

Health Outcomes Survey (HOS)

APPLICABLE LINES OF BUSINESS

- Medicare

WHY'S THE HOS IMPORTANT?

The Medicare Health Outcomes Survey (HOS) is a patient-reported survey developed by the Centers for Medicare & Medicaid Services (CMS). Patients respond to questions assessing their health status and the quality of their healthcare. The HOS is administered annually to a random sample of Medicare Advantage (MA) beneficiaries from July through November, and the same sample of respondents are surveyed again two years after the initial survey date. The goal of the HOS is to gather clinically meaningful health status data from MA patients to support quality improvement activities, monitor health plan performances, and improve the health of this patient population.

HOS QUESTIONS AND PROVIDER IMPACT

Providers can significantly impact how patients assess their healthcare experience in response to HOS questions. Some key survey questions asked of patients for each HOS measure are listed in the table below along with tips to ensure patients feel well supported.

Improving or Maintaining Physical Health	
Sample Survey Questions	<ul style="list-style-type: none"> • In general, how would you rate your health? • Does your health now limit you in these activities? <ul style="list-style-type: none"> ○ Moderate activities like vacuuming or bowling ○ Climbing several flights of stairs • During the past four weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health? <ul style="list-style-type: none"> ○ Accomplished less than you would like ○ Were limited in the kind of work or other activities you were able to perform • During the past four weeks, how much did pain interfere with your normal work?

Tips for Success	<ul style="list-style-type: none"> ● Assess your patient’s pain and functional status using standardized tools. ● Provide interventions to improve physical health, such as disease management, pain management, physical therapy, or care management. <ul style="list-style-type: none"> ○ Determine if your patient could benefit from a consultation with a specialist. ○ Consider physical therapy, cardiac, or pulmonary rehab when appropriate. ○ Promote self-management strategies to help patients take an active role in improving their health. ● Ask your patient: <ul style="list-style-type: none"> ○ How far can you walk? Do you need assistance, such as with a cane or a walker? ○ Do you have trouble with stairs? ○ How well can you perform activities of daily living, such as moving a table or pushing a vacuum cleaner? ○ Does pain limit your activity?
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Improving or Maintaining Mental Health

Sample Survey Questions	<ul style="list-style-type: none"> ● During the past four weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems? <ul style="list-style-type: none"> ○ Accomplished less than you would like ○ Didn’t do work or other activities as carefully as usual ● How much of the time during the past four weeks: <ul style="list-style-type: none"> ○ Have you felt calm and peaceful? ○ Did you have a lot of energy? ○ Have you felt downhearted or blue? ● During the past four weeks, how much of the time have your physical or emotional problems interfered with your social activities?
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Tips for Success	<ul style="list-style-type: none"> ● Empathize with the patient. ● Assess your patient’s symptoms using standardized screening tools. ● Develop a plan with your patient to improve mental health. <ul style="list-style-type: none"> ○ Consider stress triggers, exercise, diet, sleep habits, hobbies, and social connections. ○ Consider a hearing test when appropriate as loss of hearing can feel isolating. ● Discuss options for therapy with a mental health provider, when appropriate. ● Ask your patient: <ul style="list-style-type: none"> ○ How would you describe your energy level? ○ Do you get out to spend time with other people? ○ Does alcohol use cause any personal problems? ○ Have you felt calm and peaceful? ● Have you felt down or blue?
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Monitoring Physical Activity

Sample Survey Questions

- In the past 12 months, did you talk with a doctor or other health care provider about your level of exercise or physical activity?
- In the past 12 months, did a doctor or other health care provider advise you to start, increase or maintain your level of exercise or physical activity?

Tips for Success

- Talk to your patient about their physical activity. Studies show that having a patient fill out a questionnaire isn't enough to gauge their activity level and demonstrate interest in ensuring patients remain active.
- Develop a plan with your patient to start or increase physical activity.
 - Offer physical activity suggestions based on the patient's physical ability.
 - Offer ideas for where patients can engage in activities such as senior classes at the Area Agency on Aging, YMCA, and community centers to increase social interaction.
- Ask your patient:
 - What is your daily level of exercise or physical activity?
 - What activities do you enjoy?
- Do you feel better when you are more active?

Improving Bladder Control

Sample Survey Questions

- In the past six months, have you experienced leaking of urine?
- There are many ways to control or manage the leaking of urine, including bladder training exercises, medication and surgery. Have you ever talked with a doctor, nurse, or other health care provider about any of these approaches?

Tips for Success

- Assess your patient's problems with urinary incontinence.
- Communicate that urinary leakage problems can be common as we grow older, but there are treatments that can help.
 - Use educational materials as discussion starts for this sensitive topic.
 - Discuss potential treatment options such as behavioral therapy including exercises, medications, medical devices, and surgery.
- Ask your patient if they have any trouble holding their urine. If yes, ask the following questions:
 - When do you notice leaking (exercise, coughing, after urinating)?
 - Is there urgency associated with the leaking?
 - Do you have any issues emptying your bladder (incomplete, takes too long, pain)?
 - How often do you empty your bladder at night? During the day?
 - Do you have pain when you urinate?
 - Have you noticed a change in color/smell/appearance/volume of your urine?
 - How impactful are your urinary issues to your daily life?
- For men, ask all the same questions, plus:
 - Is there any change in stream?
 - Do you have any sexual dysfunction (new, historical, or changing)?

Reducing the Risk of Falling

Sample Survey Questions

- In the past 12 months, did your doctor or other health provider talk with you about falling or problems with balance or walking?
- Has your doctor or other health provider done anything to help prevent falls or treat problems with balance or walking? Some things they might do include:
 - Suggest you use a cane or walker.
 - Suggest you do an exercise or physical therapy program.
 - Suggest vision or hearing testing.

Tips for Success

- Assess your patient's fall risk using standardized tools.
- Provide fall prevention interventions, such as regular exercise and balance activities (e.g., taichi, yoga), regular eye exams and hearing tests, and the use of a cane or walker.
- Discuss home safety tips, such as removing trip hazards, installing handrails, and using nightlights.
- Review medications for any that may increase fall risk.
- Ask your patient:
 - Have you had a fall in the past year? If so, what were the circumstances of the fall and how do you think a fall could have been prevented?
 - Have you felt dizzy, had any vision problems, or had problems with balance or walking?
- Do you have someone who can help make your home safe?