

Appendix D:  
Guidance for Conducting the Adult  
Consumer Assessment of Healthcare  
Providers and Systems (CAHPS®)  
Health Plan Survey 5.1H (Medicaid)

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Assessing patient experiences with health care is an important dimension of the quality of care. The Adult Core Set includes a measure of experiences with health care based on the CAHPS® Survey.<sup>1</sup> This appendix provides additional guidance to states in carrying out CAHPS data collection, including information on the version of CAHPS used for FFY 2024 Adult Core Set reporting, contracting with a survey vendor, generating a sample frame, drawing the sample, and conducting the survey using standard protocols.

### **A. Version of CAHPS for FFY 2024 Adult Core Set Reporting**

CAHPS is a family of surveys designed to assess consumer experiences with care. Different versions of the survey are available for use among various populations, payers, and settings. The version of the CAHPS Survey specified in the 2024 Adult Core Set is the CAHPS Health Plan Survey 5.1H (Medicaid).<sup>2</sup> [Appendix C](#) contains the survey instrument.

### **B. Contracting with a Survey Vendor**

To adhere to CAHPS 5.1H measure specifications, states must follow the HEDIS protocol, which includes creating a sample frame and contracting with a NCQA-certified HEDIS measurement year (MY) 2023 survey vendor to administer the survey. The survey vendor draws the actual samples and fields the survey.

NCQA maintains a list of survey vendors that have been trained and certified to administer the CAHPS 5.1H survey. Each survey vendor is assigned a maximum capacity of samples. The capacity reflects the firm's and NCQA's projection of resources available to be dedicated to administer the survey. A current listing of NCQA-certified HEDIS MY 2023 survey vendors is available at <https://www.ncqa.org/programs/data-and-information-technology/hit-and-data-certification/cahps-5-1h-survey-certification/vendor-directory/>.

### **C. Generating a Sample Frame**

States are responsible for generating a complete, accurate, and valid sample frame data file that is representative of the entire eligible population (Table D-1). If states choose to have their sample frame validated, they should arrange for an auditor to verify the integrity of the sample frame before the survey vendor draws the sample and administers the survey.

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<sup>1</sup> CAHPS® (Consumer Assessment of Healthcare Providers and Systems) is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

<sup>2</sup> AHRQ is the measure steward for the survey instrument and NCQA is the developer of the survey administration protocol.

**Table D-1. Eligible Population for Adult CAHPS 5.1H (Medicaid)**

Age	Age 18 and older as of December 31 of the measurement year.
Continuous enrollment	The last six months of the measurement year.
Allowable gap	No more than one gap in enrollment of up to 45 days during the continuous enrollment period. To determine continuous enrollment for a beneficiary for whom enrollment is verified monthly, the beneficiary may not have more than a 1-month gap in coverage (e.g., a beneficiary whose coverage lapses for 2 months [60 days] is not considered continuously enrolled).
Anchor date	December 31 of the measurement year.
Current enrollment	Currently enrolled at the time the survey is completed.

Source: HEDIS MY 2023 Volume 3: Specifications for Survey Measures (<https://store.ncqa.org/hedis-my-2023-volume-3-epub.html>).

To enable the survey vendor to generate the systematic sample, states must generate a sample frame data file for each survey to be fielded. States are strongly encouraged to generate sample frames after eliminating disenrolled and deceased beneficiaries and updating eligibility files with address and telephone number corrections. When sampling, keep the following in mind:

- If each managed care plan carries out its own CAHPS survey, a separate sample frame must be generated for each plan.
- If a state has adults enrolled in multiple delivery systems (managed care, primary care case management, and/or fee for service), the sample frame(s) should be representative of all adults covered by the entire program. A state may generate one statewide sample frame that includes adults in all delivery systems or separate sample frames for each delivery system. The sample frame(s) should represent all adults that meet the eligibility criteria specified in Table D-1.

#### **D. Drawing the Sample**

The survey vendor is responsible for drawing the survey samples from the sample frame generated by the state. For each survey administered, the survey vendor draws a systematic sample of 1,350 adults.

##### **Deduplication**

To reduce respondent burden, the survey vendor should deduplicate samples so that only one adult per household is included in the sample. The survey vendor must use the deduplication method included in HEDIS MY 2023 Volume 3 before pulling the systematic sample.

