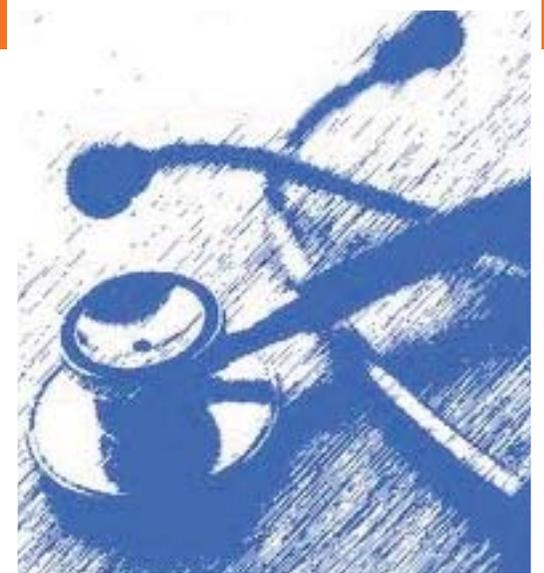


OAS CAHPS Pricing

Affordable OAS CAHPS® Compliance for small facilities

\$4500/year

*Less than 75 patients/month



Why choose us?

Our response rates lead the nation...

CMS recently conducted a study on HCAHPS response rates. The national average for response rates for the mail only mode for 2016 were 22%. **Our response rates for HCAHPS were 36%!** Our success is due to our unique, user-friendly questionnaire design that doesn't contain intimidating timing marks or large, confusing bar codes; and are printed as one single page (not pages upon pages stapled together!). We also adhere to strict CMS administration protocols.

Experience - we know “small” and “rural”

Our business focuses on small healthcare facilities. We understand your needs and will work with you to develop survey programs that fit your needs. Nothing standard, all-or-nothing, or off the shelf.

No contracts

We have BAAs with all of our clients to protect PHI, but we will never force you sign a lengthy contract. Simply put... if you aren't 100% happy with our services, feel free to choose another vendor - at any time.

Personalized service

We know what it feels like to be the small fish in the big pond... our clients receive the service and support they deserve!

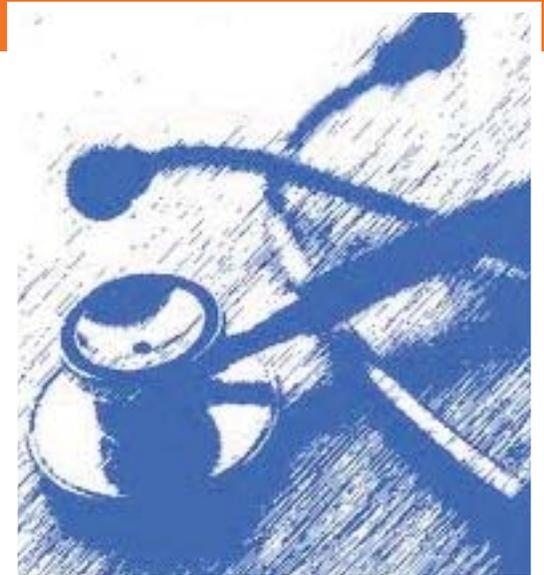
Contact: Melissa Yuzeitis melissa@customsurveys.biz
Custom Survey Solutions, Inc. PO Box 312, Big Timber, MT 59011 406.932.6565 ext. 100

OAS CAHPS At A Glance

What you need to know

OAS CAHPS Patient Eligibility

1. Patients who had at least one outpatient surgery/procedure during the sample month (including outpatient surgeries and procedures when the patient had an overnight stay for observation but was not admitted to the hospital);
2. Patients who were at least 18 years of age when they received their outpatient surgery or procedure;
3. Patients regardless of insurance or method of payment;
4. Patients whose outpatient surgery or procedure was given in an HOPD or ASC as defined by the project;
5. Patient's surgery or procedure meets project eligibility definitions, which are as follows:
 - 5a. A procedure is OAS CAHPS-eligible if it has a G-Code of G0104, G0105, G0121 or G0260, or
 - 5b. A surgery, diagnostic procedure, or other type of procedure is OAS CAHPS-eligible if it has a CPT-4 code in the 10021– 69990 range, was performed in an outpatient surgery department or ambulatory surgery center, was not billed as Laboratory, Radiology, Physical Therapy, Respiratory Therapy, or Diagnostic studies and if it has no accompanying modifier of 73 or 74 (discontinued procedure),
 - 5c. Also note that a facility may assign more than one code to a surgery or procedure. The presence of one eligible G-code or CPT code is all that is needed to make it OAS CAHPS-eligible.
6. Patients who have a domestic U.S. mailing address;
7. Patients who are not deceased;
8. Patients who do not reside in a nursing home;
9. Patients who were not discharged to hospice care following their surgery;
10. Patients who are not identified as prisoners;
11. Patients who did not request that the HOPDs or ASCs not release their name and contact information to anyone other than facility personnel, hereafter referred to in this manual as “no publicity” patients; and
12. Some states have regulations and laws governing the release of patient information for patients with specific illnesses or conditions, and for other special patient populations, including patients with HIV/AIDS. It is the ASC's or HOPD's responsibility to identify any applicable state laws and regulations and exclude state-regulated patients from the survey as required by law or regulation.



