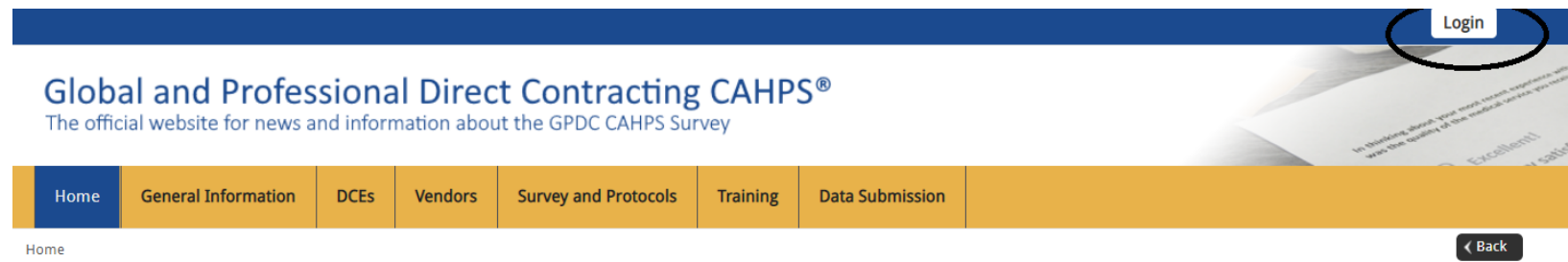


## How to Authorize a Survey Vendor for a DCE

This is a 3-step process which must be performed by the Survey Administrator or Backup Survey Administrator for the DCE.

**Step 1:** Click on the “Login” button on the top right corner of the website. Enter your username and password and click “Login.” If you forgot your password, click on “Reset Password”, and follow the directions to have a password reset link sent to the email address you used to register your account.

### Step 1



### Welcome to the official site of the GPDC CAHPS Survey

The Global and Professional Direct Contracting Consumer Assessment of Healthcare Providers and Systems (GPDC CAHPS) is designed to measure the experiences of Medicare FFS beneficiaries receiving care from GPDC Entities (DCEs) participating in the GPDC Model. Beginning in 2022, the GPDC CAHPS is conducted for DCEs by survey vendors approved by the Centers for Medicare & Medicaid Services (CMS).

For more information on the background and requirements of GPDC CAHPS visit the [About GPDC CAHPS](#) page. For information about how to become an approved GPDC CAHPS vendor, please click on the [Vendor Application Process](#) link under the "General Information" tab above.

Viewers are encouraged to check this site, which is the official website for the GPDC CAHPS, regularly for updated information about the GPDC CAHPS.

For DCEs: Contact GPDC CAHPS Technical Assistance Support at [DPC@cms.hhs.gov](mailto:DPC@cms.hhs.gov) or 1-888-734-6433.

For Survey Vendors and General Information, please contact [gpdccahps@rti.org](mailto:gpdccahps@rti.org) or 1-833-870-0486.

For information about the availability of auxiliary aids and services, please visit: <https://www.medicare.gov/about-us/accessibility-nondiscrimination-notice>



### Quick Links

#### General Quick Links:

- [Frequently Asked Questions \(FAQs\)](#).

#### For DCEs:

- [DCE Responsibilities](#)

#### For Survey Vendors:

- [Submitting Quality Assurance Plan](#)
- [Submitting Revised Quality Assurance Plan](#)
- [Approved Survey Vendors](#)

**Step 2:** Under the “DCEs” tab in the top menu bar, navigate to “Vendor Authorization,” and then click on “Start an Authorization.”

## Step 2

# Global and Professional Direct Contracting CAHPS®

The official website for news and information about the GPDC CAHPS Survey



Home
Dashboard
General Information
DCEs
Vendors
Survey and Protocols
Training
Data Submission

Home
← Back

## Welcome to the official site of the

The Global and Professional Direct Contracting Consumer Healthcare Providers and Systems (GPDC CAHPS) is designed to improve the experiences of Medicare FFS beneficiaries receiving care from DCEs participating in the GPDC Model. Beginning in 2022, the GPDC Model is conducted for DCEs by survey vendors approved by the Centers for Medicare & Medicaid Services (CMS).

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### Quick Links

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Step Two: Register as the Survey Administrator for your DCE(s)

Registered DCE ID Report

Manage Users

Vendor Authorization

Data Submission Report

Start an Authorization

Delete an Authorization

Authorization Report



**Step 3:** Select an approved GPDC CAHPS survey vendor from the “Select Survey Vendor” drop down list.

- a. Select “PY2022 Survey” from the “Select Survey Period” drop down list.
- b. Use the check box to select all DCEs for which you would like to authorize this survey vendor.
- c. Once complete, click “Save Checked Authorizations.” You will receive an email confirmation once you have successfully authorized a survey vendor.

### Step 3

## Authorize a Vendor

Please use this page to authorize a Survey Vendor for the first time **or** to change/switch to a different vendor for one or more DCEs.

### Select Survey Vendor

In this step, select the vendor you wish to authorize from the drop down list.

Vendor

### Select Survey Period

In this step, select the survey year that reflects the period in which you are authorizing this vendor.

Survey Period

### Select DCE

In this step, check the box by each DCE to which this authorization or change applies. Click the box in the top row of the grid if this action applies to all of the DCEs listed in the grid.

<input type="checkbox"/>	DCE ID	DCE Name	Current Authorized Vendor	Current Survey Period	New Authorized Vendor	New Survey Period
<input checked="" type="checkbox"/>	Z9926	RTI Provider 9926			Best Vendor	PY2022 Survey