows a p-value greater than 0.050 (indicating a “NO” for being significantly different from the national median), the initial rating is adjusted to the next decile closer to the middle categories of 2.5 and 3.0. The adjusted ratings are averaged across the 9 measures and rounded to the nearest 0.5. An overall Quality of Patient Care Star Rating is then assigned to your Home Health Average incorporating an additional adjustment made so that the ratings will range between 1.0 to 5.0 in half-star increments.

RESULTS

Figure 2 shows the summary data for all state data. Figure 3 shows the regression equation that uses the 9 measures summary score to predict the star rating. Figure 4 shows the R and R-squared values. The summary values for the star ratings shown in Figure 2 only vary from 2.5 to 3.5. The R –Squared suggests much of the variance is unexplained. Figure 5 is a scatter plot that plots the star rating versus the summary average score. There is only one 2.5 value which even skews the data even more.

STATE DATA

SUMMARY Measures	Quality of Patient Care Star Rating Average Score	Quality of patient Care Star Rating Summary Score	Quality of patient Care Star Rating Summary Score 27 measures	Quality of Patient Care Star Rating Average Score 27 Measures
Average Score	59.9	599.0	2300.3	100.0
Standard Deviation	2.08	20.85	51.82	2.25

Figure 2

	Mean	Std. Deviation	N
Quality of Patient Care Star Rating	3.302	.2657	53
Summary Average Score	66.1883	2.31753	53

Figure 3

Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
State Data	.702 ^a	.492	.482	.1912

- a. Predictors: (Constant), Summary_Average_Score
 b. Dependent Variable: Quality of Patient Care Star Rating