Remember... all facilities are required to monitor the OAS CAHPS website at

www.oascahps.org

**for updates and changes to policies and
procedures related to the OAS CAHPS survey!**

Are You Required to Participate?

An HOPD is a unit of a hospital whose primary focus is to perform outpatient surgeries and outpatient procedures. CMS specifically defines eligible HOPDs as units within the hospital which bill under the OPSS (Outpatient Prospective Payment System). Additionally, outpatient-focused units that are within critical access hospitals (CAHs) are also eligible as HOPDs even though CAHs do not bill under OPSS. There can be more than one HOPD in a hospital. Not every hospital has an HOPD.

An ASC is a freestanding medical facility that performs outpatient surgeries and procedures. CMS specifically defines eligible ASCs as distinct entities that operate exclusively for the purposes of furnishing outpatient surgical services to patients. The ASC must have an agreement with CMS and meet the general conditions and requirements in accordance with 42 CFR 416 subpart B. The ASC may also have physician offices on site, but it does not have any overnight patients. Some ASCs have more than one location, typically in a geographic region.

HOPDs and ASCs may apply for an exemption if they treat fewer than 60 survey-eligible patients during the calendar year.

Facility Responsibilities

1. Contract with an Approved OAS CAHPS Vendor

2. Designate an OAS CAHPS Survey Administrator

Before any participating HOPD or ASC can access the restricted portion of the web portal, the organization first must decide which staff member it will designate to serve as its OAS CAHPS Survey Administrator.

The designated OAS CAHPS Survey Administrator's roles and responsibilities are listed below.

- Register as the Survey Administrator for the HOPD or ASC and do the following:
 - **Submit the Facility Website User Registration Form**
 - **Complete and Submit the CCN Registration Form**
 - **Complete the Vendor Authorization Form**
- Designate another individual within the organization to serve as the backup OAS CAHPS Survey Administrator;
- Remove access or approve the removal of access for users who are no longer authorized to access the private side of the web portal;
- Serve as the main point of contact with the OAS CAHPS Survey Coordination Team and Data Center; and
- Notify the OAS CAHPS Survey Coordination Team if your role as the OAS CAHPS Survey Administrator will no longer be valid and identify a successor.

3. Complete the Online Forms Listed Above

4. Submit ALL Patient Data to Vendor in Approved Format by Requested Date

5. Review Data Submission Reports and OAS CAHPS Results Prior to Public Reporting

6. Adhere to all CMS Protocols

Patient Information Needed

Patient's Full Name

First Name, Middle Initial, Last Name (separate fields)

Gender

Patient's Date of Birth

MMDDYYYY

Patient's Mailing Address

Patient Mailing address 1, Address 2,
City, State, Zip (separate fields)

Patient's Telephone Number with Area Code

Medical Record Number

Procedure Code(s)

CPT or G Code

Date of Procedure

MMDDYYYY

Name of location where surgery occurred

The OAS CAHPS web portal, available at <https://oascahps.org/> is the main vehicle for communicating information about OAS CAHPS to ASCs, HOPDs, and survey vendors.

This portal allows Medicare-certified HOPDs and ASCs to authorize their contracted survey vendor to submit OAS CAHPS data on their behalf, access their data submission reports, and review their OAS CAHPS survey results before the results are publicly reported.

Public Reporting

CMS will begin publicly reporting OAS CAHPS survey results in 2018. A rolling four-quarter average will be reported, once four quarters or 12 months of data are acquired.

Administering OAS CAHPS with Other Surveys

Some HOPDs and ASCs may wish to conduct other patient surveys to support internal quality improvement activities. A formal survey, regardless of the data collection mode employed, is one in which the primary goal is to ask standardized questions of a sample of the patient population. HOPDs and ASCs that are administering other outpatient care patient surveys must follow the following guidelines.

With regard to sampling and ensuring that patients are not overburdened by multiple surveys:

- For each sample month, HOPDs and ASCs (working in conjunction with their survey vendor) must select the OAS CAHPS Survey sample prior to selecting the samples for any other HOPD or ASC survey.
- In the event that another CMS-sponsored effort is also conducting a survey of patients in the ASC/HOPD that month, the facility must contact the OAS CAHPS Survey Coordination Team to make arrangements for both surveys.

With regard to questionnaire content:

- In other surveys that an HOPD or ASC conducts, the facility can include questions that ask for more in-depth information about OAS CAHPS issues, but should not repeat the OAS CAHPS questions or include questions that are very similar.



Custom Survey Solutions, Inc.

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Custom Survey Solutions, Inc. PO Box 312, Big Timber, MT 59011 406.932.6565 ext. 100

OAS CAHPS FAQ

What you need to know HOPD/ASC Eligibility

An eligible hospital outpatient department (HOPD) is an outpatient surgery department or other specialized department of a hospital that performs outpatient surgeries and procedures.

