



CENTER FOR MEDICARE

DATE: November 13, 2018

TO: Medicare Advantage, 1876 Cost Contracts, Medicare-Medicaid Plans, and Prescription Drug Plan Quality Contacts and Medicare Compliance Officers

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SUBJECT: 2019 Medicare CAHPS® Survey

CMS would like to remind all Medicare Advantage Organizations (MAOs), 1876 Cost Contracts, and Part D sponsors about the 2019 Medicare CAHPS® Survey, the procedures for requesting additional sample (referred to as oversampling), and the rules regarding the number of supplemental items. This memo also includes information on administering the survey in other languages (Spanish, Chinese, Vietnamese, and Korean) as well as the timeline and process for receipt of official CMS survey results.

Vendors

Medicare Advantage Organizations, 1876 Cost Contracts, Medicare-Medicaid Plans (MMPs), and Part D sponsors will be required to contract for the 2019 survey administration with an approved Medicare Advantage (MA) and Prescription Drug Plan (PDP) CAHPS Survey Vendor to collect the CAHPS data on their behalf. Specifically, sponsors with 600 or more enrollees as of July 1, 2018 are required to contract with CMS-approved MA & PDP CAHPS survey vendors to conduct data collection. CMS provides information at the end of this memo about things to consider when selecting a survey vendor.

Authorizing a Vendor

Medicare Compliance Officers will use the web-based Survey Vendor Authorization and Oversample Request tool to authorize a CMS-approved vendor. The web-based tool is available as of November 15. An email containing instructions for accessing the web-based tool will be sent to Medicare Compliance Officers. Compliance Officers who access the tool will be presented with a list of their contracts required to report CAHPS in 2019, and will have the option of formally designating someone to act on their behalf. The tool will allow vendor authorization for each contract individually or all contracts as a group.

If you have questions about the Survey Vendor Authorization and Oversample Request tool you may contact the MA & PDP CAHPS Data Coordination Team via email at mapdpcahps@rand.org or toll-free at 1-866-690-1650. **Sponsors must inform CMS of the vendor that will be submitting data on their behalf no later than December 5, 2018.** A list of approved vendors can be found on the MA & PDP CAHPS website at <http://www.mapdpcahps.org>.

Oversampling

The standard sample size for contracts is the same as in previous years:

- 800 for all MAOs (including all coordinated care plans, PFFS, MSA contracts), Section 1876 Cost Contracts even if closed for enrollment, Employer/union only contracts, and Medicare-Medicaid Plans
- 1,500 for PDPs

CMS will continue to allow oversampling for the 2019 survey administration. All contracts required to conduct the survey will have the option of surveying a sample of enrollees that is larger than the required sample size. **Interested contracts must make a formal request for an increased sample no later than December 3, 2018.** The request should be made via the web-based Survey Vendor Authorization and Oversample Request tool. Note that the due date for oversample requests is before the due date for vendor authorization. In making the request Medicare Compliance Officers (or their designees) will be prompted to:

- Select the contract number for which increased sample is being requested (the standard sample size for each contract will be displayed)
- Enter the amount of oversample being requested
- Review the total sample being requested (standard sample plus oversample amount)

Supplemental Items

CMS continues to limit the number of supplemental items a contract may add to the MA & PDP CAHPS Survey instruments to a maximum of 12 questions. The purpose of limiting the number of supplemental items is to assure the highest possible response rate to the MA & PDP CAHPS Survey.

CMS reviews and approves all supplemental items, and items that were approved for 2018 survey administration are considered automatically approved for use – without changes – in 2019. Items denied for 2018 survey administration may not be resubmitted unless they have been revised to conform to CMS guidance for supplemental items. CMS approval guidelines prohibit use of supplemental items that:

- May affect responses to existing MA & PDP CAHPS Survey items
- Ask why a respondent selected a particular response option
- Do not focus on experience with health care
- Contain content similar to existing MA & PDP CAHPS Survey items
- Contain content similar to other CMS surveys (e.g., HOS)
- Reference Star Ratings (in the item text or response options)
- Ask the survey respondent to identify a reason health care services may not have been received
- Ask about future intentions for plan membership
- Compare the survey respondent's health with other people
- Use the phrase "In the last 12 months"
- Contain more than 5 response options
- Are complex, multi-part questions
- Ask for opinions about written communication from the plan
- Ask about the need for training for plan staff or providers
- Collect information that could be used to identify a beneficiary (either directly or through

- inference)
- May cause termination of the survey due to sensitivity of topic

Resources for supplemental items and detailed examples of supplemental items that do not meet CMS approval guidelines can be found in Appendix O of the MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V9.0 available at <http://www.ma-pdpcahps.org/en/quality-assurance/>.

