

Calculating CAHPS® Hospice Survey Top-Box Scores

This document summarizes the steps that the Centers for Medicare & Medicaid Services (CMS) uses to calculate top-box CAHPS Hospice Survey measure scores.

Step 1: Data Submission

A hospice's survey vendor submits CAHPS Hospice Survey data to the CAHPS Hospice Survey Data Warehouse.

Step 2: Data Cleaning

CMS cleans the submitted CAHPS Hospice Survey data by removing incomplete surveys and surveys from ineligible respondents. Complete details regarding survey eligibility, as well as the definition of a "completed" survey, are located in the Quality Assurance Guidelines, available at: <http://www.hospicecahpsurvey.org/en/quality-assurance-guidelines/>. Additionally, if a response to a screener question indicates that the respondent was not eligible to answer subsequent, "dependent" question(s), responses are set to missing for questions for the dependent questions. For example, if the response to Question 15, "While your family member was in hospice care, did he or she have any pain?" is "No," responses for Questions 16 and 17 are set to missing, even if the respondent provided responses to those questions.

Step 3: Calculating Top-Box Scores

CMS calculates the "top-box" score for the questions in the eight CAHPS Hospice Survey measures. The eight measures, and the questions that compose them, are shown in Appendix A of this document.

If a survey respondent does not respond to a question for which he or she is eligible, a score is not calculated for that respondent for that question. With one exception, all responses to questions for which a respondent was eligible are used in the score calculation. The exception is the Getting Hospice Care Training measure; for this measure, the measure score is calculated only among those respondents who indicated that their family member received hospice care at home or in an assisted living facility.¹

For all questions, the "top-box" score for each response is calculated as a "100" if the most positive response category(ies) for that question is selected or a "0" otherwise.

¹ In the CAHPS Hospice Survey Data Public Use File issued by CMS in December 2016, the national score for Getting Hospice Care Training includes respondents whose family members who received hospice care in all settings.

Different questions have different response options. The most positive response category(ies) are defined as follows:

- For questions using a “Never/Sometimes/Usually/Always” response scale, the most positive response category is “Always.”
 - The exception is a question for which “Never” is the most positive response.
 - Question 10. While your family member was in hospice care, how often did anyone from the hospice team give you confusing or contradictory information about your family member’s condition or care?
- For questions using a “Yes, definitely/Yes, somewhat/No” response scale, the most positive response category is “Yes, definitely.”
- For questions using a “Too Little/Right Amount/Too Much” response scale, the most positive response category is “Right Amount.”
- The most positive response categories for the Rating of Hospice question are 9 or 10 (on a scale of 0 to 10, where 10 is the “Best Hospice Care Possible”).
- The most positive response category for the Willingness to Recommend question is “Definitely Yes” (on a scale of “Definitely No/Probably No/Probably Yes/Definitely Yes”).

To calculate the unadjusted “top-box” score for each hospice, the numerator is the number of respondents who selected the most positive response category(ies) for that question and the denominator is the number of total respondents to that question. However, official scores are adjusted for mode of survey administration and case mix (see steps 4 and 5).

Step 4: Adjusting for Mode of Survey Administration

CMS applies survey mode adjustment to adjust responses for the effect of mode of survey administration.

Hospices participating in national implementation of the CAHPS Hospice Survey may choose from one of three modes of survey administration: Mail Only, Telephone Only, or Mixed Mode (mail with telephone follow-up). CMS conducted a randomized mode experiment in 2015 to assess the effect of mode on response rates and response patterns, and to determine whether survey mode adjustments were needed to fairly compare CAHPS Hospice Survey results for hospices that used different modes of data collection. The experiment found significant effects of survey mode on responses to several outcomes; therefore, to ensure fair comparisons across hospices, CAHPS Hospice Survey scores must be adjusted for mode of survey administration, which can affect scores but is not related to quality of hospice care.

In making mode adjustments, it is necessary to choose one mode as a reference point. One can then interpret all adjusted data from all modes as if they had been surveyed in the reference mode. For the CAHPS Hospice Survey, the Telephone Only mode is used as the reference mode; thus, surveys conducted using Telephone Only mode are not adjusted further for mode. Surveys conducted using the other two modes (Mail Only and Mixed mode) are adjusted according to the difference in mode effects between that mode and the Telephone Only mode, as estimated through linear regression in the CAHPS

Hospice Survey Mode Experiment. For Mixed mode, there is a single adjustment regardless of whether an individual responded by mail or phone (i.e., the adjustment is for the overall administration mode, not the mode in which the individual responds).

