



Medicare Health Outcomes Survey 2017 Survey Vendor Update Training



February 8, 2017



Welcome, Introduction, and Overview

2017 Survey Vendor Training

Agenda Topics

- Welcome!
- HOS CMS Update
- HOS 2017 Administration Updates
- 2016 Survey Vendor Results
- Data Coding and Submission
- Quality Oversight
- Data Management
- Survey Administration and Project Reporting



HOS CMS Update

Overview

- Introduction
- HOS Goals
- Star Ratings Update
- Annual DUA Process
- ASPE Report to Congress
- Categorical Adjustment Index

Introduction

- CMS uses HOS to monitor the quality of care provided to Medicare beneficiaries enrolled in Medicare Advantage Organizations (MAOs)
 - Measures self-reported health status, physical and mental functioning, and quality of life
- HOS participants: Medicare beneficiaries at least 18 years of age who are currently enrolled in an MA plan and who reside in U.S. or its territories
 - Baseline: no continuous enrollment requirement
 - Follow-Up: MAO members resurveyed after 2 years


HOS Goals

- Gather valid, reliable, and meaningful data
- Use program data to:
 - Monitor health plan performance
 - Reward top performing MA contracts
 - Assess frailty
 - Help beneficiaries make informed choices
 - Target quality improvement activities
 - Advance the science of functional health outcomes measurement

Impact of Star Ratings

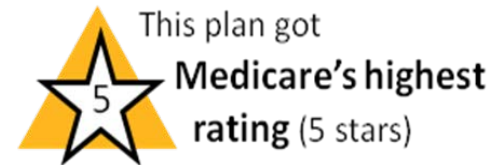
- **Public Reporting:**
 - Displayed on Medicare Plan Finder (MPF) to help consumers to compare plans, consider quality and cost in enrollment decisions
- **Marketing/Enrollment:**
 - 5-star plans can market year-round; beneficiaries can join these plans at any time via a special enrollment period (SEP)
 - Online enrollment disabled for consistently low performing plans
- **Financial:**
 - Affordable Care Act established CMS' Star Ratings as the basis of Quality Bonus Payments to MA plans

Integrity of Star Ratings

- Data integrity is critical to Star Ratings
- CMS continues to monitor and identify risks for inaccurate or unreliable Star Ratings data
 - A contract's rating is reduced to **1 star** if biased or erroneous data are identified
-  **NEW**: Survey vendors must attest to:
 - validity of HOS data submitted
 - conformance with HOS protocols
 - prompt reporting of any discrepancies

2017 Star Ratings


- 17 MA contracts achieved 5 stars



- 2 MA contracts identified as low performers



2018 Star Ratings

-  **NEW:** 5 HOS measures will be included in the 2018 Star Ratings to be released in Fall 2017
 - Improving or Maintaining Physical Health
 - Improving or Maintaining Mental Health
 - Monitoring Physical Activity
 - Reducing the Risk of Falling
 - Improving Bladder Control*

*Transitioning back to Star Ratings following revision

Data Use Agreement (DUA)

- Survey vendors must have a current DUA
- All subcontractors must sign an Addendum to the survey vendor's DUA
- Survey vendors must not release HOS data to any unlisted entity, including MAOs and MA members
- In signing the DUA, survey vendors and subcontractors must ensure data integrity, security, and confidentiality

Annual DUA Process

- Survey vendors will maintain a CMS DUA by executing the following annual steps:
 1. Verify contacts and submit changes
 2. Extend DUA for one calendar year
 3. Update DUA to include 2017 HOS data
- Note: CMS does not approve extensions or updates if a survey vendor has any outstanding expired DUAs

HOS DUA Timeline

1. Contact Changes (DUA ##### Addendum)
 - **During survey vendor application period**, submit Addendum (Form CMS-R-0235a) for each new staff member and subcontractor
2. Extension (DUA ##### Extension)
 - **Following provisional approval as an HOS vendor**, submit 1-year extension request
3. Add new data (DUA ##### Update)
 - **After survey vendor training**, submit signed Form CMS-R-0235u to add current year HOS

Form CMS-R-0235u

- Required information for CMS-R-0235u
UPDATE TO EXISTING DATA USE AGREEMENT
 - Requestor Organization – *Survey Vendor Name*
 - Name of Study/Project – *HOS*
 - CMS Contract Number – *leave blank*
 - Additional files requested – *2017 HOS*
- **Due Date: February 10, 2017**
- NOTE: CMS is not currently accepting digital signatures on DUA forms

DUA Process

- **NEW**: Survey vendors are responsible for ensuring that subcontractors comply with the DUA requirements
- **NEW**: Survey vendors must provide a copy of their current DUA to the HOS Project Team by March 3, 2017

ASPE Report to Congress

- IMPACT Act mandated research on issues related to socioeconomic status (SES) in Medicare's value-based payment programs
 - Initial Report: December 2016
 - Final Report: October 2019
- Examined the effect of beneficiaries' social risk factors (e.g., dual enrollment, residence in a low-income area, Black race, Hispanic ethnicity, and residence in a rural area)
 - Disability was examined due to its relationship with social risk factors

Key Findings:

Medicare Advantage (MA)

- Is there a relationship between MA contract social risk profile and Star Rating performance?

FINDING 1: *MA contracts with a high proportion of beneficiaries with social risk factors generally did worse on quality scores and were less likely to receive quality bonus payments (QBP).*

FINDING 2: *however, a small number of contracts serving predominantly dually-enrolled or low-income subsidy-enrolled beneficiaries performed well on the quality measures overall.*

Categorical Adjustment Index

- Categorical Adjustment Index (CAI) is an interim analytical adjustment
- Factor added to or subtracted from a contract's overall and/or summary Star Rating
 - Varies by a contract's composition of Low Income Subsidy/Dual Eligible (LIS/DE) and disability status beneficiaries
 - Contracts have up to 3 mutually exclusive and independent adjustments
 - one for the overall Star Rating and one for each summary rating
- The CAI value per contract and rating is determined by a contract's categorization into a final adjustment category
 - The final adjustment category is based on a contract's percentages of LIS/DE and disabled beneficiaries

Questions?





HOS 2017 Administration Updates

Overview

- Data Collection Overview
- 2017 Data Collection Timeline
- Survey Administration Updates
 - Program Requirements
 - Sampling
 - Data Collection Protocol
- Updates to Mail Survey and Telephone Script
- Updates to HEDIS Volume 6

Data Collection Protocol Overview

- Mixed mode
- Longitudinal to assess health over time
 - Sample member at Baseline, then again two years later (at Follow-Up)
- English, Spanish, and Chinese
 - Chinese protocol: *mail only*

Standardized Data Collection

- Promotes consistency across survey vendors and MAOs
- Survey vendors may not modify the data collection protocol
- Follow *Medicare HOS Quality Assurance Guidelines and Technical Specifications V2.1* (QAG)

Data Collection Timeline

Task	Date (2017)
Send sample files to vendors	March 20
Open survey vendor customer support telephone and e-mail	April 3
Mail Baseline pre-notification letter	April 3
Mail Baseline first questionnaire	April 10
Mail Baseline reminder/thank-you postcard	April 17

Data Collection Timeline (cont'd)

Task	Date (2017)
Mail Follow-Up pre-notification letter	May 1
Mail Follow-Up first questionnaire	May 8
Mail Baseline second questionnaire	May 15
Mail Follow-Up reminder/thank-you postcard	May 15
Mail Baseline second reminder/thank-you postcard (<i>Chinese only</i>)	May 22

Data Collection Timeline (cont'd)

Task	Date (2017)
Conduct Baseline telephone interviewing	June 5 – July 10
Mail Follow-Up second questionnaire	June 12
Mail Follow-Up second reminder/thank-you postcard (<i>Chinese only</i>)	June 19
NEW: Submit interim data files	June 30

Data Collection Timeline (cont'd)

Task	Date (2017)
Conduct Follow-Up telephone interviewing	July 3-31
End Baseline and Follow-Up data collection	July 31
Prepare and submit final data files	July 31- August 14
Final data files due	August 14



Program Requirements Updates


Member Confidentiality

- Sampling procedures are designed so MAOs cannot identify members selected to participate in the survey
- Maintain confidentiality of sampled members and do **NOT** provide MAOs with member names or other member-identifying information
- Only provide minimum data necessary to subcontractors to perform activities

Subcontractors

- The following tasks may be subcontracted to another organization:
 - Customer support services
 - Printing, sorting, and mailing HOS materials
 - Data entry
 - Telephone interviewing
- Document all subcontractors in the survey vendor QAP

Subcontractor Oversight

- Oversee all work done by subcontractors
- Conduct onsite and remote quality checks and monitoring
-  **NEW:** Ensure that subcontractors participate in quality oversight activities conducted by HOS Project Team

Sharing Data with Clients

- Data reported to MAOs is limited to data elements in biweekly summary status reports
- Do not report any calculations or results of HOS measures to MAOs

Sampling Updates

Voluntary Survey Fielding


- Voluntary reporting of HOS is considered on a case-by-case basis
- Refer questions to HOS Project Team at hos@ncqa.org

Mail Protocol Updates

Mailing Materials

- Pre-notification letter
- Two survey mailings containing survey cover letter, questionnaire, and business reply envelope
- Reminder/thank-you postcard
- See QAG page 29 for mailing materials requirements


Questionnaire Formatting Updates

-  **NEW:** Guidelines for 2017:
 - No color or shading anywhere on the questionnaire, including the cover
 - Survey vendor name and contact information must immediately follow last question

Self Mailers

- Self-mailer format is optional
- Includes a questionnaire and cover letter constructed together without the need of an envelope
- **NEW:** Use self-mailer instructions in same language as the questionnaire and cover letter
- **NEW:** Use the following standardized self-mailer instructions:
 - “To protect your privacy please remove this cover prior to mailing.”

Processing Survey Data

- Scan or “wand” in returned surveys within 24 hours of receipt
-  **NEW:** Process survey data (enter or scan) within **5 days of receipt**

Telephone Protocol Updates


Telephone Protocol

- Members in telephone phase:
 - Did not respond to mail questionnaire
 - Returned a blank or partially complete questionnaire to convert partially completes to completes
- Standardized telephone interviewing script and specifications (Appendix F)
- Must have sufficient interviewers to support data collection timeline

Telephone Protocol (cont'd)

- 6 to 9 telephone attempts
 - Different times of day
 - Different days of the week
 - Different weeks
 - 9 am to 9 pm call window (member local time)
- Interviewers may not leave voicemail messages

Recording Telephone Interviews

-  **NEW:** Survey vendors must record all telephone interviews in all languages and make them available to the HOS Project Team upon request
 - Introductions and complete interviews
- Retain recordings until December 31 of following survey administration year

Mail Survey Updates

Question 56. Height

- Simplified text and added second example

56. How tall are you without shoes on, in feet and inches? Please fill in both feet and inches, for example: 5 feet 00 inches, or 5 feet 04 inches (if 1/2 inch, please round up).

feet

inches

Telephone Script Updates

Questions 10b-f. ADLs

- Added optional introductory text

>Q10b<

{Because of a health or physical problem...}

Do you have any difficulty dressing **without special equipment or help from another person?**

Questions 12-14. Healthy Days

- Added interviewer instructions

The respondent should provide a number from 0 to 30. Probe if the respondent does not provide an appropriate answer. For example, if the respondent says “my physical health has not been good for 7, maybe 10 days” probe to find out what number between 7 and 10 best describes how many days the respondent’s physical health was not good.

For Q12, 13, and 14, if the respondent replies with “none” or “no days,” code as “00.”

1 week = 7 days

2 weeks = 14 days

3 weeks = 21 days

1 month = 30 days

Question 54. Sleep Quality

- Interviewers are instructed to emphasize “fairly” and “very”

>Q54<

During the **past month**, how would you rate your overall sleep quality? Would you say:

- <1> **Very good,**
- <2> **Fairly good,**
- <3> **Fairly bad, or**
- <4> **Very bad?**

Question 56. Height

- Valid values for feet: 1-9

{ENTER 3-DIGIT HEIGHT IN FEET AND INCHES. ZERO-FILL INCHES IF LESS THAN 10} [FOR FEET, SPECIFY: 1-DIGIT NUMBER. VALID VALUES 1-947, INCLUSIVE] [FOR INCHES, SPECIFY: 2-DIGIT NUMBER. VALID VALUES 00-11, INCLUSIVE]



HEDIS Volume 6 Updates

Hospice Exclusion

- Added exclusion to four HEDIS Effectiveness of Care Measures
 - Evidence from CMS administrative records that a member has a hospice start date
- Exclusion applied *after* survey fielding
- Not applied to PCS and MCS

Fall Risk Management (FRM)

- Updated FRM measure specification in Volume 6
- Does **NOT** apply until 2018 HOS survey

Questions?