##### **Oversampling**

A state should instruct its survey vendor to oversample if it has a prior history of low survey response rates, if it anticipates that a significant number of addresses or telephone numbers in the enrollment files are inaccurate, if it cannot eliminate disenrolled adults from eligibility files, or if it does not expect to achieve a denominator of 100 for most survey calculations. The required sample size is based on the average number of complete and eligible surveys obtained by health plans during prior years; therefore, using the required sample size for a given survey

does not guarantee that a state will achieve the goal of 411 completed surveys or the required denominator of 100 complete responses for each survey result. The state should work with its survey vendor to determine the number of complete and eligible surveys it can expect to obtain without oversampling based on prior experience.

If its prior response rates or the number of completed surveys is expected to fall below the goal of 411 completed surveys, the survey vendor should oversample. For example, if the vendor increases the sample by 5 percent, the final sample size would be 1,418. If the vendor increases the sample by 20 percent, the final sample size would be 1,620. The survey vendor will work with the state to determine an appropriate sampling strategy. For a detailed discussion of oversampling, see “HEDIS MY 2023 Volume 3: Specifications for Survey Measures,” Appendix 7, “General Recommendations for Oversampling Survey Measures.”

### **E. Survey Administration**

The sampling and data collection procedures that the survey vendors have been trained and certified to carry out promote both the standardized administration of the survey instruments by different survey vendors and the comparability of resulting data. For results to comply with CAHPS 5.1H survey specifications, the state’s survey vendor must follow one of the standard CAHPS 5.1H survey protocols. The state will have to work with its survey vendor to select one of two standard options for administering HEDIS CAHPS surveys:

1. The mail-only methodology, a five-wave mail protocol with three questionnaire mailings and two reminder postcards.
2. The mixed methodology, a four-wave mail protocol (two questionnaires and two reminder postcards) with telephone follow-up of a minimum of three and a maximum of six telephone attempts.

The basic tasks and time frames for the two protocol options are detailed in Tables D-2 and D-3. Regardless of the approach selected, the survey vendor is expected to maximize the final survey response rate and to pursue contacts with potential respondents until selected data collection protocol is exhausted. Achieving the targeted number of completed surveys does not justify ceasing the survey protocol.

Neither the state nor the survey vendor may use incentives of any kind for completion of the survey.

The vendor is expected to maintain the confidentiality of sampled adults. The health plan does not have access to the names of adults selected for the survey.

**Table D-2. Mail-Only Methodology**

<b>Survey Vendor Tasks</b>	<b>Time Frame</b>
Send first questionnaire and cover letter to the surveyed adult	0 days
Send a postcard reminder to non-respondents 4–10 days after mailing the first questionnaire	4–10 days
Send a second questionnaire and second cover letter to non-respondents approximately 35 days after mailing the first questionnaire	35 days
Send a second postcard reminder to non-respondents 4–10 days after mailing the second questionnaire	39–45 days
Send a third questionnaire and third cover letter to non-respondents approximately 25 days after mailing the second questionnaire	60 days
Allow at least 21 days for the third questionnaire to be returned by the respondent	81 days

Source: HEDIS MY 2023 Volume 3: Specifications for Survey Measures.

**Table D-3. Mixed Methodology**

<b>Survey Vendor Tasks</b>	<b>Time Frame</b>
Send first questionnaire and cover letter to the surveyed adult	0 days
Send a postcard reminder to non-respondents 4–10 days after mailing the first questionnaire	4–10 days
Send a second questionnaire and second cover letter to non-respondents approximately 35 days after mailing the first questionnaire	35 days
Send a second postcard reminder to non-respondents 4–10 days after mailing the second questionnaire	39–45 days
Initiate telephone interviews for non-respondents approximately 21 days after mailing the second questionnaire	56 days
Initiate systematic contact for all non-respondents so that at least 3 telephone calls (and no more than 6 telephone calls) are attempted at different times of the day, on different days of the week, and in different weeks	56–70 days
Complete telephone follow-up sequence (completed interviews obtained or maximum calls reached for all non-respondents) approximately 14 days after initiation	70 days

Source: HEDIS MY 2023 Volume 3: Specifications for Survey Measures.

## **F. For Further Information**

Information about the CAHPS Health Plan Survey is available at <https://www.ahrq.gov/cahps/surveys-guidance/hp/index.html>.

Information about participating in the CAHPS Health Plan Survey Database is available at <https://www.ahrq.gov/cahps/cahps-database/hp-database/participate.html>.