



IOWA TOTAL CARE

Provider CAHPS® Resource Guide

2024

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CAHPS®

Consumer Assessment of Healthcare Providers and Systems

Each spring, a random sample of Iowa Total Care members are surveyed about their experiences with their doctors, healthcare services, and health plan through the CAHPS® survey. CAHPS® surveys allow members to evaluate the aspects of care delivery that matter most to them.

As a provider, you are an important partner in our members' satisfaction with their healthcare experience. The 2024 Provider CAHPS® Resource Guide provides insight into how members are evaluating the care they receive. Please take a moment to review some of the key topics included in the survey and other valuable resources provided to you by Iowa Total Care.

Patient Experience & Clinical Outcomes

The relationship between clinical outcomes and the patient experience is clear: patients with better care experiences are more likely to have better health outcomes. For example, research has shown that positive healthcare experiences can help patients with chronic illnesses better adhere to medical advice and treatment.

To learn more about the clinical case for improving patient experience, visit [AHRQ's Improvement Guide](https://ahrq.gov/cahps/quality-improvement/improvement-guide/2-why-improve/index.html).
(ahrq.gov/cahps/quality-improvement/improvement-guide/2-why-improve/index.html)



Measures



CAHPS® Measure: Getting Needed Care

The Getting Needed Care measure assesses the ease with which patients received the care, tests, or treatment they needed. It also assesses how often they were able to get a specialist appointment scheduled when needed.

Incorporate the following into your daily practice:

- ✓ Office staff should help coordinate specialty appointments for urgent cases.
- ✓ Encourage patients and caregivers to view results on the patient portal when available.
- ✓ Inform patients of what to do if care is needed after hours.
- ✓ Offer appointments or refills via text and/or email.



CAHPS® Measure: Getting Care Quickly

The Getting Care Quickly measure assesses how often patients got the care they needed as soon as they need it and how often appointment wait times exceeded 15 minutes.

Incorporate the following into your daily practice:

- ✓ Ensure a few appointments each day are available to accommodate urgent visits.
- ✓ Offer appointments with a nurse practitioner or physician assistant for short notice appointments.
- ✓ Maintain an effective triage system to ensure that frail and/or very sick patients are seen right away or provided alternate care via phone and urgent care.
- ✓ Keep patients informed if there is a longer wait time than expected and give them an option to reschedule.



CAHPS® Measure: Rating of Health Care Quality

The CAHPS survey asks patients to rate the overall quality of their healthcare on a 0-10 scale.

Incorporate the following into your daily practice:

- ✓ Encourage patients to make their routine appointments for checkups or follow up visits as soon as they can – weeks or even months in advance.
- ✓ Ensure that open care gaps are addressed during each patient visit.
- ✓ Make use of the provider portal when requesting prior authorizations.



CAHPS® Measure: Rating of Personal Doctor

The CAHPS survey asks patients to rate their primary care provider on a 0-10 scale.

Incorporate the following into your daily practice:

- ✓ Use the teach-back method to check for patient understanding and to improve patient-provider communication.
- ✓ Gather and analyze patient feedback on their most recent office visit.
- ✓ Promote the use of online patient portals which allow patients to access their medical records and healthcare information.



CAHPS® Measure: Rating of Specialist Provider

The CAHPS survey asks patients to rate their primary care provider on a 0-10 scale.

Incorporate the following into your daily practice:

- ✓ Use the teach-back method to check for patient understanding and to improve patient-provider communication.
- ✓ Gather and analyze patient feedback on their most recent office visit.
- ✓ Periodically analyze appointment scheduling timeframes for opportunities to minimize wait times.



CAHPS® Measure: Smoking Cessation

The CAHPS survey assesses how often patients received tobacco cessation advice from their healthcare providers.

Incorporate the following into your daily practice:

- ✓ Screen for tobacco use status during patient appointments.
- ✓ Consider counseling and medication treatment options for patients who are looking to quit using tobacco.
- ✓ Refer Iowa Total Care members to the Tobacco Free Quitline at 1-800-QUIT-NOW (1-800-784-8669) for smoking cessation coaching at no cost to the member.



Interested in learning more about the CAHPS survey and how survey scores are used?