2016 HOS Survey Results

Overview

- HOS 2016 Survey Vendors
- Response Rate Trends
- Survey Response Rates
 - Cohort 19 Baseline
 - Cohort 17 Follow-Up
- Response Rate Components
 - Cohort 19 Baseline
 - Cohort 17 Follow-Up
- Key Points

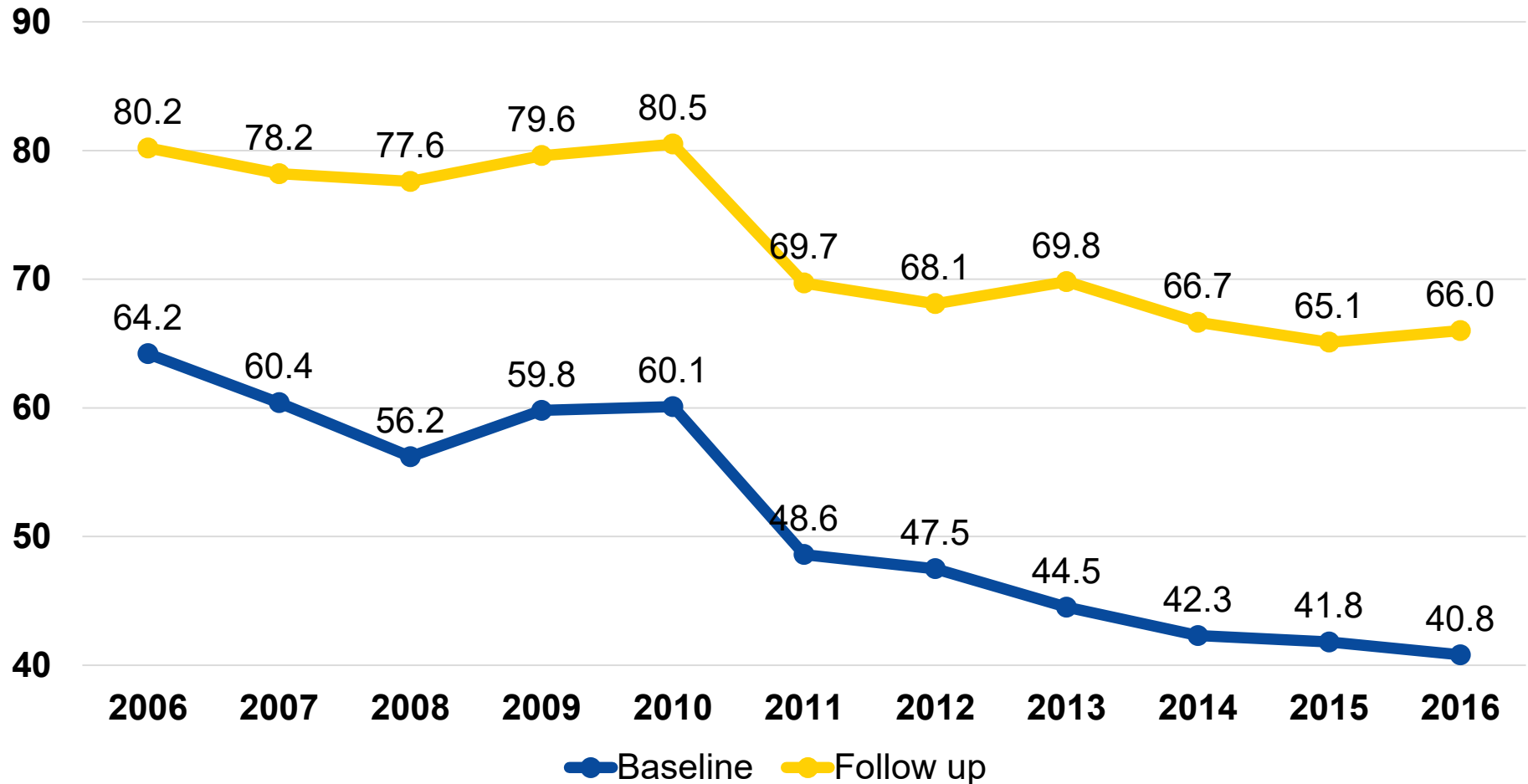
HOS 2016 Survey Vendors

- 7 survey vendors administered the HOS
- For this presentation, survey vendors were assigned a letter (A-G) randomly

Survey	# Contracts
<i>Cohort 19 Baseline</i>	463
<i>Cohort 17 Follow - Up</i>	<u>365</u>
<i>Total number of contracts</i>	828

