

OAS CAHPS

Frequently Asked Questions

Q: What is the OAS CAHPS survey?

A: The Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems (OAS CAHPS) survey tool was developed by the Centers for Medicare & Medicaid Services (CMS) as a standard survey to measure the experiences of care for patients who visited a Medicare-certified hospital-based outpatient department (HOPD) or freestanding ambulatory surgery center (ASC) for a surgery or procedure. The survey also includes questions to understand patient-reported health outcomes.

Q: Who is required to participate in the OAS CAHPS survey?

A: The OAS CAHPS survey is currently voluntary as part of the Medicare Outpatient Quality Reporting and Ambulatory Surgical Center Quality Reporting Programs. Participating HOPDs and ASCs must be Medicare-certified and reimbursed under the Outpatient Prospective Payment System (OPPS) and the Ambulatory Surgical Center Payment System, respectively.

Q: What does the OAS CAHPS survey measure?

A: The OAS CAHPS survey contains 37 questions, within the following domains:

- About facilities and staff (composite)
- Communication about your procedure (composite)
- Preparations for discharge and recovery (composite)
- Global Rating items:
 - Overall Rating
 - Willingness to Recommend

Q: Which patients are eligible for the survey?

A: Adult patients who had specific procedures or surgeries (based on a list of CMS-approved CPT codes and G codes) performed in a Medicare-certified HOPD or a freestanding ASC are eligible for the OAS CAHPS survey. Patients who are admitted as inpatients are excluded.

Q: Are observation patients eligible for the survey?

A: Yes. Assuming all other eligibility criteria are met and that the patient was not subsequently admitted to the inpatient level of care, surgical observation patients are eligible for OAS CAHPS.

Q: How many patients are surveyed?

A: CMS recommends that participating facilities target a minimum of 300 completed surveys per year per Medicare Provider Number (CCN).

Q: How often are patients eligible to receive the OAS CAHPS survey?

A: Patients are only eligible to receive the OAS CAHPS survey once every six months. If a patient is selected to receive an OAS CAHPS survey and then has another OAS CAHPS-eligible procedure/surgery within a six-month period, they are not eligible to receive another OAS CAHPS survey associated with the second procedure/surgery.

Q: When does official mandatory data collection begin for the OAS CAHPS survey?

A: CMS encourages voluntary OAS CAHPS participation as part of the Outpatient Quality Reporting and Ambulatory Surgical Center Quality Reporting Programs, but it has not yet indicated when the OAS CAHPS survey will become mandatory. When the survey becomes mandatory, HOPDs and ASCs with 60 or more eligible patients per year will need to contract with a CMS-approved vendor to administer the survey on an ongoing basis or they will lose 2% of their Medicare annual payment update. Critical access hospitals are not required to participate in OAS CAHPS but can choose to do so voluntarily.

Q: Is there a size exemption for OAS CAHPS participation?

A: Yes. HOPDs and ASCs with 59 or fewer OAS CAHPS-eligible patients annually can apply for an exemption from mandatory OAS CAHPS surveying.

Q: What are the approved survey modes for OAS CAHPS?

A: CMS has approved three modes of administration: mail only, telephone only, and mail with a telephone follow-up. Press Ganey currently offers mail-only and telephone-only administration.

Q: Must organizations contract with a vendor to complete the survey administration?

A: Yes. HOPDs and ASCs must designate a certified vendor to complete the OAS CAHPS survey administration. CMS approves vendors to administer and collect data for the CAHPS survey. Press Ganey is a CMS-approved vendor for the OAS CAHPS survey.

Q: How do I authorize Press Ganey as my vendor for OAS CAHPS?

A: Your Press Ganey Account Manager can provide detailed information on how to authorize Press Ganey as your OAS CAHPS vendor. You can also find directions in the [OAS CAHPS Guidelines](#).

Q: Are OAS CAHPS data publicly reported?

A: CMS currently publicly reports OAS CAHPS data for facilities that have voluntarily participated in data collection and shared the results with CMS. Facilities can request that their voluntarily collected OAS CAHPS data be suppressed from public reporting. If you are interested in suppressing your data, please contact your Press Ganey Account Manager.

Publicly reported data include two composite measures (About Facilities & Staff, and Communications about Your Procedure) and two global measures. The Preparations for Discharge & Recovery domain was removed from public reporting effective July 2018, but clients will continue to see this domain in their CMS Preview Reports. The publicly reported OAS CAHPS data can be found at <https://data.medicare.gov/>.

Q: If OAS CAHPS is not yet required, why should we start measuring now?

A: Based on other CAHPS programs, Press Ganey knows that clients who start measuring early outperform clients who wait until data collection is mandatory. Press Ganey recommends that you begin with voluntary OAS CAHPS implementation as soon as possible to allow yourself time to gain experience with the OAS CAHPS questions prior to mandatory participation.

Disclaimer: Information and timelines presented herein are based solely upon Press Ganey's experience with other CAHPS initiatives and our interpretation of CMS rulemaking and policy statements. Official CMS policy is distributed as part of CMS's normal rulemaking process. Information regarding the use of a visit-specific survey for targeted performance improvement is Press Ganey's recommendation based on our experience and expertise. The information herein does not represent the views or policies of CMS or any other government agency.