Visit the [CAHPS® Corner webpage](http://iowatotalcare.com/providers/quality-improvement/cahps--corner.html) to learn more and access additional resources. (iowatotalcare.com/providers/quality-improvement/cahps--corner.html)

Tips for Your Provider Office

Please refer to the [Iowa Total Care Provider Manual](#) for additional guidance on appointment availability and access standards.

ENHANCE PATIENT EXPERIENCE WITH PROVIDER ACCESS

Tip	Benefit
Consider having staff perform in-visit related activities (e.g., checking temperature, blood pressure, etc.).	Shortens patient's perceived wait time
Provide brief explanations and updates to patients about appointment delays; offer options to reschedule or be seen by another provider.	Sets patient expectations

ENCOURAGE OPEN COMMUNICATION WITH PATIENT BY ACTIVELY LISTENING

Tip	Benefit
Ask patients to list key concerns at the start of the visit	Ensures patient's needs are being met
Review medications to ensure understanding and encourage adherence	Encourages medication adherence
Ask patients if all questions and concerns were addressed before end of visit	Patients feel sufficient time was spent with them
Take complaints seriously and try to resolve promptly	Shows patients that they are being heard

REVIEW APPOINTMENT SCHEDULING PROTOCOLS & ACCESS TO CARE STANDARDS

Type of Appointment	Scheduling Requirement/Timeframe
Primary Care Providers	
Emergency Medical Condition	Immediately upon presentation, 24 hours a day, 7 days a week.
Urgent Medical Condition	Within 24 hours.
Non-Urgent Sick Visits (w/persistent symptoms)	Within 48 hours.
Routine Appointments	Not to exceed 4 to 6 weeks.
Specialists	
Specialty Providers - Urgent	Within 24 hours.
Specialty Providers - Routine	Within 30 days.
Hospitals - Emergency	24 hours a day, seven (7) days a week.
Behavioral Health - Emergency	Immediately upon presentation, 24 hours a day, 7 days a week.
Behavioral Health - Mobile Crisis	Within 1 hour of presentation or request.
Behavioral Health - Urgent	Within 1 hour of presentation at a service delivery site or within 24 hours of telephone contact with provider or Iowa Total Care.
Behavioral Health - Persistent Symptoms	Within 48 hours of reporting symptoms.
Behavioral Health – Follow-up Appt or Routine	Within 3 weeks of the request for an appointment.
Substance Use Disorder & Pregnancy	Members who are pregnant women in need of routine substance use disorder services must be admitted within 48 hours of seeking treatment.
Intravenous Drug Use	Admitted no later than 14 days after making the request for admission, or 120 days after the date of such request if no program has the capacity to admit the individual on the date of such request and if interim services are made available to the individual no later than 48 hours after such request.
Labs and X-Ray Services - Non-Urgent	Not to exceed 3 weeks.
Labs and X-Ray Services - Urgent	Within 48 hours.
General Optometry - Routine	Not to exceed 3 weeks.
General Optometry - Urgent	Within 48 hours.

Additional Resources for Office Staff & Patients

24/7 Nurse Advice Line: 1-833-404-1061 (TTY: 711)

Iowa Total Care members can call for additional after-hours coverage.

Provider Web Portal: provider.iowatotalcare.com

Providers can access the provider portal to:

- Check member eligibility.
- View member health records.
- View and submit claims and adjustments.
- View and submit prior authorizations.
- Check prior authorization requirements.
- View gaps in member care.

Interpretation Services: 1-833-404-1061 (TTY: 711)

Interpreter services are provided free of charge to members during any service. Contact Iowa Total Care Member Services at the number above.

Provider office tips relate to the following CAHPS® questions:



- How often did your personal doctor listen to you?
- How often did your personal doctor spend enough time with you?
- How often did your personal doctor explain things in a way that was easy for you to understand?
- When you needed care right away, how often did you get care as soon as you needed?
- When you made an appointment for a check-up or routine care at a doctor's office or clinic, how often did you get an appointment as soon as you needed?

Provider Engagement Collateral

Getting Needed Care

Access to medical care, including primary care, specialist appointments and appointment access, are key elements of quality care.



Each year, the CAHPS® survey asks questions like:

- In the last 6 months, how often was it easy to get appointments with specialists?
- In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
- In the last 6 months, when you needed care right away, how often did you get care as soon as you thought you needed?
- In the last 6 months, not counting the times when 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?
- In the last 6 months, how often did you see the doctor you were scheduled to see within 15 minutes of your appointment time?