Response Rate Trends

Rounds 9-19 Baseline and Follow-Up Surveys:
2006-2016

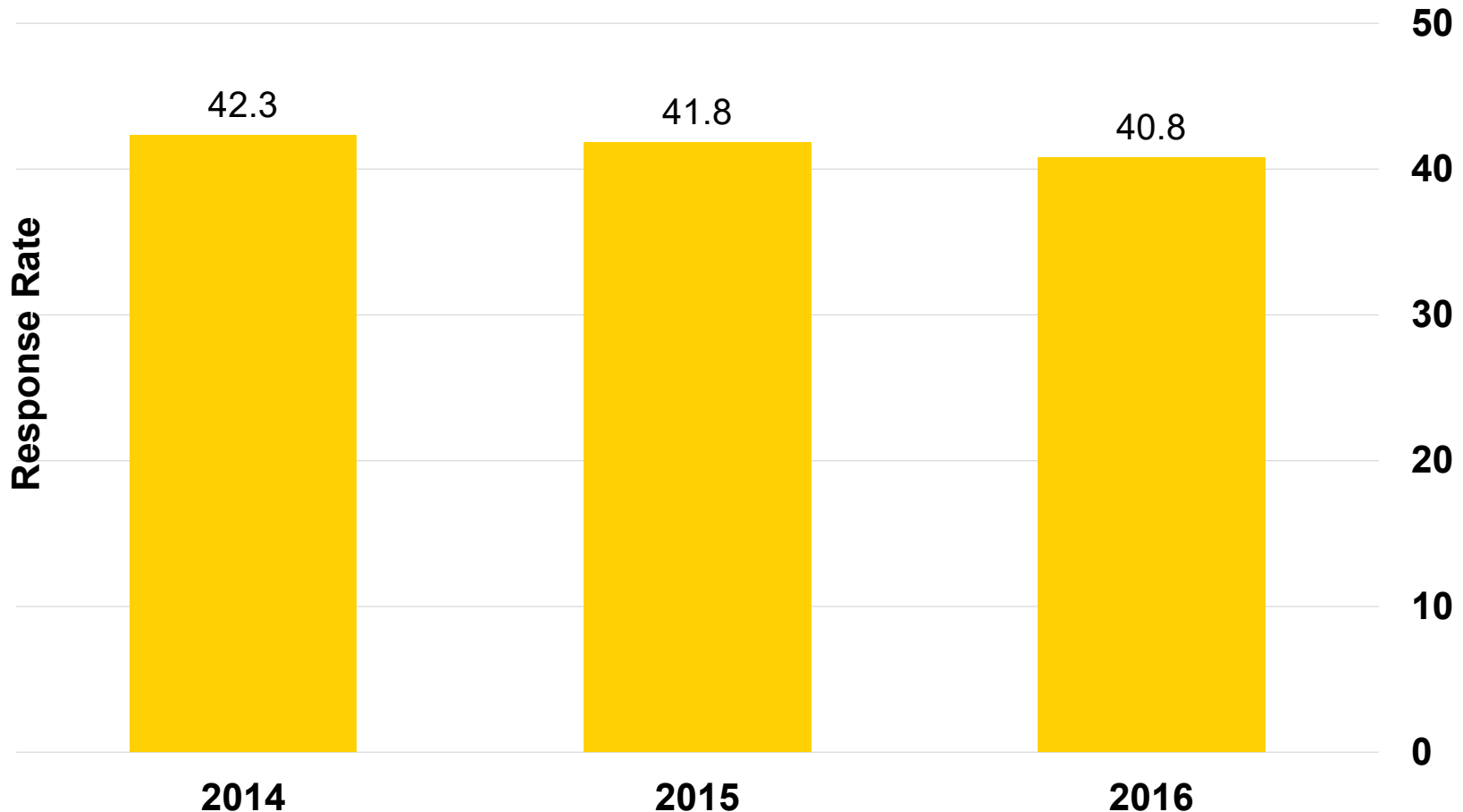


Survey Response Rates

Cohort 19 Baseline

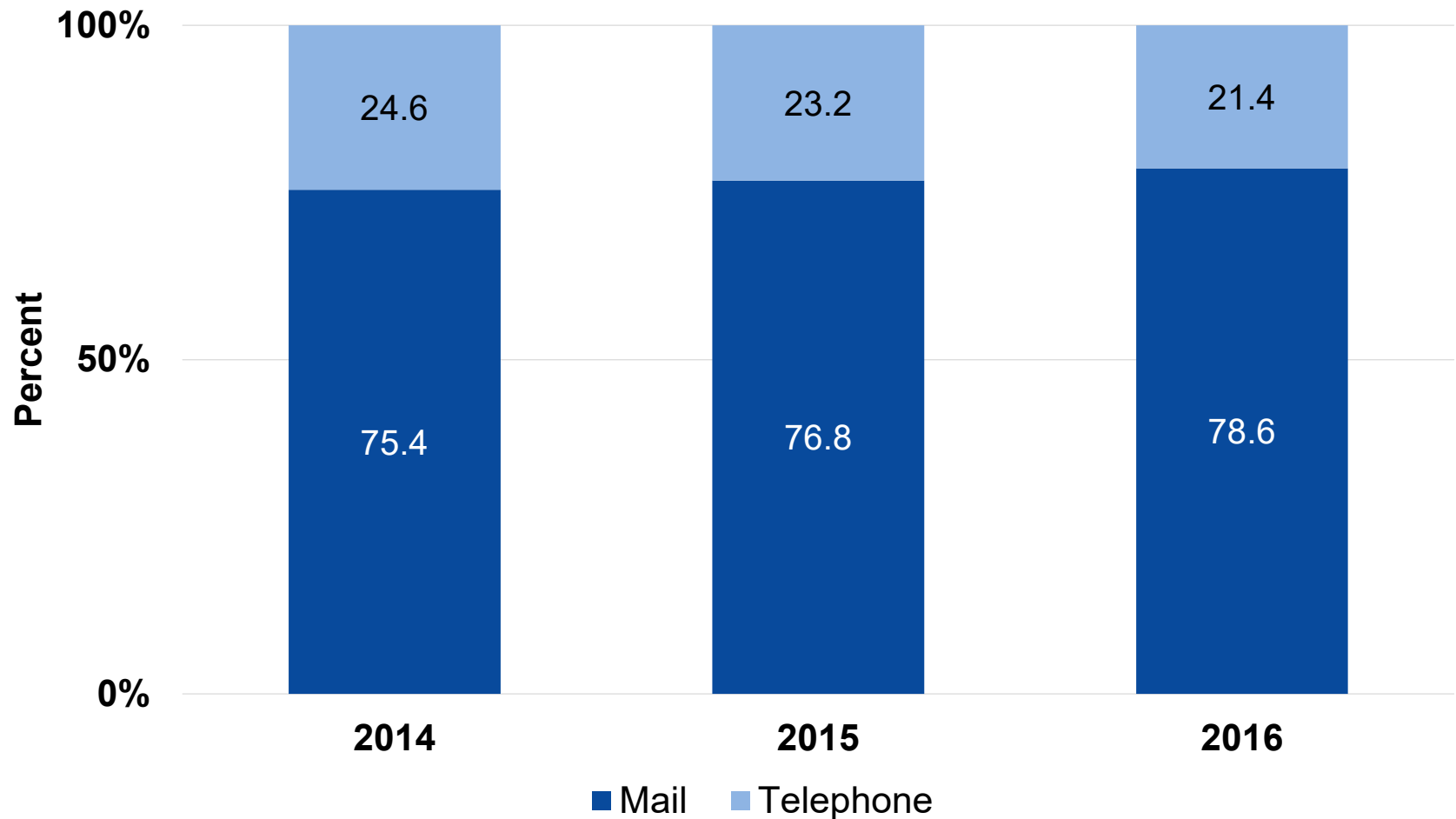
Overall Response Rates

Cohorts 17-19 Baseline Surveys: 2014-2016



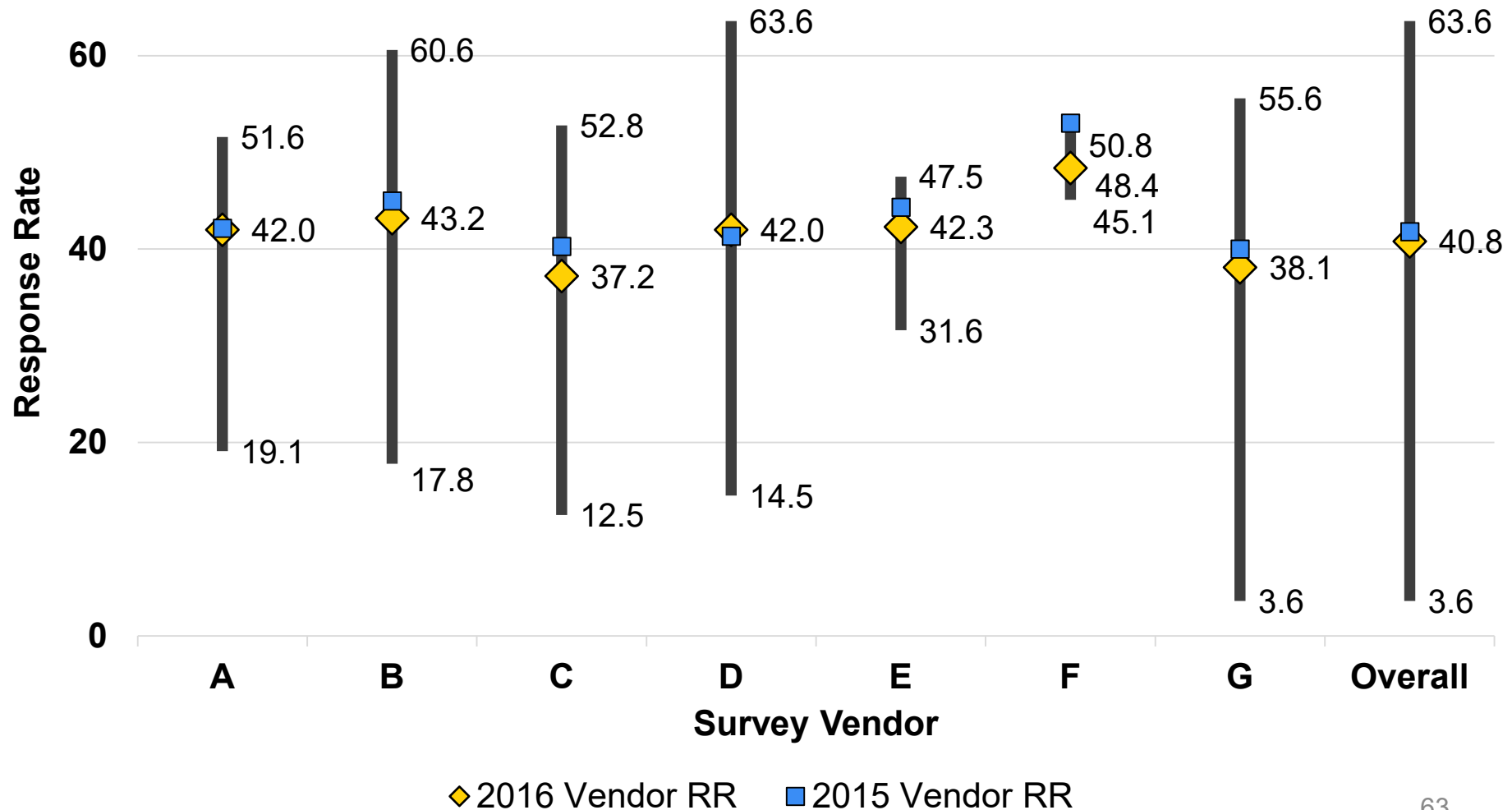
Responses by Mode

Cohorts 17-19 Baseline Surveys: 2014-2016



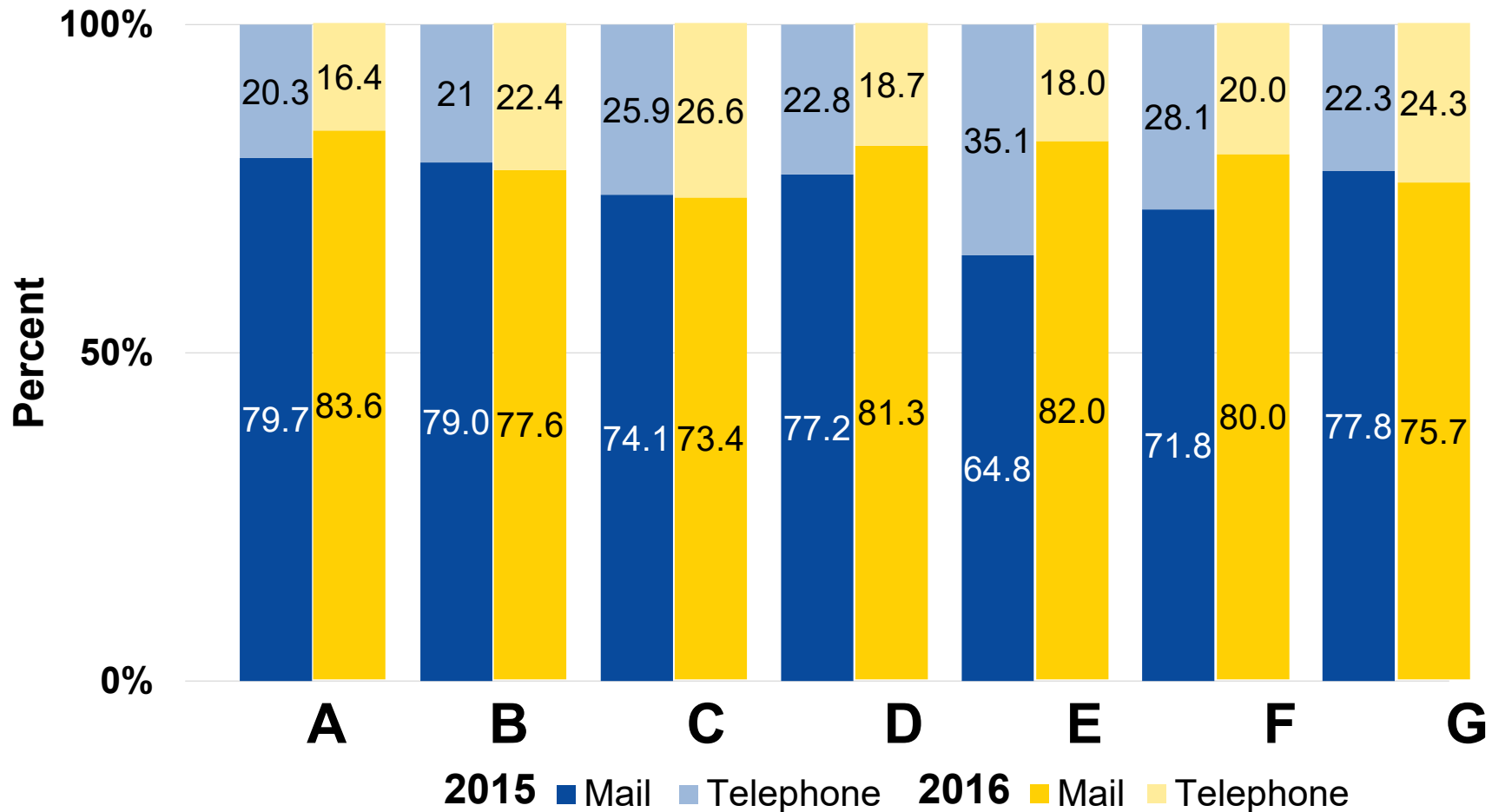
Variability of Response Rates by Vendor

Cohort 19 Baseline Survey: 2016



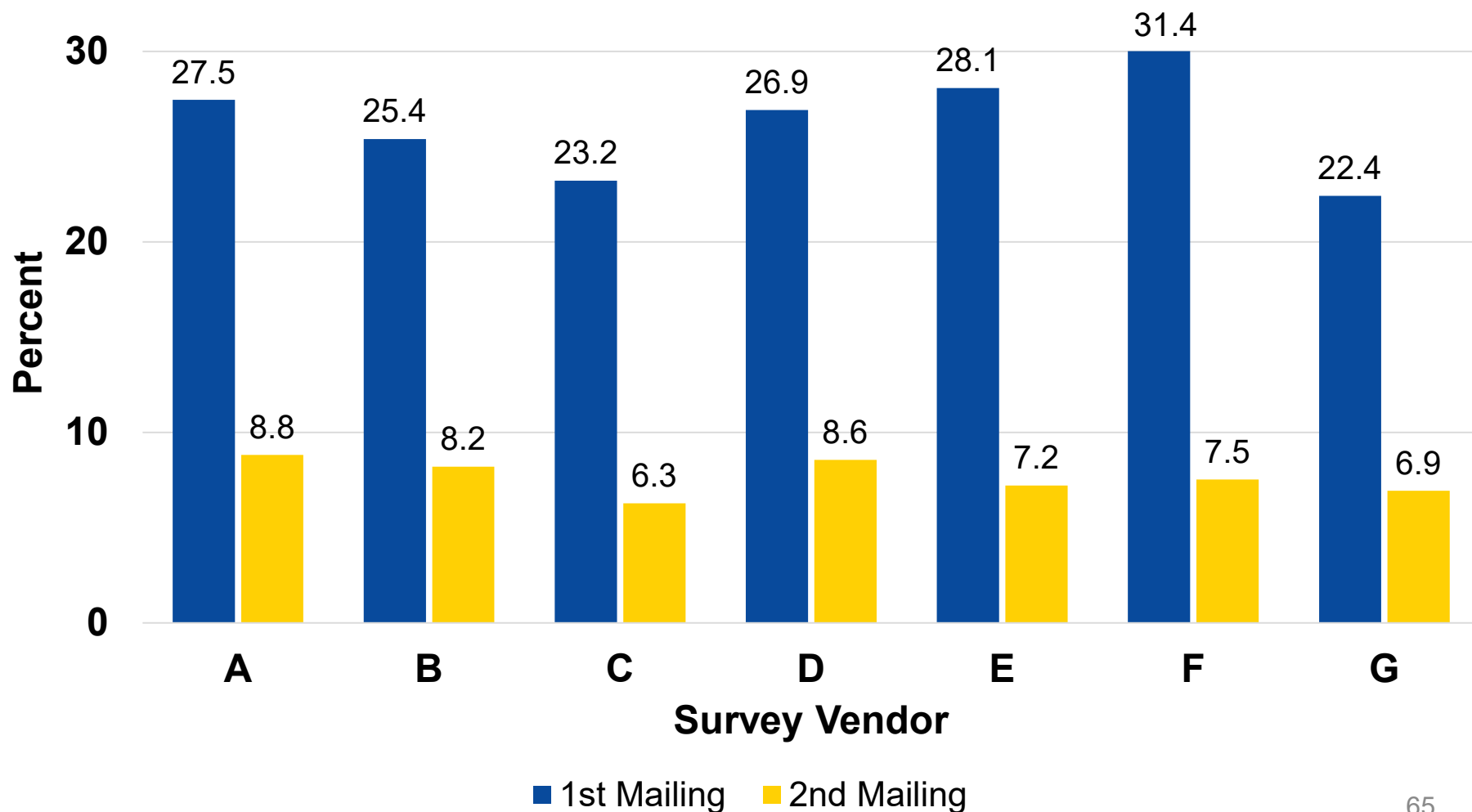
Proportion of Responses by Mode

