

A decorative graphic on the left side of the page consists of a series of blue circles of varying sizes, arranged in a pattern that suggests a curved surface or a globe. The circles are solid blue and are set against a white background.

**M** | **HEALTH SYSTEM**  
UNIVERSITY OF MICHIGAN

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# University of Michigan Health System—at a Glance



An Integrated Academic Medical Center consisting of:

- Hospitals, Health Centers, and Clinics throughout Southeast Michigan
- UM Medical School and its Faculty Group Practice
- Clinical Activities of the UM School of Nursing

## Fast Facts:

- ~27,000 faculty, staff, students, trainees, and volunteers
- 3 hospitals, 990 beds, ~45,000 discharges annually
- 97,000 emergency/urgent care visits
- 49,700 surgical cases
- 1,300 survival flight missions
- 4,100 deliveries
- 40 outpatient locations with approximately 200 clinics see more than 1.9M visits annually

## UMHS and CG-CAHPS—a brief history

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- Participated in UHC trials
  - 2010—3 primary care clinics
  - 2012—1 specialty care clinic
- Implemented the base Version 2.0 visit-specific CG-CAHPS surveys in **May 2013** for approximately 170 clinics; pediatric patients receive pediatric-version of the survey.
  - CG-CAHPS replaces previous in-house survey (with no external benchmarking capability)

## UMHS Objectives for Adopting CG-CAHPS

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- Ability to **benchmark externally** on measures of access, provider communication, and office staff
- Orient and **align our clinics** to the same patient experience measures by which our ACO will be measured
- Assist our physicians with their **Maintenance-of-Certification** (MOC) requirements for their respective accrediting boards.
- To be positioned for **other public reporting or pay-for-performance needs** that may yet come
- Eventually (but not yet) issue **provider-specific reports** for internal quality improvement purposes (currently the focus is at the clinic level)

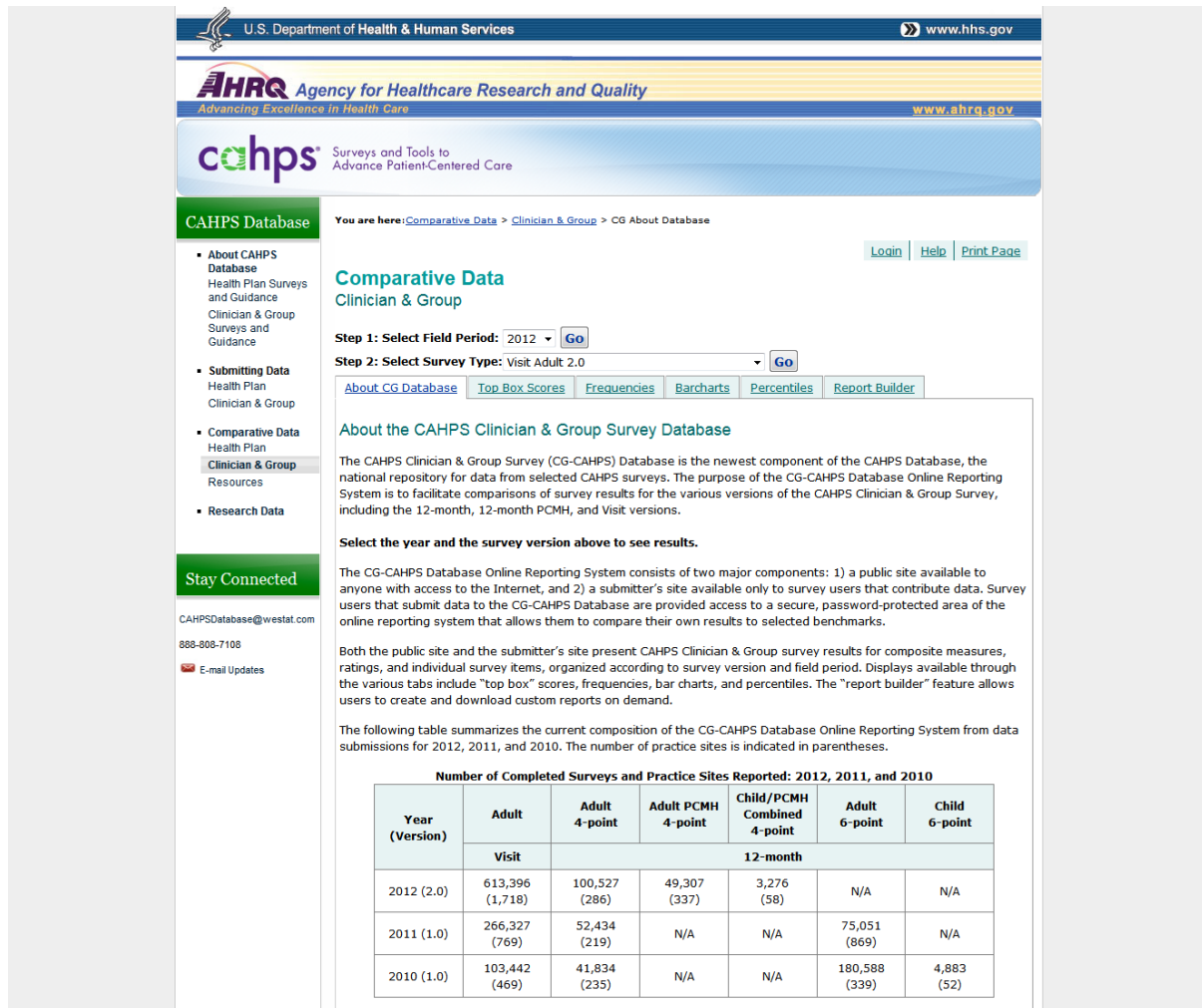
## UMHS--Survey Program Operational Facts

