Understanding how patients experience care can encourage delivery of high-quality services. It also helps payers, including the Centers for Medicare & Medicaid Services (CMS), ensure that they pay for effective and efficient care. With the goal of ultimately improving health care quality, RAND helps policymakers, health care leaders, and practitioners determine cost-effective and accurate ways to measure and report on the quality of health care in the United States.

**RAND helps design, test, and implement reliable survey and reporting tools.**
CMS uses the Consumer Assessment of Healthcare Providers and Systems (CAHPS) family of surveys to capture patients’ experiences with health care providers and systems in a standardized, easily reportable way. RAND researchers have helped CMS develop and deploy new CAHPS surveys and questions for use in assessing and reporting on beneficiaries’ experiences with Medicare managed care plans, prescription drug plans, accountable care organizations, and in other settings. They have also developed questions designed to reveal whether and how health information technology affects patient experiences—an area that is not well understood.

**RAND studies why beneficiaries leave their Medicare prescription drug plans.**
Working to ensure the quality of the Medicare Prescription Drug Benefit Program (known as Part D), CMS has sought information on beneficiaries’ expectations, experiences, and—importantly—reasons for disenrolling from such plans. To examine why beneficiaries voluntarily disenroll, and to identify potential points of dissatisfaction with program features, RAND researchers developed and implemented a survey that captures reasons for disenrollment, both overall and in different markets, regions, and population subgroups. The results of this survey will help inform the design of future Part D programs.

**RAND is developing surveys for assessing the experience of emergency department and hospice patients.**
Patient experiences in emergency departments and in hospices frequently involve aspects of care not typically found in traditional inpatient and outpatient settings. In emergency departments, these characteristics include long wait times and uncertainty about potential hospital admission. In hospice care, concerns include pain management, emotional and spiritual support, and end-of-life care. RAND researchers are developing rigorous surveys for use in these unique settings, helping to ensure that the experiences of these important patient populations—as reported by the patients themselves or, in the case of hospice care, by family members and close friends—can shape improvements in health care services.

Want to learn more?
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