Cohorts 18-19 Baseline Surveys: 2015-2016



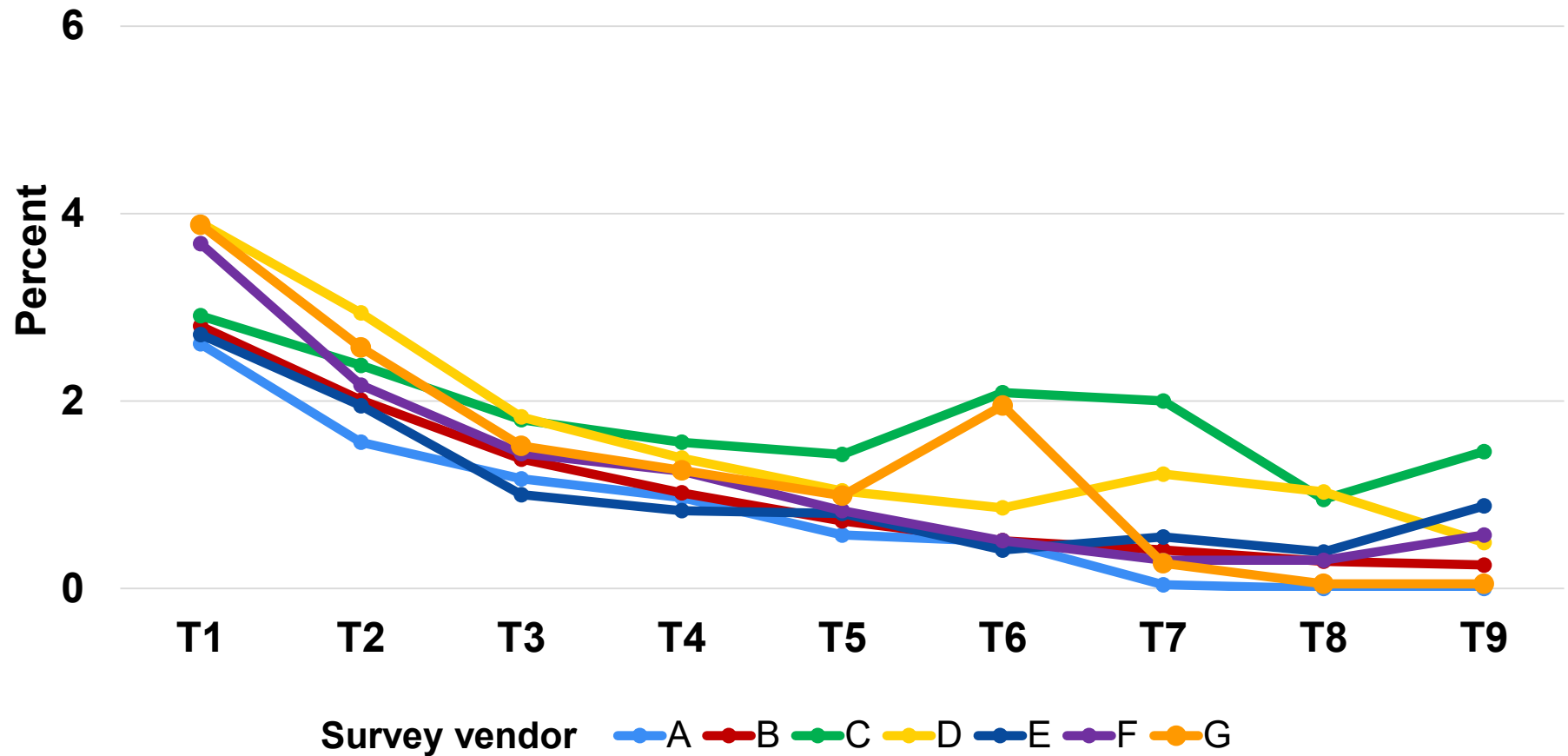
Percent of Sample Responding by Mail

Cohort 19 Baseline Survey: 2016



Percent of Sample Responding by Telephone

Cohort 19 Baseline Survey: 2016

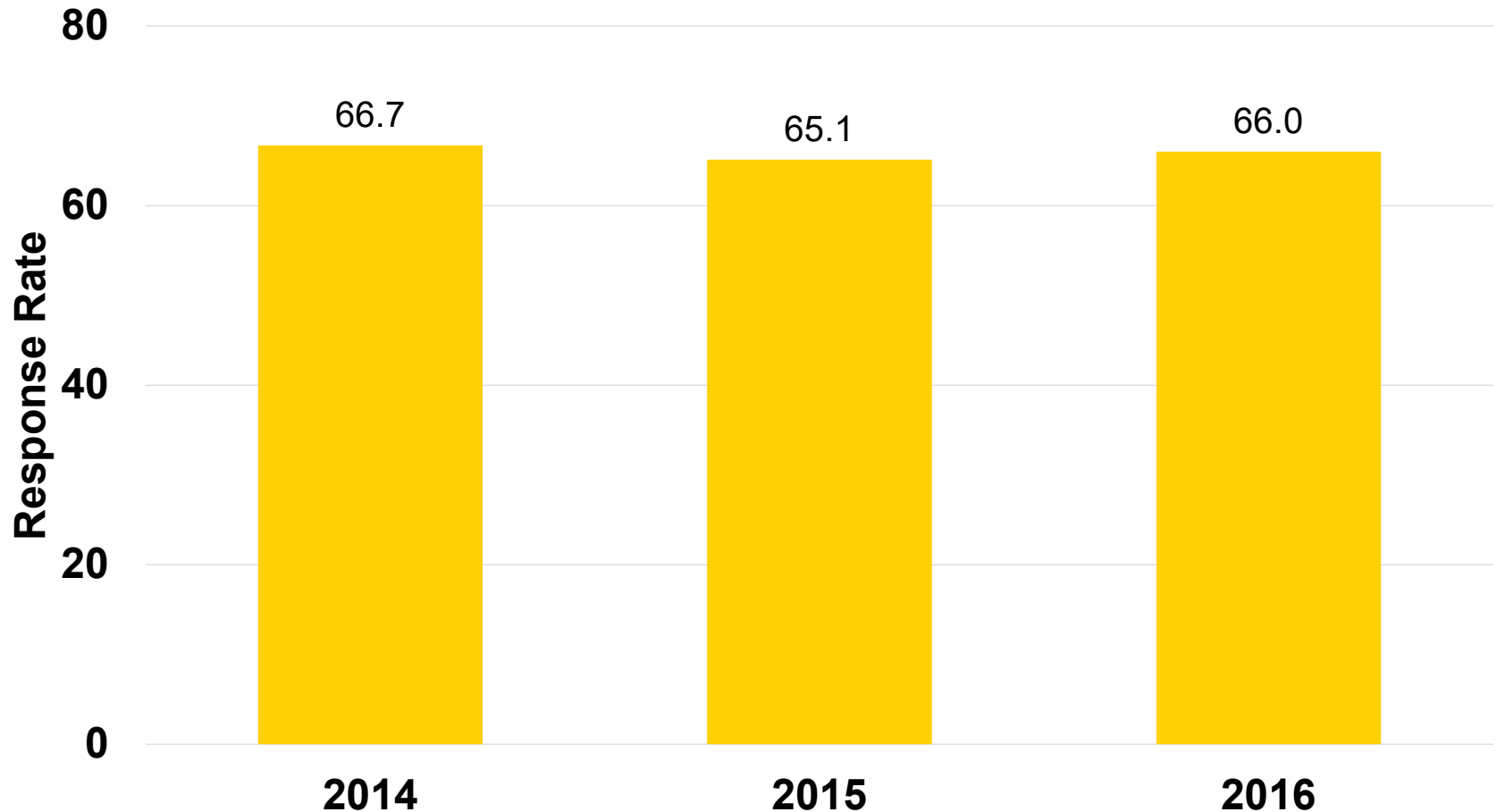


Survey Response Rates

Cohort 17 Follow-Up

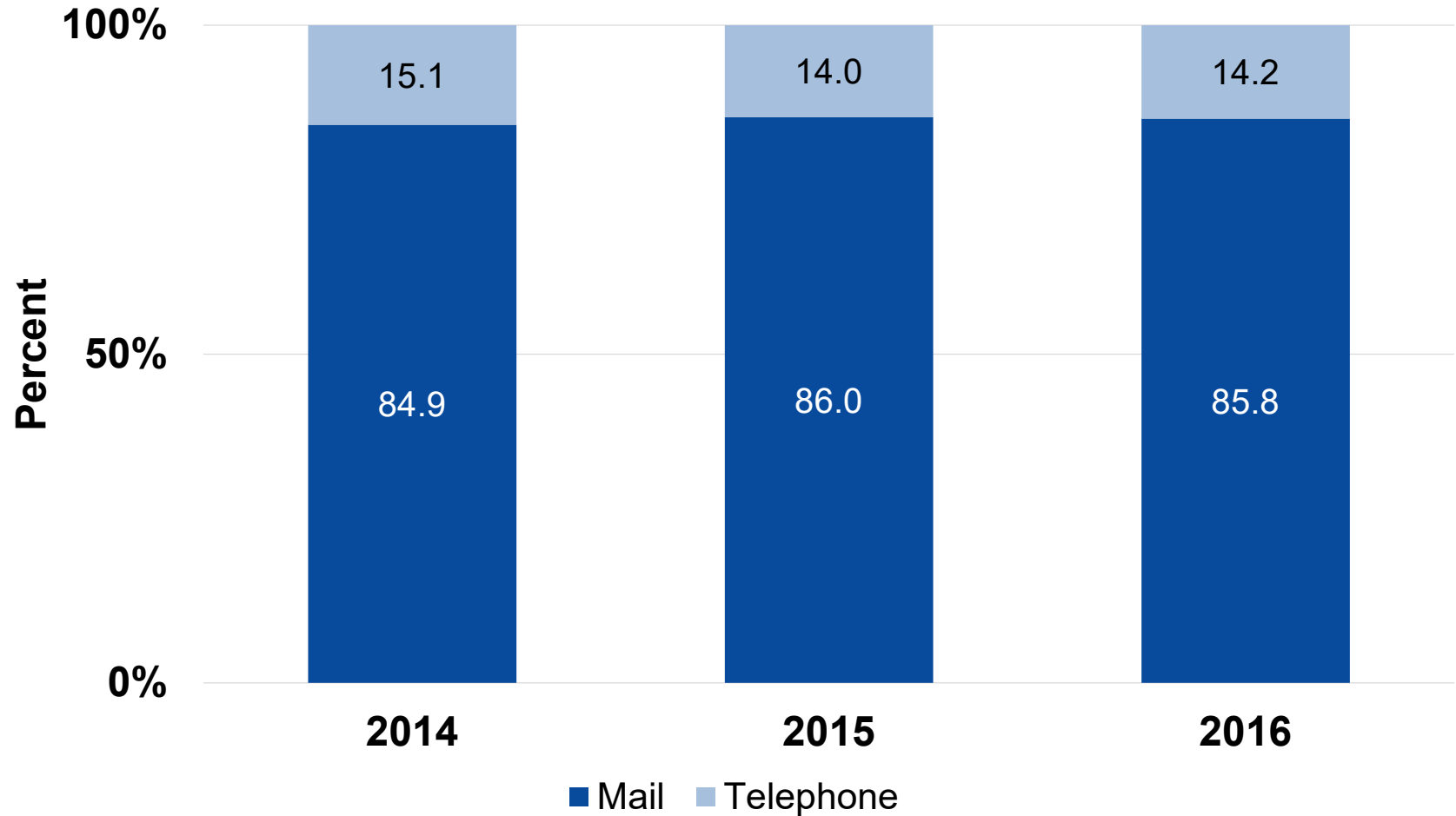
Overall Response Rates

Cohorts 15-17 Follow-Up Surveys: 2014-2016



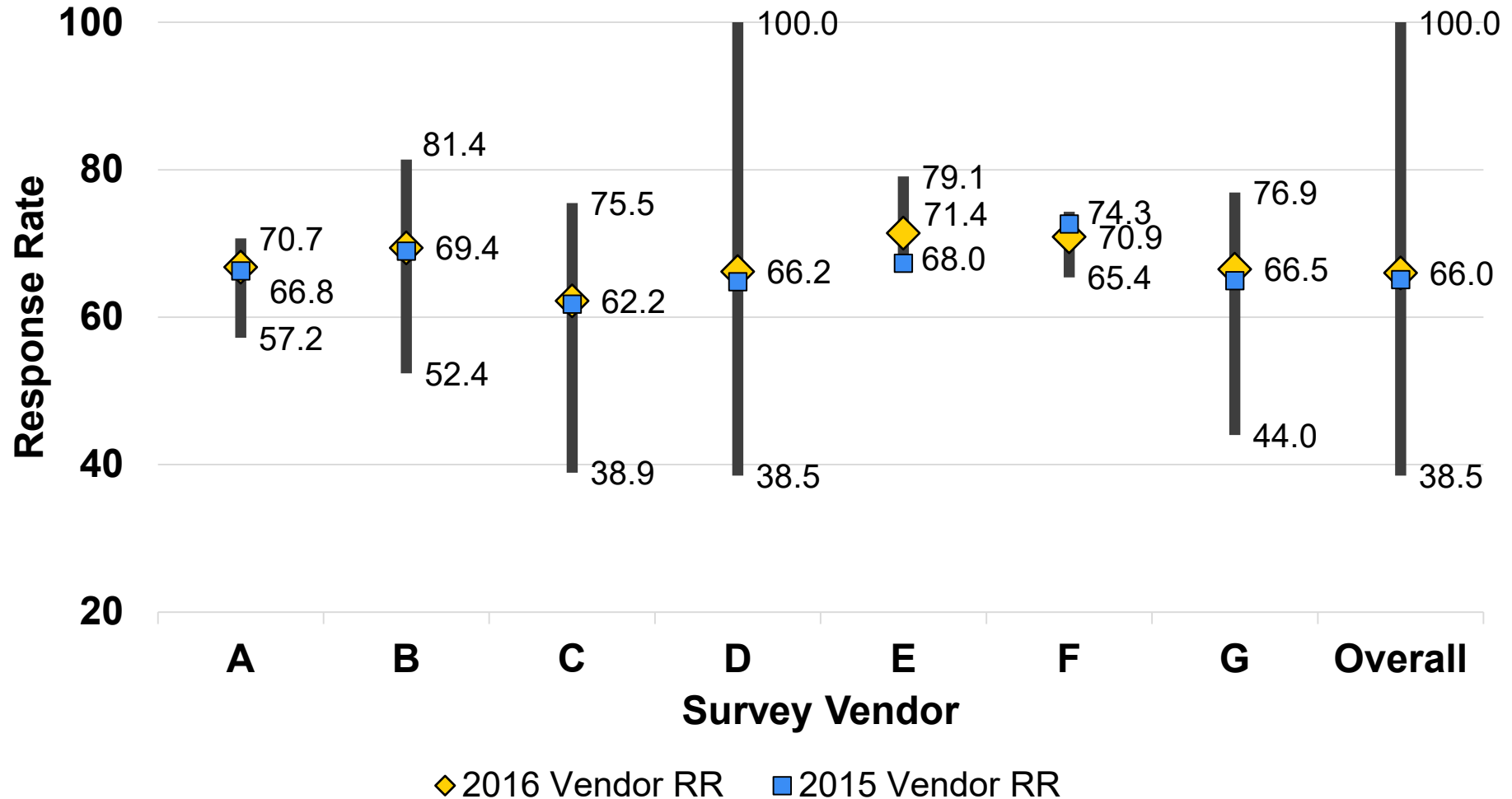
Responses by Mode

Cohorts 15-17 Follow-Up Surveys: 2014-2016



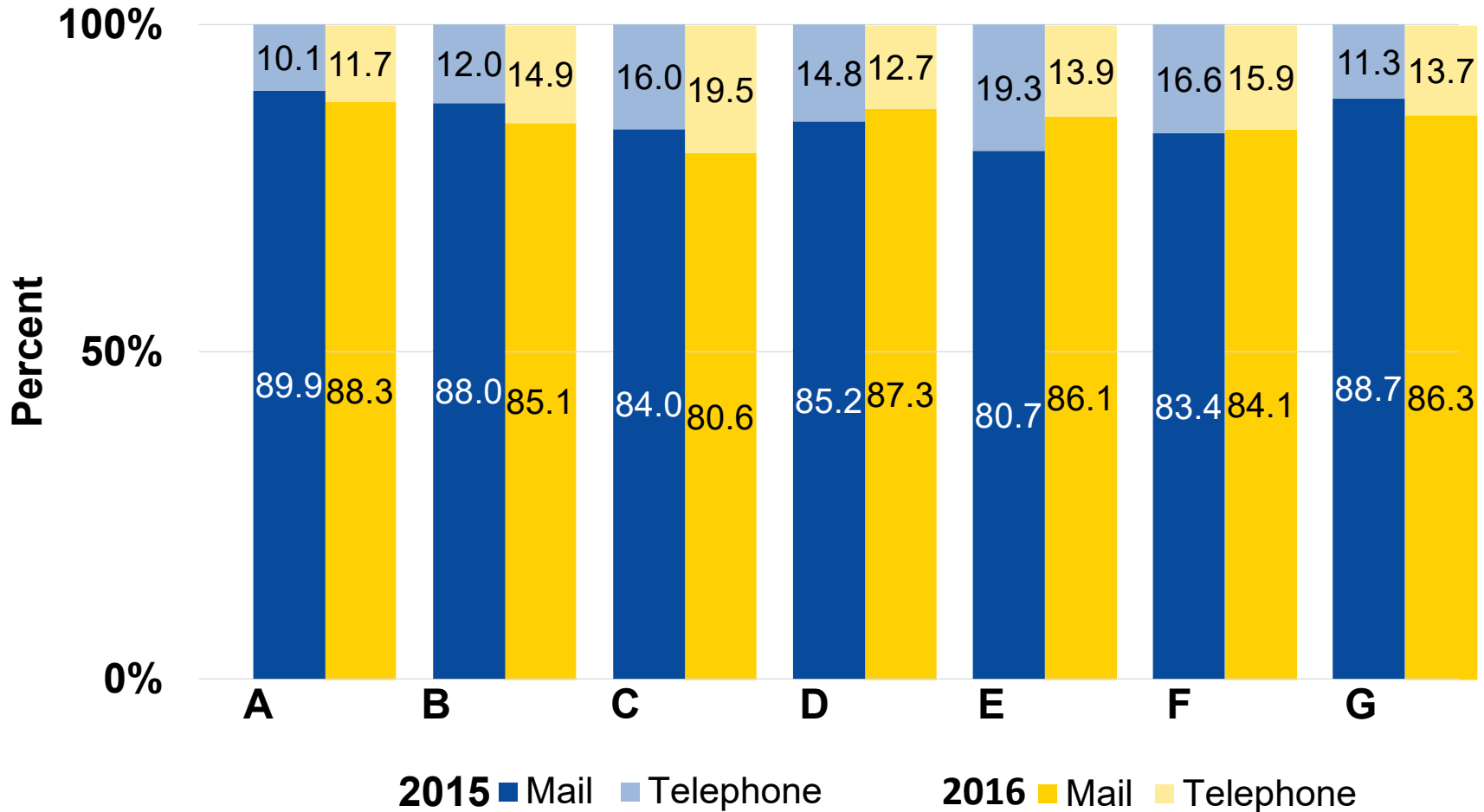
