

CAHPS Provider Resources

CAHPS® key driver	Industry best practices	Amerigroup resources
Getting Care Quickly	<ul style="list-style-type: none"> Same-day appointment scheduling – The Agency for Healthcare Research and Quality (AHRQ) recommends a method of scheduling that leaves part of each physician’s day open for same-day appointments, rather than a traditional scheduling model that books appointments weeks or months in advance. Because the method does not differentiate between urgent and routine care, patients with nonurgent concerns are able to schedule appointments sooner than under traditional scheduling methods. For more information, see www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/access/strategy6a-openaccess.html. Implement process improvements to streamline patient flow – Delays experienced by patients while waiting for care, tests, or treatment can be minimized through a variety of mechanisms. For example, reallocating tasks such ordering X-rays to physician’s assistants and nurse practitioners frees up physicians’ time to attend to more pressing patient concerns. The exact form of these improvements will vary widely by practice. See www.ahrq.gov/research/findings/final-reports/ptflow/index.html for AHRQ’s guide to plan and implement patient flow improvement strategies. The AHRQ Question Builder app – Helps patients and caregivers prepare for medical appointments and maximize visit time: https://www.ahrq.gov/questions/question-builder/index.html. Patient-Centered Medical Homes™ (PCMH) – This model increases patient access to physicians, reducing barriers to receiving care (www.ncbi.nlm.nih.gov/pmc/articles/PMC2869425/). There are many valuable sources of information on the medical home model of care and health equity. To start, see this Institute of Medicine report: https://nam.edu/wp-content/uploads/2015/06/PatientCenteredMedicalHome.pdf. Family Medicine for America’s Health is a collaboration of family medicine organizations dedicated to improving healthcare by expanding and emphasizing primary care, particularly through the use of Patient-Centered Medical 	<ul style="list-style-type: none"> Provide list of available telehealth services Sydney app Provide flyer or direct providers/office staff to state Appointment and Availability contractual requirements AHRQ Question Builder app

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Getting Needed Care	<p>Homes. For AHRQ’s resources detailing transitioning a practice to a Patient-Centered Medical Home model, see www.pcmh.ahrq.gov/.</p> <ul style="list-style-type: none"> Alternative access centers – This brief (www.rwjf.org/content/dam/farm/reports/issue_briefs/2015/rwjf419415) from the Robert Wood Johnson Foundation highlights the growing capacity of retail clinics and telemedicine to meet patient medical needs, particularly in rural and underserved communities and for patients with acute but non-serious conditions who need care quickly. Providing patients with alternative venues to access healthcare, rather than the traditional doctor’s office or hospital, lowers barriers to care (www.ncbi.nlm.nih.gov/pmc/articles/PMC4795318/). Telehealth solutions to pandemic-related issues – The COVID-19 pandemic has accelerated the usage and acceptance of telehealth by providers and patients alike. This article (www.thelancet.com/journals/langlo/article/PIIS2214-109X(20)30362-4/fulltext) details opportunities to expand telehealth beyond the pandemic. Telehealth can also be implemented to solve deferral of care issues brought about by the pandemic (https://publichealth.jmir.org/2020/3/e21607?utm_source=TrendMD&utm_medium=cpc&utm_campaign=JMIR_TrendMD_1). 	
Coordination of Care How Well Doctors Communicate	<ul style="list-style-type: none"> Improve physician communication – Much of patient dissatisfaction stems from a failure of effective physician communication (www.ncbi.nlm.nih.gov/pmc/articles/PMC3096184/). Seminars and workshops for physicians serve as a resource for physicians to learn and practice patient-centered communication techniques. For example, The California Quality Collaborative has identified nine effective strategies for improving patient experience with healthcare providers in their Improving the Patient Experience Change Package (see www.calquality.org/storage/Improving_Pt_Experience_Spread_Change_Pkg_UpdatedMay2011.pdf). For general recommendations related to physician communication, see https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving-communication/strategy6gtraining.html. 	Improving the Patient Experience training (https://www.mydiversepatients.com/le-ptexp.html) for CME credit completion.
How Well Doctors Communicate Getting Care Quickly Getting Needed Care Coordination of Care		<p>Did you know?</p> <p>Substantial evidence points to a positive association between the patient experience and health outcomes. Patients with chronic conditions, such as diabetes, demonstrate</p>

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<p>How Well Doctors Communicate Getting Care Quickly Getting Needed Care</p>	<ul style="list-style-type: none"> • Help Patients Communicate – Patients who can effectively communicate their needs tend to have higher satisfaction with their care. AHRQ recommends four interventions that prepare patients to better communicate with their providers, including record sharing, writing down talking points prior to visits, and <i>coached care</i> programs. See https://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/communication/strategy6i-shared-decisionmaking.html and http://www.ahrq.gov/cahps/quality-improvement/improvement-guide/6-strategies-for-improving/communication/strategy6htools.html. For a sample communication document that providers can distribute to patients before or during visits, see www.rwjf.org/content/dam/farm/toolkits/toolkits/2013/rwjf404048. • Build Physician-Patient Relationships – An article published in the British Journal of General Practice found that patients seeing their preferred doctor rated their satisfaction with visits significantly higher than patients who did not have a doctor preference or those who would have preferred to see a different doctor. A study of English National Health Service data found that confidence and trust in a doctor is an important predictor of overall patient satisfaction (www.ncbi.nlm.nih.gov/pubmed/18416910), while a Harvard study found that a positive physician-patient relationship correlates with better healthcare outcomes (www.ncbi.nlm.nih.gov/pmc/articles/PMC3981763/). • Improve Referral Communication – The coordination of care between primary and specialist providers can be a challenge and may affect patient perceptions of their specialist care. Improving the coordination of care and case management can increase patient satisfaction with their specialist. For examples of interventions that improve care coordination efficiency and quality, see www.ahrq.gov/innovations/index.html. 	<p>greater self-management skills and quality of life when they report positive interactions with their healthcare providers.</p> <p>Patients reporting the poorest-quality relationships with their physicians were three times more likely to voluntarily leave the physician's practice than patients with the highest-quality relationships.</p> <p>How will this benefit you and your office staff? You'll learn tips and techniques to:</p> <ul style="list-style-type: none"> • Improve communication skills. • Build patient trust and commitment. • Expand your knowledge of the <i>CAHPS Survey</i>. <p>Designed for</p> <ul style="list-style-type: none"> • Doctors • Nurses • Health professionals • Medical office staff