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- **Sampling for surveys triggered by patient encounter**
  - Eligibility for survey based on approved clinic on “whitelist” as well as approved provider type (e.g., physician, NP, etc.)
  - Mode: U.S. Mail (e-surveying not yet operational)
  - Different sampling rates for each clinic based on eligible patient volume, in order to achieve 30 completed surveys per clinic per quarter
  - Sampling rates at the clinic level dynamically readjusted to achieve target, based on actual response rates.
- **Return rates vary widely by clinic, but overall average is 26.7% (single mailing)**
  - higher rate for the adult version (29.7%)
  - lower rate for the pediatric version (16.1%)
- **15,919 total responses to date through 1/8/14**

# Accessing the CG-CAHPS Comparative data

[http://www.cahpsdatabase.ahrq.gov/CAHPSIDB/Public/CG/CG\\_About.aspx](http://www.cahpsdatabase.ahrq.gov/CAHPSIDB/Public/CG/CG_About.aspx)



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## Comparative Data Clinician & Group

Step 1: Select Field Period: 2012

Step 2: Select Survey Type: Visit Adult 2.0

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### About the CAHPS Clinician & Group Survey Database

The CAHPS Clinician & Group Survey (CG-CAHPS) Database is the newest component of the CAHPS Database, the national repository for data from selected CAHPS surveys. The purpose of the CG-CAHPS Database Online Reporting System is to facilitate comparisons of survey results for the various versions of the CAHPS Clinician & Group Survey, including the 12-month, 12-month PCMH, and Visit versions.

Select the year and the survey version above to see results.

The CG-CAHPS Database Online Reporting System consists of two major components: 1) a public site available to anyone with access to the Internet, and 2) a submitter's site available only to survey users that contribute data. Survey users that submit data to the CG-CAHPS Database are provided access to a secure, password-protected area of the online reporting system that allows them to compare their own results to selected benchmarks.

Both the public site and the submitter's site present CAHPS Clinician & Group survey results for composite measures, ratings, and individual survey items, organized according to survey version and field period. Displays available through the various tabs include "top box" scores, frequencies, bar charts, and percentiles. The "report builder" feature allows users to create and download custom reports on demand.

The following table summarizes the current composition of the CG-CAHPS Database Online Reporting System from data submissions for 2012, 2011, and 2010. The number of practice sites is indicated in parentheses.