Variability of Response Rates by Vendor

Cohort 17 Follow-Up Survey: 2016



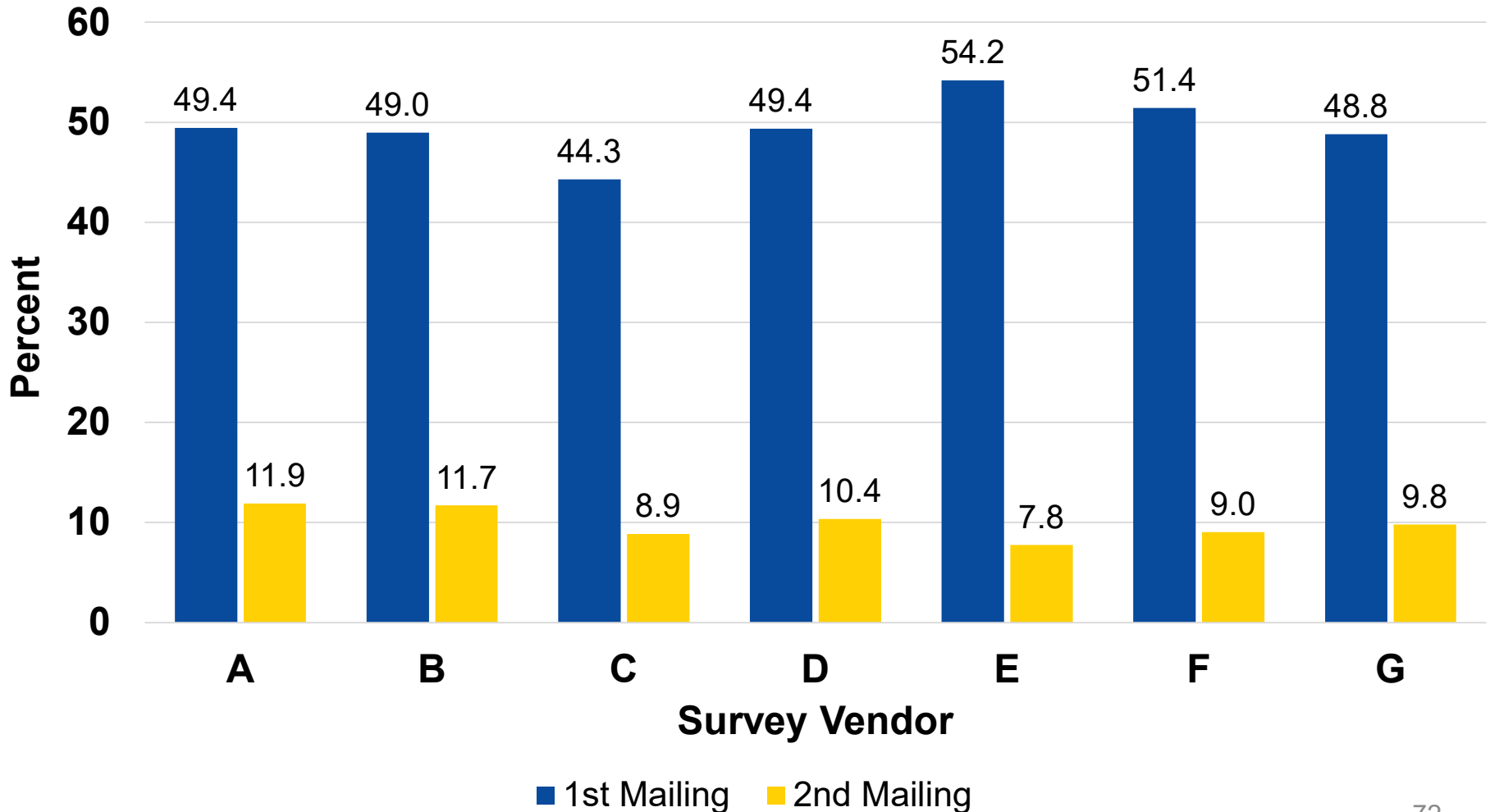
Responses by Mode and Vendor

Cohorts 16-17 Follow-Up Surveys: 2015-2016



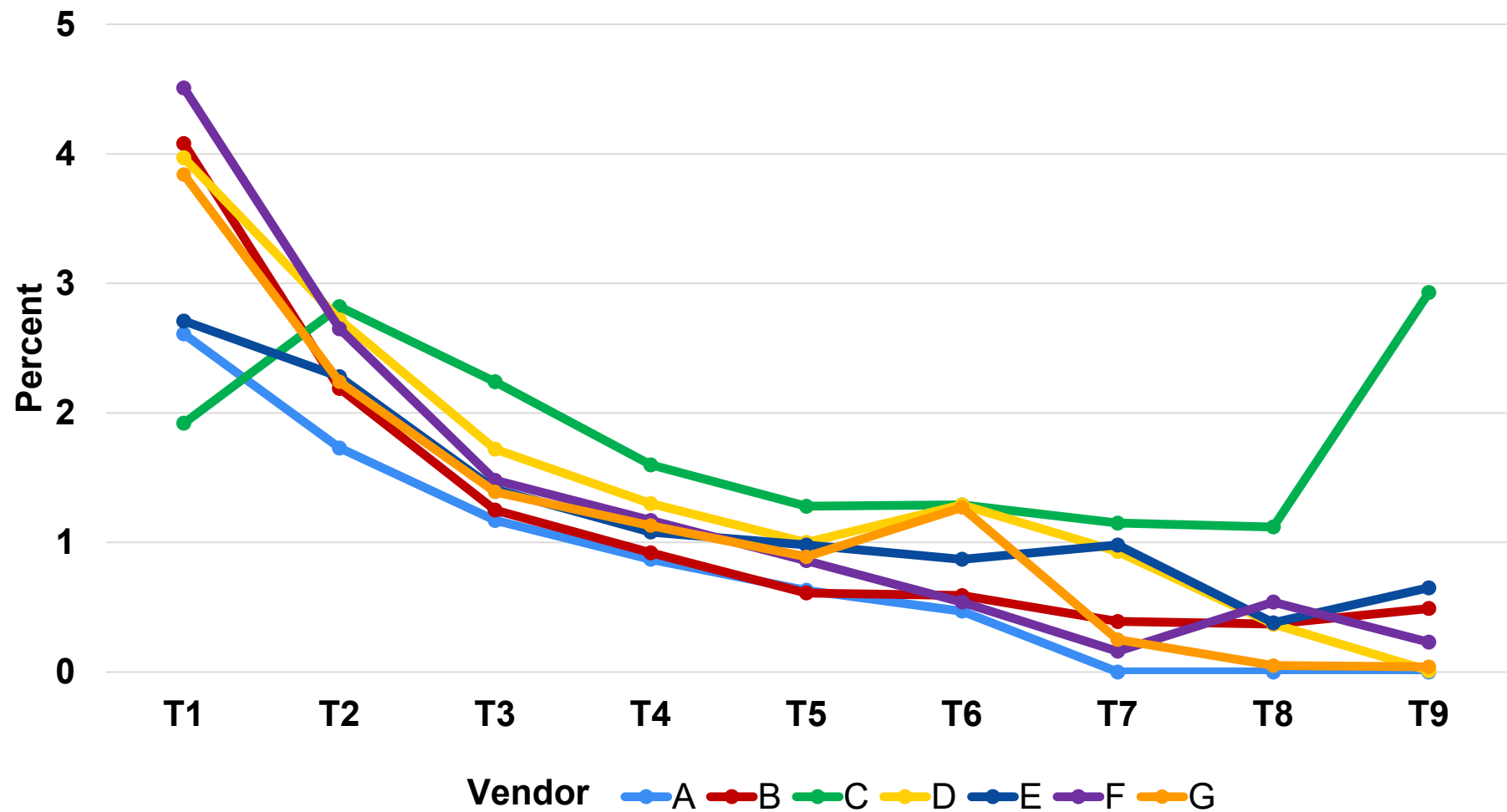
Percent of Sample Responding by Mail

Cohort 17 Follow-Up Survey: 2016



Percent of Sample Responding by Telephone

Cohort 17 Follow-Up Survey: 2016



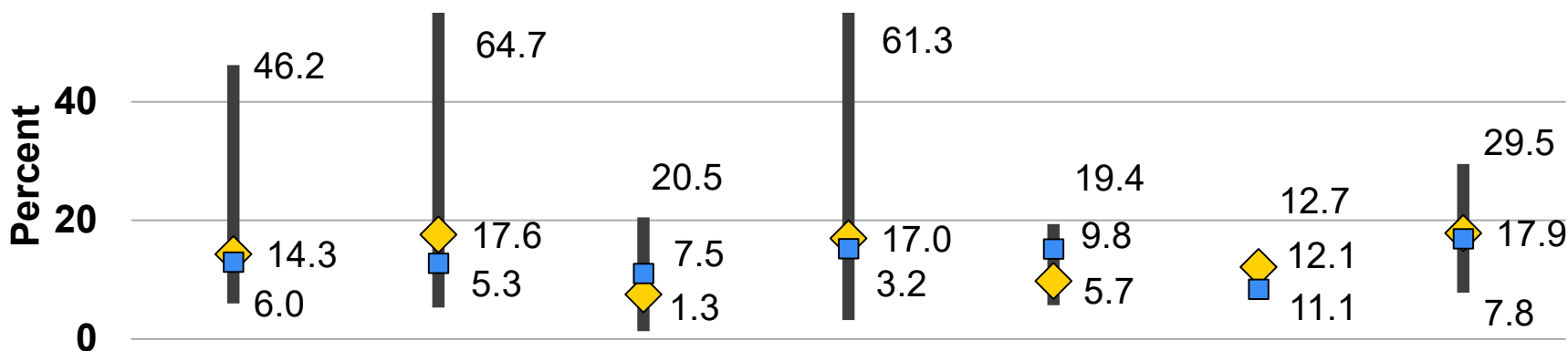


Survey Disposition Components

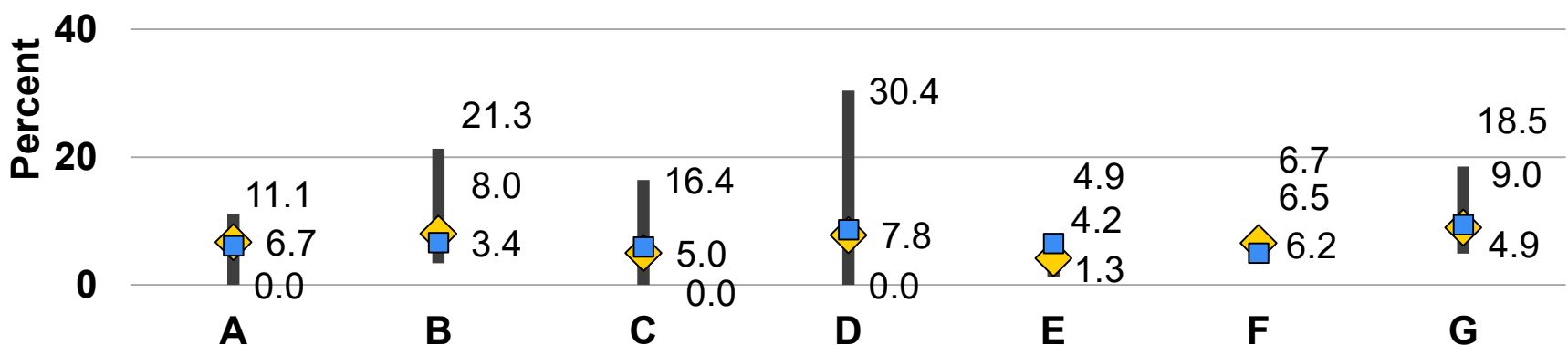
Cohort 19 Baseline and Cohort 17 Follow-Up

