

Survey-Specific Analysis Instructions for the CAHPS® Health Plan Survey 4.0

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Purpose of Survey-Specific Instructions

This document explains how to adapt the CAHPS Analysis Program Version 3.6a (also known as the macro) to analyze the results of the CAHPS Health Plan Survey 4.0. Comprehensive instructions for using this program for any CAHPS survey are provided in *Instructions for Analyzing Data from CAHPS Surveys* (Document 2015). This document is included in the *CAHPS Health Plan Survey and Reporting Kit 2008*. If you will be analyzing results of the 4.0 version of the Health Plan Survey, please read both documents carefully so that you are clear on how to use the macro for this survey.

What the Analysis Program Does

The CAHPS Analysis Program generates output that you can use to calculate the performance of various entities, such as health plans, hospitals, clinics, counties, States, regions, or any other appropriate units of measurement to show how one entity's performance compares to the overall performance of all other entities. The program generates both text output and SAS data sets, which provide information on the scores for global ratings, composite measures, and individual items.

Global Ratings

Global ratings are based on four survey items from the CAHPS Health Plan Survey 4.0 – Adult Commercial Questionnaire that ask the respondents to assess their health plan and the quality of care received in the last 12 months (6 months for Medicaid populations) on a scale of 0 to 10. The global rating items are listed on the next page. When submitting these for analysis with the CAHPS macro, you will need to set the vartype=2.

Rating Measures in the Health Plan Survey 4.0	
Q8	Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 12 months?
Q15	Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?
Q19	We want to know your rating of the specialist you saw most often in the last 12 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate the specialist?

Q27 Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

Composite Measures

Composite measures, also known as reporting composites, are groupings of two or more items that address the same dimensions of health care or health insurance plan services. Both the Medicaid and the commercial versions of the Adult Questionnaire have four composites:

- Getting needed care (2 items);
- Getting care quickly (2 questions);
- How well doctors communicate (4 questions); and
- Health plan information and customer service (2 questions).

In the Health Plan Survey, all of the items in a composite have the same response options: they use the “how often” scale, where

1=Never, 2=Sometimes, 3=Usually, and 4=Always.

The composites and the individual items included in each one are listed on the next page. When submitting these for analysis with the CAHPS macro, you will need to set the vartype=3.

Composite Measures in the Health Plan Survey 4.0 (Adults)	
Getting Needed Care	
Q17	In the last 12 months, how often was it easy to get appointments with specialists?
Q21	In the last 12 months, how often was it easy to get the care, tests, or treatment you thought you needed through your health plan?
Getting Care Quickly	
Q4	In the last 12 months, when you needed care right away, how often did you get care as soon as you thought you needed?
Q6	In the last 12 months, not counting the times you needed care right away, how often did you get an appointment for your health care at a doctor's office or clinic as soon as you thought you needed?

How Well Doctors Communicate	
Q11	In the last 12 months, how often did your personal doctor explain things in a way that was easy to understand?
Q12	In the last 12 months, how often did your personal doctor listen carefully to you?
Q13	In the last 12 months, how often did your personal doctor show respect for what you had to say?
Q14	In the last 12 months, how often did your personal doctor spend enough time with you?
Health Plan Information and Customer Service	
Q23	In the last 12 months, how often did your health plan's customer service give you the information or help you needed?
Q24	In the last 12 months, how often did your health plan's customer service staff treat you with courtesy and respect?

The 4.0 version of the **Child Questionnaire** includes the following composites:

- Parents' experiences with getting needed care (2 items);
- Parents' experiences with getting care quickly (2 questions);
- Parents' experiences with how well doctors communicate (5 questions); and
- Parents' experiences with health plan information and customer service (2 questions).

The items in these composites (listed below) also use the "how often" scale, where 1=Never, 2=Sometimes, 3=Usually, and 4=Always.

When submitting these for analysis with the CAHPS macro, you will need to set the vartype=3.

Composite Measures in the Health Plan Survey 4.0 (Children)	
Parents' Experiences with Getting Needed Care	
Q20	In the last 12 months, how often was it easy to get appointments for your child with specialists?
Q24	In the last 12 months, how often was it easy to get the care, tests, or treatment you thought your child needed through his or her health plan?

