

Hospital Consumer Assessment of Healthcare Providers and Systems Overview

Vendor Directory
June 2012

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TABLE OF CONTENTS

Introduction 2

Methodology 3

Vendor Directory 8

Appendices 60

INTRODUCTION

The Hospital Consumer Assessment of Health Providers and Systems (HCAHPS) survey process developed by the Centers for Medicaid and Medicare (CMS) and the Agency for Healthcare Research and Quality (AHRQ), a division of the Department of Health and Human Services, has developed a 27- question standardized patient satisfaction survey tool and data collection methodology that has the capacity to elevate the quality and safety of health care services across America and transform the way hospitals do business. The four primary objectives for administering this standardized patient satisfaction survey instrument include:

- Enabling meaningful comparisons across hospitals for public reporting
- Increasing hospital accountability and incentives for quality improvement
- Enhancing public accountability
- Preparing hospitals to link reimbursement to quality performance

The HCAHPS survey and data collection process is administered to discharged hospital patients over 18 years of age that have received medical, surgical or maternity care and have spent at least one overnight stay in the hospital. Approximately 80% of all inpatients qualify to receive this survey. For a complete listing of patient qualifications, reference www.hcahpsonline.org. Inpatient Prospective Payment System (IPPS) hospitals are required to administer the HCAHPS survey and publically report on the findings in order to receive a full annual payment update from CMS. Although critical access hospitals (CAH) are strongly encouraged to administer and report on HCAHPS, participation is voluntary at the time of this report. Pediatric, psychiatric and specialty hospitals are excluded from participating in the HCAHPS process.

Hospitals participating in HCAHPS can self-administer the survey process (if strict criteria is met, visit <http://www.hcahps.org/files/HCAHPS%20QAG%20V4%200.pdf> for more details) or select a trained, certified vendor to administer the HCAHPS process. To meet the HCAHPS guidelines monitored by CMS, hospitals or the vendors in which they contract with must adhere to a standardized data collection process. This process includes:

- Obtaining a randomized survey sample of discharged inpatients
- Administering a standardized survey instrument on patient satisfaction of services and care via mail, telephone, Interactive Voice Recognition (IVR) or a combination of modes
- Analyzing data systematically
- Publicly reporting hospital results
- Using results of the findings to improve overall quality and safety of patient care

Survey questions address topics such as pain management, medication instructions, effectiveness of provider communication, cleanliness of the environment and discharge information. Questions are focused on obtaining the patient's perception of quality as research suggests that patient perceptions of quality influence their choice of health plans and providers, patient complaints and

malpractice claims, adherence to medical advice and overall health status outcomes.

To assure fair and accurate comparisons across hospitals, a CMS and HCAHPS Project Team apply adjustments to eliminate any advantage or disadvantage in scores beyond a hospital's control, such as the survey mode. Only the top scores receiving a positive response are publically recorded quarterly. CMS publishes the HCHAPS results on the Hospital Compare website, www.hospitalcompare.hhs.gov.

When these survey results are tied to quality and clinical outcomes, such as the measuring of heart failure and pneumonia process of care measures, there is likely to be a reduction in readmissions and hospital-acquired infections. If hospitals take the time to invest in completing an HCAHPS process, they are likely to ensure that they are meeting their mission, protecting their bottom line, enhancing their reputation and foremost, saving patient lives as a result of their increased dedication to implementing safe, quality improvement initiatives based on results of the HCHAPS data.

HCAHPS is anticipated to play a large role in reimbursement as a result of the Patient Protection and Affordable Care Act (PPACA), which establishes a [Value-Based-Purchasing plan](#) on measures that are part of the hospital quality reporting program. This will translate into a Pay-for-Performance reimbursement strategy monitored through CMS. Beginning in 2013, CMS will impose financial penalties on excessive readmissions for heart attack, heart failure, and pneumonia patients. This movement to tie reimbursement to performance on quality metrics, including patient perception, means hospitals will be held accountable for providing excellence in safe, quality patient care.

The Medicare Beneficiary Quality Improvement Project (MBQIP), designed by the Health Resources and Services Administration, Office of Rural Health Policy, is a voluntary program created to improve overall health care outcomes and enhance safe, quality, patient care. A portion of this project is dedicated to encouraging CAHs' participation with the HCAHPS process and subsequent development of quality improvement initiatives. MBQIP will provide CAHs with a rural relevant, national benchmarking system to compare HCAHPS scores, develop tools, highlight resources and identify best practices for improving health care outcomes.

METHODOLOGY

The Health Resources and Services Administration, Office of Rural Health Policy has charged the Technical Assistance and Services Center (TASC), a program of the National Rural Health Resource Center (The Center), with capturing a body of knowledge regarding the benefits and challenges to implementing a HCAHPS survey process with small rural hospitals, specifically CAHs. The Center was also charged with assembling a directory of certified HCAHPS vendors to guide small rural hospital and CAH vendor selection of this important, patient-centered survey process. Information gleaned from a small group meeting and the vendor directory

is intended to aid State Medicare Rural Hospital Flexibility (Flex) Programs, small rural hospitals and network personnel to increase their awareness of the current HCAHPS environment.

Small Group Meeting

In April 2012, staff from The Center assembled a small group meeting in Denver, Colorado for the purpose of capturing a body of knowledge regarding CAH participation with the HCAHPS survey process. Individuals in attendance included State Flex Program Coordinators, State Office of Rural Health Directors, CAH CEOs, rural health network administrators, certified vendors and staff from the Office of Rural Health Policy and The Center. Participants were prompted with the following questions with responses listed below.

State Flex Programs: Are you organizing or networking the HCAHPS processes on a state wide level? If so, what has the response been from the hospitals?

There are a few State Flex Programs that have initiated a process of identifying and selecting a certified HCAHPS vendor for the purposes of providing a group purchasing rate, collecting statewide benchmark data and monitoring health outcomes and core quality measures. These processes have aided the State Flex Programs' educational training curriculum and technical assistance offerings. State Flex Programs are encouraged to evaluate the level of support and training provided to CAHs for implementation of the HCAHPS process.

From your perspective, what are the benefits for CAHs participating in HCAHPS?

Participants identified a variety of benefits to CAHs participation with HCHAPS. Developing a national, standardized process for collecting, measuring and reporting on patient satisfaction was noted most frequently as the top benefit as this process enables hospitals with the ability to benchmark performance and quality measures with other facilities statewide and nationally. "Facilities can showcase high HCAHPS scores, which is especially beneficial to rural hospitals that tend to score higher on patient satisfaction," noted one participant. The Flex Monitoring Team has validated this statement through their [analysis of CAH HCAHPS](#) results for 2010 discharges, which reveals that CAHs earn an average of 5-10% better patient perception scores on each HCAHPS question compared to urban hospitals. This variation between patients' perception of quality care between urban and rural facilities helps justify the value in receiving services in a small rural facility, summarized a group of participants. "Positive HCAHPS scores help CAHs demonstrate their competitive edge against larger, more urban facilities," reported a participant. Individuals acknowledged that public reporting of HCAHPS scores facilitates a process of improving care and performance that can be linked back to hospital strategy. One hospital CEO noted, "My facility would never have received a quality award had we not implemented the HCAHPS process. HCAHPS has been used as a tool to build a culture of ongoing process improvements. As a result, we are starting to see a reduction in patient errors and an increase in patient safety."

What are the barriers that CAHs face in completing HCAHPS surveys in your state? What are the hospital's concerns?

Cost was most notably the top barrier which prohibited a CAH from participating in the HCAHPS process. Participants noted how some certified HCAHPS vendors charge hospitals for the number of attempts made to reach out to a random sample of inpatients, which greatly increases the cost when multiple attempts are made to achieve a meaningful response rate. "It is advisable to seek a vendor that charges based on completed surveys, not attempts at sending surveys due to the small numbers of CAH patients," recommended a couple of participants.

Obtaining a meaningful response rate was also identified as a barrier. CAHs are concerned that the low volume of responses they receive may generate a poor public perception of their facility. "Although volume does not correlate with quality, the public may misperceive low volume as a negative trait for a care provider," cited a participant. Concerns were noted that there is currently no formula determined for calculating responses with a low denominator to be considered scientifically valid and comparable to larger, urban facilities with a higher patient census. This notion consequently raised questions for why a facility would bother utilizing and spending money to fund the 27-question, standardized, HCAHPS survey versus a self-created patient satisfaction survey instrument. Although administering and publicly reporting HCAHPS data is currently not a requirement for CAHs, it was acknowledged that policies may likely lead in this direction and hospitals that currently participate may have the "competitive edge" over non-reporting facilities as they have experienced the process of HCAHPS and have most likely linked patient satisfaction data into a continuous process of quality improvement and patient safety. Participants reinforced the value of creating a unified message to CAHs on the value and benefits for HCAHPS participation.

