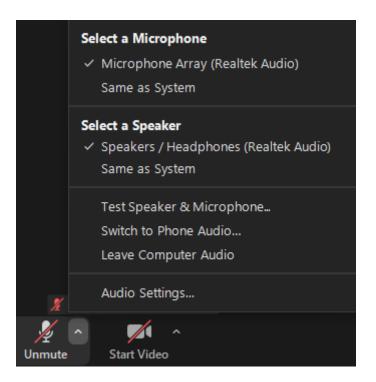


Medicare Health Outcomes Survey 2023 Survey Vendor Update Training

Welcome! Training will begin shortly.

Please make sure to link your audio to the Zoom webinar.

If you have trouble connecting audio, click the arrow to next to microphone icon labeled "Unmute" in the bottom left of the Zoom window.





Medicare Health Outcomes Survey 2023 Survey Vendor Update Training



May 23, 2023



Welcome and Introduction

NCQA

Ruth Boansi, MPH HOS Project Director

2023 Survey Vendor Update Training Agenda

Time (p.m., ET)	Agenda Item	Presenter
1:00 – 1:10 p.m.	Welcome and Introduction	Ruth Boansi
1:10 – 1:25 p.m.	HOS CMS Update	Kim DeMichele
1:25 – 1:45 p.m.	HOS 2023 Administration Updates	Ruth Boansi
1:45 – 2:00 p.m.	HOS 2022 Survey Results	Alana Berrett Jael Rodriguez
2:00 – 2:25 p.m.	Survey Material Updates	Courtney Utter
2:25 – 2:50 p.m.	Data Coding and Data Submission	Tochi Obioha
2:50 – 3:00 p.m.	Break	
3:00 – 3:35 p.m.	Data Management	Alana Berrett Jael Rodriguez
3:35 – 4:00 p.m.	Quality Oversight and Project Reporting	Alyssa Hart
4:00 – 4:10 p.m.	Questions and Closing	Ruth Boansi
4:10 – 4:30 p.m.	Post-Training Test	

Polling Question 1

Where are you joining us from?



HOS CMS Update

CMS

Kim DeMichele, PhD
Contracting Officer's
Representative (COR)

Overview

- Introduction to the HOS
- HOS Primary Goals
- Public Reporting of HOS
- Data Integrity
- HOS and Star Ratings
- Future HOS Enhancements
- Mailing Material Updates
- Data Use Agreements (DUA)

Introduction to the HOS

- Monitors quality of care provided to Medicare beneficiaries enrolled in Medicare Advantage Organizations (MAOs) at the contract-level by measuring self-reported health status, physical and mental functioning, and outcomes of care
- Participants: Medicare beneficiaries aged 18 or older who are currently enrolled in a Medicare Advantage (MA) contract and reside in the U.S. or its territories
 - Baseline: No continuous enrollment requirement
 - Follow-Up: Members resurveyed after two years

HOS Primary Goals

- Provide Medicare enrollees and the general public with information to help them to make more informed choices
- Provide MAOs with metrics that allow them to identify problems and improve quality of care at the contract level
- Enhance CMS's ability to monitor health plan performance
- Measure quality of care from the enrollee's perspective for use in calculating MA Quality Bonus Payments (QBPs)
- Estimate frailty for use in payment adjustment for Fully Integrated Dual Eligible (FIDE) Special Needs Plans (SNP) and Programs of All-Inclusive Care for the Elderly (PACE)

Public Reporting of HOS Data

HOS results are publicly reported by CMS for each participating contract

- Medicare Plan Finder is a consumer-friendly online tool that allows users to compare coverage options (<u>www.medicare.gov</u>)
- HOS data are also included in the Part C and D Star Ratings and used to calculate QPBs (http://go.cms.gov/partcanddstarratings)

Data Integrity

- 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
- Survey vendors must attest to:
 - Validity of HOS data submitted
 - Conformance with HOS protocols
 - Prompt reporting of any discrepancies

Data Integrity (Cont'd)

- MAOs and HOS Vendors MAY NOT:
 - Attempt to influence responses to HOS survey questions
 - Imply that positive feedback will reward or benefit the MAO
 - Offer incentives of any kind
 - Show the HOS questionnaire and cover letter to members
- MAOs and HOS Vendors MAY:
 - Notify all members of a contract that they may be asked to participate in the 2023 HOS
- Encouraging participation without biasing results can be tricky. To avoid jeopardizing a client's results, consult the HOS Project Team if you have questions or concerns.

Star Ratings: Measures

- Five HOS measures for the 2024 Star Ratings
 - Functional Health (Outcome) measures
 - Improving or Maintaining Physical Health
 - Improving or Maintaining Mental Health
 - Data Source: 2020-2022 Cohort 23 Performance Measurement Results (2020 HOS Baseline and 2022 HOS Follow-Up data)
 - HEDIS® Effectiveness of Care measures
 - Monitoring Physical Activity
 - Improving Bladder Control
 - Reducing the Risk of Falling
 - Data Source: Cohort 23 Follow-Up (2022) and Cohort 25 Baseline data (2022)

[®] Healthcare Effectiveness Data and Information Set (HEDIS[®]) is a registered trademark of the National Committee for Quality Assurance (NCQA).

