



2025 patient experience survey

The annual care post-service survey



Supporting providers, improving patient experiences



What is the Aetna® patient experience survey?

Each year, Medicare members are given surveys by the Centers for Medicare & Medicaid Services (**CMS**), such as:

- The Consumer Assessment of Healthcare Providers and Systems (**CAHPS®**) survey
- The Health Outcomes **Survey (HOS)**

We also conduct a patient experience survey for Aetna members, and we share the results with you. This survey focuses on metrics that are important to you. Patients will be asked to complete this digital survey after an in-person visit with a provider. It'll help us understand their perceptions of the care they get from providers like you.



What's inside:

- ✓ Why **positive care experiences** matter
- ✓ Understanding the **patient experience questions** and tips for improving results
- ✓ **Resources** to assist in navigating patient-provider discussions

Supporting you in delivering the best possible patient experience

Positive care experiences matter

Patient experiences are the care **moments**, shaped by a **culture** of care. They influence the **relationship** a patient has with their provider and care team.

Patient experiences

Providers are essential to positive health experiences and outcomes. Having a personal provider has been shown to improve measures related to access, such as getting needed care, getting needed drugs and getting care quickly.*

Care moments

Empathy is important to the overall well-being of patients. It can provide better results and increase the potential for future improvement.* Take the time to explain things like treatment and test results. This empathetic approach may help improve health literacy while also reducing anxiety.*

Culture of care

As a provider, you help your patients get the care they need. Showing a patient you care may help them speak candidly about hard topics. You can help by sharing anecdotes, resources and reassurance that they're not alone.*

Relationships

It's important to build strong provider-patient relationships. Connect with patients by preparing and listening intently. Agree on what matters most, building trust by exploring emotional cues. These connections may be made stronger through presence, awareness, focus and attention.*

Elevating patient
experience to
improve health
and satisfaction

Expanding emphasis
on preventive
medicine and early
disease detection



Enhancing
stronger decision
support for
chronic condition
management

Enriching the
relationships
patients have with
their health,
provider and plan

**Positive care experiences lead to
positive outcomes**

*FOR HAVING A PERSONAL PROVIDER SOURCE: Martsolf G, et al. **Care experiences among medicare beneficiaries with and without a personal physician.** Medical Care. April 2018; 56(4): 329-336.

*FOR EMPATHY SOURCE: Moudatsou M, et al. **The role of empathy in health and social care professionals.** Healthcare. January 2020; 8(1), 26.

*FOR ANXIETY SOURCE: Meyer A, et al. **Patient and clinician experiences of uncertainty in the diagnostic process: Current understanding and future directions.** Patient Education and Counseling. November 2021; 104(11): 2606-2615.

*FOR CARE SOURCE: National Institute on Aging. **Talking with your older patients.** National Institutes of Health. January 2023.

*FOR RELATIONSHIP SOURCE: Zulman, et al. **Practices to foster physician presence and connection with patients in the clinical encounter.** Special Communication. January 2020; 323(1): 70-81.



Annual care post-service survey

Supporting you in delivering the best possible patient experience

What you should know

Here's who gets the survey

We select Aetna® members for the survey based on the medical claims submitted to us within the last 90 days. On average, a selected member will receive a survey within 45 days of their visit.

However, the timing of a survey varies based on when we receive claims from a visit. Within 30–45 days of receiving a claim for any visit to the primary care provider (PCP) including annual wellness visits, annual physical exams and other outpatient PCP visits, we'll survey the member digitally.

The member may receive a subsequent survey if they have a visit within 180 days of the initial visit.

Your patient experience results

The 24 questions on our survey align with the official CAHPS® survey and HOS questions that you and your team have the most influence over.

We'll share survey results to help you understand your patients' perception of care. Together we can apply these results to gain insights on ways to identify areas of improvement and drive better health outcomes.

As data is collected, we'll review your results with you to create an action plan to make improvements.

Scoring will follow a four-point Likert scale measuring frequency using Never, Sometimes, Usually and Always, as well as Yes or No responses. Linear mean score will be calculated using all responses.



Personal doctor: care coordination

Members are asked to answer these six questions about care received from their **personal doctor** in the past six months.

