

# Improving Patient Satisfaction and Member Experience

The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) survey, typically conducted from March through June, is a CMS survey used to measure patient satisfaction for those on Medicare Advantage plans. CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).



## Review CAHPS questions and how you can help.

Take a look at what patients see on the CAHPS survey. They can answer these questions with “never,” “usually,” “sometimes” or “always.”

### Survey Questions

- In the last six months, when you needed care right away, how often did you get care as soon as you needed?
- In the last six months, not counting the times you needed care right away, how often did you get an appointment for your healthcare at a doctor’s office or clinic as soon as you thought you needed it?
- In the last six 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?
- In the last six 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?
- In the last six 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?
- In the last six months, did you get the help you needed from your personal doctor’s office to manage your care among different providers and services?
- In the last six months, how often did your personal doctor talk about all the prescription medicines you were taking?
- In the last six months, did you delay or not fill a prescription because you felt you could not afford it?
- In the last six months, how often was it easy to get the medicines your doctor prescribed?

## Here are some tips to help improve patient satisfaction in these areas:

- To help give patients peace of mind, tell them when to expect results and who'll be providing them.
- Ask patients if they've seen another provider. If you know they received specialty care, mention this and discuss as needed. Also, ask if they're taking medications prescribed by other providers.
- Let patients know you have a record of their complete medical history and you're able to talk to them about their health issues. Always ask if there have been changes to their medical history since you last saw them.
- Always communicate and inform patients of any delays in receiving care or results. Set appropriate expectations.

## How your office staff can help:

- Try to leave a few appointment spots open each day to accommodate urgent visits. Offer appointments with a nurse practitioner or physician assistant to patients who want to be seen on short notice but can't get an appointment with their doctor.
- Encourage patients to make their routine appointments for checkups or follow-up visits well in advance, if possible. Some may be able to book appointments online.
- Be proactive and help avoid gaps in care by calling patients months in advance to schedule their needed screenings, tests or physicals.

## How provider offices and pharmacies can help with medication satisfaction issues:

- Stay up to date with the costs of generics vs. brand names for your patients' specific medications.
- Stay up to date with the formulary of each patient's specific Medicare Advantage plan by checking on our provider portal. Know what's covered and at what tier.
- Make sure patients know their pharmacy options, local or mail order. Connect them to our Member Services team – they can call the number on their ID card to reach us.

