

OAS CAHPS® FAQs

Outpatient and Ambulatory Surgery Center CAHPS® Program from DSS Research



WHAT IS THE OAS CAHPS® SURVEY?

The Outpatient and Ambulatory Surgery Center CAHPS® Survey (OAS CAHPS®) is designed to measure the experiences of people receiving surgical care from a Medicare-certified hospital outpatient department or ambulatory surgery center. The survey is designed to meet the following three broad goals:

- To produce comparable data on the patient's perspective that allows objective and meaningful comparisons between HOPDs and ASCs on domains that are important to consumers.
- Public reporting of survey results will create incentives for facilities to improve their quality of care.
- Public reporting will enhance public accountability in health care by increasing the transparency of the quality of care provided in return for public investment.

WHAT ARE THE PARTICIPATION REQUIREMENTS?

All Medicare-certified facilities with 60 or more eligible patients annually are required to participate in the program. CMS considers each entity with a separate CMS Certification Number (CCN), formerly known as Medicare Provider Number, a separate facility.

WHY SHOULD I PARTICIPATE IN THE OAS CAHPS® SURVEY?

CMS will begin publishing survey scores for HOPDs and ASCs in January 2018. Non-participation in surveying your patients and reporting the results to CMS will result in a "Failed to Report" status on the Medicare website, reflecting negatively on your facility. Additionally, non-participation may cost you in Medicare reimbursement from CMS. Don't lose Medicare money and credibility by not conducting the patient survey.

WHERE CAN I GO TO LOOK UP ADDITIONAL INFORMATION ABOUT THE OAS CAHPS® SURVEY?

The OAS CAHPS® Survey Coordination Team maintains a website, which is available at: <https://oascahps.org>

HOW DO I KNOW IF I AM EXEMPT?

Medicare-certified facilities that serve 59 or fewer patients who meet survey eligibility criteria during the prior 12-month period may request an exemption from participating in the OAS CAHPS® Survey. These facilities must count the number of patients who meet survey eligibility criteria that they served during each annual specified 12-month period and report the count to CMS by completing a Participation Exemption Request form available on the OAS CAHPS® Survey website at:

<https://oascahps.org>

Exemption is not based on a monthly or current census, it is based on your total number of eligible surgeries for the entire year.

I AM A NEW AMBULATORY SURGERY CENTER. DO I STILL NEED TO PARTICIPATE?

If an HOPD or ASC received Medicare certification from CMS after the cutoff date for a given APU period, it is considered too new to participate in the upcoming APU. This is a one-time exemption only, and HOPDs or ASCs do not need to apply for it.

DO I HAVE TO PICK AN APPROVED THIRD PARTY SURVEY ADMINISTRATOR?

HOPDs or ASCs must contract with an approved OAS CAHPS® survey vendor, like DSS, to conduct their survey.

WHEN CAN I CHANGE SURVEY VENDORS?

You can change survey vendors **only at the beginning of a calendar quarter**, not in the middle of a quarter.

HOW DO I KNOW HOW THE PATIENTS RESPONDED TO THE SURVEYS?

We provide **extensive monthly and quarterly reporting of your results**, which show where you stand today and how to make immediate improvements to generate improved satisfaction scores.

DO YOU WORK WITH MY EMR / BILLING SOFTWARE COMPANY?

DSS is compatible with many software companies. If we are not currently working with your software firm, we will get things up and running in short order for your project.

WHAT DO YOU SEND TO CMS EACH QUARTER?

Each quarter, DSS will be responsible for submitting a **data file of the survey responses to CMS** on behalf of your facility. DSS will never leave you at risk of having your results submitted late or in an unacceptable manner.

HOW IS THE OAS CAHPS® DATA PUBLICLY REPORTED?

Public reporting of OAS CAHPS® Survey results will begin January 2018 and includes four rolling quarters of data, with survey vendors submitting data on behalf of their facility clients for each quarter to CMS. The data submitted is reviewed, cleaned, scored, and adjusted by the OAS CAHPS® Survey Coordination Team. Survey results are compiled for each facility; a “preview” report containing the results is made available to each facility for review **before the results are publicly reported.**

WHAT IS THE APU PERIOD?

An APU period is the Annual Payment Update period which is defined by CMS. The APU is a twelve month period that begins January 1 and runs through December 31. Continuous monthly participation during these periods will ensure you do not lose any of your reimbursement for the APU period.

- 2020 APU is January 1, 2018 – December 31, 2018
- 2021 APU is January 1, 2019 – December 31, 2019
- 2022 APU is January 1, 2020 – December 31, 2020

DO YOU WORK WITH SMALL HOPDs OR ASCs?

Yes! **We work with agencies of all sizes.**

IS THERE A DEADLINE TO SIGN UP?

Because this is a new program, we suggest getting started before the January 2018. Don't risk getting shut out of the process because all of the vendors are booked with work.

WHY SHOULD I CHOOSE DSS?

According to *Modern Healthcare*, **DSS has been one of the top 10 patient satisfaction firms**, based on number of engagements, for six years running. We have the **highest response rates** and a solid record of **100% accurate, on-time submissions to CMS.**



LET OUR EXPERIENCED TEAM HELP YOUR FACILITY MEET ALL REQUIREMENTS.

DSS Research is a trusted resource for the OAS CAHPS® survey. Our reporting and tools will provide the information you need to strengthen patient experience, all while helping to increase your bottom line.

QUESTIONS?

800.989.5150

www.DSSresearch.com/oascahps