



**News Flash** – Did you know that your local Medicare contractor (carrier, fiscal intermediary, or Medicare Administrative Contractor (MAC)) is a valuable source of news and information regarding Medicare business in your specific practice location? Through their electronic mailing lists, your local contractor can quickly provide you with information pertinent to your geographic area, such as local coverage determinations, local provider education activities, etc. If you have not done so already, you should go to your local contractor website and sign up for their listserv or e-mailing list. Many contractors have links on their home page to take you to their registration page to subscribe to their listserv. If you do not see a link on the homepage, just search their site for “listserv” or “e-mail list” to find the registration page. If you do not know the Web address of your contractor’s homepage, it is available at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

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## Providers Urged to Participate in Annual Medicare Contractor Satisfaction Survey (MCPSS)

### Provider Types Affected

Medicare physicians, providers, and suppliers selected to participate in the Medicare Contractor Provider Satisfaction Survey (MCPSS).

### Provider Action Needed

This article alerts providers that the Centers for Medicare & Medicaid Services (CMS) will **distribute its annual MCPSS to a new sample of Medicare providers**. CMS is sending the 2009 survey, designed to be **completed in about 20 minutes**, to approximately 30,000 randomly selected providers, including physicians and other health care practitioners, suppliers and institutional facilities that serve Medicare beneficiaries across the country. CMS will begin to notify providers selected to participate in the survey in December 2008. **Providers are urged to submit their responses via a secure website, mail, fax, or over the telephone.**

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

## Background

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The MCPSS offers providers the opportunity to contribute directly to CMS' understanding of Medicare contractor performance, as well as aid future process improvement efforts at the contractor level. All Medicare Administrative Contractors (MACs) will be measured against performance targets on the 2009 MCPSS as part of their contract requirements.

The 2008 survey results revealed that, for the second consecutive year, the top indicator of satisfaction among providers was how Medicare contractors handled provider inquiries. As in the two previous years, claims processing also remained a strong indicator in 2008 of provider satisfaction across all contractor types. The shift from claims processing as the top predictor in 2006 to provider inquiries as the top predictor of satisfaction in 2008 is an example of the type of trend data the MCPSS will reveal. Contractors are able to factor such insights into how they prioritize their provider-focused efforts

Feedback captured through MCPSS is important, and CMS urges all Medicare providers who are selected to participate in the MCPSS to complete and return their surveys upon receipt. CMS plans to analyze the 2009 MCPSS data and release a summary report at <http://www.cms.hhs.gov/MCPSS> on the CMS website in July 2009.

## Key Points

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- Survey questions focus on seven business functions of the provider-contractor relationship: provider inquiries, provider outreach and education, claims processing, appeals, provider enrollment, medical review, and provider audit and reimbursement.
- Respondents are asked to rate their contractors using the 1 to 6 scale on each of the business functions with "1" representing "not at all satisfied" and "6" representing "completely satisfied." Contractors receive an overall composite score as well as a score on each business function.
- Results from previous surveys have enabled CMS to set performance standards for MAC's.
- Performance standards give contractors a benchmark to use to compare themselves to other contractors, as well as an individual standard to improve upon year after year.
- The contractor's MCPSS score is based on the average survey score from all surveyed Medicare providers in the contractor's jurisdiction. To meet the performance standard, the MAC's score for the 2009 MCPSS must fall within a

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specified range of the 2008 national mean score. The average 2008 MCPSS for all contractors, released last August, was 4.51 on a scale of 1 to 6. This score was comparable to the 2007 average MCPSS score of 4.56. CMS plans to utilize MCPSS results to help structure future contract incentives.

The MCPSS is required by the Medicare Prescription Drug, Improvement and Modernization Act of 2003. Specifically, the law calls for CMS to develop contract performance requirements, including measuring health care provider satisfaction with Medicare contractors. The MCPSS enables CMS to make valid comparisons of provider satisfaction between contractors and, over time, improvements to the Medicare fee-for- service program.

## Additional Information

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For further information, visit <http://www.cms.hhs.gov/MCPSS> on the CMS website. If you have questions, please contact your Medicare contractor at their toll-free number which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

**News Flash** - It's seasonal flu time again! If you have Medicare patients who haven't yet received their flu shot, you can help them reduce their risk of contracting the seasonal flu and potential complications by recommending an annual influenza and a one-time pneumococcal vaccination. Medicare provides coverage of flu and pneumococcal vaccines and their administration. – And don't forget to immunize yourself and your staff. Protect yourself, your patients, and your family and friends. **Get Your Flu Shot – Not the Flu. Remember** - Influenza vaccine plus its administration are covered Part B benefits. Note that influenza vaccine is NOT a Part D covered drug. Health care professionals and their staff can learn more about Medicare's coverage of the influenza vaccine and other Medicare Part B covered vaccines and related provider education resources created by CMS, by reviewing Special Edition *MLN Matters* article SE0838, which is available at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0838.pdf> on the CMS website.

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