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Be a United Hero





The dedication and effort you and your team put into maintaining strong patient relationships deserve recognition. That's why we created the United Heroes program — to reward health care professional teams who achieve high scores on our UnitedHealthcare patient experience survey.*

If you and your team meet these target scores by the end of 2025, you'll be recognized as a United Hero. The targets fall into 3 categories:



needed care





All United Heroes receive a special award for their commitment to delivering excellent patient experiences.

To help support your team in providing great patient experiences, and to learn how to be a 2025 United Hero, order a free Hero Kit by:



- Scanning the QR code
- Or, visiting UHCprovider.com/CAHPSHOS > Become a United Hero > Order now

^{*}For more information about the survey, please see the Survey scorecard section.

Patient experience: Why it matters



Great patient experiences make a difference

By working together, we can help ensure that your patients' experiences surpass their expectations across the continuum of care.



Your patients as partners

Delivering care that is coordinated, managed and continuously improved in active partnership with patients and their care partners is associated^{1,2} with the following benefits:

- Increased patient satisfaction³
- Potential lower costs for the patient
- Increased success in self-management of disease⁴
- · Reduced illness burden
- Fewer hospitalizations
- Decreased use of emergency department
- Shorter lengths of stay



Your practice

- Patients are loyal when they feel their health care professional cares about them and delivers a quality experience⁵
- Patient experience initiatives improve employee satisfaction and reduce staff turnover⁶
- A good patient experience correlates with lower malpractice risk^{7,8}



Your payer relationship

- A good patient experience supports a positive experience for our members, as well as health care professionals and their care teams
- Research shows that patient experience surveys are reliable predictors of quality measures, including better outcomes⁹

Patient experience tips and best practices





Annual care visits

Annual care visits (ACVs) are an important way in which you can provide excellent patient experiences. They offer valuable opportunities for patients to connect with you, ask questions and receive personalized guidance about their health journey.

According to the Centers for Disease Control and Prevention,¹ the purpose of the annual care visit is to "encourage individuals to take an active role in accurately assessing and managing their health, and consequently improve their well-being and quality of life."

We offer incentive programs for ACV-related activities. Connect with your UnitedHealthcare representative to learn more.





Patients who receive ACVs tend to give higher scores in the CAHPS survey compared to those who do not.² An added bonus – your UnitedHealthcare Medicare Advantage patients may be eligible to receive rewards for these visits.

Important steps

In addition to completing the ACV comprehensive screening, you and your team can do the following with your patients to help improve your patient experience scores:

- Review any specialists or other providers they're currently seeing, including specialist referrals
- · Advise them of when and how they'll receive test results
- Discuss medications they're taking, including prescription and over-the-counter medications, supplements and vitamins
- Ask if they've had balance or walking problems and provide treatment options
- Discuss urinary incontinence issues and recommend treatment options
- Review their level of exercise and encourage them to start, maintain or increase physical activity
- Ask about their mental health and if they've experienced any changes since the last visit

Reminder: UnitedHealthcare Medicare Advantage plans cover the cost of ACVs for patients who see network providers.

Allowing patients the flexibility to make appointments and receive care in a timely manner is one way you can create positive health care experiences.

Patient experience survey question	Pre-visit tip	During the visit tip	Close of visit tip
How easy was it to get an appointment with your personal doctor as soon as you needed?	Allow patients to schedule appointments online.	Offer walk-in time slots, telehealth options and/ or appointment times outside regular hours.	Schedule patients' next appointments at the end of their visits.
Did you have any difficulty getting a referral to see a specialist from your doctor?	Confirm that the specialist is accepting new patients before making a referral.	Submit prior authorization requests immediately. Offer patients an explanation of the referral process.	Schedule patients' specialist appointments at the end of their visits. Explain the specialist's role to patients so they understand which care services they will provide.

What you can do to help improve your getting needed care scores:

- Schedule appointments through your office/front desk instead of a call center
- See patients within 48 hours for urgent care
- Schedule patients' appointments within 2 to 4 weeks
- Have patients wait no more than 15 minutes in the lobby
- Leverage advance practice clinicians



Coordinating care among health care professionals helps improve efficiency and demonstrates respect for patients' time.