There was concern by some participants that hospitals who utilized a vendor to administer the HCAHPS survey were missing opportunities for "service recovery—in other words, missing that opportunity to correct and repair patient perception when errors occur" as a result of the lag time of vendors reporting feedback results back to the facility in a timely manner. It was recommended that CAHs select a vendor that has the capacity to provide immediate or "real time" results from the survey to assist hospitals with correcting performance as soon as possible.

What has been the experience of CAHs in your state working with HCAHPS vendors?

Few participants had direct experience in working with a certified HCAHPS vendor at the time of this reporting. Of those who had direct experience, reported satisfaction and a commitment towards sustaining their relationship with their selected vendor. Many participants requested guidance and direction for selecting a vendor that has experience working with small rural hospitals and understands their unique strengths and challenges. The vendor directory provided in this report outlines key features, such as the survey mode, list of available services, cost and experience.

Please identify additional issues we should be aware of in supporting greater CAH participation in HCAHPS.

Participants strongly encouraged articulation of a consistent message that supports participation in the HCAHPS process. It was recommended that the proposed message should include how patient safety, core quality measures, and health outcomes will be improved if data is collected, measured and monitored consistently through standardized processes. In doing so, hospitals will be better prepared to identify opportunities for continuous quality improvement.

As part of an initiative to encourage critical access hospitals to report and improve on outcomes on nationally recognized measures, Flex programs will be supporting CAHs in reporting and engaging in improvement activities related to HCAHPS outcomes. CAHs are exempt from CMS's requirement to complete HCAHPS surveys for reimbursement purposes; however, patient satisfaction is an important component of hospital operations. Improved patient satisfaction can lead to improved reputation of the hospital within the community, which can lead to increased volume of services for the patients, increasing market share, when patients opt to stay in the community for care versus travel to a further hospital and reduced malpractice claims.

Vendor Directory Overview

Once a CAH understands the value and importance of investing in the HCAHPS process, the next step is to evaluate and understand the scope and breadth of services available. If pursuing a HCAHPS survey process does not appear feasible for a CAH to undertake independently, then engaging a certified HCAHPS vendor is needed. Staff from The Center collected information about all 37 vendors that were CMS-trained and certified to administer the HCAHPS survey to date. Staff developed a list of questions to ask each vendor, including: contact information, location of services offered, experience in working with small rural hospitals, survey mode, services checklist, cost structure and price, frequency of reporting to CMS, frequency of reporting to the client, and any additional information cited by the vendor. Once the questions were developed, staff called each vendor to inform them of the purpose of this project and request their participation in providing the necessary information. Twenty-six vendors agreed to provide information. Five vendors opted out of participating in this process as they do not focus on working with small rural hospitals. Two vendors are no longer providing HCAHPS services and four vendors did not return phone calls or emails and therefore are not included in this directory. Vendors were given the opportunity to review the information that was collected over the phone and provide any necessary edits to their informational page. This directory has made every attempt to present the vendors' information in a neutral, unbiased manner.

Vendor Directory Highlights

Of the 26 featured HCAHPS vendors, all indicated offering services nationally, with 3 vendors providing services internationally and 4 vendors identifying select regions of the United States in which they work most frequently.

Twenty-one HCAHPS vendors report some experience in working with small rural hospitals, with 16 vendors specifically noting their exclusive specialization with this population.

The various modes for administering the HCAHPS survey includes: a mailed survey, telephone survey with a live person, an interactive voice recognition (IVR) phone survey, and a mixed combination of both mail and phone options. Of the 26 vendors, 17 offer mailed surveys, 15 offer phone surveys, 3 offer IVR and 7 offer a mix of both mail and phone surveys. Several vendors note their opinion of mail versus phone survey options; although no conclusive information is available determining which mode is preferential for obtaining a high response rate.

Vendors were requested to identify general service offerings, such as benchmarking data, competitor comparison reports, customized survey questions or group/networking pricing included in a basic HCAHPS package. There was great variety in these service offerings, which is available in the Services Checklist of each vendor page.

There was also great variety in the cost structure and price amongst the 26 vendors with an average estimated cost of \$3,500, with a range of \$1,461 - \$6,260. Eight vendors chose not to relay their prices and encouraged hospitals to contact them directly, whereas others outlined detailed cost structures and service packages. Please contact vendors directly for an exact quote for services as prices may vary and are subject to change.

The frequency for which a HCAHPS vendor publicly reports results of the HCAHPS assessment findings to CMS occurs quarterly for 23 of the 26 vendors. Two vendors report survey results monthly.

The frequency of vendors reporting HCAHPS data back to the client also varies, ranging from immediate receipt to quarterly. The mode of survey administration appears to be a factor attributing to the turnaround time of client feedback, with phone and IVR modes providing a more timely result.

Additional information was also collected from each vendor regarding their unique perspective on administering HCAHPS surveys in which readers are encouraged to review.

VENDOR DIRECTORY

Alexandria Marketing Research Group, Inc.

212 1/2 West 5th Street, Suite 209

Joplin, MO 64801

888-420-8884

Patrick Sells

psells@alexandriamarketing.com

http://alexandriamarketing.com/newsite/Healthcare/healthcare%20services/HCAHP_S.htm

Location of Services Offered

National

Experience working with Small Rural Hospitals

Alexandria Marketing Research Group, Inc. enjoys working with small rural hospitals.

Survey Modes

x	Mail
	Phone
	Interactive Voice Recognition (IVR)
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
	Competitor comparison reports	
	Customized survey questions	
	Group/network pricing	
	Hospital employee training/education	
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	No
	Real time/near real time access to collected data	
	Staffed toll-free hotline for patient's questions	
x	Other; see below	Yes

Cost Structure and Price

Prices are determined on an individual basis to best meet customer needs. Please contact Alexandria Marketing Research Group, Inc. to seek a personalized quote.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Alexandria Marketing Research Group, Inc. offers quarterly PowerPoint reports with detailed, actionable statistics to enhance a hospital's understanding of HCAHPS reporting and promote the highest level of quality service a hospital can provide. No online real-time data is offered as the use of local servers for data storage helps to ensure privacy and security for both the patients and the hospital. However, clients can contact staff for feedback or information on survey results at any time.

Additional Information

Alexandria Marketing Research Group, Inc. focuses on helping a hospital provide the highest quality service possible by concentrating on an individual hospital's internal process improvements, therefore no comparative data with other hospitals is provided.

Alexandria Marketing Research Group, Inc. strives for the highest response rate possible from patients by providing limited, clearly defined survey questions and offering mailed surveys as it enables a patient time to provide thoughtful answers when it is convenient for their schedule. The staff at Alexandria Marketing Research Group, Inc. has expertise in quality and performance improvement, including Six Sigma and offers extensive community research and employee satisfaction surveys, in addition to the HCAHPS survey.

Arbor Associates, Inc.

P.O. Box 692, 1349 US 131

Petoskey, MI 49770

231-347-7775

Donald Cohen

doncohen@arbor-associates.com

<http://www.arbor-associates.com/productdetail.html#patient>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Arbor Associates, Inc.'s primary client base consists of mid-sized hospitals to CAHs and is currently working with 35 CAHs on HCAHPS.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	No
x	Hospital employee training/education	No
x	Incorporate with client's existing patient satisfaction surveys	No
x	Multilingual survey options	No
x	Real time/near real time access to collected data	No
	Staff toll-free hotline for patient's questions	
x	Other; see below	No

Cost Structure and Price

Arbor Associates, Inc. does not charge for setup or online access; one fee covers everything. Hospitals are charged only per completed survey. Contact for specific pricing.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Arbor Associates, Inc. offers automatic weekly, bi-weekly or monthly reporting online for near real-time access to survey results and patient comments. Arbor Associates, Inc. emphasizes open-ended follow-up questions presented to patients during phone surveys. ArborOnLine allows hospitals to access their own database and carry out any cross-references needed. It will also show benchmark (best practices) information by patient service category.

Additional Notes

Since 1982, Arbor Associates, Inc. has pursued its mission of creating insight for hospitals across the country via customized opinion research studies. Foremost among these is the Patient Expectation Project. This ongoing survey provides clients with accurate patient satisfaction information at the level of individual Inpatient (HCAHPS) and Outpatient units or departments, medical offices (C&GCAHPS) and home care (HHCAHPS) and compares it with information from the same units/departments at similar hospitals.