Figure 4

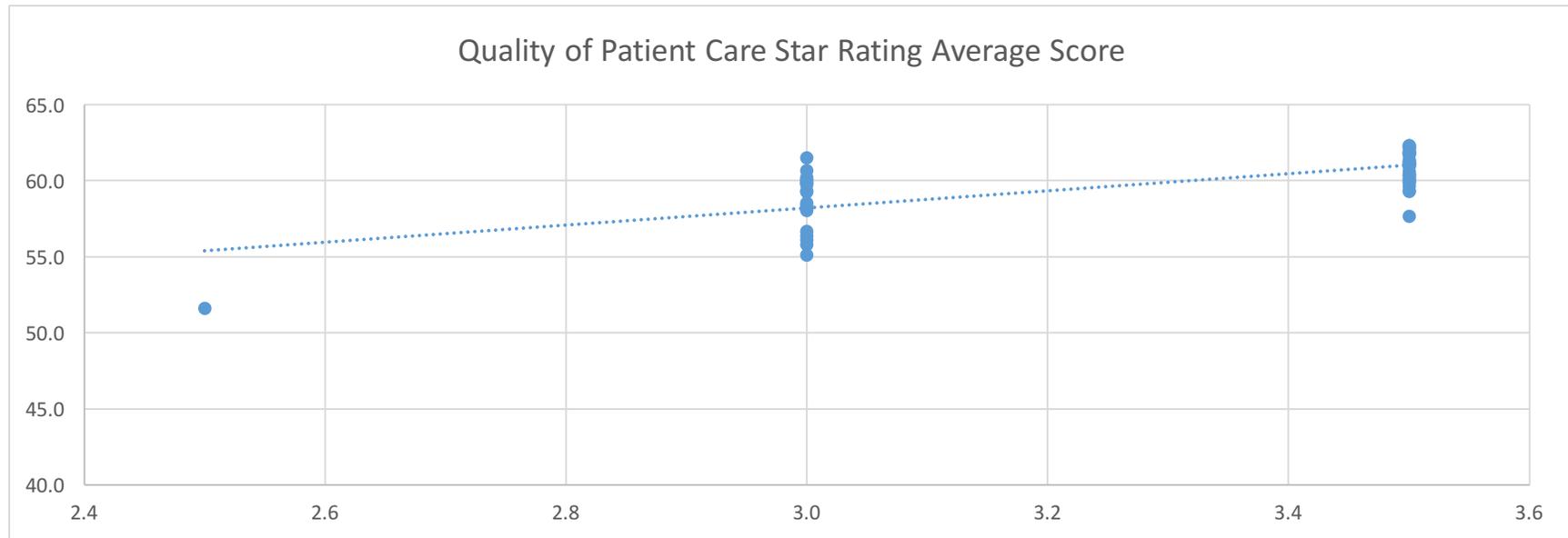


Figure 5

CONCLUSION

The small variance of the star ratings centered on 3.0 suggest the ratings will make little or no difference to consumers. One care provider is very similar to the next. Future, analysis will plot additional summary scores and averages based on additional measures.

REFERENCES

- [1] Capko J. The Patient-Centered Movement. *The Journal of Medical Practice Management : MPM*, 2014,29(4),238-42.
- [2] Manary MPMSE, Boulding WP, Staelin RP, Glickman SWMDMBA. The Patient Experience and Health Outcomes. *The New England Journal of Medicine*, 2013,368(3),201-3.
- [3] Bleich MR. Patient-Centered Leadership. *The Journal of Continuing Education in Nursing*, 2015,46(7),297-8.
- [4] Groene O, Arah OA, Klazinga NS, Wagner C, Bartels PD, Kristensen S, et al. Patient Experience Shows Little Relationship with Hospital Quality Management Strategies. *PLoS One*, 2015,10(7).
- [5] Saxton JWE, Finkelstein MME. Use HCAHPS as a Motivator to Reenergize Your Five-Star Program, and Make It Personal. *The Journal of Medical Practice Management : MPM*, 2012,27(6),365-70.

- [6] Fowler FJ, Jr., Levin CA, Sepucha KR. Informing And Involving Patients To Improve The Quality Of Medical Decisions. *Health Affairs*, 2011,30(4),699-706.
- [7] Mroz TM, Pitonyak JS, Fogelberg D, Leland NECcahrKifotTAJoOT, 69(5), 1-8. . Client centeredness and health reform: Key issues for occupational therapy. *The American Journal of Occupational Therapy*, 2015,69(5),1-8.
- [8] Liem RI, O'suoji C, Kingsberry PS, Pelligra SA, Kwon S, Mason M, et al. Access to patient-centered medical homes in children with sickle cell disease. *Maternal and Child Health Journal*, 2014,18(8),1854-62.
- [9] Leon SFD, Silfen SL, Wang JJ, Kamara TS, Wu WY, Shih SC. Patient Experiences at Primary Care Practices Using Electronic Health Records. *Medical Practices Journal*, 2012,2012(November/December),169-76.
- [10] Frost C, Mesfin A. Online Reviews of Orthopedic Surgeons: An Emerging Trend. *Orthopedics*, 2015,38(4),e257-e62.
- [11] Al Kouatly IRNMPH, Al Hassan MMRNMSN, Yazbik-Doumit NP, Soubra MMD, Malak SBS, Badr LKRNPf. Psychometric Testing of a Comprehensive Patient Satisfaction Survey in Arabic. *Journal of Nursing Measurement*, 2015,23(2),204-23.
- [12] Stanowski ACDHAF, Simpson KD, White AP, Lynch JF. Pay for Performance: Are Hospitals Becoming More Efficient in Improving Their Patient Experience?/PRACTITIONER APPLICATION. *Journal of Healthcare Management*, 2015,60(4),268-86.
- [13] Luallin MD. Great Patient Experiences Can Earn Big Payer Bonuses. *The Journal of Medical Practice Management : MPM*, 2014,30(3),156-9.
- [14] Cliff BRNPf. Excellence in Patient Satisfaction Within a Patient-Centered Culture. *Journal of Healthcare Management*, 2012,57(3),157-9.
- [15] Rollins JAPRN. The 12-Hour Shift. *Pediatric Nursing*, 2015,41(4),162-,4.
- [16] Elliott MN, Lehrman WG, Goldstein EH, Giordano LA, Beckett MK, Cohea CW, et al. Hospital Survey Shows Improvements In Patient Experience. *Health Affairs*, 2010,29(11),2061-7.