Patient experience survey question	Pre-visit tip	During the visit tip	Close of visit tip	
Did your doctor seem informed and up to date about the care you received from a specialist?	Request that patients update their current list of specialists in the patient portal or send this information before their visits. If available, gather notes from specialist referrals.	Ask your patients about all the specialists they are seeing. You may be surprised to learn your patients are seeing specialists you're not yet aware of.	Review and summarize specialist information with patients. Provide them with a copy to take home and ensure it's also accessible in the patient portal.	
Did your doctor or other health provider review all your prescription medications with you?	Ask patients to bring in their medications or a list of their current medications.	Discuss patients' medications, including specialty drugs. Simplify their regimen by reviewing each medication's name, purpose, side effects and dosage.	Review and summarize medication information with patients. Provide them with a copy to take home and ensure it's also accessible in the patient portal.	
Did you receive follow-up from your doctor's office after any blood test, X-ray or other test that you may have completed?	Inform patients ahead of time if any tests are scheduled for their upcoming appointment. Gather results from previous tests that you need to review with them.	Clearly explain ordered tests, their purposes, and when and how to expect results. Inform them if a follow-up appointment will be needed.	Review and summarize ordered tests with patients. Provide them with a copy to take home and ensure it's also accessible in the patient portal.	



Discussing clinical health indicators with patients can offer insight into their self-perception of health and personal goals. This conversation can also build trust, contributing to their overall well-being.

Patient experience survey question	Pre-visit tip	During the visit tip	Close of visit tip*	
Did your doctor or other health provider talk to you about how to prevent falls or treat problems with balance or walking?	Ask all patients to complete a fall assessment in person or before their visits.	Ask all patients, regardless of their recent fall history, if they are having difficulty with balance. Display posters and treatment cards and use the checklist to discuss balance, falls and treatment options.	Summarize the discussion and make your treatment option recommendations clear. These may include using a cane/walker, doing an exercise or physical therapy program, or having vision or hearing tests.	
Did your doctor or other health provider talk to you about ways to better control leaking of urine?	Ask all patients to complete a bladder control assessment in person or before their visits.	Ask all patients if they are having difficulty with urine leakage. Display posters and treatment cards and use the checklist to discuss bladder control, urine leakage and treatment options.	Summarize the discussion and make your recommendations for treatment options clear. These may include bladder training exercises, medication and/or surgery.	
During your visit, did your doctor or other health provider advise you to start, increase or maintain your exercise level?	Ask patients to describe their current exercise routines before their visit by completing a form in their patient portal.	Talk to patients about their current exercise routines. Use the wording "start, increase or maintain exercise level" to help with recall.	Summarize the discussion and make your recommendations for starting, increasing or maintaining exercise clear.	

^{*}Consider using the teach-back method at close of visit by checking the patient's understanding of what was discussed. This best practice involves asking the patient to state in their own words what they need to know or do about their health going forward. This also gives the patient an opportunity to ask questions and better understand their health.²



Making it easy for your patients to get their medications is an important way to help ensure positive patient experiences at the pharmacy and with their Medicare Part D benefit.

Patient experience Close of visit tip* **Pre-visit tip During the visit tip** survey question Did you experience difficulty When prescribing Review any changes to Ask patients to bring in with your insurance plan their medications, including prescription medications medications, use a covering any medications prescriptions, over-thewith patients. real-time benefit your doctor prescribed?** counter medications, vitamins check tool, such as Recommend that patients and supplements, or a list of PreCheck MyScript, to use the **UnitedHealthcare** check patients' current their current medications. app to review drug costs prescription costs and and coverage for new or coverage based on changed prescriptions. their plan. If applicable, share Review prescription costs expectations with patients and offer lower cost around prior authorization alternatives when clinically timelines and next steps. appropriate. If patients need assistance Prescribe patients 90paying for medications, or 100-day supplies of advise them to call the medications for additional number on their member cost savings.*** ID card. Submit prior authorizations in the **UnitedHealthcare Provider Portal** to help reduce phone wait times and paperwork

^{*}This measure doesn't affect your Patient Experience score.

