

# **Health Outcomes Survey**

# Provider Tip Guide

# Best practices and recommendations for talking to your patients about key areas of their health.

## **About Health Outcomes Survey (HOS)**

- Annual survey sent to a random group of Medicare Advantage plan members to rate their last six months of care.
- The Centers for Medicare & Medicaid Services (CMS) conducts the survey from July–November.
- Covers topics such as fall risk, urinary incontinence, physical activity and mental health.

### **HOS Results**

- Help you identify ways to improve patient experience
- Inform how we improve or maintain plan benefits
- Directly affect our Star ratings

Click the link or scan the code to learn more about the HOS on the CMS website. CMS.gov/Data-Research/Research/Health-Outcomes-Survey





#### **BEST PRACTICES/RECOMMENDATIONS** QUESTIONS TO ASK YOUR PATIENTS • Encourage open conversation about a fall by explaining your role is to help Have you fallen in the last 12 months? them stay healthy and safe. • What are your concerns about balance or falling? • If they have a device to aid walking, evaluate if they're using it correctly. Provide education to correct misuse and ensure they're using it full-time. When was your last vision/hearing exam? • Discuss home safety, including removing trip hazards, installing grab bars, adding night lights and using a shower chair or mat. Have you started any new medications? • Recommend a cane, walker, vision and hearing exams, when necessary. • What type of exercise or movement • Review their list of medications and ask about any OTC items not on the list. are you getting weekly? • Promote exercise, physical therapy and activities that improve strength What is your typical daily diet? and balance. How much water do you drink daily? Discuss the importance of proper nutrition and hydration. Provide nutrition resources.

Watch a quick video to help you and your team reduce fall risk for your patients.

CDC.gov/Steadi/Success-Stories/Stand-Steadi-Videos.html



# Improving or Maintaining Mental Health

| BEST PRACTICES/RECOMMENDATIONS   | QUESTIONS TO ASK YOUR PATIENTS   |
|--|--|
| Reduce negative stigma around mental health by assuring your patient it's a safe space to talk, and you want to help.  | What are you feeling that has you concerned?                               |
| Provide resources for grief support and counseling, when appropriate.  | • Have you experienced a recent loss?                                      |
| Perform a depression screening.  | <ul> <li>Do you have a support system (family<br/>and friends)?</li> </ul> |
| <ul> <li>Assess whether anxiety, depression or physical health (urinary incontinence,<br/>chronic pain, mobility) could be isolating your patient.</li> </ul>    | What are your social activities?   |
| Recommend behavioral health services and self-care techniques.   | • Is your physical health limiting   |
| • Discuss a plan that could involve volunteering, exercise, connecting with family/friends, managing stress, addressing issues with chronic pain, sleep or diet. | your activity?  • Are you getting 7 to 8 hours of sleep every night?       |
| Recommend a hearing test.  |  |

Watch a quick video to help you and your team learn more about mental health. NAMI.org/Video-Resource-Library-View-All/?Category=Mental-Health-Conditions

Your patients can reference our Healthy Living Hub as a resource for information on fall risk, bladder control, mental health and physical activity. EssenceHealthcare.com/HealthyLiving



#### **BEST PRACTICES/RECOMMENDATIONS** QUESTIONS TO ASK YOUR PATIENTS Do you have issues with bladder • Encourage discussion about this sensitive topic by explaining this is control, pain with urination or leakage? common among older adults, and you can help. How are your symptoms impacting • Assess whether your patient's symptoms point to UTI or diabetes. your daily activities? • Discuss how improving bladder control can reduce fall risk and help them • Is your sleep disrupted by frequent regain confidence when participating in activities away from home. trips to the bathroom? • Review their list of medications and ask about any OTC items not on the list. Are you rushing to get to Identify possible dietary irritants. the bathroom? • Review treatment options (exercise, physical therapy, urologist, change Have you started any new in diet, medication) to improve bladder control. medications? What is your typical daily diet?

Watch a quick video to help you and your team learn more about urinary incontinence in older adults. Nia.Nih.gov/Health/Bladder-Health-and-Incontinence/Urinary-Incontinence-Older-Adults



# Improving or Maintaining Physical Activity

| BEST PRACTICES/RECOMMENDATIONS  | QUESTIONS TO ASK YOUR PATIENTS  |
|---|---|
| <ul> <li>Emphasize the importance of regular physical activity.</li> <li>Assess whether mobility, chronic pain, urinary incontinence or mental health issues are preventing your patient from exercising.</li> <li>Discuss a plan that helps your patient start activities that match their ability.</li> <li>Recommend physical therapy, exercise programs and community resources.</li> <li>Review their list of medications and ask about any OTC items not on the list.</li> <li>Discuss the importance of proper nutrition and hydration.</li> <li>Provide nutrition resources.</li> </ul> | <ul> <li>Is your physical or mental health limiting your activity?</li> <li>What type of exercise or movement are you getting weekly?</li> <li>What activities do you enjoy (or would you like to try)?</li> <li>Have you started any new medications?</li> <li>What is your typical daily diet?</li> <li>How much water do you drink daily?</li> </ul> |

Watch a recorded webinar for you and your team to learn more about how to increase physical activity in older adults. Youtube.com/Watch?v=0YM\_LrU0Xww

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# **Sample HOS Questions**

### **Reducing Fall Risk**

- 1. Have you fallen in the past 12 months?
- 2. In the past 12 months, have you talked with your doctor or other healthcare provider about falling or problems with balance or walking?
- **3.** Has your doctor or other healthcare provider done anything to help prevent falls or treat problems with balance or walking?

## Improving or Maintaining Mental Health

- 1. How much time during the past four weeks:
  - a. Have you felt calm or peaceful?
  - **b.** Did you have a lot of energy?
  - c. Have you felt downhearted and blue?
- 2. During the past four weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)?
- **3.** Compared to one year ago, how would you rate your emotional problems in general? (such as feeling anxious, depressed, irritable)? Low?

## Improving Bladder Control

- 1. In the past six months, have you experienced leaking of urine?
- 2. During the last six months, how much did leaking of urine make you change your daily activities or interfere with your sleep?
- 3. Have you ever talked with a doctor, nurse or other healthcare provider about leaking of urine?

# Improving or Maintaining Physical Activity

- 1. In the past 12 months, have you talked with your doctor or other healthcare provider about your level of exercise or physical activity?
- 2. In the past 12 months, has your doctor or other healthcare provider advised you to start, increase or maintain your level of exercise or physical activity?
- **3.** During the past four weeks, have you accomplished less than you would like or been limited in your work or other regular daily activities as a result of your physical health?