Star Ratings: Display Measures

- Both current HOS longitudinal (outcome) measures are temporarily on public display
 - Improving or Maintaining Physical Health
 - Improving or Maintaining Mental Health
- A potential new measure is also on display
 - Physical Functioning Activities of Daily Living (PFADL) (under development and on display since 2021)
- Display measures are publicly available for informational purposes but are not used in the Star Ratings calculations

Future HOS Enhancements

- CMS continues to explore ways to enhance HOS and provide MAOs with actionable feedback about their enrollee populations
- Present work includes efforts to:
 - Develop and test new measures
 - Update the current HOS 3.0 instrument and remove some items
 - Test adding a web mode to the current mail-phone protocol
- Additional information can be found in the <u>2024 Medicare Advantage Rate Announcement</u>

Mailing Material Updates

- NEW: Updated the prenotification letter and cover letters using plain language principles and other research conducted by CMS
- NEW: Removed survey vendor names and logos from mailing materials and questionnaire
- Consumer research testing by CMS found:
 - CMS logo and "Medicare" were more recognized
 - Enrollees were less likely to open and return a survey that displayed a survey company name or logo
 - Some enrollees were confused when both the CMS name or logo and the survey company's name or logo were used in the mailing materials

Data Use Agreement (DUA) Terms and Restrictions

- Each HOS survey vendor must maintain a current, updated, and fully-executed DUA
- By signing the DUA Addendum, the vendor's subcontractors and all personnel agree to ensure integrity, security, and confidentiality of CMS and HOS data
- Survey vendors and subcontractors may not release CMS or HOS data to any entity not listed on the CMS DUA, including MAO clients and MA members
- Survey vendors are prohibited from using HOS sample files for any other purpose, including de-duplicating samples for other client surveys

Annual DUA Process

- CMS-approved HOS vendors must complete the following steps in Enterprise Privacy Policy Engine (EPPE):
 - Verify only current staff and subcontractors are listed; update if needed
 - Submit signed <u>Addendum</u> to add individuals or organizations to DUA
 - Update DUA to add 2023 HOS data by June 5, 2023
- Submit updated DUA to HOS Project Team by June 9, 2023
- Notify HOS Project Team immediately of any changes in key personnel or subcontractors that occur after initial submission
 - Update DUA to add or remove individuals or organizations within three
 (3) business days of a change and send updated DUA to Project Team
- Extend DUA when prompted and submit an extended DUA to the HOS Project Team by September 28, 2023

Questions?





HOS 2023 Administration Updates

NCQA

Ruth Boansi, MPH
HOS Project Director

Overview

- HOS Instrument Updates
- Data Collection Overview
- Data Collection Timeline
- HEDIS Volume 6 Updates
- Fielding Non-CMS Surveys

HOS Instrument Updates

- NEW: CMS implemented the following changes to the HOS instructions page for 2023
 - Added instructions for proxies completing the survey on behalf of the member to answer in the way the member would answer for themselves
 - Removed HIPAA disclaimer box
 - Removed "Version 02-01" from the OMB footnote

Data Collection Protocol

- Mixed mode data collection
- Longitudinal to assess health over time
 - Sample member at Baseline, then resurvey two years later at Follow-Up
- English, Spanish, Chinese, and Russian
 - Russian protocol: mail only

Standardized Data Collection

- Survey vendors must use the standardized data collection protocol outlined in Medicare HOS Quality Assurance Guidelines and Technical Specifications V2.7 (QAG)
- Standardized data collection ensures survey data collected across contracts by CMS-approved HOS survey vendors are comparable
- Survey vendors may not change the wording or order of HOS questions, mailing materials, or the telephone script

Mail Protocol

- Standardized mailing materials and questionnaire
 - Prenotification letter
 - Two survey mailings containing survey cover letter, questionnaire, and business reply envelope
 - NEW: The HOS mailing protocol no longer includes reminder postcard mailings for any language

Mail Protocol (Cont'd)

- Survey vendors send mailing materials as assigned by the member's protocol path
- Survey vendors may **not** send materials to a member that differ from the member's assigned protocol path

Telephone Protocol

- Members in telephone phase:
 - Did not respond to mail questionnaire
 - Returned a blank or partially complete questionnaire
- Standardized telephone interviewing script and specifications
- Must have enough interviewers to support data collection timeline

- Survey vendors must make multiple telephone attempts to reach nonrespondents
 - NEW: The maximum attempts to a single dialed telephone number is five
 - NEW: After five attempts to a single number,
 no further attempts are made to that number
 - NEW: If a second or third number is available, survey vendors must dial these numbers

- Telephone attempts must occur on
 - Different times of day
 - Different days of the week
 - Different weeks (at least three calendar weeks)
 - 9 a.m. to 9 p.m. call window (member local time)
- The 1st call attempt must occur within the first 10 calendar days of the telephone protocol
- The 5th attempt must occur no sooner than 21 calendar days after the 1st call attempt
- Interviewers may not leave voicemail messages

- Survey vendors are responsible for properly implementing the telephone protocol, including:
 - Proper training of interviewers
 - Following CATI script verbatim
 - Making calls in a quiet environment
 - Properly programming telephone specifications
- Interviewers must be trained on how to address technical issues (e.g., system failure) during a telephone interview
 - All processes must be documented in the survey vendor's Quality Assurance Plan (QAP)

- Caller ID Enhancement
 - NEW: Caller IDs may be programmed, with the permission of the health plan's HIPAA/Privacy Office with "on behalf of [Health Plan Name]"
 - NEW: May not code display as:
 - Only "[Health Plan Name]"
 - "on behalf of [Medicare]"

 NEW: Survey vendors may begin obtaining telephone numbers from MAOs as soon as contracting agreements are in place

Determining Language Preferences

- Survey vendors work with MAOs to determine language preferences for the Baseline survey
- Survey vendors must use the Protocol Identifier Flag to determine which language to contact the member or proxy for the Follow-Up protocol unless the member or proxy requests otherwise

Russian Survey Administration

- Russian is a mail-only protocol
 - NEW: Two standardized mailing materials and questionnaires
 - There are no reminder/thank you postcard mailings after each questionnaire mailing
 - If a member received a mail survey questionnaire in Russian but would like to take the survey over the phone in English, Spanish, or Chinese (if applicable), the survey vendor must allow this

