



RESEARCH SUMMARY

Improving the Efficiency of CAHPS Survey Administration

The Aim

The CAHPS team’s guidelines for administering CAHPS surveys are carefully designed to generate data that represent the enrollee or patient population, accurately reflect their experiences with health care, and can be compared to that of other health care organizations. However, in light of technological advances and a growing demand for more frequent and less burdensome data collection, the team recognizes the importance of reducing the expense and time required to field CAHPS surveys. To that end, the CAHPS team has been investigating various ways to streamline the data collection process and enhance survey users’ ability to achieve adequate response rates.

Anticipated Benefits

By studying the impact of alternative data collection modes and other changes to the guidelines for survey administration, the CAHPS team can assess their suitability for the CAHPS surveys and develop the evidence base for new recommendations. With this approach, the team supports efforts to collect patient experience data more efficiently and expediently while still maintaining the integrity and credibility of the CAHPS surveys.

Examples of Recent and Ongoing Investigations

The CAHPS team has conducted multiple studies of different data collection modes, such as in-office distribution of surveys, and other strategies with the potential to reduce the burden of survey administration. These include projects to answer the following research questions:

- What is the impact of an incentive in the form of \$5 in cash or as a Target® e-certificate on response rates to a Web-based survey of patients’ experiences with care from a medical center?
- How comparable are the costs of data collection, response rates, and responses to a CAHPS survey of patients in a community health center when different modes are used (i.e., a comparison of the standard mode of mail and telephone to in-office distribution and Web administration)?
- How does shortening the core Clinician & Group Survey affect the reliability of the data and the survey response rate?
- How does switching from a 12-month sampling frame and survey recall period to a 6-month sampling frame and recall period affect respondent recall and response rates to the Clinician & Group Survey?
- How do different formatting and design changes in paper questionnaires affect respondents’ answers, especially to questions with the survey’s “Never, Sometimes, Usually, Always” response options?



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Published Articles

Bergeson SC, Gray J, Ehrmantraut LA, et al. Comparing web-based with mail survey administration of the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Clinician and Group Survey. *Prim Health Care* 2013 Apr 15;3.

Brown JA, Serrato CA, Hugh M, et al. Effect of a post-paid incentive on response rates to a web-based survey. *Surv Pract*, in press.

Drake KM, Hargraves JL, Lloyd S, et al. The effect of response scale, administration mode, and format on responses to the CAHPS Clinician and Group survey. *Health Serv Res* 2014 Aug;49(4):1387-99.

Stucky BD, Hays RD, Edelen MO, et al. Possibilities for shortening the CAHPS Clinician and Group Survey. *Med Care*, 2015 Nov 3 (epub).



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