Ensure your patients are satisfied with their ease of access by:

- ✓ Seeing members within access and availability standards.
- ✓ Scheduling appointments in a reasonable window for each request.
- ✓ Following up with members after referral to specialists to ensure care is coordinated.
- ✓ Ensuring all information for specialists, tests, and procedure authorizations is provided and following up as necessary.
- ✓ Reducing time in the waiting room to no more than 15 minutes from appointment time.



Helpful tips to provide the needed care to your patients:

Iowa Total Care continually monitors and evaluates measures that reflect appropriate coordination of care practices. These include:

- ✓ Reviewing medications with your patients.
- ✓ Offering to schedule specialist and lab appointments while your patients are in the office.
- ✓ Reminding your patients about annual flu shots and other immunizations.
- ✓ Making sure your patients know you also are working with specialists on their care. Ensure you receive notes from specialists about the patient's care and reach out to specialists if you have not gotten consultation notes. Tell your patient the results of all tests and procedures. Sharing decision making with patients to help them manage care. And please follow up on all authorizations requested for your patient.
- ✓ Contacting your patients to remind them when it's time for preventive care services, such as annual wellness exams, recommended cancer screenings, and follow-up care for ongoing conditions such as hypertension and diabetes.

Quick Tips: Provider Focus

At Iowa Total Care, we value everything you do to deliver quality care to our members – your patients – and ensure they have a positive healthcare experience. Below are some tips you can follow to improve on the five quality measures listed below:



Getting Needed Care

- ✓ For urgent specialty appointments, office staff should help coordinate with the appropriate specialty office.
- ✓ If a patient portal is available, encourage patients and caregivers to view results there.



Getting Care Quickly

- ✓ Maintain an effective triage system to ensure that frail and/or very sick patients are seen right away or provided alternate care via phone and urgent care.
- ✓ For patients who want to be seen on short notice but cannot access their doctor, offer appointments with a nurse practitioner or physician assistant.
- ✓ Ensure a few appointments each day are available to accommodate urgent visits.
- ✓ Address the 15-minute wait time frame by ensuring patients are receiving staff attention.
- ✓ Keep patients informed if there is a wait and give them the opportunity to reschedule.



Rating of Personal Doctor

- ✓ Use the teach-back method to check for patient understanding and to improve patient-provider communication.
- ✓ Gather and analyze patient feedback on their most recent office visit.
- ✓ Promote the use of online patient portals which allow patients to access their medical records and healthcare information.



Rating of Health Care

- ✓ Encourage patients to make their routine appointments for checkups or follow up visits as soon as they can – weeks or even months in advance.



Rating of Specialist Provider

- ✓ Use the teach-back method to check for patient understanding and to improve patient-provider communication.
- ✓ Gather and analyze patient feedback on their most recent office visit.
- ✓ Periodically analyze appointment scheduling time frames for opportunities to minimize wait times.

10 Elements for Using Teach-Back Effectively



What is teach-back?

- ✓ A way to make sure you—the healthcare provider—explained information clearly. It is not a test or quiz of patients.
- ✓ Asking a patient (or family member) to explain in their own words what they need to know or do, in a caring way.
- ✓ A way to check for understanding and, if needed, re-explain and check again.
- ✓ A research-based health literacy intervention that improves patient-provider communication and patient health outcomes.

- 1 Use a caring tone of voice and attitude.
- 2 Display comfortable body language and make eye contact.
- 3 Use plain language.
- 4 Ask the patient to explain back, using their own words.
- 5 Use non-shaming, open-ended questions.
- 6 Avoid asking questions that can be answered with a simple yes or no.
- 7 Emphasize that the responsibility to explain clearly is on you, the provider.
- 8 If the patient is not able to teach back correctly, explain again and re-check.
- 9 Use reader-friendly print materials to support learning.
- 10 Document use of patient response to teach-back.



For more information, visit [AHRQ's Teach-Back: Intervention Resource](https://ahrq.gov/patient-safety/reports/engage/interventions/teachback.html).
(ahrq.gov/patient-safety/reports/engage/interventions/teachback.html)