Arbor Associates, Inc. has been serving the health care industry for 30 years and offers services ranging from CMS certified CAHPS surveys to various opinion research studies and analytical studies. Survey information is collected via personal telephone interviews with recent patients. Due to its far higher response rates, telephone-based surveys are well recognized as the best way to obtain a randomized survey sample. This allows for far greater statistical accuracy with smaller sample sizes - which helps control costs.

Arbor Associates, Inc.'s telephone-based methodology consistently produces accurate and actionable statistical findings which executives and managers can rely upon, plus extensive patient comments which clarify for staff what patients truly appreciated about the care they received and what could have been done to improve their satisfaction.

Arbor Associates, Inc. has an intense focus on customer service. They offer onsite support to any of their clients and make their staff available for training and decision making assistance.

Avatar International, LLC

1000 Primera Blvd Ste 3144

Lake Mary, FL 32746

407-805-9506

Jason Macedonia

jmacedonia@avatar-intl.com

http://www.avatar-intl.com/products/patient_surveys_with_hcahps

Location of Services Offered

National

Experience working with Small Rural Hospitals

Avatar International, LLC has worked with 400 CAHs in the last year and is a subcontractor with iVantage, who serves primarily rural healthcare facilities.

Survey Modes

<input checked="" type="checkbox"/>	Mail
<input type="checkbox"/>	Phone
<input type="checkbox"/>	Interactive Voice Recognition
<input type="checkbox"/>	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
<input checked="" type="checkbox"/>	Benchmarking data	No
<input checked="" type="checkbox"/>	Client networking/sharing of best practices	No
<input checked="" type="checkbox"/>	Competitor comparison reports	No
<input checked="" type="checkbox"/>	Customized survey questions	Yes
<input checked="" type="checkbox"/>	Group/network pricing	
<input checked="" type="checkbox"/>	Hospital employee training/education	Yes
<input checked="" type="checkbox"/>	Incorporate with client's existing patient satisfaction surveys	Yes
<input checked="" type="checkbox"/>	Multilingual survey options	Yes
<input type="checkbox"/>	Real time/near real time access to collected data	
<input checked="" type="checkbox"/>	Staffed toll-free hotline for patient's questions	Yes
<input checked="" type="checkbox"/>	Other; see below	

Cost Structure and Price

For an individual hospital, the cost is a \$3,500 flat yearly fee (which includes the first mailing and a follow up mailing for each patient). In a group purchase consisting of 5 or more hospitals, yearly fees range from \$3,000 to \$3,200.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Quarterly reports include rural benchmarks and other indicators small rural hospitals will find beneficial

Additional Information

Avatar International, LLC offers a variety of additional services to their basic HCAHPS surveying, although many come at an additional price. Their pricing is fairly straightforward and they have experience in providing assistance to rural health providers, specifically CAHs.

Beacon Technologies, Ltd.

3958 Dundee Road
Northbrook, IL 60062
847-513-6850
Richard Heller
rheller@beacontouch.com
<http://www.beacontouch.com>

Location of Services Offered

National; with a strong client base in Puerto Rico and other outlying portions of the US

Experience working with Small Rural Hospitals

Beacon Technologies, Ltd. works very frequently (approximately 75% of their time) with small rural hospitals.

Survey Modes

	Mail
	Phone
	Interactive Voice Recognition
x	Mixed (Unique system -See below)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
x	Competitor comparison reports	No
x	Customized survey questions	No
	Group/network pricing	
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	No
x	Real time/near real time access to collected data	No
x	Staffed toll-free hotline for patient's questions	No
x	Other; see below	Yes

Cost Structure and Price

Pricing is structured on a quarterly basis and varies based on the number of eligible Medicare/Medicaid patients surveyed. Please contact Beacon Technologies, Ltd. for specific pricing.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Beacon Technologies, Ltd. provides monthly graphical results and reports, including verbatim responses - The Voice of The Customer - are captured and reported twice each week. Critical comments are isolated for expedited service quality recovery actions.

Additional Information

Beacon Technologies, Ltd. has been in business since 1993 and offers a variety of customer satisfaction monitoring systems to a number of industries. Beacon Technologies, Ltd. offers flexible and customizable programs for its clients, including a program titled, "nTouch surveying" which combines the responsiveness and personalization of a phone survey with the accuracy and ease of an interactive voice recognition (IVR) system. Using "nTouch surveying", a real person calls the patient and introduces them to a system similar to an IVR. A live person is available for the whole call to assist the patient and gather additional information from them. "nTouch surveying" provides:

- High response rates
- Simplicity, ease of introduction and use
- Flexibility, through custom-designed surveys
- Convenient to patients (24/7 availability)
- Multi-lingual platforms
- Depth, breadth and comparability of information
- Rapid results reporting (including verbatim comments)
- Internet-ready technology
- Meaningful analysis of results

Data consists of information about the customer's service experience and comments regarding issues not covered in the survey session responses. Beacon Technologies Ltd. reporting style uses clear, crisp graphics and tables to present the key data elements. Demographic characteristic profiles of survey respondents are provided for reference, and to ensure that a representative sample of the customer population is achieved.

Reports are developed through custom-designed analyses for each client application. Written and electronic analyses are prepared and posted on the Beacon Technologies, Ltd. secured website ready for staff viewing and action. Raw data files are available for client use.

CAMC Institute

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Charleston, WV 25304

304-388-9914

Mary Emmett

mary.emmett@camc.org

<http://www.camcinstitute.org/research/chsor/default.htm>

Location of Services Offered

National

Experience working with Small Rural Hospitals

CAMC Institute works primarily with CAHs.

Survey Modes

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
	Benchmarking data	
	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	No
	Group/network pricing	
	Hospital employee training/education	
	Incorporate with client's existing patient satisfaction surveys	
	Multilingual survey options	
	Real time/near real time access to collected data	
	Staffed toll-free hotline for patient's questions	
	Other; see below	

Cost Structure and Price

CAMC Institute offers services on a yearly, renewable annual contract. Price structure varies depending upon the hospital's patient volume. There is no "flat" fee. First year's price is based on average discharge rate per month, assuming that approximately 40% of patients will be surveyed. Once a baseline price is set, historical averages can be used to set price. Clients pay for all mail postage and all other costs incurred.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

CAMC Institute sends a raw data report to the hospital monthly, unless otherwise requested. Urgent or high importance material is sent out immediately in PDF or fax form.

Additional Information

CAMC Institute is focused on providing basic, inexpensive HCAHPS services. CAMC Institute sends raw data to the hospital and prefers to steer away from adjusting data and making comparisons. Inaccuracies associated with small samples sizes, regional differences, and so on are the reasons behind this decision. There is no information about CAMC's HCAHPS services offered online.

Communications for Research, Inc.

PO Box BF 61 Highway 8 East

Steelville, MO 65565

573-775-4550

Jim Steber or Nicole Travis

jsteber@cfrinc.net or nicole2@ddbainbridgeassoc.com

<http://www.cfrinc.net/hcahps.html>

Location of Services Offered

National and international - English speaking countries

Experience working with Small Rural Hospitals

Communications for Research, Inc. (CFR) has created a program specifically designed for CAHs and smaller rural hospitals in partnership with Darlene D. Bainbridge & Associates, Inc.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	No
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	Yes
x	Real time/near real time access to collected data	No
x	Staffed toll-free hotline for patient's questions	No
x	Other; see below	No

Cost Structure and Price

Please note that the following prices are for a single facility's HCAHPS surveys and are based on the number of completed surveys. A completed survey is defined as one that meets all the CMS criteria for submission and is successfully submitted.

Pricing for English Language, based on estimated annual completed surveys

100 completed surveys or less \$2,200
101 to 200 completed surveys \$3,400
201 to 300 completed surveys \$4,600

Pricing for English and Spanish Languages, based on estimated annual completed surveys

100 completed surveys or less \$2,300
101 to 200 completed surveys \$3,600
201 to 300 completed surveys \$4,900

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

CFR provides weekly reporting. The data from calls made each week is electronically available to hospitals every Monday morning.