Customer Support Services

- Survey vendors must institute processes to accommodate English and Spanish incoming calls and email correspondence
- Survey vendors who field Chinese and Russian must institute processes to respond to calls and email correspondence in Chinese and Russian

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 memberidentifying information
 - NEW: Survey vendors will no longer be provided a supplemental file
 - MAOs will provide addressees and telephone numbers for their entire membership
- Provide only the 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 and DUA

Subcontractor Oversight

- Store electronic images, files, and recordings on the survey vendor's systems and retain per QAG record storage requirements
- Conduct onsite and remote quality checks and monitoring
- Ensure subcontractors participate in quality oversight activities conducted by the HOS Project Team

Subcontractor Oversight (Cont'd)

- Survey vendors who use telephone subcontractors must participate in call monitoring in addition to the subcontractor's independent monitoring
 - Survey vendors must conduct a sufficient percentage of telephone interviewer monitoring to identify issues with interviews completed by its subcontractors
 - Survey vendors must monitor at least 10 percent of internal telephone interviews and 10 percent of subcontracted telephone interviews (if applicable)

Sharing Data with Clients

- Limit data reported to MAOs to sample size and frequency distributions for each final disposition code at the contract level only, which are the data elements contained in biweekly summary status reports
- Do not share any sample file variables
- Do not report any calculations or results of HOS measures to MAOs

Data Collection Timeline

Task	Date (2023)
Send sample files to vendors	June 26
Mail Baseline and Follow-Up prenotification letter	July 17
Open survey vendor customer support telephone and email	July 17
Open inbound electronic telephone interviewing	July 17
Mail Baseline and Follow-Up first questionnaire	July 24

Data Collection Timeline (Cont'd)

Task	Date (2023)
Mail Baseline and Follow-Up second questionnaire	August 28
Conduct Baseline and Follow-Up outbound telephone interviewing	September 18 – November 1
Submit interim data files	October 3 – October 5
End Baseline and Follow-Up data collection	November 1
Prepare and submit final data files	November 2 – November 15
Final data files due	November 15

Data Retention

- Retain all data files, audio recordings, questionnaires (electronic or paper) onsite for a minimum of three years
 - Paper Questionnaires: Must be retained onsite through December 31 of the following survey administration year
 - May destroy after one year following electronic imaging and QA
 - Retain for three years if an electronic image is not created
 - Telephone Data: Retain onsite all telephone survey data and recordings in all fielded languages, including subcontractor telephone interview recordings
- Establish a process for data destruction after three years and complete attestation of data destruction



HEDIS Volume 6 Updates

Summary of Changes

- NEW: Removed reminder/thank-you postcards from the mail protocol description and Appendix materials
- NEW: Updated telephone attempt guidance
- NEW: Updated all mailing materials with plain language edits and revisions



Fielding Non-CMS Surveys with HOS Questions

Fielding Non-CMS Surveys with HOS Questions

- NCQA prohibits survey vendors from fielding surveys containing HOS questions eight weeks prior to and during the official HOS administration (May through November)
- In addition, CMS strongly discourages MA contracts and survey vendors from fielding other non-CMS surveys to enrollees eight weeks prior to and during the official HOS administration
- Fielding surveys similar to the HOS, even in the offseason, may negatively impact HOS response rates
 - If HOS response rates are too low, contracts risk not having enough data to calculate measure scores or Star Ratings, which could impact quality bonus payments

Fielding Non-CMS Surveys with HOS Questions (Cont'd)

- To download the HOS and HOS-M questionnaires and HEDIS Volume 6, visit NCQA's HOS webpage
- Survey vendors fielding off-cycle, non-CMS sponsored surveys using the HOS or HOS-M instruments or questions derived from the HOS must complete an HOS <u>Survey Use Application</u> and acknowledge and sign the HOS Terms of Use
- HEDIS Volume 6 is accessible from the <u>NCQA Store</u>

Questions?





HOS 2022 Survey Results

Health Services
Advisory Group

Alana Berrett, MPH Research Analyst Jael Rodriguez, MPH Healthcare Analyst

Overview

- HOS 2022 Survey Administration
- Response Rate Trends
- Survey Response Rates
 - Cohort 25 Baseline
 - Cohort 23 Follow-Up
- Survey Disposition Components
 - Cohort 25 Baseline
 - Cohort 23 Follow-Up
- Key Points

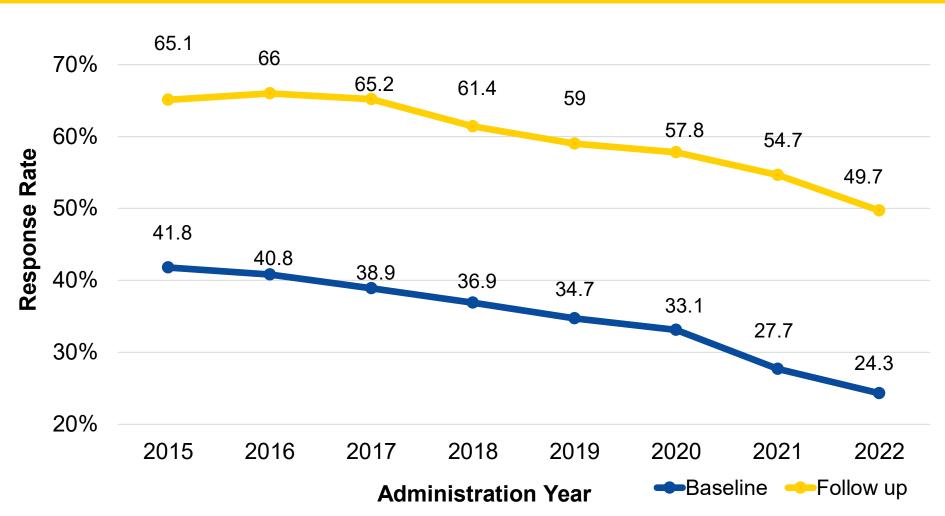
HOS 2022 Survey Administration

- Three survey vendors administered HOS
- Survey vendors randomly assigned a letter (A-C) for this presentation