**Number of Completed Surveys and Practice Sites Reported: 2012, 2011, and 2010**

| Year (Version) | Adult           | Adult 4-point | Adult PCMH 4-point | Child/PCMH Combined 4-point | Adult 6-point | Child 6-point |
|----------------|-----------------|---------------|--------------------|-----------------------------|---------------|---------------|
|                | Visit           | 12-month      |                    |                             |               |               |
| 2012 (2.0)     | 613,396 (1,718) | 100,527 (286) | 49,307 (337)       | 3,276 (58)                  | N/A           | N/A           |
| 2011 (1.0)     | 266,327 (769)   | 52,434 (219)  | N/A                | N/A                         | 75,051 (869)  | N/A           |
| 2010 (1.0)     | 103,442 (469)   | 41,834 (235)  | N/A                | N/A                         | 180,588 (339) | 4,883 (52)    |

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**Percentile Top Box Scores**

| Composite/Item   | CAHPS DB Overall | 90 <sup>th</sup> Percentile | 75 <sup>th</sup> Percentile | 50 <sup>th</sup> Percentile | 25 <sup>th</sup> Percentile |
|--|------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| <i>Getting Timely Appointments, Care, and Information</i>            | 62%              | 76%                         | 69%                         | 63%                         | 57%                         |
| Got appointment for urgent care as soon as needed                    | 67%              | 84%                         | 77%                         | 69%                         | 61%                         |
| Got appointment for check-up or routine care as soon as needed       | 71%              | 85%                         | 80%                         | 74%                         | 67%                         |
| Got answer to phone question during regular office hours on same day | 63%              | 80%                         | 72%                         | 64%                         | 56%                         |
| Got answer to phone question after hours as soon as needed           | 62%              | 82%                         | 73%                         | 63%                         | 53%                         |
| Wait time to be seen within 15 minutes of appointment time           | 46%              | 68%                         | 58%                         | 47%                         | 36%                         |



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**Survey Versions:**

- Visit Adult 2.0
- 12-Mo Adult 2.0 4pt
- 12-Mo PCMH Adult 2.0 4pt
- 12-Mo Child/PCMH Combined 2.0 4pt

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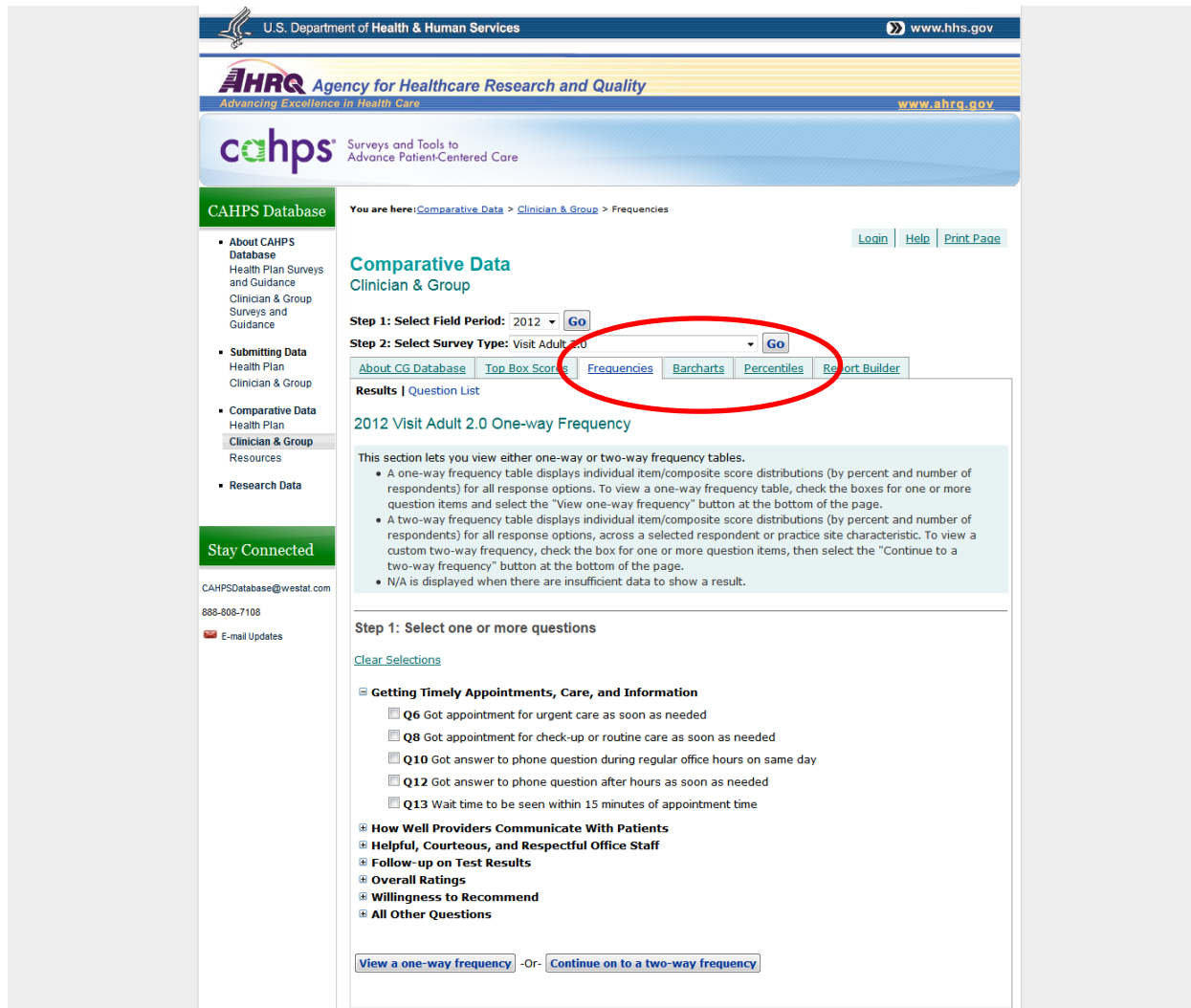
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## Top Box Scores—Available Tables