The mode effects for each question are the coefficients for the mode dummy variables in regression models with two mode dummy variables, hospice dummy variables, and case-mix adjustors. These coefficients estimate the remaining difference between Telephone Only mode and each of the other modes after case-mix adjustment. The mode adjustments are equal to -1 times the coefficients. The use of Telephone Only mode as the reference mode does not indicate that this mode is preferable to other approved modes in any way.

Caregivers generally provided more positive responses in the Mail Only mode than in the Telephone Only mode. Appendix B of this document presents the mode adjustments derived from the CAHPS Hospice Survey Mode Experiment for each CAHPS Hospice Survey question relative to the Telephone Only mode. As an example, suppose a respondent surveyed using the Mail Only mode selects “Definitely Yes” for the Willingness to Recommend question and thus, is scored as “100.” This score would be adjusted to 99.47% (i.e., 100% - 0.53%) in order to account for the fact that 99.47% is the corresponding expected score for that question had the survey been conducted in Telephone Only mode.

Step 5: Adjusting for Case Mix

To ensure that comparisons between hospices reflect differences in performance rather than differences in patient and/or caregiver characteristics, CMS adjusts responses for “case mix” (i.e., variations of such characteristics across hospices). The case-mix adjustment model includes the following variables:

- response percentile (calculated by ranking lag time—that is, days between death and survey response—among respondents for each hospice in each month, then dividing by total sample size)
- decedent age
- payer for hospice care
- primary diagnosis
- length of final episode of hospice care
- respondent age
- respondent education
- relationship of decedent to caregiver
- language

The CAHPS Hospice Survey website (www.hospicecahpsurvey.org/en/scoring-and-analysis) presents more information regarding case-mix adjustment, including the case-mix adjustment factors for each CAHPS Hospice Survey measure for each quarter.

Step 6: Calculating Composite Measure Scores for Each Hospice

Steps 1 through 5 result in mode- and case-mix adjusted hospice-level scores for each question. For single-question measures, the hospice-level measure score is simply equal to the adjusted question score calculated in Step 5. For multi-question measures (i.e., composite measures), the hospice-level measure score is calculated as the average of the hospice-level question scores for the questions that compose the measure.

Step 7: Calculating Mean Scores for Each Hospice and for All Hospices Nationwide

Steps 1 through 6 are conducted separately for each of the quarters of data included in a given reporting period.

For each CAHPS Hospice Survey measure, CMS calculates a mean score for each hospice using a weighted average of scores across all quarters of data in the reporting period. Specifically, for each hospice, each quarter is weighted according to the number of eligible decedents/caregivers. CMS also calculates a national average for each measure in the reporting period by averaging measure scores across all hospices that had a minimum of 30 completed questionnaires during that reporting period.

Appendix A. CAHPS Hospice Survey Measures and Questions

Composite and question

Hospice Team Communication

How often did the hospice team listen carefully to you when you talked with them about problems with your family member's hospice care?

While your family member was in hospice care, how often did the hospice team listen carefully to you?

While your family member was in hospice care, how often did the hospice team explain things in a way that was easy to understand?

While your family member was in hospice care, how often did the hospice team keep you informed about your family member's condition?

While your family member was in hospice care, how often did the hospice team keep you informed about when they would arrive to care for your family member?

While your family member was in hospice care, how often did anyone from the hospice team give you confusing or contradictory information about your family member's condition or care?

Getting Timely Care

While your family member was in hospice care, when you or your family member asked for help from the hospice team, how often did you get help as soon as you needed it?

How often did you get the help you needed from the hospice team during evenings, weekends, or holidays?

Treating Family Member with Respect

While your family member was in hospice care, how often did the hospice team treat your family member with dignity and respect?

While your family member was in hospice care, how often did you feel that the hospice team really cared about your family member?

Getting Emotional and Religious Support

In the weeks after your family member died, how much emotional support did you get from the hospice team?

While your family member was in hospice care, how much emotional support did you get from the hospice team?

Support for religious or spiritual beliefs includes talking, praying, quiet time, or other ways of meeting your religious or spiritual needs. While your family member was in hospice care, how much support for your religious and spiritual beliefs did you get from the hospice team?

Getting Help for Symptoms

How often did your family member receive the help he or she needed from the hospice team for feelings of anxiety or sadness?