Survey	Number of Contracts
Total Unique Contracts	624
Cohort 25 Baseline	621
Cohort 23 Follow-Up	489

Response Rate Trends

Rounds 18-25 Baseline and Follow-Up Surveys: 2015–2022



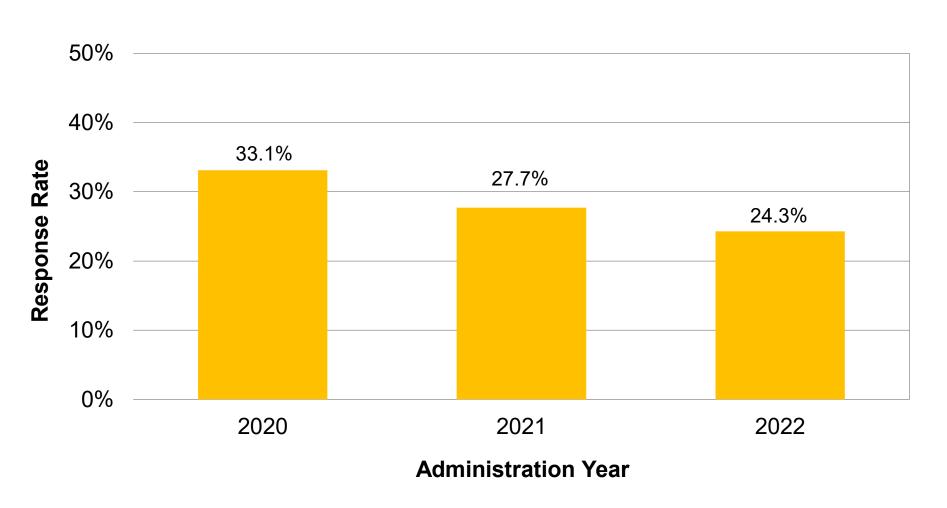


Survey Response Rates

Cohort 25 Baseline

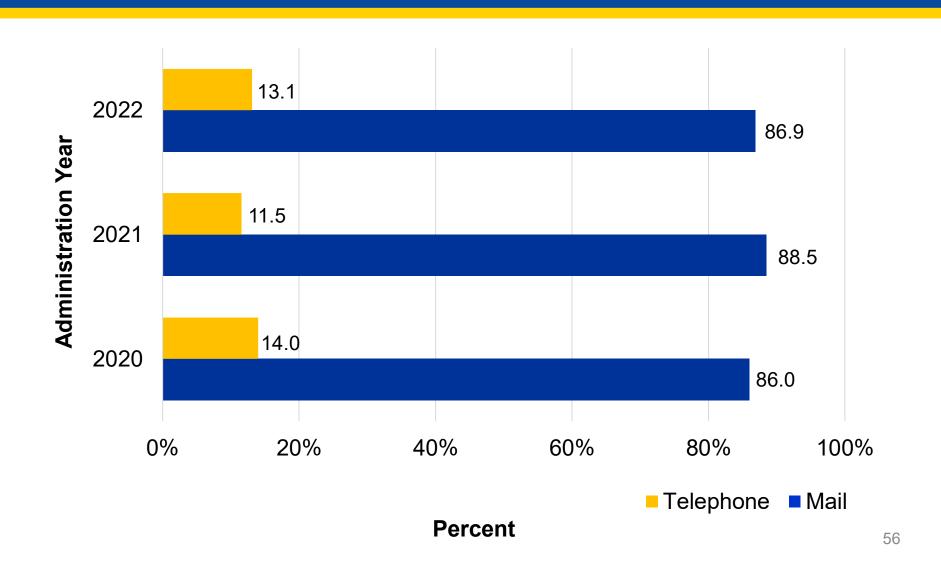
Overall Response Rates Trend

Cohorts 23-25 Baseline Surveys: 2020-2022



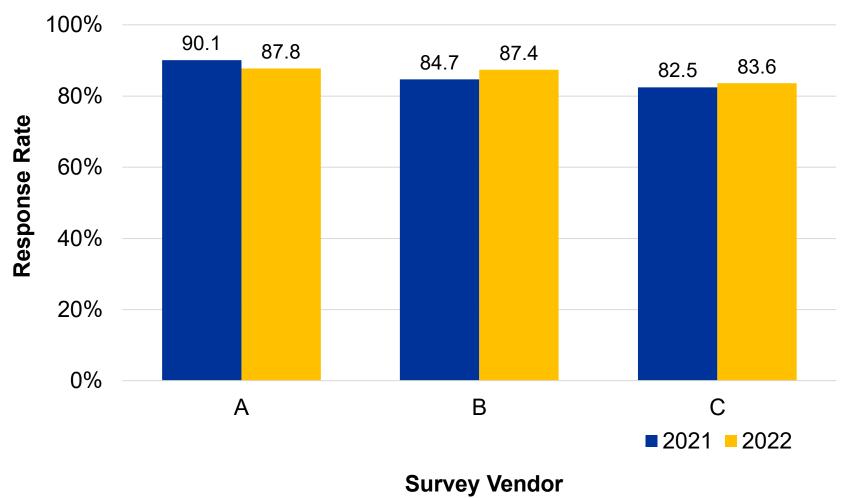
Completed Surveys by Mode

Cohorts 23-25 Baseline Surveys: 2020-2022

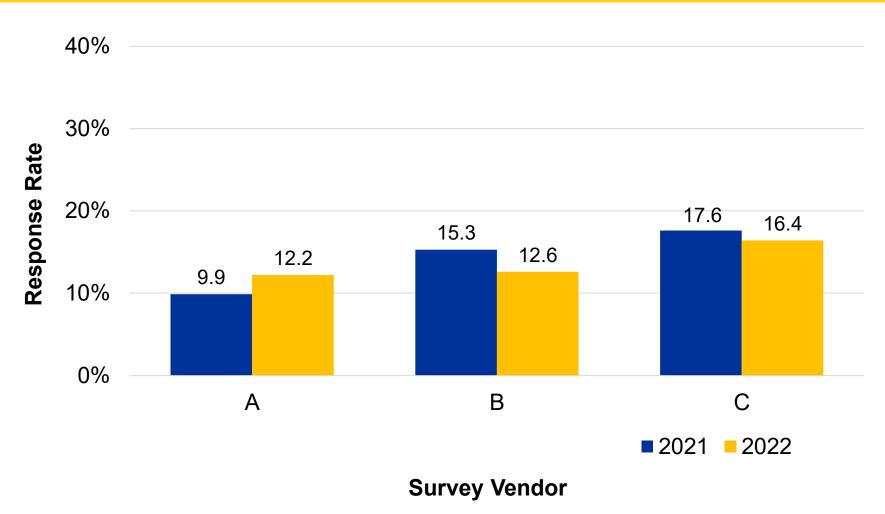


Completed Mail Survey Rates by Vendor

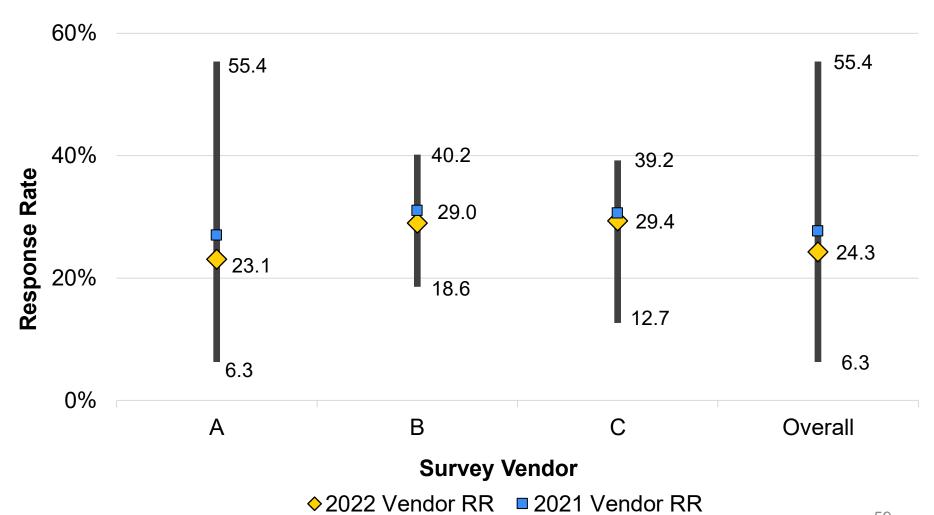
Cohorts 24-25 Baseline Surveys: 2021-2022



Completed Telephone Survey Rates by Vendor Cohorts 24-25 Baseline Surveys: 2021-2022