An **HOPD** is eligible to participate in the OAS CAHPS Survey if it meets **all** of the following criteria:

- Performs procedures that are within the OAS CAHPS–eligible range of CPT-4 Codes for Surgery (i.e., CPT codes between 10021 and 69990) or one of the following G-codes: G0104, G0105, G0121, or G0260;
- is Medicare-certified and has a CMS Certification Number (CCN);
- bills under the Outpatient Payment Prospective System (OPPS) using CMS-1450 claim form for provider-based offices (not CMS-1500 claim form used for the Physician Fee Schedule), with the exclusion of emergency department procedures; and
- has an agreement with CMS and meets the general conditions and requirements in accordance with 42 CFR 419 subpart B.

Critical access hospitals (CAHs) are also eligible for OAS CAHPS even though CAHs do not bill under OPPS; however, participation for CAHs is voluntary.

An **ASC** is a freestanding medical facility that performs outpatient surgeries and procedures. CMS specifically defines eligible ASCs as distinct entities that operate exclusively for the purpose of furnishing outpatient services to patients. An ASC is eligible to participate in the OAS CAHPS Survey if it meets **all** of the following criteria:

- Performs procedures that are within the OAS CAHPS–eligible range of CPT-4 Codes for Surgery (i.e., CPT codes between 10021 and 69990) or one of the following G-codes: G0104, G0105, G0121, or G0260;
- Is Medicare-certified and has a CMS Certification Number (CCN).
- bills under ASC Payment System; and
- has an agreement with CMS and meets the general conditions and requirements in accordance with 42 CFR 416 subpart B.

Participation Exemption

The Participation Exemption Request (PER) form will be an online form available on the OAS CAHPS website. On the form, HOPDs and ASCs will provide patient counts for a variety of eligibility criteria over a 12-month period (January to December) for a specified year. Calculate the number of OAS CAHPS-eligible patients over the 12-month period. If the total is fewer than 60, the PER form can be submitted. If the total is 60 or more, the facility is eligible for participation in the OAS CAHPS Survey and should follow the steps with getting started with the OAS CAHPS Survey.

Reimbursement

Based on the 2019 Final Rule published in November 2018, CMS plans to continue the voluntary participation period for OAS CAHPS throughout 2019. The CY 2019 Rule reflects participation information for the 2019 data collection period (CY 2021 payment determination).



How Do I Register?

1. Register for login credentials on the OAS CAHPS website by completing the online Facility Administrator Registration form. You can access this form by clicking on the Register for Login Credentials link under the “For Facilities” menu tab on the OAS CAHPS website (<https://oascahps.org/>). A direct link to the Facility Administrator Registration form is provided here: <https://oascahps.org/ForFacilities/Facility-Registration>.
2. Using the login credentials (username and password) submitted on the registration form mentioned in Step 1 above, log onto the website. The “Login” link can be found in the upper right-hand corner of the Home page.
3. Navigate to the Facility CCN Registration form available on your customized dashboard (through the “Click here to register your HOPD facility or your ASC facility (by CCN)” link (under the Resource column)). Once you are logged in, you can also access this same form through the Facility CCN Registration link under the “For Facilities” menu tab.
4. On this form, you will enter your facility’s CMS Certification Number (CCN, also known as the Medicare Provider Number). Do not include dashes in the CCN. If you have multiple CCNs, you can enter them as a comma separated list, as shown in the example below. Do not include spaces or returns.

Example: 111111,222222,333333

5. Then, click the “Lookup Facility Names” button to confirm the information you entered.
6. To submit the form, the OAS CAHPS Survey Administrator should review and agree to the responsibilities listed at the bottom of the Facility CCN Registration form.
7. After you submit this form, your customized dashboard will be updated to reflect the registered facilities.

How Do I Authorize a Vendor?

1. Log in to the private side of the OAS CAHPS website (<https://oascahps.org/>) with your username and password. The Login link can be found in the upper right-hand corner of the Home page.
2. Go to the “For Facilities” menu and select the “Vendor Authorization” link, and then select “Start an Authorization.”
3. On the Authorize a Vendor form, Use the drop-down list under “Select a Vendor” to select your survey vendor.
4. Use the drop down list under “Select Start Date” to select the first day of the calendar quarter for which you are authorizing this vendor to start submitting survey data on your behalf. For example, if your vendor will start administering the OAS CAHPS Survey for the January, February or March 2016 sample month, you should select 1/1/2016.
5. Under the “Select Facility” table, check the box next to each facility CCN/name for which you want to apply a vendor authorization. If you want to apply the vendor authorization to all facilities listed in the box, check the box on the top row of the grid (next to “CCN”).
6. Review the information on the form for accuracy. If all is correct, click “Save Checked Authorizations.”
7. After saving, the “Vendor Authorization Report” will display on your screen. It shows a list of all your facilities for which you are the Survey Administrator. Any authorizations or changes to authorizations you just saved will be displayed under the column, “Modified” indicated by a green check mark.