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  - Northeast
  - South
  - West
- **Physician Specialty**
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  - Internal Medicine
  - OB/GYN
  - Pediatrics
  - Other Primary Care
  - Surgical
  - Other Specialty
- **Practice Ownership and Affiliation**
  - Provider and/or Physician
  - Hospital or Health System
  - **University or Academic Medical Center**
  - Community Health Center
  - Other
- **Survey Mode**
  - Mail
  - Phone
  - IVR
  - Web Internet

# Frequencies, Bar Charts, Percentiles, Report Builder



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**Results | Question List**

#### 2012 Visit Adult 2.0 One-way Frequency

This section lets you view either one-way or two-way frequency tables.

- A one-way frequency table displays individual item/composite score distributions (by percent and number of respondents) for all response options. To view a one-way frequency table, check the boxes for one or more question items and select the "View one-way frequency" button at the bottom of the page.
- A two-way frequency table displays individual item/composite score distributions (by percent and number of respondents) for all response options, across a selected respondent or practice site characteristic. To view a custom two-way frequency, check the box for one or more question items, then select the "Continue to a two-way frequency" button at the bottom of the page.
- N/A is displayed when there are insufficient data to show a result.

**Step 1: Select one or more questions**

[Clear Selections](#)

- Getting Timely Appointments, Care, and Information**
  - Q6 Got appointment for urgent care as soon as needed
  - Q8 Got appointment for check-up or routine care as soon as needed
  - Q10 Got answer to phone question during regular office hours on same day
  - Q12 Got answer to phone question after hours as soon as needed
  - Q13 Wait time to be seen within 15 minutes of appointment time
- How Well Providers Communicate With Patients**
- Helpful, Courteous, and Respectful Office Staff**
- Follow-up on Test Results**
- Overall Ratings**
- Willingness to Recommend**
- All Other Questions**