Additional Information

CFR offers a satisfaction measurement and management tool specifically designed to meet the operational needs of smaller hospitals. These services include:

- The ability to generate standardized and customized reports at will
- Benchmarking with a range of peer groups: i.e. all CAHs, CAHs in home state, CAHs in Medicare region, etc.
- Auto-upload from Healthcare Satisfaction Index to Quality Health Indicators (QHI) to automate data entry for users of that benchmarking tool
- Eight hours of internet and telephone support for quality and patient satisfaction management type questions
- Participation in quarterly training webinars related to quality and guest service management
- Discounted pricing for access to the comprehensive HSI tool that offers patient, employee and physician satisfaction measurement

CFR understands the competitive strength of smaller hospitals in creating a patient focused experience and performing well on patient satisfaction measures and view HCAHPS participation as "an opportunity for [rural] hospitals to demonstrate their commitment to making patients not only feel well cared for, but personally cared about."

Conifer Patient Communications, Inc

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<http://www.coniferhealth.com/patientsatisfactionssurveys.html>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Approximately one- fourth of all HCAHPS services administered by Conifer Patient Communications, Inc. are with hospitals that have 50 beds or less.

Survey Modes

<input checked="" type="checkbox"/>	Mail
<input checked="" type="checkbox"/>	Phone
	Interactive Voice Recognition
<input checked="" type="checkbox"/>	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
<input checked="" type="checkbox"/>	Benchmarking data	No
	Client networking/sharing of best practices	
	Competitor comparison reports	
<input checked="" type="checkbox"/>	Customized survey questions	Yes
<input checked="" type="checkbox"/>	Group/network pricing	Discount
	Hospital employee training/education	
<input checked="" type="checkbox"/>	Incorporate with client's existing patient satisfaction surveys	Yes
<input checked="" type="checkbox"/>	Multilingual survey options	Details below
<input checked="" type="checkbox"/>	Real time/near real time access to collected data	No
<input checked="" type="checkbox"/>	Staffed toll-free hotline for patient's questions	No
<input checked="" type="checkbox"/>	Other; see below	No

Cost Structure and Price

At no charge, Conifer Patient Communications, Inc. will provide custom project assessments and price estimates for small, rural hospitals and consortiums. Pricing begins at \$5,000 for the administration and reporting of the Standard HCAHPS mail survey and scales to fit scope-of-work budget considerations for telephone and mixed survey modes.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Real-time daily results reporting available online, including unit-level results.

Additional Information

Conifer Patient Communications, Inc. has developed a best-in-class process for the administration of the CAHPS family of surveys. Through healthcare industry expertise and leading-edge technology, Conifer Patient Communications, Inc. delivers comprehensive survey research solutions for hospitals, systems and healthcare entities. Clients benefit from the flexibility of multiple-mode survey administration techniques with multi-language capability, tools providing real-time access to survey findings, CMS reporting, benchmarking and best practice support.

Both English and Spanish language surveys are offered over the phone at no additional fee in as little as three days post-discharge. Six languages are available via mail surveys at an additional charge.

In addition to HCAHPS surveys, Conifer Patient Communications, Inc. offers to rural hospitals survey services designed for multiple patient settings including the emergency department, outpatient, rehab, and readmission avoidance, plus Clinician & Group CAHPS and other research services.

CRG Medical Info Tool

PO Box 2042
 Bellaire, TX 77402
 713-825-7900
 Douglas Dotan
ddotan@crgmedical.com
http://crgmedical.com/?page_id=41

Location of Services Offered

National; with many clients in Texas

Experience working with Small Rural Hospitals

CRG Medical Info Tool works exclusively with CAHs and small rural hospitals.

Survey Modes

	Mail
x	Phone (preferred)
x	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
	Benchmarking data	
x	Client networking/sharing of best practices	No
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	
x	Hospital employee training/education	Yes
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	No
x	Real time/near real time access to collected data	No
	Staffed toll-free hotline for patient's questions	
x	Other; see below	No

Cost Structure and Price

Base price for small hospitals completing 1-100 surveys is \$1,970 per year (payments are made quarterly). After 100 completed surveys, there is a \$19.70 charge per completed survey. The initial year requires a \$350 payment for orientation/introduction.

Frequency of Reporting to CMS

Monthly

Frequency of Reporting to Client

CRG Medical Info Tool updates clients monthly with an excel sheet containing raw survey data.

Additional Information

CRG Medical Info Tool aims to provide a low cost, high value HCAHPS service tailored to the needs and budgets of CAHs and small rural hospitals. The service includes use of "Info Tool", which provides hospitals with analytics on HCAHPS results. In addition, "Info Tool" transforms survey data into actionable process improvement information. CRG Medical Info Tool includes basic support and assistance with process improvement in its standard form of HCAHPS. Consulting with GP strategies, one of CRG Medical Info Tool's partners, is available at an additional cost. CRG Medical Info Tool is currently in the process of developing a website designed to outline their offerings and to showcase their commitment to low cost, high value HCAHPS services.

CRG Medical Info Tool provides Physician Alignment Surveys, Employee Satisfaction/culture surveys and more. CRG Medical Info Tool offers this service as part of a suite of knowledge-based products designed to help hospitals become high reliability learning organizations, sharing best-practice knowledge rapidly, improving outcomes and preventing harm. "Info Tool" provides leadership with a tool system that statistically correlates key critical success factors and provides unique pathways to improve organizational productivity.

CTQ Solutions, LLC

Orchard Research Park 688 East Main Street

Branford, CT 06405

877-208-7605

Paul Faraclas

pfaraclas@ctqsolutions.com

<http://ctqsolutions.com/csp/ctqprod/WSCTQHCAHPSH.html>

Location of Services Offered

National

Experience working with Small Rural Hospitals

CTQ Solutions, LLC specializes in working with small to mid-sized hospitals.

Survey Modes

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	No
	Hospital employee training/education	
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	Yes
x	Real time/near real time access to collected data	No
	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

No long-term contract is required. Pricing involves a one-time implementation fee in addition to a monthly fee and a per mailing fee. Group/network pricing is available.

Pricing structure follows:

- | | |
|--|-------------------|
| • Subscription Fee | \$58.00 per month |
| • Email Survey Distribution | FREE |
| • Mailed Survey Distribution | \$.99 per survey |
| • Cost per Completed Survey by Patient | \$1.85 per survey |
| • Cost per Completed Survey by Vendor | \$2.55 per survey |
| • Cost per Completed Survey by Facility | \$1.25 per survey |
| • Monthly EdgeSurvey Performance Analysis Report | FREE |

Frequency of Reporting to CMS

Monthly

Frequency of Reporting to Client

Immediately following the monthly Microsoft Excel transmission, each hospital receives a Personalized Summary Report with aggregate, service line and TopBox detail. Completed surveys are reviewable online at any time.

Additional Information

CTQ Solutions, LLC offers a standard version of HCAHPS services with the option for more in depth quality management, patient issue resolution, and other options through their EdgeSurvey Hospital Suite, at an additional cost. With EdgeSurvey, information can be compared by department and across the industry. CTQ Solutions, LLC has been in business since 2008 and their program focuses on customization, flexibility, and cost effectiveness. CTQ Solutions, LLC consistently receives a high response rate (58%+) for their mail surveys and their clients scored “well above all 10 measures for national averages posted on Hospital Compare for data last updated on April 11, 2011.”

Since 2003, CTQ Solutions, LLC has not raised a price on their services and operates on the philosophy that they should earn a client’s business. Employee, physician, referring physician, and outpatient satisfaction surveys are available in addition to HCAHPS services and can be administered by mail or electronically.

CTQ Solutions, LLC focuses on customizing their services for each client’s need. CTQ Solutions, LLC offers an intro webinar providing an overview of services and discussion of features, benefits, and options to recommend a flexible and cost effective program.

Field Research Corporation

601 California Street, Suite 900

San Francisco, CA 94108

415-392-5763

Kevin Howard

kevinh@field.com

<http://field.com/health.html>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Field Research Corporation has conducted HCAHPS surveys with approximately 15 small rural hospitals.

Survey Modes

x	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	Depending on question length
x	Group/network pricing	
	Hospital employee training/education	
x	Incorporate with client's existing patient satisfaction surveys	No
x	Multilingual survey options	
x	Real time/near real time access to collected data	Depending on extent of data needed
x	Staffed toll-free hotline for patient's questions	No
	Other; see below	

Cost Structure and Price

Cost varies depending on quantity of interviews conducted and extent of data reporting. Contact for an estimate.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Monthly to daily/"real-time"

Additional Information

Field Research Corporation has extensive experience in healthcare research. Studies in this area include many large, landmark surveys of healthcare attitudes and behavior among the general public as well as highly focused efforts to assess levels of satisfaction with or reactions to specific products and services. Clients include various government agencies, academic institutions, and non-profit organizations as well as healthcare insurance plans, hospitals, clinics and other service providers.