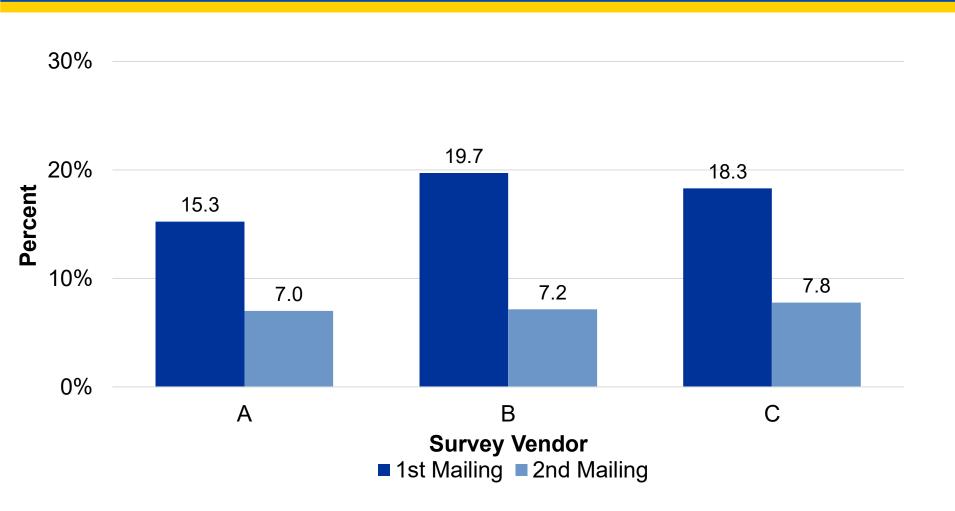


Variability of Completed Survey Rates by Vendor Cohort 25 Baseline Survey: 2022

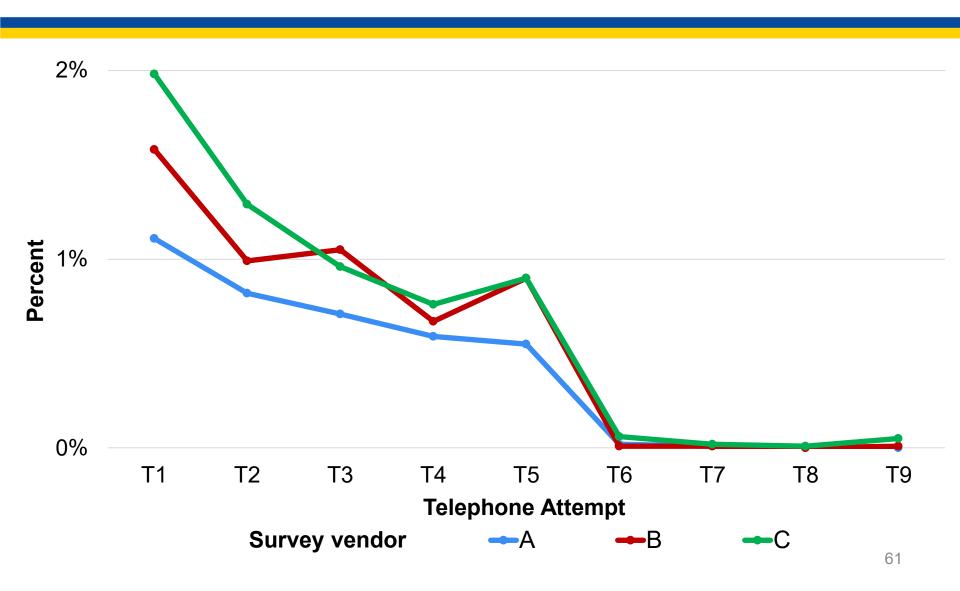


Percent of Sample Responding by Mail

Cohort 25 Baseline Survey: 2022



Percent of Sample Responding by Telephone Cohort 25 Baseline Survey: 2022