Member survey questions



Industry best practices for physicians

Suggestions for having a positive impact on your patients

Opportunity

Was it easy to get the care you needed?

- General care
- Tests
- Treatment

Was it easy to schedule your appointment?

When you visited for a scheduled appointment, did they have your medical records or other information about your care?

When a blood test, X-ray or other test was ordered for you, did someone from your doctor's office give you those results?

Was it easy to get medicines prescribed by your doctor?

Did you talk with your doctor about any medicines you take?

- Getting needed care can be difficult. When a patient understands their care plan, they're more likely to adhere to it.
- Explaining tests and treatment clearly can help patients commit to seeking needed care. When you recommend care, be specific. Tell patients what their options and timelines are. Offer resources and support for getting care.
- Ask patients about any problems they have with scheduling. Online and phone scheduling can be convenient for some. For others, it's best to schedule appointments in the office.
- Offer to schedule follow-ups when a patient is checking out. And ask how they prefer to get appointment reminders.
- Ask your patient if they have transportation for appointments. If they don't, encourage them to call our Resources For Living® program. They can help your patients find transportation resources.
- Consider these factors: drug availability and affordability, timely prescribing, and up-to-date patient pharmacy choice. This results in patients getting the drugs they need.
- Remind Aetna® members that they have a QR code on their member ID card. It'll take them to a web page specific to their plan. And it has important resources, such as their plan's formulary.



Specialists: care coordination

Members are asked to answer these two questions about care received from a **specialist** in the past six months.

Member survey questions



Opportunity

Was it easy to schedule a specialist appointment?

Did your primary care provider know about the care you got from a specialist?

Industry best practices for physicians

Suggestions for having a positive impact on your patients

- Care coordination offers patients holistic access to the care they receive from separate providers. For those providers, care coordination becomes a team sport, guided by effective communication.
When a patient's PCP is aware of care received elsewhere, they're able to focus on the total health care needs of a patient. And they're better equipped to reduce costs from redundant tests and procedures.*
- Coordinating a patient's care is focused on reducing friction points. These points may include scheduling appointments and tests, understanding costs, and consolidating information from disparate providers. These factors can be barriers to care as patients navigate logistical obstacles.*

*FOR CARE COORDINATION SOURCE: The New England Journal of Medicine. **What is care coordination?** NEJM Catalyst. January 2018.

*FOR BARRIERS SOURCE: Compton-Phillips A. **When providers and plans collaborate on patient experience, everybody wins.** Press Ganey. September 2023.



Specialist: care coordination

Members are asked to answer these four questions about care received from their **most recent visit**.

Member survey questions



Opportunity

Was it easy to get the care you needed?

- General care
- Tests
- Treatment

Was it easy to schedule your appointment?

Did you talk with your doctor about any medicines you take?

Did your primary care doctor know about the care you got from a specialist?

Industry best practices for physicians

Suggestions for having a positive impact on your patients

- Getting needed care can be difficult. When a patient understands their care plan, they're more likely to adhere to it.
- Explaining tests and treatment clearly can help patients commit to seeking needed care. When you recommend care, be specific. Tell patients what their options and timelines are. Offer resources and support for getting care.
- Ask patients about any problems they have with scheduling. Online and phone scheduling can be convenient for some. For others, it's best to schedule appointments in the office.
- Offer to schedule follow-ups when a patient is checking out. And ask how they prefer to get appointment reminders.
- Ask your patient if they have transportation for appointments. If they don't, encourage them to call our Resources For Living® program. They can help your patients find transportation resources.
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Improving bladder control

Member survey questions



Industry best practices for physicians

Suggestions for having a positive impact on your patients

Opportunity

Have you talked to a doctor about bladder control?

Has a doctor told you to try any of these to help with bladder control?

- Exercises
- Medicines
- Surgery

- Incontinence can be a difficult subject to approach. But it's important to discuss with your patient. It's more than an inconvenience and can also lead to falls, if not controlled.
- Be sure to summarize any recommendations so your patient clearly understands what they can do to improve their bladder control.



Reducing the risk of falling

Member survey questions



Have you talked with a doctor about any of these?