Several of Field Research Corporation's senior professionals have specialized in the health care industry and can bring a high degree of knowledge and experience to bear in this area.

Fields Research, Inc.

3814 West Street Suite 110

Cincinnati, OH 45227-3743

513-821-6266

Ken Fields

KEN@FIELDSRESEARCH.COM

https://www.fieldsresearch.com/hhcahps_compliance.php

Location of Services Offered

National

Experience working with Small Rural Hospitals

Fields Research, Inc. specializes in working with rural home health care providers and is eager to increase their volume of small rural hospitals.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
x	Competitor comparison reports	No
	Customized survey questions	
x	Group/network pricing	No
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
	Multilingual survey options	
x	Real time/near real time access to collected data	No
	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

The monthly cost is \$250-\$500. Clients are charged on a quarterly basis. There is also a one-time setup fee of approximately \$200. There is no contract and no hidden fees.

Frequency of Reporting to CMS

As of May 2012, reporting is monthly. Soon, reporting will be quarterly.

Frequency of Reporting to Client

As of May 2012, reporting is monthly. Soon, online data will be updated on a nightly basis.

Additional Information

Fields Research, Inc. is a family owned and operated business. As one of the longest standing data collection firms in the United States, the company's main focus is on conducting Home Health CAHPS, but is in the process of expanding their HCAHPS services to offer everything that is currently available to their HHCAHPS clients. These services include: consultation services (at an additional cost), the option for customized survey questions, and multilingual surveying options. The website will be updated with the latest offerings.

Fields Research, Inc. research devotes resources to focus groups within the greater Cincinnati area and to web surveying and other areas of research. Fields Research, Inc. offers benchmarking and competitor comparisons that are accessible online and offer a number of viewing options. Examples showing this format are available on the website.

Gilmore Research Group

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John Cell

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<http://www.gilmore-research.com/>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Gilmore Research Group works with a number of rural hospitals but on consulting and surveying services that are separate from HCAHPS. CAHs and smaller rural hospitals are not their main client base.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
	Benchmarking data	
	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	No
	Hospital employee training/education	
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	Unknown
x	Real time/near real time access to collected data	Unknown
	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

Gilmore Research Group offers a fixed yearly fee that is billed quarterly. Contact for individual pricing details.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Gilmore Research Group reports quarterly to clients, dependent upon client's needs. The ability to view survey data online will be ready June 2012.

Additional Information

Gilmore Research Group offers customizable services and works with each of their clients to provide services that fit individual needs. In fact, Gilmore Research Group's HCAHPS offerings were created not as a separate offering, but as a requested add-on by a number of clients who were already using Gilmore Research Group as a resource and were looking to start up an HCAHPS initiative. Gilmore Research Group is in the process of creating a web-based system that will allow clients to access data in near real time. Gilmore Research Group is focused on assisting clients in responding to the regulatory changes and evolving competitive marketplace in today's healthcare industry. In addition to HCAHPS, Gilmore Research Group offers other types of market research, consultation and focus group activities.

HealthStream

209 10th Avenue South Suite 536

Nashville, TN 37203

615-224-1550

Michael Scarlett or Berke Bilbay

michael.scarlett@healthstream.com or berke.bilbay@healthstream.com

<http://www.healthstream.com/products/patient-insights.aspx>

Location of Services Offered

National

Experience working with Small Rural Hospitals

HealthStream currently works on HCAHPS with about 700 hospitals across the country, 100 of which are CAHs.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
x	Competitor comparison reports	No
x	Customized survey questions	Yes
x	Group/network pricing	
x	Hospital employee training/education	No
x	Incorporate with client's existing patient satisfaction surveys	Yes
x	Multilingual survey options	Yes
x	Real time/near real time access to collected data	No
x	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

HealthStream charges a CAH a range of \$3,000 to \$5,000 annually, although pricing varies based on size and options selected.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

The Insights Online reporting platform provides always-accessible reports and survey data. All survey data including recorded "Voice of the Patient" comments are uploaded and are available online the day after the survey is completed.

Additional Information

HealthStream provides CAHs and smaller hospitals with HCAHPS services that are priced starting in the middle to low range and offer a nice selection of additional options. The Insights Online reporting platform is an "easy-to-use yet powerful tool which permits a wide range of options, from advanced filtering capabilities to scheduling automatic delivery of custom reports". A number of networking/learning opportunities are also available. These include: HealthStream's annual summit, webinars, and the HealthStream community (offering blogs, discussions, wikis, etc.). In addition to HCAHPS, HealthStream offers a number of other potentially useful services, including: learning modules and an online courseware library for employee learning and training, employee, community and physician insight tools, and an HCAHPS app for iPhone/iPad. HealthStream offers a large variety of tools and resources at an additional cost. For information, please visit their website.

Informed Decisions, Inc.

PO Box 23384

Minneapolis, MN 55423-9840

651-335-9498

Jim Theurer

jim@jtstrategy.com

<http://www.informeddecisions.net/IDI-PatientSatisfaction.html>

Location of Services Offered

National, with an "in depth understanding of healthcare in the upper-Midwest"

Experience working with Small Rural Hospitals

Informed Decisions, Inc. specializes in working with CAHs and small rural hospitals.

Survey Modes

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
x	Competitor comparison reports	
x	Customized survey questions	Yes
x	Group/network pricing	-
x	Hospital employee training/education	Yes
x	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	
x	Real time/near real time access to collected data	
x	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

Prices start at \$3,000 annually.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Informed Decisions, Inc. (IDI) reports back to hospitals on a monthly basis and provides a quarterly summary report within 6 weeks of the end of the last discharge for that quarter. The summary report contains frequency data for each question.

Additional Information

IDI offers personalized HCAHPS services for its clients, especially in the upper Midwest. The organization provides over the phone training for its HCAHPS services and is willing to meet in person with hospital leadership groups to determine what issues are most important, review the results, and help create an action plan. Using a database of responses from hundreds of other providers, IDI can benchmark organizational scores against others in the industry. At an additional cost, IDI offers employee engagement and leadership development programs.

JL Morgan & Associates, Inc.

P.O. Box 360481

Birmingham, AL 35236

205-408-8774

Jeff Morgan

jefflmorgan@aol.com

<http://www.jlmorganandassociates.com>

Location of Services Offered

National

Experience working with Small Rural Hospitals

JL Morgan & Associates, Inc. was founded to focus on rural needs and continues to do so. Much of the work they currently do for rural hospitals involves coordination with Federal grant programs.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	
x	Hospital employee training/education	No
x	Incorporate with client's existing patient satisfaction surveys	No
x	Multilingual survey options	No
x	Real time/near real time access to collected data	No
x	Staffed toll-free hotline for patient's questions	No
x	Other; see below	

Cost Structure and Price (Three Pricing Options; Discounts available)

1. HCAHPS only: Should the hospital wish to participate in the HCAHPS program only at the level by which the data will be publicly reported (i.e. 100 – 300 annual HCAHPS surveys completed), the program cost is \$290 per month with a one-time database set up fee of \$150.

2. COST BENEFIT: Real time Patient Satisfaction, as well as HCAHPS - Should the hospital wish to participate in both the Real Time Patient Satisfaction Program by completing a minimum of 85-monthly Real Time Patient Satisfaction surveys monthly, the program cost is \$844 per month with a one-time database set up fee of \$150. Additionally, within this structure, JL Morgan & Associates, Inc. will provide the HCAHPS program (300 surveys annually) at no cost. In other words, the HCAHPS program is provided as an added benefit to the Real Time Patient Satisfaction Program. If the hospital participates by minimally completing 200 Real Time Patient Satisfaction surveys monthly, JL Morgan & Associates, Inc. will provide the HCAHPS program as well as the Culture of Safety Survey program at no cost.

3. Patient Satisfaction only: Should the hospital wish to participate in the Patient Satisfaction program only, the program cost is simply \$ 9.93 per completed survey. Should the hospital client agree to participate in the patient satisfaction program to minimum volume of 65 total surveys per month, JL Morgan & Associates, Inc. will waive all database setup costs. Cost example: 65 patient satisfaction surveys at \$9.93 per survey = \$645 per month. There are no other costs whatsoever.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Data is always available in "real-time".