Note that all MMPs participating in 2019 MA & PDP CAHPS are required to field a common set of 10 supplemental items. These supplemental items are required by CMS as part of an evaluation of the state dual eligible demonstrations. Additional items may be required for MMPs in other states.

Please direct any questions about supplemental items or any other aspect of survey administration to the MA & PDP CAHPS Project Team via email at MA-PDPCAHPS@hcqis.org or by phone at the following toll-free number: 1-877-735-8882.

Administering the Survey in Other Languages

CMS provides survey materials in Spanish, Chinese, Vietnamese, and Korean. The Chinese translation has been tested with and is suitable for speakers of both Cantonese and Mandarin. If contract members require materials in Spanish, Chinese, Vietnamese, or Korean, contracts can promote member participation in the survey by:

- Asking your vendor to “Double stuff” your mail survey packets with an English-language survey and a Spanish, Chinese, Vietnamese, or Korean-language survey, OR
- Providing your vendor with language preference data for all contract members and asking your vendor to use those data to mail Spanish, Chinese, Vietnamese, or Korean-language surveys to members who prefer Spanish, Chinese, Vietnamese, or Korean.

About the Asian Language Translations of MA & PDP CAHPS Surveys

CMS provides three Asian-language survey translations: Chinese, Vietnamese, and Korean. These translations have semantic and conceptual equivalence to the English-language survey and use phrasing appropriate for a population of older adults in terms of word choice and respectful tone.

The Chinese translation uses a traditional character set and is suitable for use with speakers of Cantonese or Mandarin. For telephone administration of the survey, your vendor will need to know if you require interviewers who speak Cantonese or Mandarin or both dialects, as an interviewer who is fluent in Cantonese can conduct the phone survey with a beneficiary who speaks Cantonese, but may not be able to conduct the phone survey with a beneficiary who speaks Mandarin.

The Vietnamese translation uses the Northern dialect which is the standard form of the language and is appropriate for the broad range of Vietnamese speakers.

The Korean translation uses the Seoul dialect which is the standard form of the language in South Korea and is appropriate for a broad range of Korean speakers.

Why CMS Provides Asian Language Translations

Promoting participation of the broadest pool of plan members promotes accurate measurement of

the experience of Medicare beneficiaries enrolled in an MA or PDP contract. Collecting information from beneficiaries who can only respond to the survey in Chinese, Vietnamese, or Korean will also increase the usefulness of the MA & PDP CAHPS Survey for quality improvement initiatives.

When to Use an Asian Language Translation

You should consider using the Chinese, Vietnamese, or Korean-language survey if:

- A plurality of the Medicare beneficiaries enrolled in your plan prefer to talk with providers in Chinese, Vietnamese, or Korean.
- Your plan is routinely providing written materials for its members in Chinese, Vietnamese, or Korean.

Using an Asian Language Translation Does Not Change Your CAHPS Scores

To promote comparison of CAHPS scores across plans, CMS adjusts the data before it is scored to take into account differences in response that are due to the characteristics of the beneficiary rather than a meaningful difference in experience. This is called case-mix adjustment and is described in detail on the MA & PDP CAHPS Survey [website](#). By including Asian language completion (i.e., Chinese, Vietnamese, or Korean) in case-mix adjustment CMS ensures that across all plans, use of the Asian translation has no net effect on scores beyond promoting survey participation of the broadest pool of plan members.

Reports

Contracts participating in the 2019 survey administration will receive official reports of survey results from CMS. The anticipated delivery date for the preview report is August 2019, and the anticipated delivery date for the full plan report is October 2019. The preview version will be emailed to the contract's Medicare Compliance Officer listed in HPMS, and the full plan report will be mailed to the Medicare Compliance Officer. Contracts are reminded to review and update their contact information in HPMS. Any questions about preview or final reports should be directed to CMS via email at MP-CAHPS@cms.hhs.gov.

Contracts are reminded that any results they receive from their vendor may differ from CMS results and are not to be considered official.

**ATTACHMENT –
Being an Informed Consumer:
Things to Consider When Selecting an MA & PDP CAHPS Survey Vendor**

All contracts that wish to participate in the MA & PDP CAHPS Survey must contract with a CMS-approved survey vendor and submit a Survey Vendor Authorization by December 5, 2018. A list of approved vendors can be found on the MA & PDP CAHPS Survey website at <http://www.ma-pdpcahps.org>.

When shopping for an MA & PDP CAHPS vendor, contracts will have different priorities. The questions below are designed to enable contracts to match their priorities with vendor strengths and services, recognizing that there will be trade-offs in this decision-making process.