How often did your family member get the help he or she needed for trouble with constipation?

How often did your family member get the help he or she needed for trouble breathing?

Did your family member get as much help with pain as he or she needed?

Getting Hospice Care Training

Did the hospice team give you the training you needed about how to help your family member if he or she had trouble breathing?

Did the hospice team give you the training you needed about what side effects to watch for from pain medicine?

Did the hospice team give you the training you needed about what to do if your family member became restless or agitated?

Did the hospice team give you the training you needed about if and when to give more pain medicine to your family member?

Side effects of pain medicine include things like sleepiness. Did any member of the hospice team discuss side effects of pain medicine with you or your family member?

Rating of Hospice

Using any number from 0 to 10, where 0 is the worst hospice care possible and 10 is the best hospice care possible, what number would you use to rate your family member's hospice care?

Willingness to Recommend

Would you recommend this hospice to your friends and family?

Appendix B. Mode Adjustments (Telephone Only as Reference Mode)

Survey Question	Survey Mode	Mode Adjustment
How often did you get the help you needed from the hospice team during evenings, weekends, or holidays?	Mixed	1.36
	Mail	1.14
While your family member was in hospice care, how often did the hospice team keep you informed about when they would arrive to care for your family member?	Mixed	2.04
	Mail	2.04
While your family member was in hospice care, when you or your family member asked for help from the hospice team, how often did you get help as soon as you needed it?	Mixed	-0.02
	Mail	0.10
While your family member was in hospice care, how often did the hospice team explain things in a way that was easy to understand?	Mixed	-0.78
	Mail	-2.20
While your family member was in hospice care, how often did the hospice team keep you informed about your family member's condition?	Mixed	-0.22
	Mail	-2.32
While your family member was in hospice care, how often did anyone from the hospice team give you confusing or contradictory information about your family member's condition or care?	Mixed	-2.06
	Mail	-2.77
While your family member was in hospice care, how often did the hospice team treat your family member with dignity and respect?	Mixed	-1.38
	Mail	-1.73
While your family member was in hospice care, how often did you feel that the hospice team really cared about your family member?	Mixed	-0.40
	Mail	-0.38
How often did the hospice team listen carefully to you when you talked with them about problems with your family member's hospice care?	Mixed	-3.74
	Mail	-3.95
Did your family member get as much help with pain as he or she needed?	Mixed	-1.17
	Mail	-0.15
Side effects of pain medicine include things like sleepiness. Did any member of the hospice team discuss side effects of pain medicine with you or your family member?	Mixed	-2.38
	Mail	-0.25
Did the hospice team give you the training you needed about what side effects to watch for from pain medicine?	Mixed	-2.71
	Mail	-4.13
Did the hospice team give you the training you needed about if and when to give more pain medicine to your family member?	Mixed	-0.21
	Mail	-1.12
How often did your family member get the help he or she needed for trouble breathing?	Mixed	1.28
	Mail	-0.83
Did the hospice team give you the training you needed about how to help your family member if he or she had trouble breathing?	Mixed	1.26
	Mail	-3.46
How often did your family member get the help he or she needed for trouble with constipation?	Mixed	-0.39
	Mail	-0.97
How often did your family member receive the help he or she needed from the hospice team for feelings of anxiety or sadness?	Mixed	-2.38
	Mail	-4.24
Did the hospice team give you the training you needed about what to do if your family member became restless or agitated?	Mixed	-3.26
	Mail	-5.53

Survey Question	Survey Mode	Mode Adjustment
While your family member was in hospice care, how often did the hospice team listen carefully to you?	Mixed	-1.72
	Mail	-2.27
Support for religious or spiritual beliefs includes talking, praying, quiet time, or other ways of meeting your religious or spiritual needs. While your family member was in hospice care, how much support for your religious and spiritual beliefs did you get from the hospice team?	Mixed	-2.72
	Mail	-3.67
While your family member was in hospice care, how much emotional support did you get from the hospice team?	Mixed	-0.91
	Mail	-1.09
In the weeks after your family member died, how much emotional support did you get from the hospice team?	Mixed	-3.18
	Mail	-3.24
Using any number from 0 to 10, where 0 is the worst hospice care possible and 10 is the best hospice care possible, what number would you use to rate your family member's hospice care?	Mixed	-2.76
	Mail	-3.89
Would you recommend this hospice to your friends and family?	Mixed	-1.28
	Mail	-0.53