PBGH believes that publically available healthcare performance information stimulates competition and drives the market to improve the healthcare system's quality and moderate its cost.

First fielded in 2001, the Patient Assessment Survey (PAS) is an annual survey that measures patient experience with medical groups among adult Health Maintenance Organization (HMO) and Point-of-service (POS) enrollees in CA. PAS asks questions on various topics, such as whether the patient accessed routine and urgent care on a timely basis, spent sufficient time with and received attention from their physician, and experienced continuity of care. Patient experience feedback enriches other types of performance information, such as clinical outcomes and costs, and helps to paint a comprehensive picture of overall care quality.

The PAS is managed by PBGH under a contract with the California Healthcare Performance Information System (CHPI), a non-profit, multi-stakeholder corporation. PAS results are published annually at the medical group level in the Office of the Patient Advocate's California Health Care Quality Reports. In an effort to increase transparency and access to patient experience ratings for Californians, Consumer Reports partnered to publish a special February 2014 issue that included full PAS results for 2013. PAS ratings are also available online at www.calqualitycare.org, a free, easy-to-use source of information about the performance of medical groups, hospitals, nursing homes, and other long-term care facilities in CA produced by the California HealthCare Foundation.

In addition to informing the public, performance on the PAS survey affects payments to physician groups in CA. Specifically, PAS results comprise 20% of the pay for performance (P4P) formula administered by the Integrated Healthcare Association (IHA), the largest non-governmental physician incentive program in the US. In 2014, IHA paid out $40 M to high performing CA physician groups. Participating medical groups also use the PAS results to identify patient experience improvement opportunities, monitor performance, and learn from best practices.

Many employers provide PAS results to their populations -- alongside other performance indicators, such as clinical quality and cost information -- to enable informed decision-making.

How it works: Every year, a survey invitation is sent to a random sampling of approximately 150,000 insured HMO and POS patients who were at least 18 years old and visited a physician in the prior 12 months. The survey instrument uses the industry standard, national patient experience survey from the Clinician & Group Consumer Assessment of Healthcare Providers and Systems (CG-CAHPS), with some customization for topics of interest of participating medical groups. In 2014, approximately 58,000 patients completed and responded to the survey (38% return rate). In 2014, PAS had sufficient responses to evaluate and report, with statistical accuracy, on 170 physician groups. Because the 170 physician groups collectively provide over 90% of the healthcare for Californians, the results of PAS provide a representative view of patient experience in the state.
Most of the PAS questions fall into one of five categories:

- Communicating with your provider
- Coordinating your care
- Working with the office staff
- Getting timely care
- Staying healthy

Each of CA's 12 regions has at least one physician group ranked in the top 10% statewide. Over the past few years, Northern CA has slightly outperformed Southern CA across all key measures. However, on the whole, CA medical groups receive lower ratings than the national average. Although there is no definitive research on the cause of the difference, it may be the result of CA medical groups serving patients from more diverse socioeconomic backgrounds.

Looking ahead: Currently, PAS administers a paper and electronic-based version of the survey that includes over 50 questions, and is four pages long, with the majority of invitations sent through the mail. The Center for Healthcare Transparency (CHT) recently awarded an innovation pilot grant for PAS and the Massachusetts Health Quality Partners to partner on next generation methods to more quickly and efficiently survey patients. This pilot project will be launched in two markets (CA and MA) and aims to evaluate a shorter questionnaire, electronic distribution and collection methods, and the feasibility of producing patient-assessment results at the individual doctor level.

Frequently Asked Questions (FAQs)

1. What is the relationship between PBGH and CHPI Corp.?
   CHPI Corp contracts with PBGH to perform the technical work for CHPI’s two programs: the Patient Assessment Survey (PAS) and CA’s Multi-Payer Claims Database (MPCD).

2. How is PAS different from CHPI’s Multi-Payer Claims Database (MPCD)?
   PAS compares patient experience at the physician group level. CHPI’s MPCD’s results compare clinical quality at the individual physician level.

3. Where can I locate PAS results?
   Consumer Reports will publish 2014 results in their February 2015 edition. In addition, results can be viewed online at the California HealthCare Foundation’s website (CalQualityCare.org) and the Office of the Patient Advocate’s California Health Care Quality Report Cards.

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