Mail Non-Response After Max Attempts: M36

Baseline

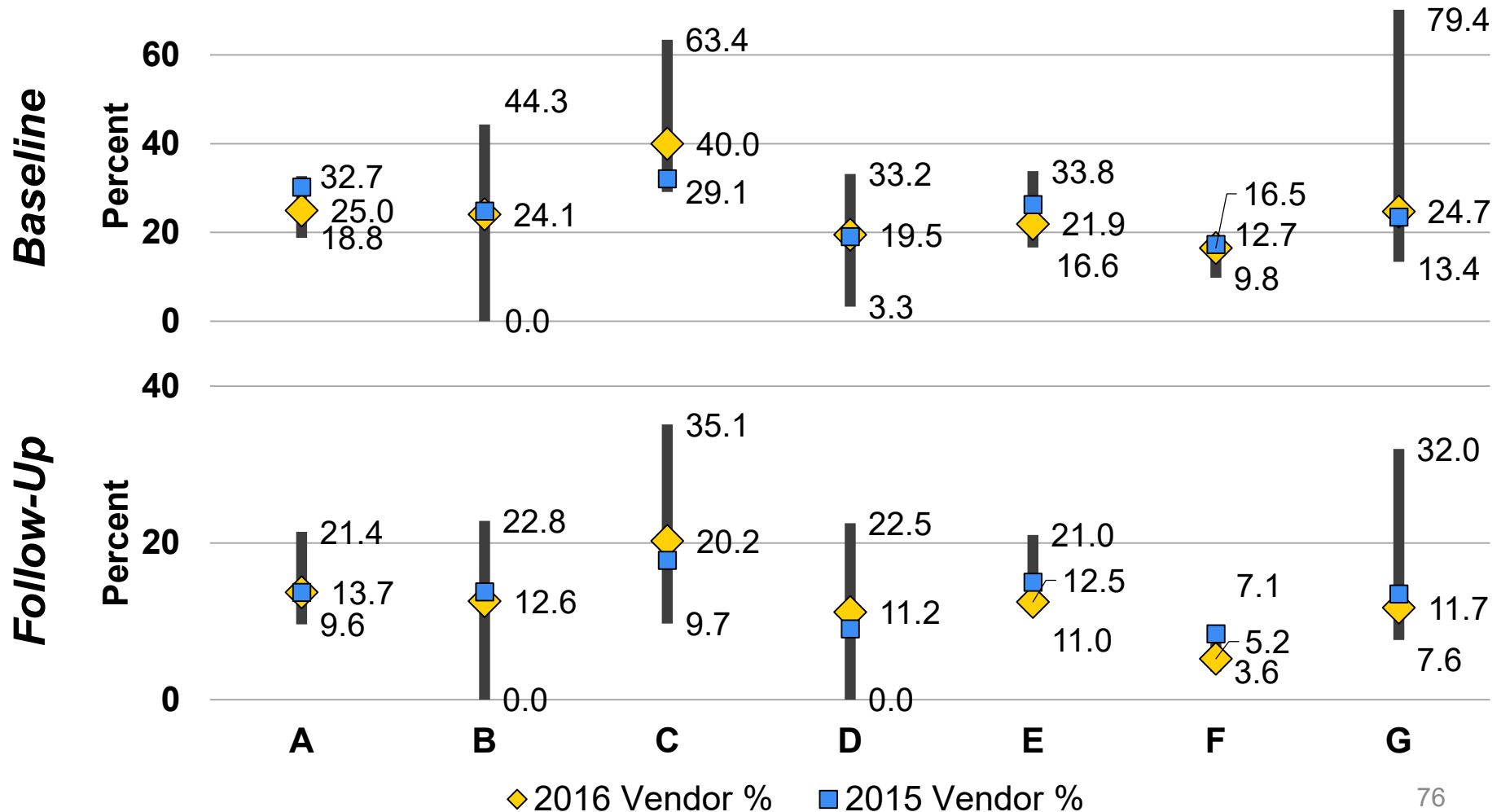


Follow-Up

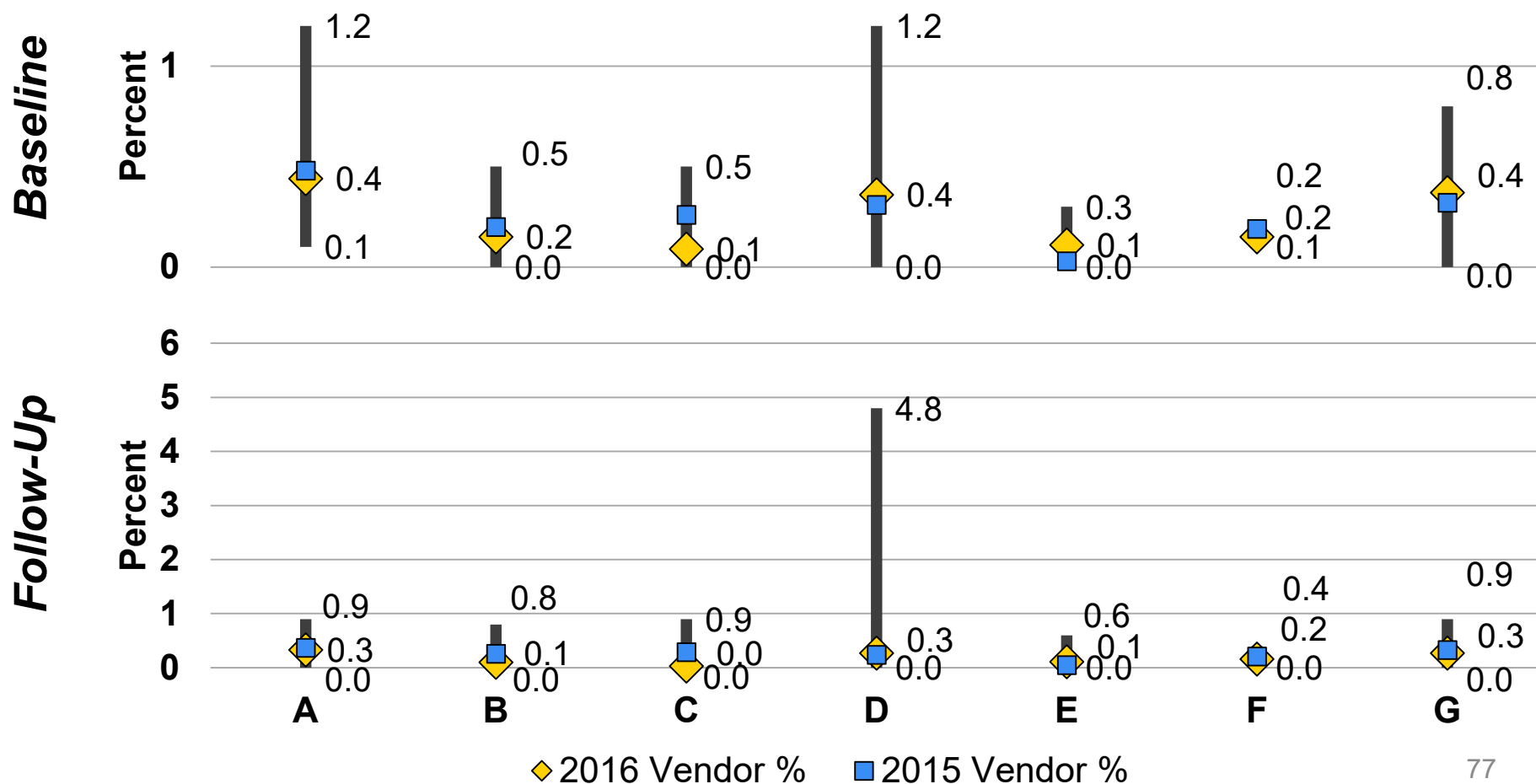


◆ 2016 Vendor % ■ 2015 Vendor %

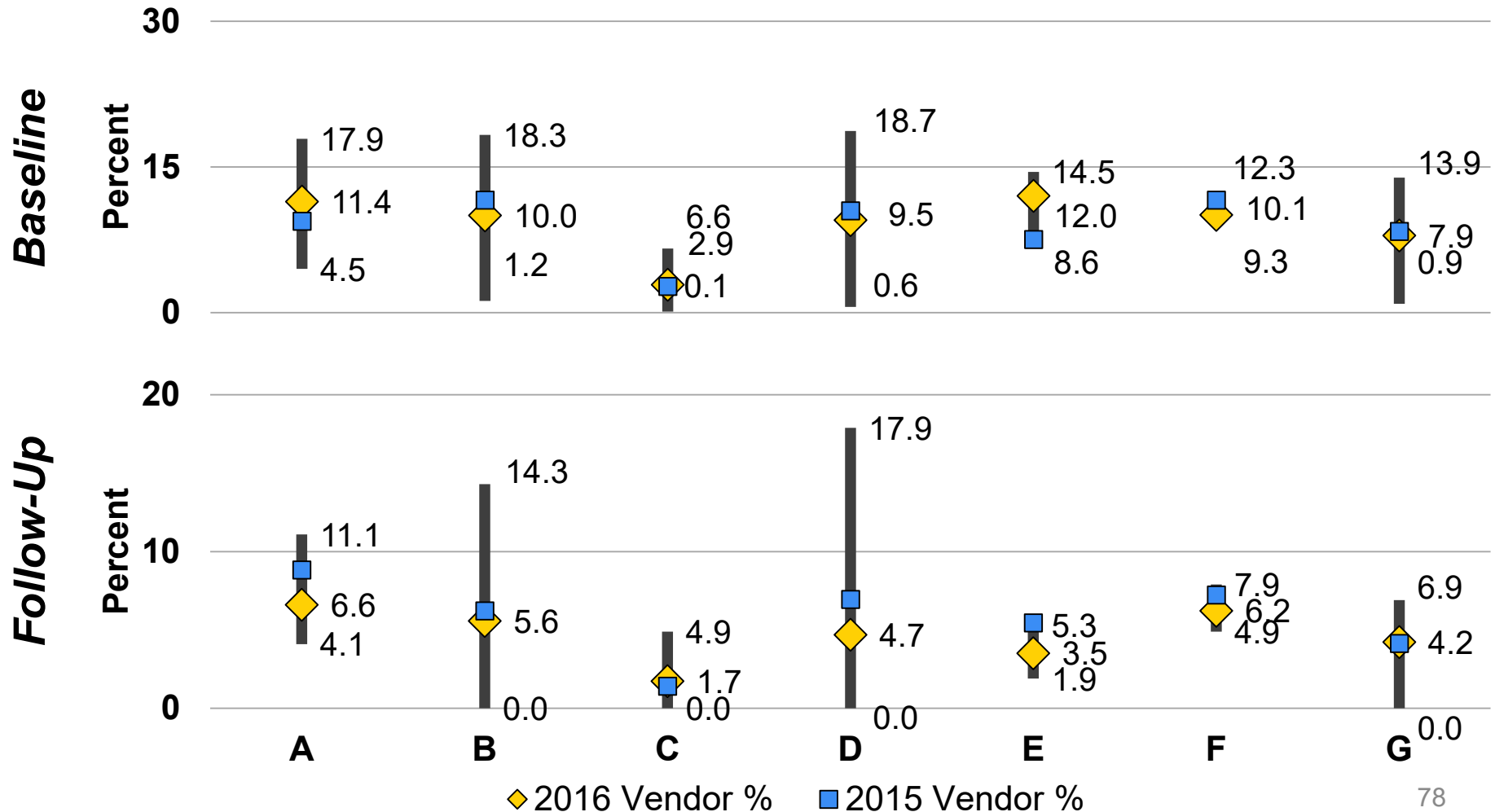
Telephone Non-Response After Max Attempts: T36



Mail Refusal: M32



Telephone Refusal: T32



Key Points

- Baseline response rates continued to decrease in 2016
- Most responses obtained by mail and in particular on the first mailing
- Most telephone responses obtained on the first telephone attempt, with a trend for decreased success with subsequent attempts
- There were wide response rate ranges across contracts for some survey vendors

Questions?





Data Coding and Data Submission

Data Coding Overview

- Text File Specifications
- Data Coding Guidelines
 - Decision Rules
 - Percent Complete
 - Survey Disposition Codes
 - Additional Data Fields

Text File Specifications

- Submit a record for all sampled members in original sample file
- Data files are in a text file format (.TXT) and have two record types:
 - Header Record
 - Member Level Record
- See Appendix D of the QAG for the file layout

Data Coding Guidelines

- Decision rules for surveys
- Open ended questions
- Survey skip patterns
- Calculating percent complete

Decision Rule Guidelines

- Three categories:
 1. Scale or dichotomous/categorical questions
 2. Open-ended questions
 3. Exception questions
- Table 7 in the QAG outlines the decision rule categories

Open-Ended Questions

- Table 8 in the QAG outlines the decision rules
- Numeric responses
 - Healthy Days questions – Q12, 13, 14
 - Weight question – Q55
 - Height question – Q56
- Alphabetic responses
 - Primary Language question – Q60
 - Proxy Name question – Q67

Numeric Open-Ended Questions Updates

Rule	Example	Code As
NEW: For responses of “none” or “no days” code as 00 days	No days	00
NEW: Height only: If respondent report feet greater than 9, code as 8 = Inappropriate Answer. Do not clean.	10 feet 5 inches	805

Skip Patterns

- Do not clean skip pattern errors for the mail survey
- Rules for coding skip pattern for mail and telephone questions can be found in the Data Coding section of the QAG

Calculating Percent Complete

- HOS contains 85 potential response items
- Exclude 12 items from calculation, which are part of a skip pattern
 - Q14, 35a, 35b, 35c, 35d, 35e, 43, 44, 45, 47, 65, 67
- Denominator is 73 items

$$\% \text{ Complete} = \frac{\text{Total Number of Answered Items (exclude skip pattern items)}}{\text{Total Response Items} - \text{Excluded Items}}$$

Calculating Percent Complete (cont'd)

- Q12-13
 - Any value except “99=Missing” counts toward percent complete
- Q58, 59, 63
 - If respondent checks one or more responses, question is complete
 - If all values are not checked (all values = 0), question is not complete
- Q56 and 60
 - Only one of the two fields must be complete to count towards percent complete

Survey Disposition Codes

- Disposition Code Types
 - Complete Survey
 - Partial Complete Survey
 - Non-response
 - Ineligible
 - Ineligible codes that require NCQA approval before use
- Table 9 and 10 in the QAG outlines all disposition codes

Data Fields

- **Survey Round:** Designates what round the survey was completed (e.g., M2, T9)
- **Survey Language:** Language in which respondent completed the survey
- **Survey Completion Date:** When the mail survey was received or when the telephone interview was completed


Data Fields (cont'd)

- **Telephone Interviewer ID:** Unique ID that links telephone attempts to a specific interviewer
- **MAO Phone Flag:** Indicates whether or not a MAO provided a phone number for a sampled member
 - Note: even if the number is wrong, code as “yes” if MAO provides a number

Exclude from Future Surveys Flag

- Identifies members who request to be removed from the mailing list or never contacted again (Do Not Call list)
- 1 = Member specifically requested *Take me off your list and never contact me again*
- 2 = Member did **NOT** request *Take me off your list and never contact me again*

Exclude from Future Surveys Flag (cont'd)

-  **NEW**: Survey vendors may not assign the flag based on information provided by the MA contract (e.g., an MAO DNC list)

Member Telephone Number


- Telephone number at which the member was successfully contacted
- Number is provided in the sample file for the Follow-Up Survey to facilitate re-contact with the sampled member
- For inbound surveys, if the member declines to provide a number, code as 8888888888

Data Submission

Overview

- Interim and Final Data Files
- Data Quality Attestation
- Data and Record Storage
- Data and Document Retrieval


Interim Data Files

-  **NEW:** Survey vendors submit interim data files to the HOS Project Team by June 30
- All data received up to 5 days prior to data submission due date must be in the interim data files

Final Data Files

- Survey vendors submit final data files by 11:59 PM ET on August 14, 2017
- Data files not submitted on time are **NOT** included in publicly reported HOS results
- Survey vendors may not resubmit data after the deadline



Data Quality Attestation

-  **NEW**: Survey vendors sign a statement attesting that all HOS data collected and submitted to CMS are accurate and conform to the QAG
- Attestation forms will be provided at a later date

Data and Record Storage

- **Mail:**
- Survey vendors store returned paper surveys or scanned images of survey in a secure location for 3 years
- Retain the 2017 paper surveys on site until December 31, 2018

Data and Record Storage (cont'd)

- **Telephone:**
-  **NEW:** Survey vendors retain all telephone survey data securely for 3 years
-  **NEW:** Retain 2017 telephone recordings in all languages on site until December 31, 2018

Data and Document Retrieval

- All survey images and telephone recordings must be available for retrieval within 3 business days

Questions?





Quality Oversight


Overview

- Oversight Activities
 - Before Survey Administration
 - During Survey Administration
 - After Survey Administration


Before Survey Administration

- Mailing Materials
- Electronic Telephone Interviewing Materials
- Quality Assurance Plan (QAP)

Mailing Materials

- Review final print-ready HOS questionnaires, mailing materials, and envelopes
- Due February 24
 - Send electronic copies to hos@ncqa.org
 - Comment/Approve by March 10
 -  **NEW**: All materials must be final by March 20


Electronic Interviewing Materials

- Review telephone interviewing screenshots and skip pattern logic
- Due March 10
 - 2 weeks after submitting mailing materials
 - Send electronic copies to hos@ncqa.org
 - Comment/Approve by March 24
 -  **NEW**: All materials must be final by April 3


Survey Vendor QAP

- Compliance with HOS Protocols
- QAPs must follow the Model QAP format in the QAG
 - Appendix B
 - Due March 17
- QAP conference call
 - Schedule April 3 - 14

Survey Vendor QAP (cont'd)

-  **NEW:** Provide documentation of previous administration issues and corrective action taken
- Provide documentation of quality oversight processes, including oversight of subcontractors

During Survey Administration

- Seeded Mailings
- Customer Support Review
- Electronic Telephone Interviewing Monitoring
- Survey Vendor Progress Reports
- Discrepancy Reports & Corrective Action Plan
-  **NEW**: Interim Data File Submission
- Site Visit
- Data Record Review



During Survey Administration (cont'd)

Oversight Activities	Dates (2017)
Seeded Mailings	April – June
Customer Support Monitoring	April – May
Electronic Telephone Interviewing Monitoring	June – July
Survey Vendor Progress Reports	April – August
Discrepancy Reports & Corrective Action Plan	April – July
NEW: Interim Data File Submission	June 30
Site Visit	May – July
Data Record Review	May – August

Seeded Mailings

- Quality assurance tool
- Handle seeded mailings as any other mailing in the sample file
- Do not:
 - Hand select seeded mailings for closer review
 - Make individual changes to seeded mailings

Seeded Mailings (cont'd)

- Program seeded mailing information in the printing and mailing databases
-  **NEW**: Include HOS Project Team and CMS in all survey mailings that are sent to members
 - Do not create seeds for protocols not fielded
 - Notify HOS Project Team in advance
-  **NEW**: Document seeded mailing process in detail in QAP

Seeded Mailings (cont'd)

- Example of mail database entry with seeded mailings

Sampled Member	Address 1	Address 2	City	State	Zip
Member 1
Member 2
Member 3
...
...
Seed 1
Seed 2
Seed 3

Customer Support Monitoring

- Customer support – E-mail
 - Securely forward all customer support e-mails with responses on a weekly basis
- Customer support – Telephone
 - Baseline Review
 - Follow-Up Review

Telephone Interviewer Monitoring

- Remote and/or onsite monitoring
 - Read verbatim
 - Accurate probes
 - Speak clearly
 - Maintain an appropriate pace
 - Operate the electronic interviewing system competently
 - Capture accurate response
- Survey vendors monitor at a minimum - 10%, including subcontractors

