January 17, 2005

Ms. Melissa Musotto  
Centers for Medicare & Medicaid Services  
Office of Strategic Operations and Regulatory Affairs  
Division of Regulations Development and Issuances  
Room C5-14-03  
7500 Security Boulevard  
Baltimore, Maryland 21244-1850

RE: November 19, 2004 Federal Register [CMS-10102]  
Agency Information Collection Activities: Proposed Collection; Comment Request

Dear Ms. Musotto:

The Consumer-Purchaser Disclosure Project is a coalition of more than 50 of the nation’s leading employer, consumer, and labor organizations that have united to ensure that Americans will be able to select hospitals, physicians, physician groups/delivery systems and treatments based on public reporting of nationally standardized measures for clinical quality, consumer experience, equity, and efficiency.

Providing care that respects patient preferences, needs, and values is an essential dimension of hospital quality. We strongly support the consistent leadership of the Department of Health and Human Services (HHS) in the development of the HCAHPS survey instrument and sampling and data collection protocol for use in providing comparative information on patients’ experience with hospital care to the public. Making standardized patient experience data available will enable consumers and purchasers to make informed hospital selection decisions and support hospitals in their efforts to improve the care they provide.

Thank you for the opportunity to offer the following comments on the survey instrument and implementation:

- **Patient experience data must meet the needs of multiple stakeholders – including consumers, purchasers, and hospitals – therefore a robust survey instrument is critical.**

  As you know, HCAHPS covers domains that are important for consumers, namely communication with doctors and nurses, responsiveness of hospital staff, pain control, communication about medicines, physical environment, and discharge information. Comparative information about hospitals’ performance in all of these areas is critically important. We are firmly convinced that these patient experience domains cannot be adequately addressed if there are further reductions in the number of survey questions. While we are aware of the expressed concern by hospital survey vendors that the survey should be shortened due to “burden”, we strongly disagree with any effort to shrink HCAHPS to what would be far below a de minimus set of questions.
• Approval by the National Quality Forum Review Committee of 27-question survey.
  On December 1, 2004, the National Quality Forum convened a Review Committee that involved a diverse group of stakeholders, including representatives from the hospital industry, organized labor, consumer advocates, health care purchasers, physicians, and survey vendors. Using a consensus process, the Review Committee recommended that two questions that had been previously deleted be re-incorporated into the HCAHPS survey, yielding a 27 question instrument. These two questions address how often patients were treated with courtesy and respect by their physicians and nurses, respectively. We support this decision and encourage HHS to integrate these questions in the final version of the survey since they address such a fundamental aspect of care. By an 18-2 vote, the Review Committee approved the 27-question survey.

• Rapid adoption and implementation of a standardized instrument and survey protocol is critical.
  Hospitals across the nation are reporting their performance on clinical measures of quality for heart attack, pneumonia, and heart failure through the Hospital Quality Alliance. We have every reason to believe that several private-sector and state reporting initiatives as well as a number of large hospital systems are eager to begin using HCAHPS to measure patient experience with hospital care. Some hospitals, for example, do not treat a sufficient volume of patients to report on clinical measures, thus HCAHPS is an important tool to demonstrate the quality of care provided in their institution. For other hospitals, augmenting the clinical information with patient experience data provides a more complete picture of their performance. We urge HHS to rapidly finalize the survey instrument and administration protocol and encourage the Centers for Medicare and Medicaid Services to begin building the processes and infrastructure that will allow the public reporting of patient experience with hospital care as soon as possible.

Again, thank you for the opportunity to comment. Please contact us should you have any questions.

Sincerely,

Peter V. Lee  
President and CEO  
Pacific Business Group on Health

Debra L. Ness  
President  
National Partnership for Women & Families