

# FAQs for Interviewers on the Medicare Provider Experience Survey (ACO REACH CAHPS®)

## **Why should I do this?/Purpose**

The survey helps the Centers for Medicare & Medicaid Services and Medicare health care providers understand where and how care may need to be improved.

## **I never saw that doctor/I didn't see that doctor in the last 6 months.**

In that case, you'll skip over the questions about that doctor and answer a shorter set of questions about other providers you saw in the last 6 months.

## **I didn't see any providers in the last 6 months.**

This survey is only for Medicare beneficiaries who received health care in the last 6 months. Thank you for your time, goodbye.

## **What is this/Where are you calling from?**

I'm an interviewer from [Survey Vendor] requesting you complete a telephone survey about the quality of care provided by your Medicare provider.

## **Project Contact Information**

Helpdesk Telephone: [INSERT VENDOR PHONE NUMBER HERE]

Helpdesk Email: [INSERT VENDOR EMAIL HERE]

## **Who is sending the survey?**

The U.S. Centers for Medicare & Medicaid Services (CMS) is sponsoring this survey. CMS is the federal agency that administers the Medicare program. CMS and your provider's office are working with [VENDOR] to conduct the survey.

## **What kinds of questions will be asked?**

We ask questions such as

- How easy or hard was it for you to make appointments and get care?
- Whether providers treated you with respect?
- Did you feel listened to?
- How clearly did providers explain what you needed to know to take care of yourself and stay healthy?

## **I don't want to give out my personal information.**

No identifying information is collected, and you may refuse to answer any question. (IF NEC: All information we collect is confidential. Your provider will only see results in summary form, without names, so they will not know who responded or how anyone answered.)

## **Confirming Legitimacy of Survey**

- This is an official government survey sponsored by the Centers for Medicare & Medicaid Services, also known as CMS. You can contact 1-800-MEDICARE, and operators can verify the Medicare Provider Experience Survey.
- Your provider knows about this survey and encourages their patients to complete it.
- This survey is not used for sales or advertising.

## **How did you get my name?**

Your name was randomly selected from all Medicare beneficiaries who were recently seen by the health care provider named in the survey.

IF QUESTIONS ABOUT PRIVACY LAWS/HIPAA: "The survey we're conducting fully complies with privacy laws, for example, HIPAA (Health Insurance Portability and Accountability Act). We've been authorized by the Centers for Medicare & Medicaid Services to conduct this survey and keep all information about you confidential."

## **Will my doctor/provider know my answers to these questions?**

All the information we collect through the survey is confidential. Your provider will only see results in summary form, without names, so they will not know who responded or how anyone answered. Even though your answers are not tied to you, they help your provider improve the experience and health of their patients.

## **How are the results from the survey going to be used?**

Your answers help the Centers for Medicare & Medicaid Services evaluate the quality of care provided under Medicare. The survey will help Medicare and providers understand where and how care may need to be improved.

## Interviewer Information: ACO REACH CAHPS Schedule

Modes	Date	Languages	Respondent Types
Mail	Sept. 11–Dec. 8	English, Spanish	Beneficiary, Proxy
Telephone	Nov. 13–Dec. 8	English, Spanish	Beneficiary, Proxy

### Eligibility Criteria

- ✓ Medicare beneficiary
- ✓ At least 18 years of age
- ✓ Reside in the United States
- ✓ Received health care services (in person or telehealth) in the past 6 months
- x Institutionalized (nursing home, jail, prison)
- x Deceased

### I'm on the Do Not Call list. Why are you calling me?

The Do Not Call list stops sales and telemarketing calls. We are conducting survey research on behalf of the U.S. Centers for Medicare & Medicaid Services, also known as CMS. We are not calling to sell or market a product or service.

### Criteria Permitted for a Proxy

- ✓ Beneficiary is physically or mentally incapable
- ✓ Beneficiary language barrier other than Spanish

### Criteria Not Permitted for a Proxy

- x Beneficiary deceased
- x Beneficiary under 18
- x Unavailable/out of country
- x Institutionalized (nursing home, jail, prison)
- x Does not want to do the survey

### Can someone else complete the survey on behalf of the beneficiary?

If a beneficiary can't respond because of poor health or mental or physical limitations, someone like a family member or caregiver knowledgeable about the beneficiary's health care can take the survey on the beneficiary's behalf.

### Proxy Respondent Qualifications

Use these guidelines to help a person decide if they qualify as a proxy respondent

- ✓ At least 18 years of age
- ✓ Knowledgeable about the beneficiary's health care

### Complaints About Doctor/Provider/Practice

- o I'm sorry to hear that. There is a Medicare number to call with concerns about doctors: 1-800-MEDICARE.
- o When you participate in the survey, your answers help Medicare understand the problems some people may experience when getting care from certain doctors. Medicare reports the results from all people who answered the survey to your doctor, so they can understand these problems as well. Results are in summary form and your name is never included.

### No Time

I understand. Would you agree to start the survey for a few minutes and when you need to stop, we'll stop? (IF APPROPRIATE: We'll save your answers and resume at a later date?

- Or -

I or another interviewer can call you back at a more convenient time.)

### Not interested

The Centers for Medicare & Medicaid Services could really use your help. Your survey participation will help improve the care provided under Medicare.

### Assisted Living/Residential Care Facilities

- ✓ Ensure you have reached an assisted living/residential care facility.
- ✓ Beneficiaries living in these facilities are not eligible for the telephone survey. Thank the facility and end the call.

### How long will this take?

This takes about 15 to 20 minutes. We can get started now and I'll move through the questions as quickly as possible to save you time.