^{**}This question involves member experience with their insurance coverage, but there are actions providers can take to help support performance in this area.

^{***}Effective Jan. 1, 2025, 90- and 100-day supplies are only available for Tier 1, 2 and 3 medications. Cost savings may only be available for 100-day supplies for select pharmacies or tiers.



Health Outcomes Survey: Mental and physical health

The Centers for Medicare & Medicaid Services (CMS) uses the Health Outcomes Survey (HOS) to understand patients' perceptions of their physical and mental health status.

In survey year 2025, Improving or Maintaining Mental Health (MCS) and Improving or Maintaining Physical Health (PCS) are 3-weight measures. In 2024, they were 1-weight measures.

Reminder: Your patients may have mental health benefits through their plan. Please encourage your patients to learn more by calling the number on their member ID card.

Best practices

Use the ACV or first visit with your patients to address how they feel about their physical and mental health at the time of their visit compared to the previous year.

Other helpful practices for each measure are as follows:

Improving or Maintaining Physical Health

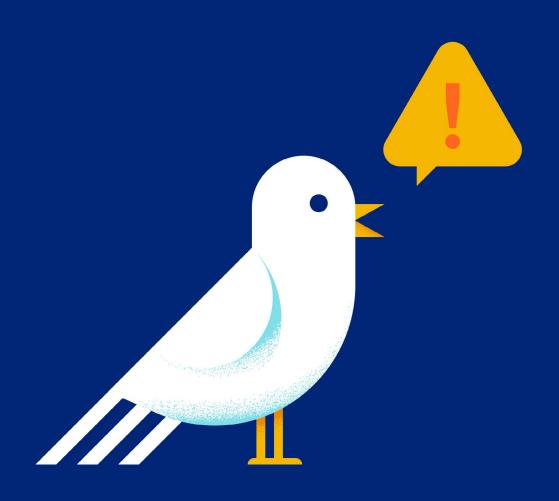
- Use the familiar phrase: "I'd like to talk about your physical health and if it affects your daily life. Is that OK?"
- Ask patients regularly if their physical health, including any pain, affects their ability to get around or do everyday activities such as climbing stairs or housecleaning
- Prescribe physical activity using a prescription pad to advise patients of appropriate activity regimens

Improving or Maintaining Mental Health

- Use the familiar phrase: "I'd like to talk about your emotions and mental health and if it affects your daily life. Is that OK?"
- Ask patients regularly if their emotions or mental health limit their daily or social activities
- Implement mental health screenings (PHQ-2 and PHQ-9)
- Provide first-line treatment as appropriate or refer them to a behavioral health provider
- Connect patients with mental health information and resources



Importance of patient experience planning



Preparing for positive patient experiences

To help enhance patient experiences, consider using this checklist to prepare for each visit and holding daily huddles to review the patient list and set priorities.

Pre-visit

Practice Assist)

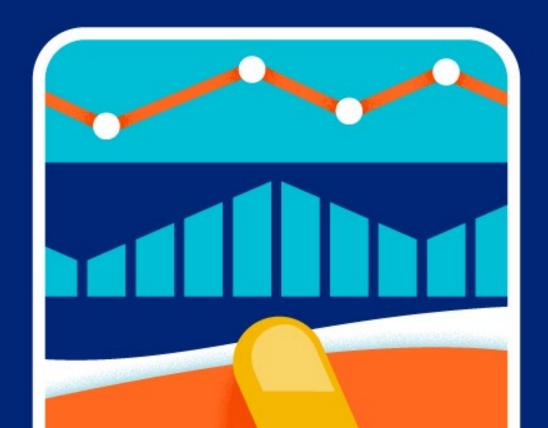
1. G	Sather information and let patients know what to expect
t c	Provide alternate appointment options (e.g., telehealth, pefore/after hours or wait list) if it helps them get the care they need, when they need it Request patients bring in a list of specialists they're seeing
a	and any prescription or over-the-counter medications they're taking
	Send preappointment reminders by email or phone
	Offer checklists to complete before visit (medical history) Set expectations of office wait time
2. E	stablish a care coordination process
(S	Obtain and/or order medical records and review them (e.g., lab test results, specialist records and preventive screening results) Send medical records to referring health care
F	professionals
3. P	Prepare for scheduled patients
	Review the next day's appointment at the end of every day, or every morning
	Create patient chart
	Document patient's preferred communication method
4. U	Jse data to help drive the visit
C	Incorporate patient information from UnitedHealthcare data platforms into your visit (e.g., Patient Care Opportunity Review (PCOR), PreCheck MyScript® and