- Falling
- Problems with balance
- Problems with walking

Has a doctor told you to try any of these to help with balance or walking?

- Use a cane or walker
- Doing an exercise program
- Doing a physical therapy program
- Getting a vision or hearing test

Industry best practices for physicians

Suggestions for having a positive impact on your patients

Opportunity

- Patients tend to have fewer falls when they're assessed for gait and balance challenges and receive regular vision and hearing tests.
- Ask all patients about any issues they're having with balance or falling. Be sure to summarize any recommendations so it's clear what they should do to prevent falls.

Check out this resource on fall prevention:

[Aetna/Reduce_Falls](https://aetna.com/Reduce_Falls)



Monitoring physical activity

Member survey questions



Have you talked with a doctor about your physical activity? Such as talking about if you exercise.

Has your provider told you to try any of these to help with balance or walking?

- Start doing exercise
- Keep doing the same amount of exercise
- Do more exercise

Industry best practices for physicians

Suggestions for having a positive impact on your patients

Opportunity

- Helping patients track their physical activity can help them meet their goals.
- Our movement tracking resource includes space for you to make recommendations. And patients can write down any concerns they have about their activity.

You can find this resource at

[Aetna/Move_Tracker](https://aetna.com/move-tracker)



Improving and maintaining mental health

Member survey questions



Industry best practices for physicians

Suggestions for having a positive impact on your patients

Opportunity

Have you ever talked with a provider about mental health?

In the past 30 days, was your mental health mostly good?

In the past 30 days, have you felt downhearted and blue?

- Monitoring mental health outcomes can help patients and providers understand how effective certain interventions and treatments are.* Mental health is an important part of overall quality of life. Measures in quality of life may help in tracking health disparities and assessing the impact of chronic diseases.*
- We're asking patients to self-rate their mental health on a 30-day timeline. This measure includes stress, depression and problems with emotion. This topic can be hard to talk about. When talking to patients about mental health, ask open-ended questions to allow them to speak candidly.

If you find a patient needs a mental health referral, be specific. Offer them contact information and an explanation of the referral to help them take action.
- If a patient is in crisis, encourage them to call the **Suicide & Crisis Lifeline at 988**. They're available 24/7 for free and confidential support.

*FOR MONITORING SOURCE: Guttman M. [Rethinking how we measure progress in mental health treatment](#). National Alliance on Mental Illness. June 2023.

*FOR MEASURES SOURCE: Dumas S, et al. [A comparison of the four healthy days measures \(HRQOL-4\) with a single measure of self-rated general health in a population-based health survey in New York City](#). Health and Quality of Life Outcomes. September 2020; 18: 315.



Patient open comments

Member survey questions



Think about the most recent doctor visit you may have had since enrolling with the plan. Please describe anything about the visit, the staff or the follow-up that went especially well.

Please share any good or bad experiences you had in your most recent visit.

Industry best practices for physicians

Suggestions for having a positive impact on your patients

Opportunity

This open-ended question won't impact your score. We're asking patients to openly share any good or bad experiences they had in their most recent visit.

This question helps us capture anything we've missed. So we can effectively monitor outcomes and identify any unmet needs or disparities in getting needed care.

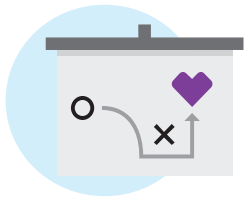


Healthier happens together[®]

Resources for better patient experience

- Aetna[®] patient engagement materials portal
- Annual care checklist
- CAHPS[®] and HOS provider toolkit
- Sample member ID card
- Plan web pages
- Resources For Living[®] program
- SilverSneakers[®] fitness benefit
- Tools to help you understand the CAHPS survey

**Helping patients
with what
matters most**



Providing a 5-star experience

Understanding industry best practices in support of CAHPS® and HOS measures will be the key to a successful patient journey and experience.