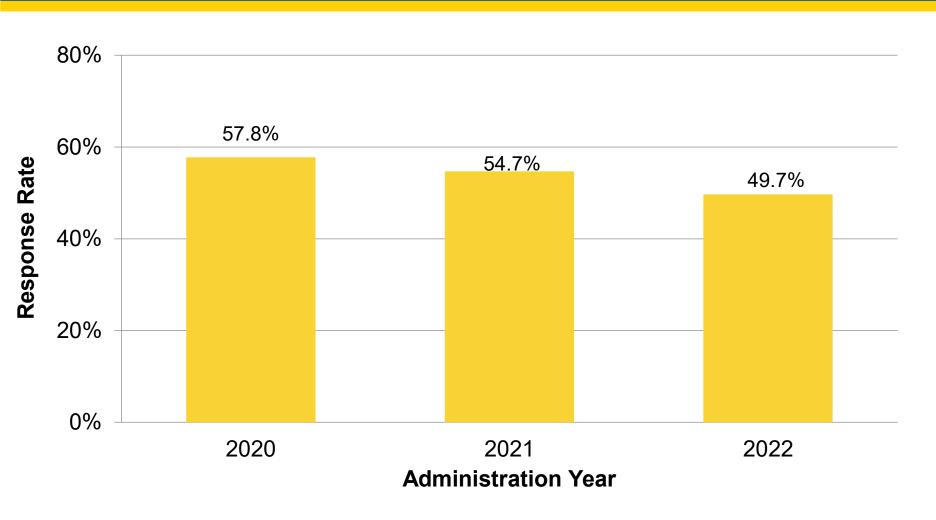


Survey Response Rates

Cohort 23 Follow-Up

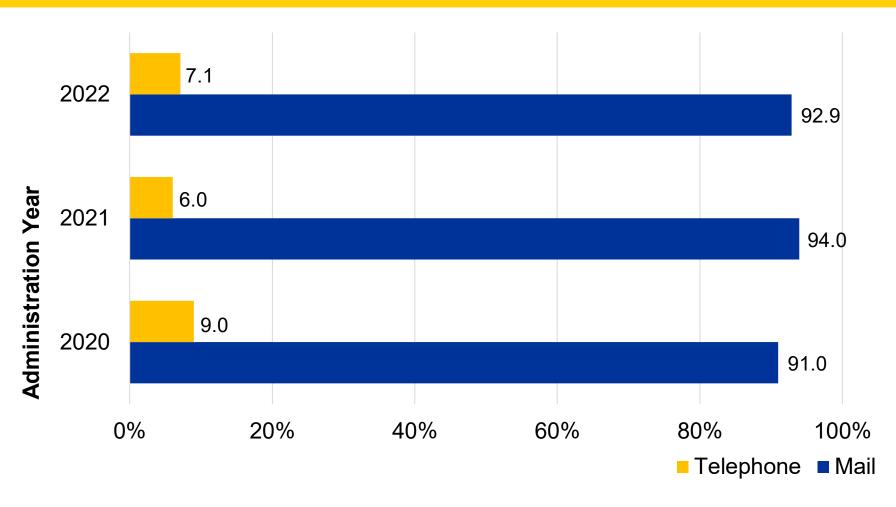
Overall Response Rates Trend

Cohorts 21-23 Follow-Up Surveys: 2020-2022



Completed Surveys by Mode

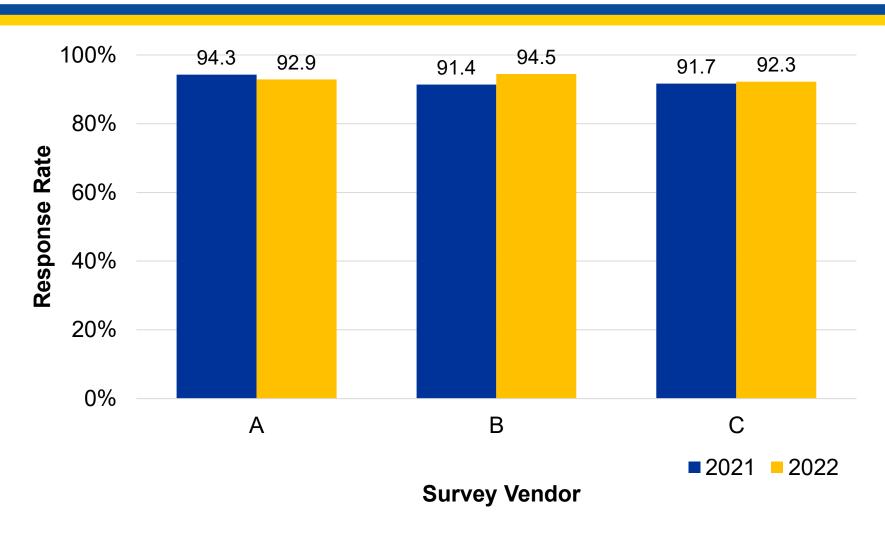
Cohorts 21-23 Follow-Up Surveys: 2020-2022