Survey Vendor Progress Reports

- Narrative Reports
 - Summary of challenges/difficulties encountered
 - Experience to date
- Summary Status Reports
 - Survey Dispositions
 - Response Rates
- Member Correspondence (i.e., white mail)

Discrepancy Report & Corrective Action Plan

- Complete and submit the Discrepancy Report within 1 business day
- Provide as much information as possible
 - Description of discrepancy
 - Corrective Action Plan

HOS Discrepancy Report Form		
Submit the completed Discrepancy Report Form to the HOS mailbox at hos@ncqa.org .		
Contact Information		
Name:	Title:	
Organization:	Address:	
Telephone:	E-mail:	
Discrepancy		
Date Discrepancy Discovered:		
Detailed Description of Discrepancy:		
Discrepancy Time Frame:		
Additional Information:		
Impact of Discrepancy		
Affected Contracts	Number of Affected Surveys	Number of Sampled Members
How Was Estimation of Affected Surveys Reached?		
Corrective Action Plan (CAP)		
Detailed Description of CAP:		
Estimated Time of CAP Implementation:		

Interim Data File Submission

- Submit all interim data files via NCQA's IDSS by June 30
 - Include all survey data received up to 5 days prior to June 30
- System opens June 26 to allow the opportunity to investigate data submission issues before submitting final files


Site Visits

- May-July timeframe: Evaluate survey vendor's degree of compliance with the QAG
 - Project organization
 - Subcontractor
 - Survey management system
 - Staff training
 - Sample file processing
 - Oversight of staff and subcontractors
 - Mail and telephone operations
 - Data review
 - Data security

Data Record Review

- Review select records of varying survey dispositions and survey rounds
- Track record throughout survey timeline
 - Sample file
 - Address and telephone update
 - Mail phase
 - Data receipt and entry
 - Telephone phase
 - Data submission
- Provide documentation
 - Hard copy or scanned images
 - Telephone recording
 - Customer support logs

Data Record Review (cont'd)

- Survey vendor systems/databases must be available to the HOS Project Team
-  **NEW**: The HOS Project Team will provide a list of requirements prior to the review
- Conduct reviews onsite or remotely

After Survey Administration

- Prepare and Submit Final Data Files
- Data Validation
- Final Data Submission

After Survey Administration (cont'd)

Oversight Activities	Dates (2017)
Prepare and Submit Final Data Files	July 31 – August 14
Final Data Submission	August 14

Prepare and Submit Final Data Files

- Upload a maximum of 80 files within a zip file at one time
- Let each zip file process before uploading another
- Header record provided will contain submission and organization IDs

Data Validation

- Header Record
 - Valid values for each respective field position as described in Appendix D: Table D-1 of the HOS Sample File Layout and Survey File Record Layout Values must match
 - CMS Contract Number
 - Contract Name
 - NCQA Survey Vendor ID
 - Exclusive SNP Flag
 - NCQA Healthcare Organization ID
 - NCQA Submission ID

Data Validation (cont'd)

- Sample File Layout
 - Submission file values must match exactly the same-named elements in the same field positions in the sample file
 - Example
 - Sample file = 4567 Main Street
 - Submission file error = 4576 Main Street

Data Validation (cont'd)

- Valid values for survey question responses
 - Example
 - Valid values for Q3a = 1, 2, 3, 4, 5, 9
 - Submission file error = 7
 - No two surveys may have the exact same responses to all questions

Data Validation (cont'd)

- Valid values for survey vendor generated values
 - Survey Disposition
 - Survey Round
 - Survey Language
 - Survey Completion Date
 - Survey Vendor's Telephone Interviewing ID
 - MAO Phone
 - DNC
 - Member Telephone
- Example 1
 - Survey Disposition = M10, M11, M31
 - Survey Disposition error = **M12**
- Example 2
 - Survey Round = M1, M2
 - Survey Round error = **M3**

Data Validation (cont'd)

- Agreement of Survey Vendor ID with Telephone Interviewer ID
 - Example
 - Survey Vendor ID = 01234
 - Telephone Interview ID error = 012431234
- Agreement of Survey Round with Survey Language
 - Example
 - Survey Round = T1 (1st Telephone attempt)
 - Survey Language error = 4 - Chinese
- Survey Completion Date

Data Validation (cont'd)

- Agreement of Survey Disposition with
 - Member Telephone Number
 - Telephone Interviewer ID
 - Survey Language
- Example 1
 - Survey Disposition = M10 – Mail complete
 - Survey Round Error = T1 – 1st Telephone attempt
- Example 2
 - Survey Disposition = T11 – Telephone partial complete
 - Survey Language Error = 4 - Chinese

Data Validation (cont'd)

- Survey Disposition codes requiring NCQA approval
 - Example
 - Survey Disposition = T21 - Ineligible: not enrolled in MAO
- Survey completion level against Survey Disposition
 - Complete Survey
 - Example
 - Survey Disposition = M10 – Mail complete
 - ADL error = 4 ADLs answered appropriately and 62 relevant questions answered appropriately
 - Partial Complete Survey
 - Break-off Survey

Data Validation (cont'd)

- Survey Disposition indicating Complete, Partial, or Break-off must be completed within the survey protocol time-frame
 - Example
 - Survey Disposition = T10 – Telephone complete
 - Survey Completion Date error = 08012017

Data Validation (cont'd)

- Skip pattern logic for telephone completes (T10, T11, T31)
 - Example
 - Survey Disposition = T10 – Telephone complete
 - Skip pattern error
 - Q12 = 00 AND Q13 = 00
 - Q14 = 12

Final Data Submission

- Review all Header Record and Detail Record errors
- Revise and re-upload data files
- Final data files
 - Due **August 14**

Questions?



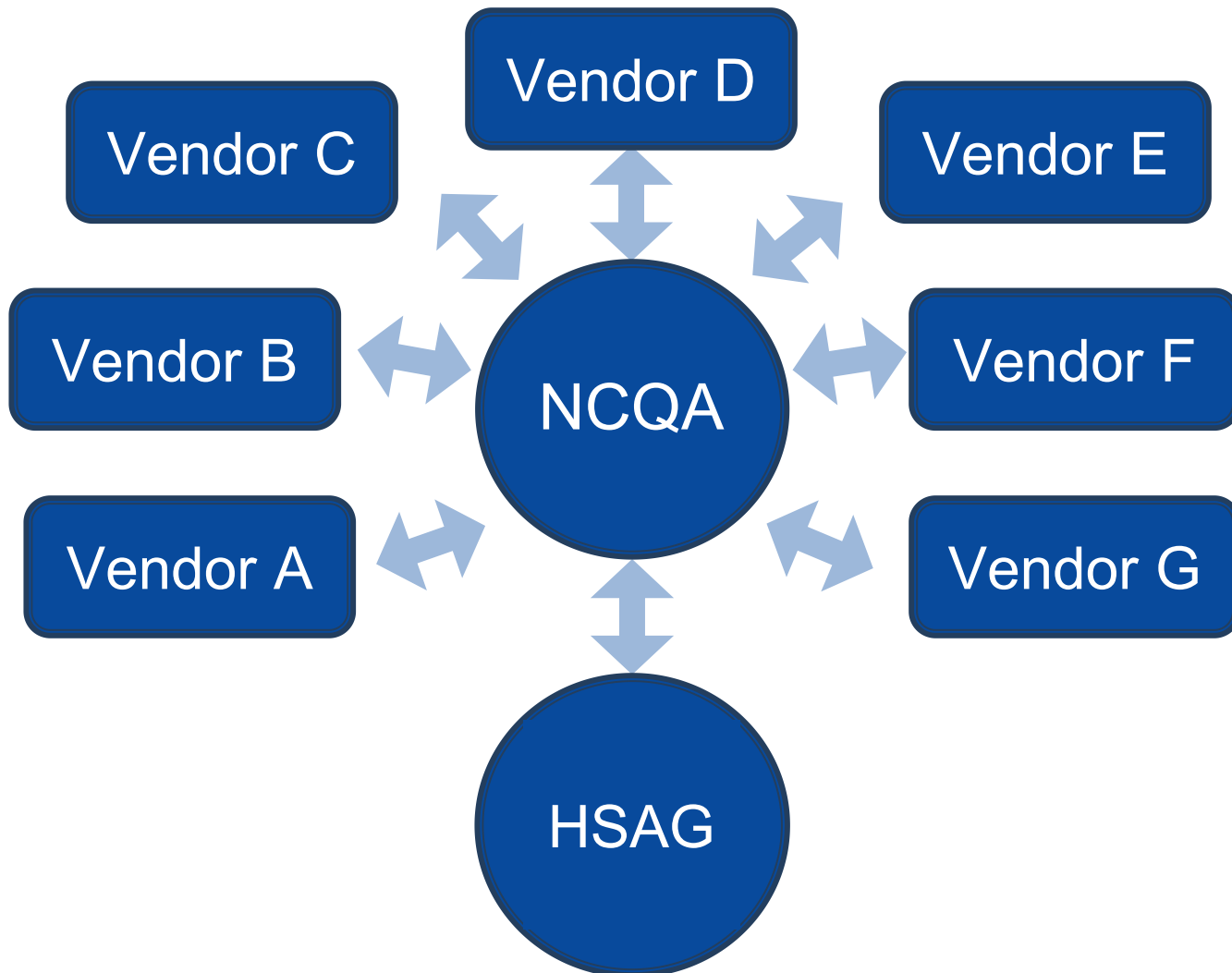


Data Management

Overview

- Data Submission and Review Process
- HSAG's Data Evaluation Process
- Types of Discrepancies Investigated
 - Questionable Data Distributions
 - Skip Pattern Violations
 - Out of Range Values
 - Inconsistent or Missing Data
 - Inappropriate Cleaning
 - Missing Sections
 - Changes Between Submissions
- MA Contract Data Requests for Cohort 16

Data Submission and Review Process



HSAG's Data Evaluation Process

- Survey vendors submit plan-level text files to NCQA
- Upon receipt of the survey vendor text files from NCQA, HSAG combines the files into one data set
 - Examine differences among
 - Contracts
 - Survey vendors
 - Previous cohorts
 - Survey modes (i.e., Telephone vs. Mail)
 - Survey languages
 - Compare response distributions for missing values and variations from historical values
 - Identify potential response issues for new survey items

Types of Discrepancies Investigated

Questionable Data Distributions

Skip Pattern Violations

Out of Range Values

Inconsistent or Missing Data

Inappropriate Cleaning

Missing Sections

Changes Between Submissions

Questionable Data Distributions

- Responses to each question by survey vendor
 - Overall
 - For telephone and mail mode surveys
 - For each survey language
- Compared with historical trends
- New questions
- Open-ended questions
- Questions with more than one answer permitted
 - Hispanic ethnicity
 - Race
 - Living arrangement – alone or with others

Example 1: Questionable Data Distributions

How many days during the past 30 days was your physical health not good?

# days	N	# days	N	# days	N	# days	N
0	972	5	0	10	150	30	387
1	0	6	0	11	1	40	46
2	0	7	0	12	10	50	107
3	0	8	0	13	35	60	17
4	0	9	0	70	54

- No telephone responses of 1-9
- Many responses over 30 at intervals of 10 (i.e. 40, 50, etc.)
- It was determined that a zero was added to each response

Example 2: Questionable Data Distributions

Spanish Surveys Only

Survey Questions	Percent Missing
<i>Climbing several flights of stairs</i>	70.0%
All other VR-12 questions	0.5–10.0%

- Unusual response distribution of Spanish language telephone surveys
- One survey vendor had an unusually high percentage of missing values for one question

Skip Pattern Violations

- Skip pattern violations by beneficiaries that occur in the *mail* survey data are not unexpected.
 - If no skip pattern violations are found across questions that commonly have such violations, further investigation may be warranted
- Skip pattern violations in the *telephone* data are not expected.
 - If skip pattern violations are found in telephone records, further investigation may be warranted

Example 3: Skip Pattern Violations

Responses	Any cancer?		Responses	Are you currently under treatment for colon cancer?	
	N	%		N	%
Yes	10	10%	Yes	1	1%
No	60	60%	No	58	58%
Missing	30	30%	Missing	41	41%

Missing space

Any cancer (other than skin cancer)
If you answered “yes” [...],
 Are you currently under treatment for:

- Mail survey results show more respondents than expected ignored the skip pattern
- In the survey layout, a line space was missed

Out of Range Values

- Verify that all responses are valid by conducting range checks for all survey fields
- Identify shifts in data values due to misalignment of fields in the survey vendor text files
- Verify that dates are within the appropriate ranges
 - All survey dates should correspond to the survey administration window

Example 4: Out of Range Values

Record	Last Name	Q68	Disposition	Round	Language	Survey Date	Etc..
200	Muñoz	03	M10	M1	2	06082013	Etc. .
201	López	04	M11	M2	1	05282013	Etc.
Record	Last Name	Q68	Disposition	Round	Language	Survey Date	Etc..
200	Mu~no	z0	3M1	0M	1	20608201	Etc. .
201	L´ope	z0	4M1	1M	2	10528201	Etc. .

Inconsistent or Missing Data

- Compare values contained in the member level data provided by CMS and the respondent's survey data
 - Race
 - Gender
- Verify administrative survey fields
 - Round number
 - Survey disposition
 - Survey language
 - Electronic telephone interviewer ID

Inconsistent or Missing Data (cont'd)

- Further investigation by looking at:
 - Frequencies of “ineligible” surveys among survey vendors
 - Percent complete of the survey portion of each record
 - Percent complete vs. survey vendor assigned survey dispositions
 - Round number fields
- Review similar survey fields for internal consistency
 - Correlations between similar item responses

Example 5: Inconsistent or Missing Data

Q12: Healthy Days (# Days Physical Health is Not Good)	Survey Vendor (percent)						
	T	W	Z	V	X	U	Y
00	53.10	39.85	0.00	42.88	41.95	36.64	46.75
01	2.20	3.91	2.11	1.67	2.25	1.57	1.97
...
88	0.00	0.07	0.13	0.27	0.00	0.03	0.00
99	4.65	11.49	48.37	13.75	6.31	17.84	7.28

- One survey vendor had no survey response of '00' for the three Healthy Days Questions
- This survey vendor had a higher missing rate, i.e. high usage of '99'
- Investigation identified a programming error that converted '00' to '99'. Vendor fixed and resubmitted the data.