As you weigh the priorities for your organization, you may wish to ask questions similar to the following:

PREVIOUS EXPERIENCE

- How much experience have you had conducting the MA & PDP CAHPS Survey?
- Did your organization have an on-site visit from the MA & PDP CAHPS Project Team in support of the 2018 survey?
 - IF YES: Did your organization receive a feedback report indicating the items reviewed during the visit were fully compliant?
- What other kinds of surveys have you conducted for organizations like my contract?
- Do you have subcontractors that would be involved in data collection for my contract?
 - IF YES: How long have you worked with your subcontractors?
 - IF YES: How will you ensure that your subcontractors adhere to the survey procedures detailed in the MA & PDP CAHPS Quality Assurance Protocols & Technical Specifications Version 9.0?

Why it matters: In order to be approved to administer the MA & PDP CAHPS Survey, all vendors must meet a set of minimum requirements. These requirements can be found at: <http://www.ma-pdpcahps.org/en/business-requirements/>. Vendors receive on-site visits at least once every two years, to assess compliance with CMS specifications, guidelines, and timeline for administration of the survey.

Some vendors may have additional experience that is of particular interest to your organization; for example, they have a long history of conducting surveys of the Medicare population, they have conducted several different types of CAHPS surveys, or they have experience conducting the survey in the languages needed. In addition, understanding how a vendor works will ensure that your organization has a complete understanding of the survey administration process, roles, and responsibilities, and the process for subcontractor oversight.

RESPONSE RATES

- What response rate (or range of response rates) did you achieve on recent surveys for your MA & PDP CAHPS clients?
- What response rates do you typically achieve for Medicare and/or CAHPS surveys for other clients?

- Do you update beneficiary contact information (address, phone number) provided by CMS?
 - How do you update beneficiary addresses prior to mailing?
 - What do you do if a mail survey is returned as undeliverable?
 - Do you use a National Change of Address (NCOA) service to update addresses? (IF YES: Do you use information from the past 12 months or past 48 months?)
 - What do you do to obtain phone numbers when CMS is unable to provide a phone number for a beneficiary, or if the number provided by CMS is no longer the correct number?
 - Do you use a look-up vendor? Directory assistance? Other service?
 - What information can my contract provide to help with locating sampled beneficiaries?

Why it matters: Maximizing response rates means that a contract receives more robust information about patient experience in its contract. The response rate for the MA & PDP CAHPS Survey is calculated as the percentage of complete or partially completed surveys out of the total number of eligible sampled beneficiaries. Historic response rates for MA & PDP CAHPS can be found at <https://www.ma-pdpcahps.org/en/historic-data/>.

Ensuring that a vendor has correct contact information maximizes the potential that a beneficiary will receive a survey and has the opportunity to respond. CMS provides the most recent contact information (address, phone number) on file for beneficiaries in each contract's sample. However, a vendor may take steps to ensure that this reflects the most up-to-date information for each beneficiary. A contract can also work with the vendor to supplement the information provided. For example, if your organization can provide the vendor with phone numbers for all its enrollees, beneficiary surveys that may have otherwise been categorized as "Bad Address and Bad Telephone Number" may actually become completed surveys.

SURVEY LANGUAGES

- Which of the CMS-approved procedures for administration of Spanish-language surveys do you recommend for my organization?
- Do you have the capacity to conduct the MA & PDP CAHPS Survey in Chinese?
 - Which of the CMS-approved procedures for Chinese-language surveys do you recommend for my organization?
 - Our enrollees speak Cantonese/Mandarin/both Cantonese and Mandarin. Do you have interviewers that speak this dialect/both dialects?
- Do you have the capacity to conduct the MA & PDP CAHPS Survey in Vietnamese/Korean?
 - Which of the CMS-approved procedures for Vietnamese/Korean-language surveys do you recommend for my organization?

Why it matters: Ensuring that all of your beneficiaries have the opportunity to complete the survey in the language with which they are most comfortable provides the most accurate picture of patient experience in your contract.

DATA SECURITY

- In addition to the minimum data security requirements, what procedures do you follow to

keep my contract's sample file and data secure and confidential?

Why it matters: In order to provide candid feedback, beneficiaries need to feel that their data are being processed securely and their confidentiality will be protected. Ensuring your vendor follows excellent data security practices protects your contract and your patients, and maintains confidence in the survey process.

COST AND ADDITIONAL SERVICES

- What will it cost to...
 - Request an oversample of [NUMBER] cases?
 - Add [NUMBER] supplemental items to the survey?
- What services do you offer in addition to conducting the CAHPS survey?
 - What reports can you provide for me?
 - What services do you offer to help my team understand our survey results and scores?

Why it matters: Knowing what a vendor charges for extra services will help you as you weigh costs against potential benefits of reaching more beneficiaries.

Each contract will receive a report from CMS that contains their scores on the MA & PDP CAHPS Survey. Vendors may provide supplementary reports or services that, while not official results, may provide insight for understanding survey results and for quality improvement activities. Contracts should understand exactly what supplementary services a vendor can provide, if they meet a contract's information needs, and what value they bring to understanding patient experience.