



NCQA Medicare Advantage CAHPS Guidance October 2019

NCQA Publications/Programs	
Publication of Medicare CAHPS Results	<p>Each September, NCQA releases final Medicare CAHPS^{®1} ratings (the previous year's data) to all plans.</p> <p>NCQA released final Medicare CAHPS ratings (based on data reported in 2018) on September 20, 2019, at healthinsuranceratings.ncqa.org.</p> <p>In 2020 and in future years, NCQA will release final Medicare CAHPS ratings (using data collected in the previous years) on September 15 at reportcards.ncqa.org.</p>
Use in NCQA Health Plan Ratings	<p>Due to the timing of receipt of Medicare CAHPS data, NCQA uses the previous year's Medicare CAHPS data for Health Plan Ratings.</p> <p>For example, for 2020, HPR will report results using measurement year 2019 HEDIS/CAHPS results (reported in June 2020) for commercial and Medicaid product lines. For Medicare, NCQA will use the measurement year 2018 CAHPS data (reported to CMS in spring 2019) and the measurement year 2019 HEDIS data.</p> <p>https://www.ncqa.org/wp-content/uploads/2019/10/20190731_2020_Health_Plan_Ratings_Methodology.pdf</p>
Methods	
Reporting	<p>NCQA uses top-box scoring (e.g., 9+10, Usually+Always) for HPR using the original composite measure and single-item scale (0–10 point scale, 1-4 point scale).</p> <p>In 2020, NCQA will eliminate HPA HEDIS/CAHPS scoring that used a 3-point mean.</p> <p><i>(CMS: Linear mean scores for CAHPS measures are transformed to 0–100 scale for public reporting.)</i></p>
Case Mix Adjustment	<p>NCQA does not case-mix adjust Medicare CAHPS results; CMS does case-mix adjust Medicare CAHPS results.</p>
Age as an Exclusion for Survey Measures	<p>NCQA excludes respondents younger than age 65 from Medicare CAHPS results calculations for the HEDIS Medicare Flu Vaccinations for Adults Ages 65 and Older and Pneumococcal Vaccination Status for Older Adults measures.</p>

¹CAHPS[®] is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

Denominator Threshold	<p>NCQA requires a minimum denominator of at least 30 responses for Medicare CAHPS results for <i>Medical Assistance With Smoking and Tobacco Use Cessation</i> measure rates.</p> <p>Note: All other Medicare measure results require a minimum denominator of 100 responses.</p> <p>CMS reports based on reliability.</p>
Composite and Single-Item Rating Measures	
Getting Needed Care	<p>2-item composite (Usually+Always):</p> <ul style="list-style-type: none"> • In the last 6 months, how often did you get an appointment to see a specialist as soon as you needed? • In the last 6 months, how often was it easy to get the care, tests or treatment you needed? <p>Same questions as CMS 2-item composite.</p>
Getting Care Quickly	<p>2-item composite (Usually+Always):</p> <ul style="list-style-type: none"> • In the last 6 months, when you needed care right away, how often did you get care as soon as you needed? • In the last 6 months, how often did you get an appointment for a checkup or routine care as soon as you needed? <p>Omits 1 item from CMS 3-item composite.</p>
Coordination of Care	<p>Uses the CMS 6-item composite (in contrast to NCQA's 1-item question for commercial and Medicaid product lines) (Usually+Always):</p> <ol style="list-style-type: none"> 1. In the last 6 months, when you visited your personal doctor for a scheduled appointment, how often did he or she have your medical records or other information about your care? 2. In the last 6 months, when your personal doctor ordered a blood test, x-ray or other test for you, how often did someone from your personal doctor's office follow up to give you those results? 3. In the last 6 months, when your personal doctor ordered a blood test, x-ray or other test for you how often did you get those results as soon as you needed them? 4. In the last 6 months, how often did you and your personal doctor talk about all the prescription medicines you were taking? 5. In the last 6 months, did you get the help you needed from your personal doctor's office to manage your care among these different providers and services? 6. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from specialists? (NCQA 1-item question for commercial and Medicaid)

	<p>CMS applies a weighted average of 6 scores in calculation:</p> <ul style="list-style-type: none"> • The score for items 1–4, each with a weight of 1, and • The score for item 5, with a weight of ½, and • The score for item 6, recoded if applicable, with a weight of ½.
<p>Rating of All Health Care</p> <p>Rating of Personal Doctor</p> <p>Rating of Specialist Seen Most Often</p> <p>Rating of Health Plan</p>	<p>NCQA reports top-box scores (9+10) vs. CMS reporting of linear means.</p> <p>CMS scoring: CMS scores “Always: as 100, “Usually” as 66⅔, “Sometimes” as 33⅓ and “Never” as 0, so the resulting score is a mean using linear scoring from “Never” to “Always,” rescaled from a minimum of 0 to a maximum of 100.</p> <p>This is called “linear means scoring”; the score is the proportion of the maximum possible earned, using linear scoring and calculating means.</p>
<p>Advising Smokers and Tobacco Users to Quit</p>	<p>NCQA reports the proportion of current smokers or tobacco users who indicated they received advice to quit from a doctor or other health provider (refer to HEDIS <i>Volume 3: Specifications for Survey Measures</i> for guidance).</p> <p>Not reported by CMS.</p>

References:

HEDIS Volume 3: Specifications for Survey Measures

CMS Medicare Advantage and Prescription Drug Plan CAHPS Survey: <https://www.ma-pdpcahps.org/en/>

CMS Medicare 2019 Part C & D Star Ratings: Technical Notes: <https://www.cms.gov/Medicare/Prescription-Drug-Coverage/PrescriptionDrugCovGenIn/Downloads/2019-Technical-Notes.pdf>