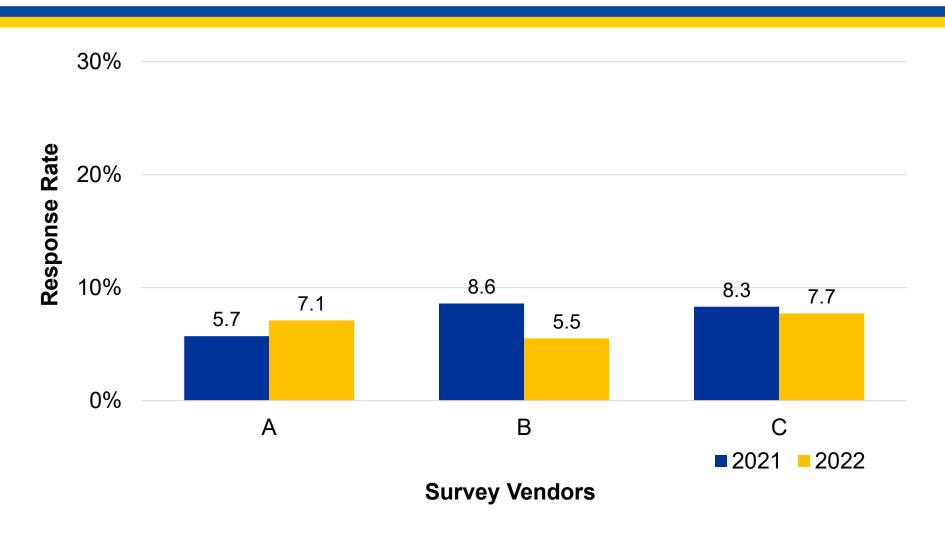
Percent

64

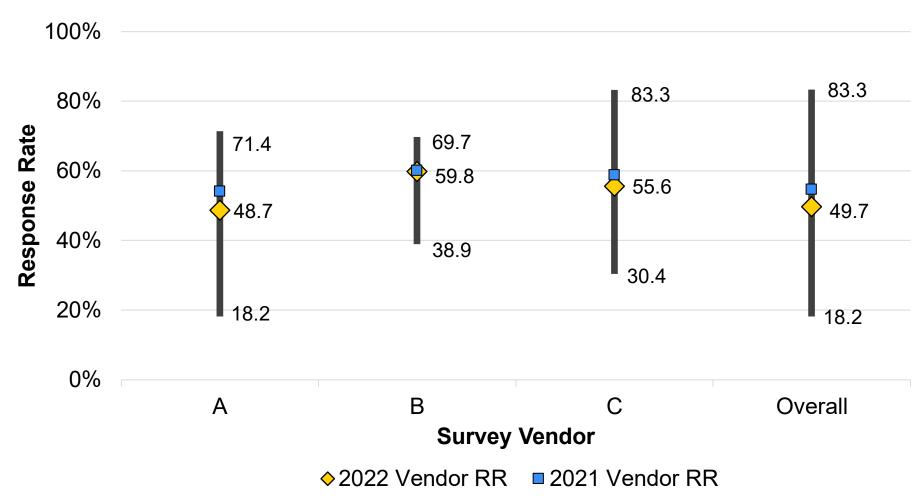
Completed Mail Survey Rates by Vendor Cohorts 22-23 Follow-Up Surveys: 2021-2022



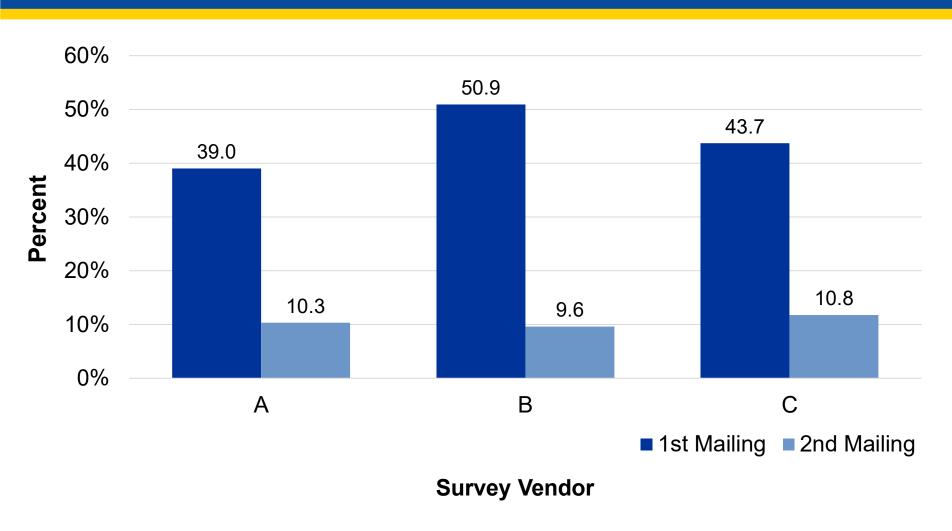
Completed Telephone Survey Rates by Vendor Cohorts 22-23 Follow-Up Surveys: 2021-2022