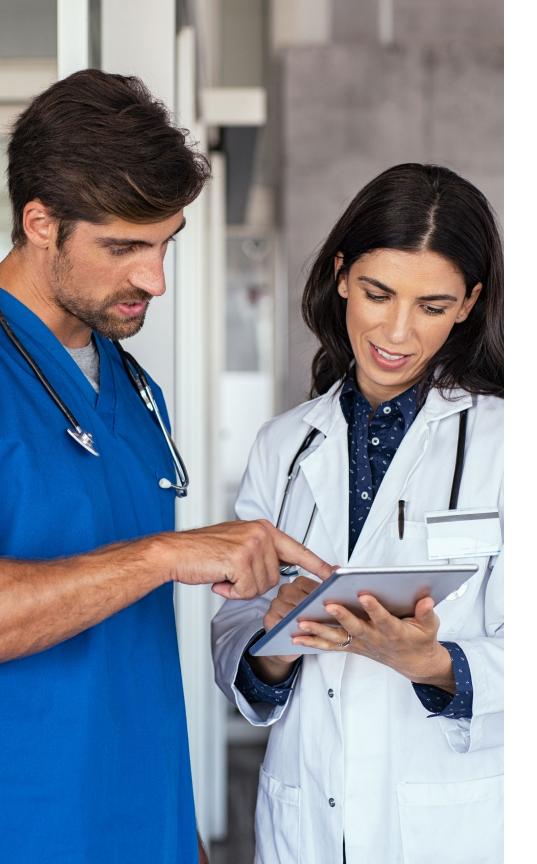
During the visit

1. Provide care	
 □ Review medications □ Review specialist visits □ Provide follow-up lab or test information □ Assess changes in balance, physical activity and bladder control □ Remind patients that they may receive a patient experience survey by email or an automated call after their visit 	
2. Complete administrative tasks	
 □ Request prior authorizations □ Schedule appointments for specialists or tests and create patient reminders 	
Post-visit	
Post-visit 1. Follow up with patient	
1. Follow up with patient Give patients a post-visit summary to reference Communicate delivery method and timing of lab or test results	
 1. Follow up with patient Give patients a post-visit summary to reference Communicate delivery method and timing of lab or test results Remind the patient they may receive a post-visit follow-up survey 	
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 1. Follow up with patient Give patients a post-visit summary to reference Communicate delivery method and timing of lab or test results Remind the patient they may receive a post-visit follow-up survey Schedule any additional specialist visits, labs or tests 	
 1. Follow up with patient Give patients a post-visit summary to reference Communicate delivery method and timing of lab or test results Remind the patient they may receive a post-visit follow-up survey Schedule any additional specialist visits, labs or tests 2. Post-discharge follow-up Call patients after hospitalization to follow up on their medications, reconcile their medications and schedule 	

inform areas you could improve

Understanding your patient experience survey and scorecard





About the patient experience survey

We want to support you in delivering the best possible patient experiences.

After we receive a claim, we may survey your patient and report your specific results to you through monthly scorecards. Please note that it may take up to 45 days for us to receive a claim and we won't survey your patients more than once every 4 months.

The 9 questions on our patient experience survey relate to the official CAHPS survey and HOS questions that you and your team have the most influence over.



We encourage you to let your patients know that their feedback is important. Please ask them to complete the survey from UnitedHealthcare if they receive one after their visit with you.



The UnitedHealthcare patient experience survey

Scoring will reflect the percentage of positive responses (shown in boxes) for each question.

