

# The Medicare Health Outcomes Survey Program (HOS)

*Sonya Bowen, MSW*

*U.S. DHHS Centers for Medicare & Medicaid Services*

*sonya.bowen@cms.hhs.gov*

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# What is the Medicare HOS?

- Medicare HOS Program of CMS since 1998
- Annual survey of 1,200 randomly selected (non-ESRD) Medicare beneficiaries in EACH managed care plan under contract to CMS
- Collects longitudinal health status data (remeasurement at 2 years)
- Self-administered mail survey with telephone follow-up

# Goal of HOS Program

**Collect Valid and Reliable Data That May Be Used To Promote:**

- Managed Care Performance Assessment
- Quality Improvement
- Beneficiary Choice
- Outcomes Research

# Survey Content

Physical Health Status

Mental Health Status

Chronic Medical Conditions

Clinical Symptoms

Activities of Daily Living



Medicare Health Outcomes Survey

Height & Weight

Depression Indicator

Smoking Status

HEDIS Measures:  
UI/Falls/Phys Act/Osteo

Healthy Days

Demographics

# HOS Outcome Measure

- % whose physical and mental health improved over two years;
- % whose physical and mental health remained the same over two years; and,
- % whose physical and mental health declined over two years.

\* All numbers are case-mix and risk adjusted for valid comparison between health plans.

# Health Outcomes Survey-Modified (HOS-M)

- Shorter, modified version of HOS instrument
  - 12 item Health Survey
  - Activities of Daily Living
  - Memory Loss Question
  - UI Question
- Allows CMS to adjust payment for specialized Medicare managed care plans treating vulnerable enrollees at greatest risk for poor outcomes

# Survey Response Rates

- Average national sample approximately 200,000 Medicare managed care enrollees each year
- Average response rates (excl. HOS-M)
  - Baseline – 66%
  - Follow up (at 2 years) – 83%
- Over one-million enrollees surveyed since inaugural year

# Key Program Improvements

## ■ 2003

- New HEDIS Measure – Management of Urinary Incontinence in Older Adults
- Add CDC's BRFSS Healthy Days Measure
- Retire Advising Smokers to Quit Battery

## ■ 2005

- New HEDIS Measure – Physical Activity in Older Adults
- HOS-M implemented



# Key Program Improvements (cont.)

## ■ 2006

- Sample size increased from 1,000 to 1,200
- Core health status questions changed from MOS 36 item Health Survey to Veterans RAND 12 item Health Survey
- 2 New HEDIS Measures – Fall Risk Management; Osteoporosis Testing in Older Women
- Add height & weight questions for BMI
- Retired 3 questions on UI and stroke complications

# Uses of HOS Data

- By CMS to:
  - Monitor health plan performance
  - Reward top performing plans with regulatory relief
  - Construct a frailty adjustor for payment purposes (HOS-M)
  - Inform agency programs and priorities (e.g., disabled, health care disparities)

# Uses of HOS Data (cont.)

- By Medicare managed care plans and Quality Improvement Organizations to target quality improvement activities and resources
- By other stakeholders (i.e., federal agencies, advocacy groups, health services researchers) to monitor health of Medicare population, including vulnerable subgroups, and evaluate treatment outcomes

# HOS Resources

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- Email: [hos@cms.hhs.gov](mailto:hos@cms.hhs.gov)
- Web: [www.hosonline.org](http://www.hosonline.org)