-Or-

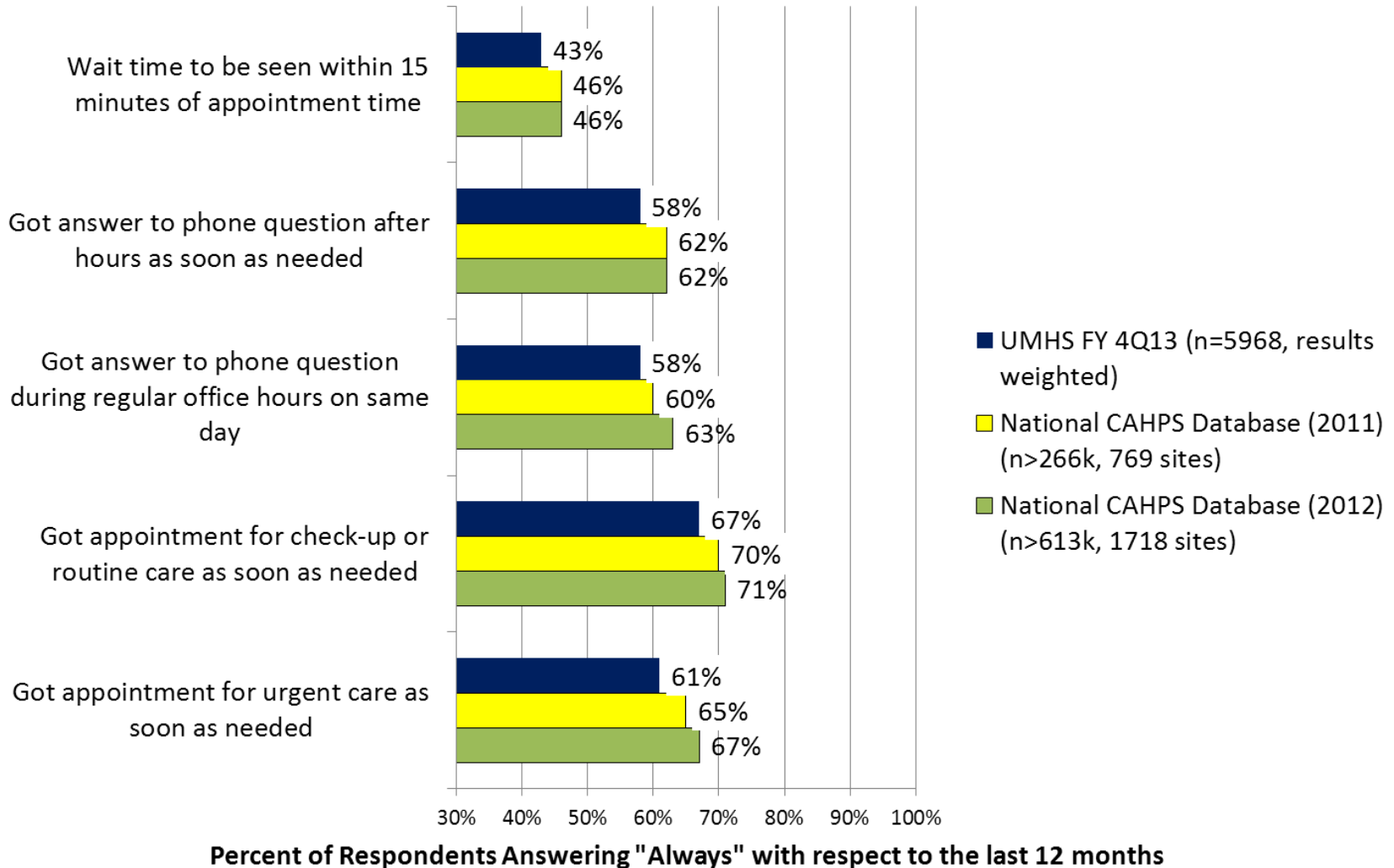
# Frequencies, Bar Charts, Percentiles, Report Builder

Percentiles tab shows you the percentile values for top box ratings for each question (national benchmark only)

| Composite/Item  | 10% | 20% | 30% | 40% | 50% |
|---|-----|-----|-----|-----|-----|
| <i>Getting Timely Appointments, Care, and Information</i>                   | 51% | 55% | 58% | 60% | 63% |
| <b>Got appointment for urgent care as soon as needed</b>                    | 53% | 59% | 63% | 66% | 69% |
| <b>Got appointment for check-up or routine care as soon as needed</b>       | 61% | 66% | 69% | 71% | 74% |
| <b>Got answer to phone question during regular office hours on same day</b> | 48% | 54% | 58% | 61% | 64% |
| <b>Got answer to phone question after hours as soon as needed</b>           | 43% | 50% | 56% | 59% | 63% |
| <b>Wait time to be seen within 15 minutes of appointment time</b>           | 26% | 33% | 39% | 43% | 47% |