Getting needed care



- 1. How easy was it to get an appointment with your personal doctor as soon as you needed?
 - Easy

- Not easy
- Somewhat easy
- Does not apply
- 2. Did you have any difficulty getting a referral to see a specialist from your doctor?
 - No difficulty
- Some difficulty
- It was difficult
- Does not apply



Care coordination

- 3. Did your doctor seem informed and up to date about the care you received from a specialist?
 - Yes, my doctor talked to me about care from my specialist
 - No, my doctor did not speak to me about care from my specialist
 - Did not see a specialist
 - Does not apply
- 4. Did your doctor or other health provider review all your prescription medications with you?
- Yes
- No
- Does not apply
- 5. Did you receive follow-up from your doctor's office after any blood test, X-ray or other test that you may have completed?
 - Yes, received a follow-up
 - No, did not receive a follow-up
 - Does not apply

Getting needed Rx



This category helps us detect opportunities to support your patients. This target score does not affect your patient experience score.

- 6. Did you experience difficulty with your insurance plan covering any medications your doctor prescribed?
- No difficulty
- Some difficulty
- It was difficult
- Does not apply



- 7. Did your doctor or other health provider talk to you about how to prevent falls or treat problems with balance or walking?
- Yes
- No
- Does not apply
- 8. Did your doctor or other health provider talk to you about ways to better control leaking of urine?
- Yes
- No
- Does not apply
- 9. During your visit, did your doctor or other health provider advise you to start, increase or maintain your exercise level?
- Yes
- No
- Does not apply

Your patient experience scorecard

(Getting needed care + Care coordination + Doctor-patient conversations)/3

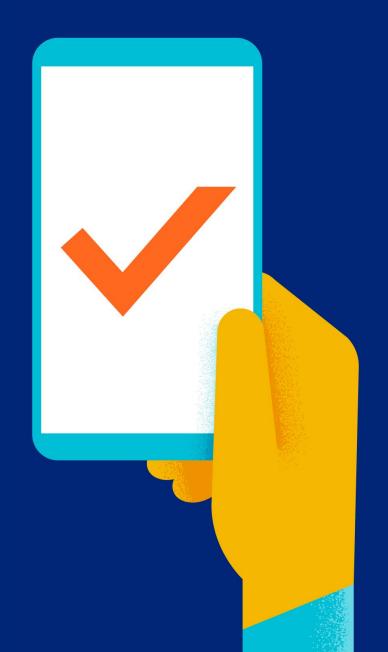
In 2025, you must hit the target scores in each of the 3 patient experience categories to become a United Hero.

Review your scorecard results with your UnitedHealthcare representative and care team to identify improvement opportunities.



Survey question Survey question	Target score	Month 1	Month 2	Month 3	2025	2024
Getting needed care	93%					
How easy was it to get an appointment with your personal doctor as soon as you needed?	90%	т	he latest 3	Smonths wi	ill ha displ	aved
2. Did you have any difficulty getting a referral to see a specialist from your doctor?	96%	The latest 3 months will be displayed			ayeu	
Care coordination	91%					
3. Did your doctor seem informed and up to date about the care you received from a specialist?	89%	_, ,				
4. Did your doctor or other health provider review all your prescription medications with you?	94%	us de	The "Getting needed Rx" category helps us detect opportunities to support your patients. This score doesn't affect your patient experience score.			your
5. Did you receive follow-up from your doctor's office after any blood test, X-ray or other test that you may have completed?	89%					
Getting needed Rx	93%					
6. Did you experience difficulty with your insurance plan covering any medications your doctor prescribed?	93%					
Doctor-patient conversations	64%					
7. Did your doctor or other health provider talk to you about how to prevent falls or treat problems with balance or walking?	69%					
8. Did your doctor or other health provider talk to you about ways to better control leaking of urine?	46%					
9. During your visit, did your doctor or other health provider advise you to start, increase or maintain your exercise level?	78%					
Patient experience score	83%			experience age of the 3		

A quick guide to the CAHPS survey and HOS





What are the CAHPS survey and HOS, and why do they matter?

Each year, CMS sends the CAHPS survey and HOS to some of your patients who are UnitedHealthcare® Medicare Advantage plan members to gather insights into how they feel about their patient experiences. The CMS Star Ratings Program helps consumers understand a practice's performance.

In 2025, 32% of health plans' CMS Star Ratings will come from the CAHPS survey (25%) and HOS (7%).