Additional Information

JL Morgan & Associates, Inc. offers (HCAHPS, HHCAHPS, Real Time Patient Satisfaction, Employee Morale, and Culture of Safety, Preventative Care (i.e. Discharge Follow-Up Survey) paperless surveys that require no assistance from the hospital. The software that supports the survey programs is encrypted and is written and created exclusively to provide the hospital, regardless of size, with a statistically sound, cost-effective method of determining, tracking and benchmarking real-time data. Since the survey methodology is 'telephone only', they have the ability to provide real time data that can be utilized to immediately evaluate patient perceptions and subsequently provide the hospital with data necessary to affect patient loyalty. The HCAHPS and Patient Satisfaction programs meet the requirements of the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO) and are Health Insurance Portability and Accountability Act (HIPAA) compliant. In addition to its surveying services, JL Morgan & Associates, Inc. offers "hands on" educational activities.

Minnesota Rural Health Cooperative

190 East 4th Street North P.O. Box 155

Cottonwood, MN 56229

507-423-5300 ext 214

Lou Wischer

lwischer@mrhc.net

<http://www.mrhc.net/>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Minnesota Rural Health Cooperative specializes in working with rural providers, specifically CAHs.

Survey Modes:

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist:

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	
	Hospital employee training/education	
x	Incorporate with client's existing patient satisfaction surveys	No
	Multilingual survey options	
	Real time/near real time access to collected data	
X	Staffed toll-free hotline for patient's questions	No
	Other; see below	

Cost Structure and Price

Clients are charged an annual fee of \$2995 plus a per piece mailing fee of \$1.85 per piece for the first mailing and \$1.35 per follow up mailing. There are no setup charges or additional fees for customized reports. The cost for the first and second mailings include; daily negative comments sent to quality contact as they are sent in, typed comments sent weekly as well as at the end of the quarter, quarterly reports that includes state and national benchmark comparisons, postage, customized letterhead, customized envelopes, customized surveys, etc. Contact for specific pricing.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Minnesota Rural Health Cooperative sends reports quarterly, within 30 days of survey complete by date. Quarterly reports contain details on individual questions on the HCAHPS survey along with information on historical performance. Patient comments will be sent through secure email weekly. Urgent or negative comments are sent daily for the hospital's review.

Additional Information

Minnesota Rural Health Cooperative provides HCAHPS and has been in the patient satisfaction surveying business for 12 years. As a Minnesota Rural Health Cooperative, the organization has a high level of familiarity with the issues and challenges faced by rural communities and providers. Highlighted services include:

- Reports processed and completed at the end of each quarter and emailed via Zix Secure email
- National, state and agency bench mark comparisons are included on the reports
- Scanned and emailed comments for issues that may require immediate attention
- No fee for any additional questions

National Research Corporation

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Lincoln, NE 68508

402-475-2525

Ruta Jaudegis

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<http://www.nrcpicker.com/hcahps>

Location of Services Offered

National and International, with a strong patient experience client base in the South Atlantic region (Delaware, Maryland, District of Columbia, Virginia, West Virginia, North Carolina, South Carolina, Georgia, Florida) and the state of California.

Experience working with Small Rural Hospitals

National Research Corporation is currently working with 100-150 small, rural hospitals. They offer multiple options for HCAHPS, including a CAH-specific program.

Survey Modes:

x	Mail
x	Phone
x	Interactive Voice Recognition
x	Mixed (mail and phone)

Services Checklist:

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	
x	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	
x	Group/network pricing	
x	Hospital employee training/education	
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	
x	Real time/near real time access to collected data	
x	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

Contact for pricing

Frequency of Reporting to CMS

Monthly

Frequency of Reporting to Client

National Research Corporation provides real-time, 24-7 access to data. Hospitals can continually track the outcome of research efforts as data comes in and is linked to the hospital's individual Action Plan reports. These single-page reports inform hospitals of everything they need to know about their performance and provide clear actionable information for process improvements.

Additional Information

For more than 30 years, National Research Corporation has been at the forefront of patient-centered care. Today, the company's focus on empowering customer-centric healthcare across the continuum transcends patient-centered care to incorporate families, communities, employees, and other stakeholders.

Currently recognized by *Modern Healthcare* as the largest patient satisfaction measurement firm in the U.S., National Research Corporation is dedicated to representing the true voice of patients and other healthcare stakeholders. This integration of cross-continuum metrics and analytics uncovers insights for effective performance improvement, quality measurement, care transitions and many other factors that impact population health management.

In addition to a standard HCAHPS survey, other programs offered include: Picker Universal, which measures patient, employee and physician experience within one unified program; Patient & Family Experience; Resident & Family Experience; Employee Engagement; Physician Engagement; Home Health CAHPS, Clinician & Group CAHPS; Patient Outreach Programs; Market Insights; Healthcare Analytics; and Clinical & Outcomes Analytics.

National Research Corporation also has a number of tools and resources available to help a hospital make sense of their results and facilitate improvement. National Research Corporation offers several in-person regional networking events across the country where participants are provided the opportunity to learn from peers share best practices related to improving the patient experience in the hospital and clinic setting. Weekly webinars are also offered on a variety of topics for clients eager to learn how to effectively use their data, gain additional insight into their Catalyst reporting tool, and hear client success stories. The annual NRC Picker International Patient-Centered Care Symposium is one of their client largest events, where healthcare innovators from around the world convene to discuss the latest in patient-centered excellence.

To find more information on National Research Corporation events on patient-centered care, please visit their website.

OutSource Services, Inc.

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<http://outsourcenc.com/HCAHPS.html>

Location of Services Offered

National

Experience working with Small Rural Hospitals

None

Survey Modes:

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist:

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
	Competitor comparison reports	
x	Customized survey questions	No
x	Group/network pricing	
x	Hospital employee training/education	No
x	Incorporate with client's existing patient satisfaction surveys	No
x	Multilingual survey options	No
	Real time/near real time access to collected data	
x	Staffed toll-free hotline for patient's questions	No
	Other; see below	

Cost Structure and Price

\$3,300 per year (mailing up to 75 surveys per month); Price may be lower for exceptionally small hospitals.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Outsource Services, Inc. (OSI) provides reports quarterly, although clients can call or email for updates at any time. Data will be processed and available on a weekly basis. Reports include:

- 1) Individual hospital scores
- 2) How the hospital compares to CMS benchmarks as well as other similar hospitals
- 3) If requested, OSI will supply raw data for use of individual analysis

Additional Information

OSI employs the CMS approved protocol to generate the most reliable and accurate HCAHPS data possible. Each patient in the sample will receive a mail packet which includes a cover letter, survey, and a postage-paid business reply envelope. All non-respondents will receive a second, follow-up mailing. A toll-free number is supplied to patients (staffed by OSI employees) for additional questions about the survey.

Press Ganey Associates

404 Columbia Place

South Bend, IN 46601

800-232-8032

Deirdre Mylod, PhD

dmylod@pressganey.com

http://pressganey.com/ourSolutions/hospitalSettings/satisfactionPerformanceSuite/HCAHPS_Insights.aspx

Location of Services Offered

National

Experience working with Small Rural Hospitals

Press Ganey Associates has experience with CAHs and small rural hospitals and is currently working with 182 CAHs nationwide on HCAHPS.

Survey Modes

x	Mail
x	Phone
	Interactive Voice Recognition
x	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
x	Competitor comparison reports	No
x	Customized survey questions	No
x	Group/network pricing	No
x	Hospital employee training/education	No
x	Incorporate with client's existing patient satisfaction surveys	No
x	Multilingual survey options	No
x	Real time/near real time access to collected data	No
x	Staffed toll-free hotline for patient's questions	No
x	Other; see below	No

Cost Structure and Price

Press Ganey Associates provides a CAH-specific fee structure. There is a yearly flat fee that varies based on volume and possible discounts from group/network pricing. All services listed above are included with Press Ganey Associates' HCAHPS offerings. There are no up-charges for anything. The per-mailing fee for the mail method ranges from \$1.85 to \$2.00. There is a per completed call phone fee for the phone method. Contact for pricing details.

Frequency of Reporting to CMS

Quarterly with audits two times a month to ensure data is being reported accurately and no mistakes are made.

Frequency of Reporting to Client

Press Ganey Associates provides hospitals with national, regional and CAH-to-CAH comparison reports monthly. The standard report is broken down to the question level and can be viewed by department within the hospital. Reports include the current month's reporting as well as the previous 3 months for trending purposes and predictive future HCHAPS percentile rankings.

