

Re: CAHPS Survey Reminder

May 5, 2022

Dear Provider,

The Consumer Assessment of Healthcare Providers and Systems (CAHPS) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. It not only helps to increase patient retention but can also help increase compliance with physician recommendations and improve patient outcomes.

The CAHPS survey was recently distributed to a random sample of Molina Complete Care (Child) Medicaid members. Please let your patients know they may receive a survey in the mail or by phone and encourage your patients to participate and provide their feedback. The CAHPS survey will end fielding on May 18, 2022.

For your understanding, below are a few topics and specific questions, addressed in the survey regarding patient care:

- Getting needed care
- Coordination of care
- Rating of personal doctor
- How well the doctors communicate
- If they felt their doctor listened to them
- If their doctor explained things in a way that was easy to understand

Additional CAHPS information are available at: www.molinahealthcare.com

Thank you! for your support in the CAHPS survey process and providing Excellent Patient Care to Molina Complete Care members.

Sincerely,

Molina Complete Care of Arizona



# Improving Patient Satisfaction: Tips for Your Provider Office

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) is an industry standard survey tool used to evaluate patient satisfaction. Improving patient satisfaction has many benefits. It not only helps to increase patient retention but can also help increase compliance with physician recommendations and improve patient outcomes.

Surveys are mailed to members across all lines of business every year starting **February through May** by an approved NCQA survey vendor. Let your patients know they may receive a survey, by mail or by phone and please encourage your patients to complete the survey.

Are you looking for ways to help improve patient satisfaction and increase CAHPS® scores? Here are a few suggestions that may help:

# Review appointment scheduling protocols and access to care standards

Tips		Benefits	
The access standards below are based on standards as outlined per contract:			
Medical Appointment Types	Access Standards		
Routine, asymptomatic	Within 30 calendar days		
Routine, symptomatic	Within 7 calendar days		
Urgent Care	Within 24 hours		
Specialty Care (High Volume)	Within 45 calendar days		
Specialty Care (High Impact)	Within 45 calendar days		
Urgent Specialty Care	Within 24 hours	Sets patient expectations	
Obstetrical Care	Within 21 calendar days in the first trimester, within 14 calendar days in the second trimester and within 7 days thereafter		
Dental Providers (Routine)	Within 45 calendar days		
Dental Providers (Urgent Care)	Within 48 hours		
Call or text patients 48 hours before their appointments to remind them about their appointments and anything they will need to bring.		Reduces no shows	
Consider offering evening and/or weekend appointments.		Increases access to care	
Provide clear instructions on how to access care after office hours (includes local urgent care centers).		Reduces ER visits	
Behavioral Health Appointment Types	Access Standards		
Emergency	Immediately		
Urgent Care	Within 24 hours		
Routine Care	Within 14 calendar days		
Follow-up Routine Care	Within 7 calendar days		

# **Prior Authorization (PA)**

	Standard PA request: within 14 calendar days with complete clinical documentation.  Urgent PA requests: within 72 hours with complete clinical documentation.
Medicaid	Urgent requests must meet AHCCCS definition and may be downgraded if the request doesn't meet criteria. Extensions may add an additional 14 calendar days



## Additional resources for office staff and patients:

#### 24 Hour Nurse Advise Line

For additional after-hours coverage, Molina Complete Care members can call: (800)-424-5891 (English) TTY: 711

### **Provider Web Portal**

Providers can access the provider web portal at <a href="www.MolinaHealthcare.com">www.MolinaHealthcare.com</a> to:

- Search for patients & check member eligibility
- Submit service request authorizations and/or claims & check status
- Obtain information on quality measures, HEDIS performance and HEDIS/CAHPS Tip Sheets
- Participate in online Cultural Competency trainings

## **Interpreter Services**

Molina Complete Care members can access interpreter services at no cost by calling Member Services: Medicaid: (800)-424-5891 TTY:711

Maximize all visits

Tips	Benefits
For a patient who is seen for an office-based E&M service (a sick visit) and due for a preventive health care visit, schedule the preventive health care visit for another time before the patient leaves your office.	Addresses patient's needs and improves health outcomes.

Improve patient point of contact experience through positive framing

Tips	Benefits
Offer patient available appointment with an alternative provider, if requested provider is not available within standard timeframe.	Increases access to care Improves patient's perception of getting care timely
Express appointment availability in relation to access standard (e.g., when a patient requests a preventive appointment, let the patient know that the standard wait is 30 calendar days, but you are offering an appointment within two weeks).	Sets patient expectations Improves patient's perception of getting care timely
Consider if a telehealth visit is appropriate for the patient's needs.	Acknowledges that patient's time is important
Ask if patient has transportation to the appointment. If not, refer patient to Member Services number on the back of their Molina Member ID card.	Ensures patient's needs are met Increases access to care

**Enhance patient triage process and office experience** 

Tips	Benefits
Assign staff to perform preliminary work-up activities (e.g., blood pressure, temperature, etc.).	Shortens patient's perceived wait time
Give a brief explanation for any provider delays and provide frequent updates. Offer options to reschedule or be seen by another provider (including a PA or NP).	Sets patient expectations Acknowledges that patient's time is important

**Encourage open communication with patient** 

Tips	Benefits
Review all treatment options with patient and ask patient to list key concerns at the start of the visit.	Ensures patient's needs are met
Review all medications to ensure understanding for taking the medication and to encourage adherence.	Facilitates medication adherence and better health outcomes
Offer resources, such as health education materials and interpreters.  Ask patient if all questions and concerns were addressed before ending visit.	Improves patient's perception that enough time was provided
Show empathy.  Be aware of and respect cultural differences and communication styles.	Shows patients that they are being heard and respected



Participate in and encourage staff to complete Molina's online Cultural	
Competency trainings.	
Take complaints seriously and try to resolve immediately.	

## Related CAHPS® questions:

- When you needed care right away, how often did you get care as soon as you needed?
- When you made an appointment for a check-up or routine care at a doctor's office or clinic, how often did you get an appointment as soon as you needed?
- How often was it easy to get the care, tests treatment you needed?
- How often did your personal doctor listen carefully to you?
- How often did your personal doctor spend enough time with you?
- How often did your personal doctor explain things in a way that was easy for you to understand?
- How often did you and your personal doctor talk about all the prescription medicines you were taking?
- How would you rate your personal doctor?
- How would you rate the specialist you saw most often in the last six months?