Example 6: Inconsistent or Missing Data

Current treatment for prostate cancer	Survey Vendor (percent)						
	Z	Y	X	W	V	U	T
Yes (1)	0.96	0.89	0.00	0.60	1.06	0.65	1.28
No (2)	4.10	2.00	0.00	3.43	3.37	2.25	4.58
Missing (9)	94.93	97.11	100.00	95.97	95.57	97.09	94.14

- One survey vendor had no telephone respondents with a response to the *current treatment for prostate cancer* question
- Investigation identified a programming error that set all telephone responses to the question to “missing”
- Investigate for coding errors in fields with extreme frequencies (0% or 100%), especially by mode

Example 7: Inconsistent or Missing Data

Survey Round Codes	Survey Vendor (percent)						
	Z	Y	X	W	V	U	T
MT	0.51	0.54	0.81	0.64	0.41	1.00	0.48
T1	2.40	3.63	4.75	4.25	9.43	3.77	6.55
T2	1.76	2.47	3.15	3.86	0.00	2.49	2.78
T3	1.42	1.63	2.05	2.26	0.00	1.88	2.16
...	2.62	4.10	5.54	7.14	0.00	8.67	4.16
T9	0.00	0.06	0.30	0.53	0.00	0.42	0.16

- One survey vendor with no surveys obtained in telephone attempts T2-T9

Inappropriate Cleaning (Mail Surveys)

- Open-ended numeric questions (healthy days, weight, height)
 - Enter as written by the respondent, except as directed by the QAG
 - Small number of invalid or inappropriate values expected
- Skip patterns
 - Enter all responses as marked on the survey
 - Small number of skip pattern violations expected
- Absence of respondent generated errors in mail surveys may indicate inappropriate cleaning by the survey vendor

Example 8: Inappropriate Cleaning

Height in Inches	Survey Vendor (percent)						
	Z	Y	X	W	V	U	T
Valid (00-98)	96.6	94.26	95.90	94.17	94.83	95.12	95.78
Inappropriate Answer (88)	0.04	0.54	0.05	0.00	1.22	0.23	0.25
Missing (99)	3.29	5.12	4.03	5.83	3.88	4.59	3.93

- Mail survey results without any inappropriate responses for one survey vendor
- Mail survey responses should not be cleaned prior to submission

Missing Sections

- Look at key questions (VR-12, ADL) for unexpected sequences
 - Entire section of the survey is blank
- Missing data at the contract level and survey vendor level

Example 9: Missing Sections

Record	Q1	Q2a	Q2b	Q3a	Q3b	Q4a	Q4b	Q5	Q6a	Q6b	Q7	Q8	Q9	Q10a	Q10b	Q10c	Q10d	Q10e	Q10f	Q11a	Q11b	Q11c	Q12
54														1	2	1	1	1	2	1	2	3	2
55														3	3	3	2	2	3	3	2	1	8
56														1	1	2	2	1	2	1	1	2	7
57														2	2	3	2	1	1	3	2	2	0
58														2	1	2	3	3	2	3	3	2	0
59	1	1	1	2	1	2	3	1	2	2	1	2	2	3	3	2	1	2	2	1	2	2	1
60	3	2	2	3	3	2	1	2	2	1	2	3	1	1	1	1	2	2	1	2	3	2	8

- Responses missing for questions 1 – 9, which correspond with pages 1 and 2 of the mail survey
- Identify and investigate clusters of missing responses

Changes Between Submissions

- Compare data files to verify that:
 - Expected changes occurred
 - Unexpected changes did not occur

Example 10: Changes Between Submissions

Submission	Record	Disposition	Survey Mode	Survey Date	Interviewer ID	Rest...
1	99	T31	T1	04/12/2016	1234567892	Same
2	99	T31	T1	06/06/2016	1234567893	Same
1	256	T24	NC	99/99/9999	9999999999	Same
2	256	T36	NC	99/99/9999	9999999999	Same

- Unexpected changes in fields between first and second data submissions
- Always check revised data files for unexpected changes, and submit explanation for any unexpected changes with resubmitted files

Suggested Quality Checks for Survey Vendors

- Check for inconsistencies in skip patterns for telephone records
 - Check for missing responses indicating possible coding errors
 - Examine the distribution of responses for improbable results in mail surveys
 - Investigate for coding errors in fields with extreme frequencies (0% or 100%) for any one response

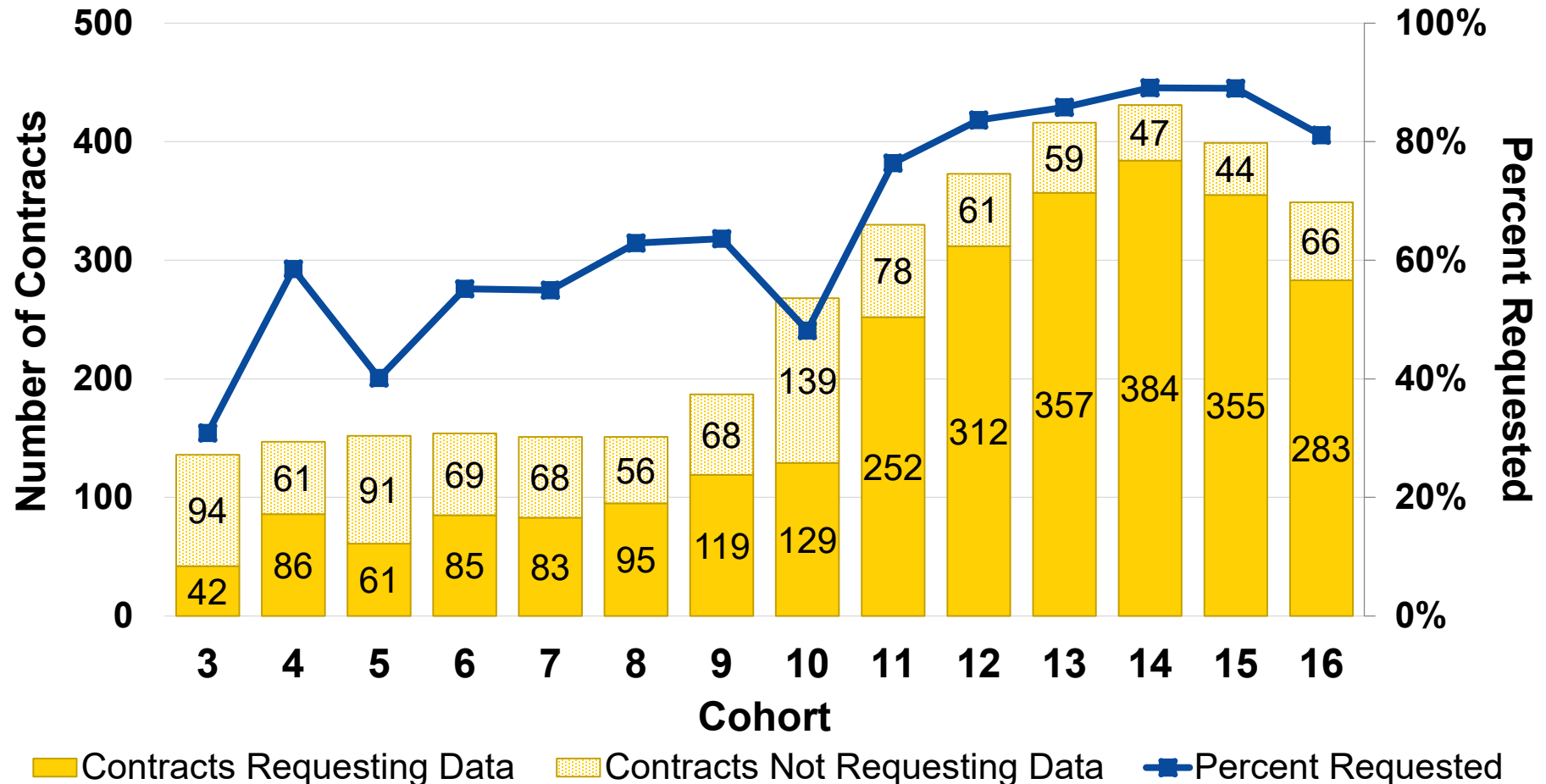
Suggested Quality Checks for Survey Vendors (cont'd)

- Check for inconsistencies in skip patterns for telephone records
- Verify that coding of responses has not been reversed
- Identify and investigate clusters of missing responses
- Always check revised data files for unexpected changes, and submit explanation for any unexpected changes with resubmitted files
- Verify that all HOS codes are present for each reporting field, rather than only flagging invalid codes

Suggested Quality Checks for Survey Vendors (cont'd)

- Verify that:
 - Mail survey responses are not cleaned prior to submission
 - Electronic telephone interviewing program does not permit skip pattern violations
 - Names do not contain any accents

Number and Percent of MA Contracts Requesting HOS Data* by HOS Cohort



Questions?





Survey Administration and Project Reporting

Overview

- Survey Administration Timeline
- Reporting Requirements
 - Seeded Mailings
 - Member Correspondence
 - Model QAP
- Data Submission
- Blinded Response Rates
- Communications

Baseline Survey Timeline

Cohort 20 Baseline

- Pre-notification Letter: April 3
- 1st Questionnaire Mailing: April 10
- Reminder/Thank-You Postcard: April 17
- 2nd Questionnaire Mailing: May 15
- Telephone Interviewing: June 5 – July 10

Follow-Up Survey Timeline

Cohort 18 Follow-Up

- Pre-notification Letter: May 1
- 1st Questionnaire Mailing: May 8
- Reminder/Thank-You Postcard: May 15
- 2nd Questionnaire Mailing: June 12
- Telephone Interviewing: July 3 – July 31

Chinese Protocol Timeline

- Mailing timeline follows the same timeline as English and Spanish but there are two exceptions:
 - Baseline **second** reminder/thank-you postcard: May 22
 - Follow-Up **second** reminder/thank-you postcard: June 19
- Does not include a telephone protocol


Survey Materials Submission

Oversight Activities	Dates (2017)
Submit Mailing Materials / Final Printed Material Proofs	February 24
NEW: Finalize Mailing Materials	March 20
Submit Electronic Telephone Screenshots	March 10
NEW: Finalize Electronic Telephone Screenshots	April 3

Reporting Requirements

Deliverable (Report #)	Due Date (2017)
QAP and Signed Confidentiality Agreements (1)	March 17
Project Reports (2-10)	Fridays (Biweekly) April 14- August 4
Final Project Report (11)	August 18
HOS Records Storage Report	September 8

Model QAP

- Compliance with HOS Protocols
- QAPs must follow the Model QAP format in Appendix B of the QAG
-  **NEW**: Document previous administration issues and action to prevent the issues from reoccurring
- Due March 17

Bi-Weekly Project Reports

- Please review the QAG for specific instructions for each report
- Recurring deliverables
 - Narrative reports (Reports 2-8)
 - Summary Status Reports (Reports 3-11)
 - Member correspondence (Reports 2-10)
- One-time deliverable
 - Copy of progress report to MAOs (Report 9)

Narrative Reports


Survey Progress and Survey Vendor Experience

- Overview of mailing status
- Summary of challenges/difficulties encountered
- Experience to date
- Customer support summary statistics

Narrative Reports (cont'd)

- Narrative Report 2:
 - Overview of Baseline pre-notification letter and first questionnaire mailing, printing, and fulfillment processes
 - Verification of mail out date of Baseline pre-notification letter and first questionnaire mailing (e.g., USPS generated report)
 - Status of staff training and SMS development
 - Confirmation of customer support functionality and testing
 - Outstanding issues or concerns
- Narrative Reports 2-5 and 7:
 - Overview of required materials
 - Survey vendor provides a USPS generated report to verify mail out dates for applicable mailing

Narrative Reports (cont'd)

- Narrative Report 6 and 8:
 - Overview of progress to date
 - Describe telephone protocol and training
 - Implementation of telephone interviewing
 - High-level statistics on customer support calls and e-mails
 -  **NEW:** Report on experience with submitting interim data files (Report 8 only)

Summary Status Reports

- Synthesis of data collected to date
- Monitor response rates for each protocol phase and processing of returned mail surveys
- Submit two files (Baseline and Follow-Up) with naming conventions:
 - Survey Vendor Name_SSR_C20B_MM-DD-17.xls
 - Survey Vendor Name_SSR_C18F_MM-DD-17.xls
- Use template provided
 - Updated 2017 SSR template sent via NCQA's Accellion

One-Time Deliverable

Sample of MAO progress reports (Report 9)

- Reports must follow guidelines and only provide information specified in the QAG
 - Summary status report data
- Sending member-specific data is prohibited
- As a reminder, survey vendors are **NOT** permitted to share their own unpublished results

Final Detailed Status Report

- Three components:
 1. Data synthesis (required)
 2. Discussion component (required)
 - a. Survey implementation, issues encountered, lessons learned, recommendations
 3. Recommendations for 2018 HOS Administration (optional)
- Reports used for:
 - Informing QAG updates
 - Process improvement

Seeded Mailings

- Seeded mailings must be created in the member mailing database as a QA tool
- Include the HOS Project Team and CMS in all survey mailings that are sent to members (including pre-notification letters)

Member Correspondence

- White mail only - written notes/letters, notes on cover letters, pre-notification letters, survey covers, or envelopes
- Examples of correspondence to be sent:
 - Comments about the MAO/provider
 - Personal problems
 - Requests for medical assistance and supporting documentation
 - Opinions about the survey instrument or federal government

Member Correspondence (cont.)

- Examples of correspondence not to be sent:
 - Death notices
 - Address changes
 - Language barrier
 - Institution notice
 - Comments written on or throughout the survey, including marginal comments
- Include member contact information for CMS follow-up
- Note: Do not send member correspondence via e-mail

Data Submission

- Baseline and Follow-Up final data files due August 14 (via web)
- Timely submission is required
- Specific instructions provided as data submission approaches
- Late files result in automatic 1-star rating

Blinded Response Rates

- HOS Project Team will provide blinded response rates to survey vendors based on Summary Status Reports on a biweekly basis

Communications

- HOS@ncqa.org
 - Reports and updates
- Phone
 - Call to report/discuss urgent matters immediately and follow-up with e-mail

NCQA's Secure Site Accellion

- All materials and documents sent via Accellion
- Sample files will be sent via Accellion
- Survey vendors can use Accellion to send NCQA copies of electronic mailing materials and other deliverables
- The link to Accellion is:
 - <https://attach.ncqa.org>

Other Resources

- NCQA's Customer Support (1-888-275-7585)
 - To verify legitimacy or for questions about NCQA
- 1-800 Medicare (1-800-633-4227)
 - To verify legitimacy of the survey
 - Complaints, compliments, concerns about Medicare, MAOs, physicians, or care received

Questions?





Questions and Closing

Thank You

- Thank you for your participation!



Post Training Test

Post Training Test Instructions

- Only 1 person from each survey vendor should complete the test
- The test will be administered immediately after the training via WebEx
- Survey vendors have 20 minutes to complete the test