Additional Information

Press Ganey Associates offers a number of CAH specific services, including: customized survey questions available in 32 languages; a database of comparisons containing only CAHs (with the capability to compare question by question); small hospital specific newsletter and webinars; and, a dedicated team of 20 CAH/small market sales and service teams that understand the challenges of the rural, community, and critical access hospitals. Press Ganey Associates features networking opportunities and sharing of best practices among its members. There is an online forum for members to seek peer support and sharing of successes. Each hospital is assigned a personal improvement manager to help raise HCAHPS scores using evidence based best practices.

Professional Research Consultants, Inc.

11326 P Street

Omaha, NE 68137

800-742-3322

Jan Gnida or Doug Bare

JGnida@PRConline.com or DougBare@PRConline.com

http://prconline.com/index.php/content_pages/view/39

Location of Services Offered

National

Experience working with Small Rural Hospitals

Professional Research Consultants, Inc. serves primarily health systems or larger medical centers. Services for rural clients are not emphasized in any informational materials.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
	Competitor comparison reports	
x	Customized survey questions	No
	Group/network pricing	
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
	Multilingual survey options	
x	Real time/near real time access to collected data	No
	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

Professional Research Consultants (PRC) price covers all aspects of HCAHPS work proposed, excluding travel expenses:

- Analysis/Reporting Fee \$ 1,000
- HCAHPS Telephone Interviews \$ 15/Completed interview (300 Annual target from CMS)

All-inclusive total= \$5,500 per facility

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Survey responses are available online moments after a completed interview. Data and reports that capture snapshots of critical areas are available anytime to help individual nursing managers break down their HCAHPS scores by unit and recognize top performers for their best practices and bring transparency to units that need additional resources in each dimension. In addition, PRC's "Target Tracker" enables users with the ability to view exactly how many more "Always," "9/10's" and "Yes" responses are needed to reach goals.

Additional Information

PRC offers educational resources and sharing of best practices to improve overall quality and service. PRC offers a four-phase action planning process that helps managers map out action plans, collaborate with others, document their processes and see the results on initiatives in real-time.

PRC provides leadership training at no extra charge which helps leaders to effectively use data for improvement. For each of its clients, PRC provides a one-on-one relationship with an expert project manager and access to any of PRC's specialists in statistical analysis, client education and other departments.

Research & Marketing Strategies, Inc.

15 East Genesee Street Suite 210

Baldwinsville, NY 13027

315-635-9802

Megan O'Donnell or Kim Cucarro

megano@RMSresults.com or KimC@RMSresults.com

<http://www.rmsresults.com/index.php?page=healthcare>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Research & Marketing Strategies, Inc. caters specifically to small rural hospitals.

Survey Modes

x	Mail
x	Phone
	Interactive Voice Recognition
x	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
x	Competitor comparison reports	
x	Customized survey questions	No
	Group/network pricing	
	Hospital employee training/education	
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	Yes
x	Real time/near real time access to collected data	See Below
	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

Modality	Description	Pricing
SET-UP FEE	This represents a one-time cost to setup the hospital's survey into the statistical software. It incorporates branding, testing, sample data transfer, and CMS set-up.	\$750 (One-time)
MAILMODE: <i>Option 1</i>	Patient satisfaction surveying is done via a mailed survey instrument. Monthly fee is based only upon returned surveys.	\$20 per completed survey
MAIL MODE: <i>Option 2</i>	Patient satisfaction surveying is done via a mailed survey instrument. Monthly fee is based upon number of patients sampled.	\$5.75 per patient surveyed
PHONEMODE	Patient satisfaction surveying is done via a telephone survey. Monthly fee is based only upon completed telephone surveys.	\$25.25 per completed survey
MIXED MODE	Patient satisfaction surveying is done via both mailed survey and telephone survey. Monthly fee is based upon the mode of the completed surveys. There is a \$2.50 charge for mailed surveys returned after a phone call attempt.	\$20 per returned mail survey plus \$25.25 per completed telephone survey
ENHANCED REPORTING	Clients have the option to purchase enhanced quarterly reporting that longitudinally compares data and identifies trends. National benchmarking is also conducted.	\$300 per quarter

Frequency of Reporting to CMS

Monthly or quarterly reports, depending upon the hospital's preference.

Frequency of Reporting to Client

Monthly reporting guided by a Research & Marketing Strategies, Inc. (RMS) representative that provides personalized feedback and assistance.

Additional Information

RMS is a full service marketing and research firm with a dedicated healthcare division. Many services are available in addition to HCAHPS, including demand studies, feasibility studies, staff surveying, strategic planning, community health assessments and more. RMS runs their own on-site call center and they are currently in the process of setting up a real-time access to survey results and data. RMS is willing to work with their clients to customize a project or program to best meet each client's individual needs.

Rural Comprehensive Care Network

995 E Highway 33, Suite 2

Crete, NE 68333

402-826-3737

Nicole Gohring

ngohring@neb.rr.com

<http://rccn.info/surveys/h-cahps>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Rural Comprehensive Care Network caters exclusively to small rural hospitals.

Survey Modes

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	Details below
x	Competitor comparison reports	No
x	Customized survey questions	No
x	Group/network pricing	
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	No
	Real time/near real time access to collected data	
	Staffed toll-free hotline for patient's questions	
	Other; see below	

Cost Structure and Price

Rural Comprehensive Care Network (RCCN) charges \$600 annual fee plus \$3 per surveyed patient.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Monthly. Comments from the surveys are typed and distributed to the administrators monthly. If a patient response indicates the need for immediate attention, that response is faxed or sent in the mail immediately.

Additional Information

RCCN currently offers only the mail method of distributing surveys, but are open to work with hospitals who would like to utilize other methods. The benchmarking offered by RCCN compares a client hospital to other similar hospitals who are currently working with RCCN. Since RCCN works exclusively in the rural community, this method ensures hospitals are being compared to “peers” rather than large hospitals. RCCN does not currently offer a “structured” client networking option, but do provide hospitals the opportunity to network amongst themselves for the purposes of sharing best practices. Spanish language surveys are available at no additional charge.

Rural Wisconsin Health Cooperative

880 Independence Lane

Sauk City, WI 53583

800-225-2531

Bonnie Laffey

blaffey@rwhc.com

<http://rwhc.com/Services/QualityPrograms/CAHPSHospitalSurvey.aspx>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Rural Wisconsin Health Cooperative works exclusively with small rural hospitals.

Survey Modes

x	Mail
	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
x	Client networking/sharing of best practices	No
	Competitor comparison reports	
x	Customized survey questions	Yes
x	Group/network pricing	No
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
x	Multilingual survey options	No
x	Real time/near real time access to collected data	No
x	Staffed toll-free hotline for patient's questions	No
x	Other; see below	No

Cost Structure and Price

Rural Wisconsin Health Cooperative (RWHC)'s HCAHPS pricing is dependent upon the survey volume. The structure consists of an annual access fee and a per survey fee. Group discounts are available when 3 or more hospitals purchase together.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

RWHC provides daily data and reports with 9 quarters of trending information to assist with quality improvement plans.

Additional Information

RWHC's primary focus is on small rural hospitals, so RWHC understands the variety of responsibilities charged to hospital staff and thus, RWHC's program is designed to keep the hospital's workload to a minimum. The only responsibility required of hospitals is to provide patient information. RWHC will do the rest of the necessary processing, including:

- Mailing the surveys
- Tracking responses
- Mailing follow-up surveys to non-responders
- Maintaining a hot line to answer patient questions about the survey
- Uploading data to CMS (as appropriate)
- Providing participating hospitals with a response rate for their facility
- Generating real time reports

RWHC also hosts regular teleconferences that allow for sharing, networking and educational opportunities on a variety of program related topics, including: "How to Read and Understand HCAHPS Reports" and "Best Practices for Improving Patient Satisfaction Scores."

Synovate

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 Falls Church, VA 22043-2004
 703-663-7280

David Bryant

david.bryant@synovate.com

<http://www.synovate.com/healthcare/expertise/cahps.jsp?item=cs>

Location of Services Offered

International

Experience working with Small Rural Hospitals

Synovate works primarily with large hospital associations or is contracted by the government for large CAHPS projects, such as the Veterans Association. Synovate is not currently focused on conducting HCAHPS services with small, rural hospitals.