Resources include:

- eLearning
- Tailored office hours
- Patient experience materials
- Personalized webinar
- Supplemental member verbatim upon request

Understanding the CAHPS survey

[Aetna/Understand_CAHPS](https://aetna.com/Understand_CAHPS)

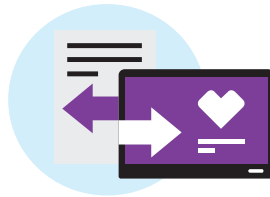
CAHPS and HOS provider education video series

[Aetna/Provider_Video_Resources](https://aetna.com/Provider_Video_Resources)

Aetna patient engagement materials portal

[Aetna/Provider_Resource_Portal](https://aetna.com/Provider_Resource_Portal)

QR code and plan web page URL on ID card



Learn more about your patients' health plan benefits in one place

Our **member ID cards** make it easy for you and your office staff to access details about a patient's plan. It includes access to plan materials like:

- Summary of Benefits
- Evidence of Coverage (EOC)
- Formulary

Just scan the **QR code** or visit the **plan web page URL** on your device.

An important tool that can help you learn about a patient's health plan benefits

Sample member ID card



Medicare PPO
Aetna Medicare Dental

Market Plan Name
PLAN# XXXXXXXXXXXXXXXX
ID 10XXXXXXXXXXXXX
NAME E JOHN Q SAMPLE
RxBIN 610502 RxPCN MEDDAET
RxGRP# RXAETD

Medicare Rx
Prescription Drug Coverage

ISSUER (80840)

PCP \$XX
ER \$XX

Printed on: XX/XX/XXXX

HXXXX-XXX

AetnaMedicare.com/HXXXX-XXX
Aetna Dental Providers: AetnaDental.com

Customer Service 1-833-570-6670
Dental Customer Service 1-866-409-0937
Prescription Drug 1-833-620-8808
24 Hour Nurse Line 1-855-493-7019
Provider Services 1-800-624-0756
TDD/TTY 711

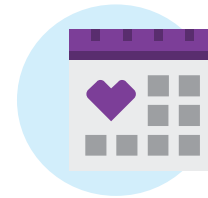
Send claims to:
Aetna Medicare
PO Box 981106
El Paso, TX 79998-1106

This plan is part of Aetna Dental PPO Network.
This card does not guarantee coverage.

Payer ID# 60054
Medicare limiting charges apply.



To learn more about a patient's health plan, scan the **QR code** or visit the **plan web page**.



Annual wellness visit

The **annual wellness visit** is a great time to gain more focus on a patient's overall well-being and physical, mental and emotional health.

During the annual wellness visit, you can:

- Discuss current medications
- Discuss any risk factors they should keep in mind
- Talk about their emotional or well-being concerns
- Review any needed screenings and shots

We've developed a tool to help you and your patient create a personalized plan.

Our **annual care checklist** can help guide the conversation with patients and keep your chat on track.

Download our [annual care checklist](#)

SilverSneakers® fitness benefit

Gym visits through the **SilverSneakers fitness program** can boost your patients' mood, improve their health and help them avoid social isolation, too.

Your patients have access to 1,000s of participating SilverSneakers locations nationwide.

Would a patient rather work out at home? They can log in at [SilverSneakers.com](https://www.silversneakers.com) to view on-demand videos and join live online classes. Or they can download the SilverSneakers GO app to access workout programs tailored to their fitness level. All are available at no extra cost.

To learn more, your patients can call SilverSneakers at **1-866-584-7389 (TTY: 711)**, 8 AM–8 PM ET, Monday–Friday. Or visit [SilverSneakers.com/StartHere](https://www.silversneakers.com/StartHere)

Needs that go beyond medical care

Our Resources For Living® program can connect your patients to a wide range of services in their area. This includes transportation, housing, access to food, social connections and so much more. And there's no extra cost for the call. Your patients pay for any services they use.

Your patients can call **1-866-370-4842 (TTY: 711)**, 8 AM–5 PM, Monday–Friday. Or visit [Aetna/RFL](https://www.aetna.com/RFL)

Does your patient have an Aetna® Dual Eligible Special Needs Plan (D-SNP)?

These patients can reach out to their Aetna care team to help get the info on benefits and services they may need.





Have questions?

Email us at askSTARS@aetna.com

Aetna is the brand name used for products and services provided by one or more of the Aetna group of companies, including Aetna Life Insurance Company and its affiliates (Aetna).