## UMHS CG-CAHPS Performance on **Access** Measures vs. National CAHPS Database



# UMHS Reporting with Benchmarks

**SAMPLE**

| ACCG                                    | ACU                                     | Respondent Count for the ACU | Provider rating                           | In the last 12 months...             |                                       |  |  |                                    |
|---|---|------------------------------|---|--------------------------------------|---------------------------------------|--|--|------------------------------------|
|   |   |                              |   | Get appt for urgent care when needed | Get appt for routine care when needed | Get answer same day to call made during regular office hours | Get answer to call made after regular office hours when needed | Saw provider within 15 min of appt |
| All scales are 'higher is better'       |   |                              | Percent Giving Highest Rating ('top-box') |                                      |                                       |  |  |                                    |
| 2012 National CAHPS Database Benchmarks | 75th Percentile                         | >>>>>                        | 85%                                       | 77%                                  | 80%                                   | 72%  | 73%  | 58%                                |
|   | 50th Percentile                         | >>>>>                        | 81%                                       | 69%                                  | 74%                                   | 64%  | 63%  | 47%                                |
| Briarwood                               | Briarwood Family Medicine               | [n=61]                       | 64%                                       | 40%                                  | 37%                                   | 68%  | 79%  | 49%                                |
|   | Briarwood Health Associates             | [n=187]                      | 79%                                       | 55%                                  | 64%                                   | 55%  | 75%  | 45%                                |
|   | Briarwood Medical Group                 | [n=24]                       | 83%                                       | 70%                                  | 53%                                   | 64%  |  | 37%                                |
|   | Briarwood Reproductive Medicine         | [n=55]                       | 69%                                       | 80%                                  | 62%                                   | 65%  | 82%  | 54%                                |
|   | Briarwood Women Children Young Adults   | [n=66]                       | 79%                                       | 81%                                  | 43%                                   | 78%  | 71%  | 37%                                |
|   | Burlington Pain Clinic - Anesthesiology | [n=71]                       | 69%                                       | 62%                                  | 59%                                   | 26%  | 85%  | 36%                                |
|   | Burlington Spine PM&R                   | [n=68]                       | 71%                                       | 34%                                  | 60%                                   | 39%  | 23%  | 50%                                |
| Brighton                                | Brighton Health Center                  | [n=236]                      | 88%                                       | 52%                                  | 54%                                   | 59%  | 73%  | 35%                                |
|   | Brighton MedSport Orthopaedic Surgery   | [n=33]                       | 72%                                       | 58%                                  | 54%                                   | 25%  | 100%   | 37%                                |
|   | Brighton Ophthalmology                  | [n=31]                       | 89%                                       | 50%                                  | 70%                                   | 100%   |  | 45%                                |
| Cancer Center                           | Cancer Center                           | [n=381]                      | 87%                                       | 85%                                  | 88%                                   | 65%  | 80%  | 25%                                |
|   | Cancer Center Mohs                      | [n=38]                       | 100%                                      | 100%                                 | 100%                                  | 100%   | 100%   | 76%                                |
| Canton                                  | Canton Health Center                    | [n=189]                      | 71%                                       | 47%                                  | 55%                                   | 44%  | 77%  | 43%                                |
|   | Canton Ophthalmology                    | [n=32]                       | 86%                                       | 88%                                  | 70%                                   | 83%  |  | 48%                                |
| Cardiovascular Center                   | Cardiovascular Center                   | [n=173]                      | 83%                                       | 74%                                  | 82%                                   | 90%  | 48%  | 35%                                |

## Impacts and Anticipated Future Use

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- We are in a high-touch, intensive educational period now with the organization about the survey and the meaning of its results
  - The internal conversation has changed—concepts previously dismissed are now being taken more seriously
  - Organizational strengths and weaknesses have been re-confirmed (e.g., Access) and given even more attention
  - The interest in eventually obtaining provider-level results is palpable
- Setting Internal Goals for Improvement—TBD but will be influenced by external benchmarks for the first time
- Application for Hospital Magnet Status (2015)