These 2 federally mandated surveys gather patient feedback every year to better understand health care experiences and outcomes. The results provide valuable insights into how consumers perceive their experience with health care professionals and health plans.

Together, we can use these insights to identify areas of improvement and drive better health outcomes.

For more information about the surveys, please contact your UnitedHealthcare representative or visit cahps.ahrq.gov and hosonline.org.

Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey

From March through June each year, a random sample of your patients who are Medicare Advantage members receive the CAHPS survey.



CMS survey year 2025 weights*	Measures	Survey questions tied to a patient's experience with health care professional
1	Annual flu vaccine	Have you had a flu shot?
2	Getting needed care	How would you rate your ease and timeliness of: • Getting appointments with specialists? • Getting the care, tests or treatment you needed?
2	Getting appointments and care quickly	How often did you:Get urgent care as soon as needed?Get appointments at your doctor's office?
2	Care coordination Customer service Getting needed Rx drugs	 Has your personal doctor or doctor's office: Managed your care among different providers and services to your satisfaction? Followed up promptly on test results? Talked to you about all the medications you take?
2	Rating of health care	On a scale from 0 to 10, how would you rate your: Overall health care? Personal doctor? Specialist seen most often?
2	Rating of plan	Survey questions not tied to health care professional
2	Rating of drug plan	Survey questions not tied to health care professional

^{*}Measure weights are subject to change based on CMS guidelines. For more information, please visit cms.gov.

Health Outcomes Survey (HOS)

From July through November each year, a random sample of your patients who are Medicare Advantage members receive the HOS. Your patients may receive a baseline survey and then a follow up survey 2 years later.

of total Star Rating based on HOS results

CMS survey year 2025 weights*	Measures	Survey questions tied to a patient's health outcomes with care provider
1	Fall risk management	 Have you had a fall or issues with walking or balance? When talking with your doctor, have they recommended ways to help prevent falls or treat problems with walking or balance?
1	Management of urinary incontinence	 In the past 6 months, have you experienced leaking of urine? How much did leaking of urine make you change your daily activities or interfere with your sleep? Have you talked with your doctor about treatment options?
1	Physical activity in older adults	In the past 12 months, did you talk with your doctor about your level of exercise or physical activity?
3	Improving or maintaining mental health	During the past 4 weeks, how much of the time have you: • Felt calm and peaceful? • Had a lot of energy? • Felt downhearted and blue?
3	Improving or maintaining physical health	 Does your health now limit you in daily activities like cleaning, climbing a flight of stairs or playing golf? In the last 30 days, has pain interfered with your daily activities either at home or work?

^{*}Measure weights are subject to change based on CMS guidelines. For more information, please visit cms.gov/hos.

Frequently asked questions



Q: How did you choose the 9 questions on the UnitedHealthcare patient experience survey?

A: We base our 9 questions on measures related to the CAHPS survey and HOS. These questions represent the greatest opportunities for you to identify areas of improvement for your patients.

Q: How do you contact patients for the UnitedHealthcare patient experience survey?

A: We may email and/or call your patients.

Q: How did you establish the target scores on the UnitedHealthcare patient experience survey?

A: We use CMS methodology based on past provider patient experience survey performance to determine our target scores. We review our survey target scores annually.

Q: Where can I find coding information for different visit types, such as Welcome to Medicare, ACV and Annual Routine Physicals?

A: Please connect with your UnitedHealthcare representative to receive this information.

Q: What codes initiate the Patient Experience survey for my patients?

A: Please connect with your UnitedHealthcare representative to receive this information.

Q: Why do you include Patient Experience survey scores in incentive programs?

A: For 2025, CMS survey measures account for a significant portion of the overall Star Rating. To help emphasize the importance of these survey measures, we may include them in our provider incentive programs.

Q: Why do health care professionals need to be involved with CAHPS and HOS?

A: Health care professionals and their teams heavily influence patient experience, and we want to do our part in supporting you. We've created a suite of educational materials to help set you up for success in achieving excellent patient experience scores and becoming a United Hero.

Q: If the survey response rates for my patients seem low, how can I increase them?