Survey Modes

x	Mail
x	Phone
x	Interactive Voice Recognition
x	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
x	Competitor comparison reports	No
x	Customized survey questions	No
x	Group/network pricing	No
x	Hospital employee training/education	No
	Incorporate with client's existing patient satisfaction surveys	
	Multilingual survey options	
	Real time/near real time access to collected data	
	Staffed toll-free hotline for patient's questions	
	Other; see below	

Cost Structure and Price

Synovate charges an initial set up fee of \$500 to \$1,000, in addition to an annual service fee of \$2,500 to \$6,000, pricing varies based upon the size of the organization or association.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

Synovate provides a full summary of the results including: comparisons with past results, comparisons with the National Committee for Quality Assurance (NCQA)'s national database findings and benchmark data used in the Managed Care Organization's accreditation process. The frequency of reporting to the client was not specified.

Additional Information

As an NCQA certified CAHPS vendor, Synovate has all the resources to make HCAHPS administration run smoothly. Synovate also offers a unique Member Retention Model (MRM) designed to identify attributes of members' care experience that drives patient satisfaction with their health plans and healthcare. The MRM identifies:

- The foundation of member satisfaction
- Areas that provide opportunity for growth in member satisfaction
- The impact of improvement in specific care areas of members' decisions to stay with your plan

The Dallas Marketing Group Inc.

12221 Merit Drive, Suite 850

Dallas, TX 75251

972-991-3600

Michael Egan

m.egan@The-DMG.com

<http://the-dmg.com/>

Location of Services Offered

National

Experience working with Small Rural Hospitals

Approximately 50% of The Dallas Marketing Group, Inc.'s client base is small rural hospitals.

Survey Modes

	Mail
x	Phone
	Interactive Voice Recognition
	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
x	Benchmarking data	No
	Client networking/sharing of best practices	
x	Competitor comparison reports	No
x	Customized survey questions	Yes
x	Group/network pricing	Yes
x	Hospital employee training/education	Yes
x	Incorporate with client's existing patient satisfaction surveys	Yes
x	Multilingual survey options	Yes
x	Real time/near real time access to collected data	No
	Staffed toll-free hotline for patient's questions	
x	Other; see below	

Cost Structure and Price

The Dallas Marketing Group, Inc. (DMG)'s pricing starts at \$340 per month if the client hospital will not meet 300 patient surveys per year; \$375 if the hospital will meet the 300 survey requirement. DMG offers a discount for hospital networks and group purchasing. Discounts are typically offered with a group of 6 or more clients and start at 10% off.

Frequency of Reporting to CMS

Monthly

Frequency of Reporting to Client

Quarterly and annually. Monthly reporting is available at an additional cost.

Additional Information

DMG has been in the market research and marketing consulting business for 37 years. Their reports provide detailed feedback to hospitals on all issues measured by the HCAHPS survey in addition to those publicly reported. This level of detail provides additional insight about patient attitudes. The hospital is encouraged to discuss that feedback with DMG by phone or internet conferencing. Market research services including surveys, focus groups and in-depth interviews are available for other departments of the hospital at an additional cost.

The Jackson Group

219 1st Avenue SW

Hickory, NC 28602

828-328-8968

Janette Jones

jjones@thejacksongroup.com

<http://thejacksongroup.com/healthcare/hcahps/>

Location of Services Offered

National

Experience working with Small Rural Hospitals

The Jackson Group's niche is small to mid-sized hospitals.

Survey Modes

<input checked="" type="checkbox"/>	Mail
<input checked="" type="checkbox"/>	Phone
<input type="checkbox"/>	Interactive Voice Recognition
<input checked="" type="checkbox"/>	Mixed (mail and phone)

Services Checklist

Available Services? If yes, mark "x"	General Service Listings	Additional Charge?
	Benchmarking data	
	Client networking/sharing of best practices	
<input checked="" type="checkbox"/>	Competitor comparison reports	No
<input checked="" type="checkbox"/>	Customized survey questions	Yes
<input checked="" type="checkbox"/>	Group/network pricing	
	Hospital employee training/education	
<input checked="" type="checkbox"/>	Incorporate with client's existing patient satisfaction surveys	No
<input checked="" type="checkbox"/>	Multilingual survey options	Yes
<input checked="" type="checkbox"/>	Real time/near real time access to collected data	Yes
	Staffed toll-free hotline for patient's questions	
<input checked="" type="checkbox"/>	Other; see below	

Cost Structure and Price

The Jackson Group offers standard HCAHPS service attempts to reach a target of 300 completed surveys with an annual price of \$1,500-\$3,500. Clients are billed quarterly.

Frequency of Reporting to CMS

Quarterly

Frequency of Reporting to Client

The Jackson Group provides a dashboard that is updated nightly, as well as a quarterly report which includes up to 5 competitor comparisons and 3 service line breakouts per quarter that give an organization an idea of how specific departments are performing. Competitor comparisons are more difficult for CAHs due to their low amount of data, so there is an additional charge to compare CAHs to CAHs.

Additional Information

All of The Jackson Group's clients receive are assigned a direct project manager and a data specialist who are available to answer questions and address an organization's individual needs. For each service, any completed survey calls beyond the given 300 (standard) or 600 (achieve) are charged on a per completed call basis. The Jackson Group runs their own multilingual call center and the Spanish surveying option is offered at \$100 per quarter. The Jackson Group allows for customization of services. Some additional services (at an additional price) include: employee or physician satisfaction services, market studies and the "Rounding pad" -a mechanism to enter patient feedback on-site which provides an opportunity for immediate improvement at the facility and helps to ensure patient satisfaction. It is run through an iPad unit and uses custom, open ended and/or standard questions.

APPENDIX A: SMALL GROUP MEETINGS

HCAHPS Small Group Meeting
Thursday, April 19 2012 4:30 pm- 5:30 pm
Room: Quartz B, Hyatt Regency

The purpose of this meeting is to capture a body of knowledge regarding the utilization of small rural hospitals' participation with Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) surveys. Information gleaned from this small group meeting will be shared with other state, rural hospital and network personnel, as well as staff from the Office of Rural Health Policy. The attached questions will be used to guide our discussion during this session.

1. State Flex Programs: Are you organizing or networking the HCAHPS processes on a state wide level? If so, what has the response been from the hospitals?
2. What are the benefits for critical access hospitals (CAHs) participating in HCAHPS from your perspective?
3. What are the barriers that CAHs face in completing HCAHPS surveys in your state? What are the hospital's concerns?
4. What has been the experience of CAHs in your state working with HCAHPS vendors?
5. Please identify additional issues we should be aware of in supporting greater CAH participation in HCAHPS.

APPENDIX B: HCAHPS VENDOR QUESTIONS

1. Which region (or States) does your agency offer HCAHPS services?
2. On average, how frequently does your agency work with small rural hospitals (50 beds or less) on HCAHPS within one year?
3. On a scale of Excellent, Good, Fair, Poor; Please rate your agency's level of understanding of the unique attributes and challenges of a small rural hospital (50 beds or less). (Follow up: What do you view as some of the attributes and challenges of rural hospital's participation with HCAHPS?)
4. Please identify all of the method(s) your agency utilizes to administer HCAHPS surveys (mail, telephone, active interactive voice recognition, mixed mail/telephone).
5. What should a small rural hospital anticipate paying for a basic HCAHPS service from your agency? What is the average price range (including annual/start up fees and per survey charges, if applicable) for each method: mail, telephone, active interactive voice recognition, mixed mail/telephone.
6. Please identify all of the services your agency includes in a basic HCAHPS service:
 - Benchmarking data
 - Client networking/sharing of best practices
 - Competitor comparison reports
 - Customized survey questions
 - Group/network pricing
 - Hospital employee training/education
 - Incorporate with client's existing patient satisfaction surveys
 - Multilingual survey options
 - Real time/near real time access to collected data
 - Send HCAHPS data to CMS
 - Staff toll-free hotline for patient's questions
 - Survey printing, postage, and/or telephone charges
 - Other
7. Please identify all of the HCAHPS services your agency offers at an additional charge:
 - Benchmarking data
 - Client networking/sharing of best practices
 - Competitor comparison reports

- Customized survey questions
 - Group/network pricing
 - Hospital employee training/education
 - Incorporate with client's existing patient satisfaction surveys
 - Multilingual survey options
 - Real time/near real time access to collected data
 - Send HCAHPS data to CMS
 - Staff toll-free hotline for patient's questions
 - Survey printing, postage, and/or telephone charges
 - Other
8. How frequently does your agency send HCAHPS reports to a client? (monthly, quarterly, annually, no reports provided, depends on client's request)
9. How frequently does your agency send HCAHPS data to CMS? (monthly, quarterly, annually, no reports provided, depends on client's request)
10. Please share any additional information you would like small rural hospitals to know about your HCAHPS services.