Parents' Experiences with Getting Care Quickly	
Q4	In the last 12 months, when your child needed care right away for an illness, injury, or condition, how often did your child get care as soon as you thought he or she needed?
Q6	In the last 12 months, not counting times your child needed health care right away, how often did you get an appointment for health care at a doctor's office or clinic as soon as you thought your child needed?
Parents' Experiences with How Well Doctors Communicate	
Q11	In the last 12 months, how often did your child's personal doctor explain things in a way that was easy to understand?
Q12	In the last 12 months, how often did your child's personal doctor listen carefully to you?
Q13	In the last 12 months, how often did your child's personal doctor show respect for what you had to say?
Q15	In the last 12 months, how often did your child's personal doctor explain things in a way that was easy for <u>your child</u> to understand?
Q16	In the last 12 months, how often did your child's personal doctor spend enough time with your child?
Parents' Experiences with Health Plan Information and Customer Service	
Q26	In the last 12 months, how often did customer service at your child's health plan give you the information or help you needed?
Q27	In the last 12 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

Example of a CAHPS Macro call

The CAHPS macro is designed to analyze both individual items and composites with questions that use the same response scales. Below is an example of a SAS data step designed to prepare the raw data for use by the CAHPS macro. Once the data step is run and a new analysis data set is created, multiple CAHPS macro calls may be made using any combination of single items or composites based on recodings done in the data step.

```
data runfinal( drop = i ) ;
  set in.test ;
```

```
* Recodes numeric site variables to character to simplify
interpretation of the result tables. The CAHPS macro
requires the variable PLAN be created. PLAN may be
any entity, such as a hospital, clinic, state, gender, or
whatever unit needs to be compared. The text output and
variable names will still use the label PLAN, but you
will know exactly what it is from this data step.
```

```
length plan $ 20 ;
if region = 1 then plan = 'NEW ENGLAND' ;
else if region = 2 then plan = 'SOUTH' ;
else if region = 3 then plan = 'MIDSTATES' ;
else plan = 'WEST' ;

age = q33 ;
run ;
```

```
* Run measures through the CAHPS macro
* for a single rating ;
```

```
%cahps(var = q8,
vartype = 2,
name = Rate Health Care,
adjuster = age,
adulthood = 3,
dataset = runfinal,
outname = ratecare ) ;
```

```
* Run measures through the CAHPS macro
* for a composite ;
```

```
%cahps(var = q171 q21,
vartype = 3,
name = Getting Needed Care,
adjuster = age,
adulthood = 3,
dataset = runfinal,
outname = neededcare ) ;
```

Longitudinal Analysis of the Health Plan Survey

Because of significant changes in the wording of items and the structure of the composite measures from the 3.0 version to the 4.0 version, it is no longer advisable to conduct longitudinal analyses for several of the composites. Specifically, the CAHPS Consortium recommends that users of the data **not** attempt to assess changes in performance from the 3.0 version to the 4.0 version of the questionnaires for the following composites:

- Getting Needed Care (2 items)
- Customer Service (2 items)

Based on analyses of the field test data, the Consortium has not been able to determine how changes to the Getting Care Quickly composite will affect the ability to assess changes in performance from the 3.0 version to the 4.0 version of that measure. Until more data and analyses are available, the Consortium discourages users from looking at trends for this composite. Changes affecting this measure include the following:

- Two items were slightly reworded to improve readability.
- Two items were dropped:
 - A question on being taken to an exam room within 15 minutes was removed because of uncertainty about its ability to generate meaningful data. Questions arose, for example, about how well the item could assess overall waiting time in the absence of an item asking about waiting time in the exam room.
 - A question on getting help by phone during regular office hours was moved out of this survey and into the new CAHPS Clinician & Group Survey.

Analyses indicate that survey sponsors may continue looking at trends for the communication composite and the global rating items:

- How Well Doctors Communicate (4 items) – Minor wording changes are not expected to affect the ability to look at trends.
- Rating of Health Care (1 item)
- Rating of Health Plan (1 item)
- Rating of Doctor (1 item) – Minor changes in wording and the definition of personal doctor are not expected to affect the ability to look at trends.
- Rating of Specialist (1 item)