HTPP Year 4: HCAHPS, Staff always explained medicines (NQF 0166)

Measure Basic Information

To support effective care transitions through improvements in internal customer service and quality related activities, this measure uses patient survey data to measure patients’ hospital care experiences. The survey asks patients who were given a medication that they had not taken before how often staff explained the medication (on a scale of never, sometimes, usually, or always). 'Explained' means that before the medication was administered to the patient hospital staff informed the patient what the medication was for and what side effects the patient may experience.

Name and date of specifications used: NQF 0166.

URL of Specifications: www.hcahpsonline.org/Files/QAG_V10_0_2015.pdf

Measure Type:

HEDIS □ Joint Commission □ Survey ■ Other □ Specify:

Data Source 1: Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Survey, administered by hospitals (some may use a vendor). OAHHS will collect responses from the hospitals and report to OHA.

Measurement Period:


Note: This measure is based on HCAHPS surveys for patients who were discharged during the measurement year (versus surveys collected during the measurement year).

Benchmark: National 90th percentile (73.0%, April / May 2016) 2

Improvement Target: Minnesota method with a 2 percentage point floor 3

1 OHA reserves the right to contact hospitals directly or through OAHHS with additional questions about data submitted as part of the program. Hospitals must be able to provide documentation of data submitted should it be requested.


3 Information on improvement target calculations can be found in the ‘Hospital Improvement Target Brief’, here: http://www.oregon.gov/oha/Pages/Hospital-Baseline-Data.aspx.
**Equation:** The equation used is per CMS guidelines, and is the (1) rate for each individual question comprising the composite, and then (2) the average of these rates (see below for calculation details).

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**Measure Details**

**HCAHPS survey sample:** A random sample of adult patients of all payer types and across medical conditions between 48 hours and six weeks after discharge that meet the following criteria:

- 18 years or older at the time of admission
- At least one overnight stay in the hospital as an inpatient
- Non-psychiatric MS-DRG/principal diagnosis at discharge
- Alive at the time of discharge

The following are excluded from the survey sample:

- Patients discharged to hospice care
- Patients discharged to nursing homes and skilled nursing facilities
- Court/law enforcement patients (i.e., prisoners); this does not include patients residing in halfway houses
- Patients with a foreign home address (excluding U.S. territories—Virgin Islands, Puerto Rico, and Northern Mariana Islands)
- “No-Publicity” patients - A patient who requests at admission that the hospital: (1) not reveal that he or she is a patient; and/or (2) not survey him or her.
- Patients who are excluded because of rules or regulations of the state in which the hospital is located

**Calculation Details and Measure Requirements:** Per CMS guidance (see [http://www.hcahpsonline.org/Files/Calculation%20of%20HCAHPS%20Scores.pdf](http://www.hcahpsonline.org/Files/Calculation%20of%20HCAHPS%20Scores.pdf)), the *HCAHPS, Staff gave patients discharge information* measure is the **average of two values**, outlined in steps 1-3:

1. **Percentage of patients who responded “always” on question #16 of the HCAHPS Survey:**

   *Question 16: Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?*

   **Data elements required denominator:** Number of adult patients in survey sample with valid responses to question 16 of questionnaire.
Required exclusions for denominator: Those with invalid responses to question 16 of questionnaire.

Deviations from cited specifications for denominator: None.

Data elements required numerator: Number of patients who responded “always” on question 16 of the survey.

Required exclusions for numerator: None.

Deviations from cited specifications for numerator: None

2. Percentage of patients who responded “always” on question #17 of the HCAHPS Survey:

   Question 17: Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?

   Data elements required denominator: Number of adult patients in survey sample with valid responses to question 17 of questionnaire.

   Required exclusions for denominator: Those with invalid responses to question 17 of questionnaire.

   Deviations from cited specifications for denominator: None.

   Data elements required numerator: Number of patients who responded “always” on question 17 of the survey.

   Required exclusions for numerator: None.

   Deviations from cited specifications for numerator: None

3. Average of Composite Element Rates

   The CMS methodology indicates that the rates from the above calculations then be averaged, as below:

   \[
   \text{HCAHPS: Explained medicines} = \frac{Q16 \text{‘Always’}}{Q16 \text{‘Total’}} + \frac{Q17 \text{‘Always’}}{Q17 \text{‘Total’}}
   \]

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1. Hospital A value #1

**Question 16: Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?**

| Count 'Never' | 3 |
| Count 'Sometimes' | 7 |
| Count 'Usually' | 27 |
| Count 'Always' | 72 |
| Count Total | 109 |

Percentage of patients who responded ‘always’ to Question 16: 72/109 = 66.1%

2. Hospital A value #2

**Question 17: Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?**

| Count 'Never' | 5 |
| Count 'Sometimes' | 12 |
| Count 'Usually' | 19 |
| Count 'Always' | 89 |
| Count Total | 125 |

Percentage of patients who responded ‘always’ to Question 17: 89/125 = 71.2%

3. **HCAHPS, Staff always explained medicines final score for Hospital A:**

Average of Value #1 and Value #2: (66.1% + 71.2%) / 2 = 68.7%

Note, however, that OHA is unable to make the case mix adjustments as outlined by CMS. Therefore, the numerators and denominators (and resulting calculations) used for HTPP are unadjusted.

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Further detail and additional examples can be found online at: [http://www.hcahpsonline.org/Files/Calculation%20of%20HCAHPS%20Scores.pdf](http://www.hcahpsonline.org/Files/Calculation%20of%20HCAHPS%20Scores.pdf)

HCAHPS Medication Reconciliation - HTPP Measure Specifications (Year 4)
List other required exclusions and or deviations from cited specifications not already indicated: None.