- A: There are several reasons why it may appear that you aren't receiving many survey responses, such as:
 - We base our survey on claims we receive from your practice. Please note that it may take up to 45 days for us to receive a claim. We won't survey your patients more than once every 4 months.
 - We only survey your patients who are Medicare Advantage members. For example, if you serve fewer than 100 of these members, your response rates will be low.
 - Your patients who are Medicare Advantage members may benefit from a reminder that they'll receive the survey on a regular basis throughout the year. Encourage your patients to complete a survey if they receive one.

Q: The doctor-patient conversations category is harder to achieve and doesn't seem appropriate for every patient visit. Why does UnitedHealthcare include it?

A: CMS asks your patients on the HOS if they've discussed fall risk management and urinary incontinence with their doctor. UnitedHealthcare addresses them as part of the patient experience survey and encourages health care professionals to routinely have these conversations. The targets for this category are lower than the other survey measures.



Endnotes

Patient experience: Why it matters

- Frampton, S. B., S. Guastello, L. Hoy, M. Naylor, S. Sheridan, and M. Johnston-Fleece. 2017. Harnessing Evidence and Experience to Change Culture: A Guiding Framework for Patient and Family Engaged Care. NAM Perspectives. Discussion Paper, National Academy of Medicine, Washington, DC. doi.org/10.31478/201701f
- Stewart, M.A. Effective physician-patient communication and health outcomes: A review. CMAJ 1995; 152(9):1423-33.
- Safran, D.G., Taira, D.A., Rogers, W.H., et al. Linking primary care performance to outcomes of care. J Fam Pract 1998: 47(3):213-20.
- Sequist, T.D., Schneider, E.C., Anastario, M., et al. Quality monitoring of physicians: Linking patients' experiences of care to clinical quality and outcomes. *J Gen Intern Med* 2008; 23(11):1784-90.
- Safran, D.G., Montgomery, J.E., Chang, H., et al. Switching doctors: Predictors of voluntary disenrollment from a primary physician's practice. *J Fam Pract* 2001; 50(2):130-6.
- ⁶ Rave, N., Geyer, M., Reeder, B., et al. Radical systems change: Innovative strategies to improve patient satisfaction. *The Journal of Ambulatory Care Management* 2003; 26(2):159-74.
- Levinson, W., Roter, D.L., Mullooly, J.P., et al. Physician-patient communication: The relationship with malpractice claims among primary care physicians and surgeons. *JAMA* 1997; 277:553-9.
- B Hickson, G.B.C., Clayton, E.W., Entman, S.S., et al. Obstetricians' prior malpractice experience and patients' satisfaction with care. *JAMA* 1994; 272:1583-7.
- Oleary, P.D. Evolving concepts of patient-centered care and the assessment of patient care experiences; optimism and opposition. JHealth Polit Policy Law 2016; 41(4):675-96.

Patient experience tips and best practices

- Goetzel, RZ; Staley, P; Ogden, L; Stange, P; Fox, J; Spangler, J; Tabrizi, M; Beckowski, M; Kowlessar, N; Glasgow, RE; Taylor, MV. A framework for patient-centered health risk assessments providing health promotion and disease prevention services to Medicare beneficiaries. Atlanta, GA: US Department of Health and Human Services, Centers for Disease Control and Prevention, 2011. stacks.cdc.gov/view/cdc/23365
- ^{2,3} Frampton, S. B., S. Guastello, L. Hoy, M. Naylor, S. Sheridan, and M. Johnston-Fleece. 2017. Harnessing Evidence and Experience to Change Culture: A Guiding Framework for Patient and Family Engaged Care. *NAM Perspectives*. Discussion Paper, National Academy of Medicine, Washington, DC. doi.org/10.31478/201701f

Frequently asked questions

Care Coordination. Content last reviewed November 2024. Agency for Healthcare Research and Quality, Rockville, MD. ahrq.gov/ncepcr/care/coordination.html

We're here to support you

For more patient experience resources, visit **UHCprovider.com/ CAHPSHOS** or connect with your UnitedHealthcare representative.

To access our self-paced interactive course, please visit **UHC.com/patientexperience**.