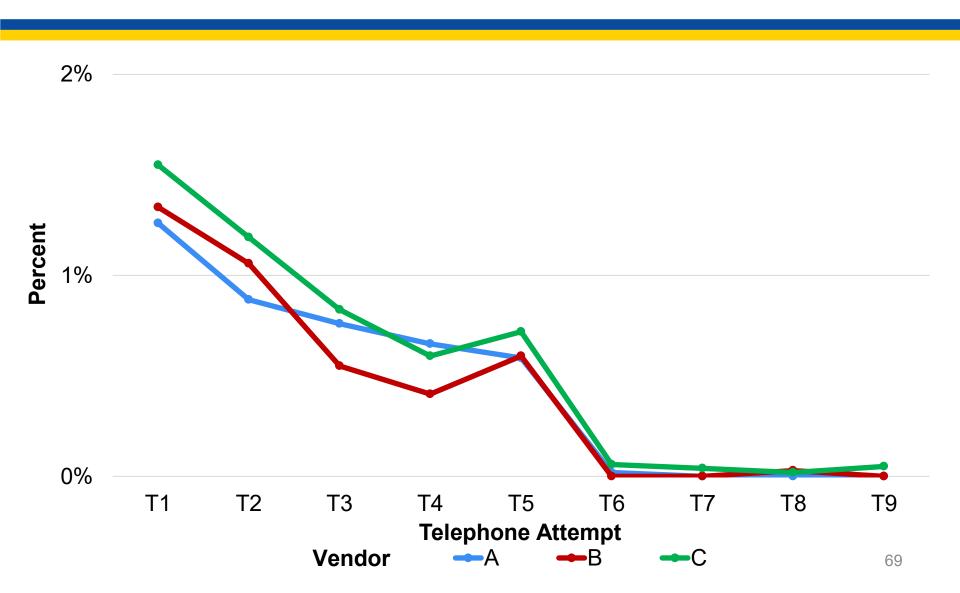
Variability of Completed Survey Rates by Vendor Cohort 23 Follow-Up Survey: 2022



Percent of Sample Responding by Mail Cohort 23 Follow-Up Survey: 2022



Percent of Sample Responding by Telephone Cohort 23 Follow-Up Survey: 2022

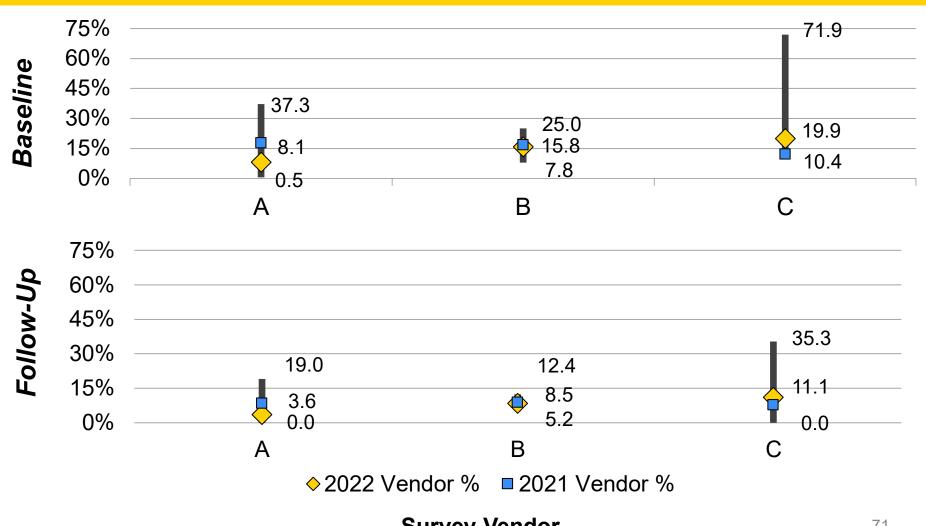




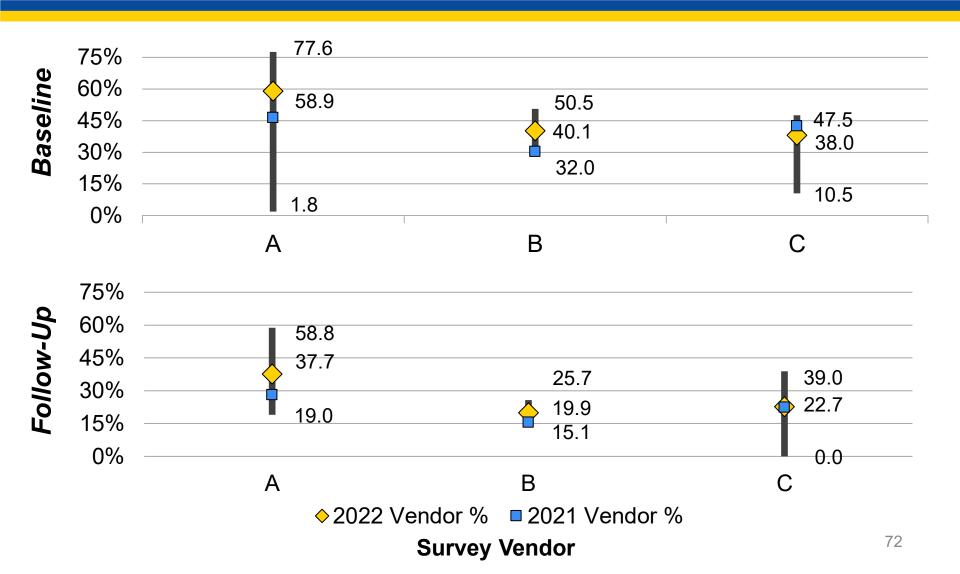
Survey Disposition Components

Cohort 25 Baseline and Cohort 23 Follow-Up

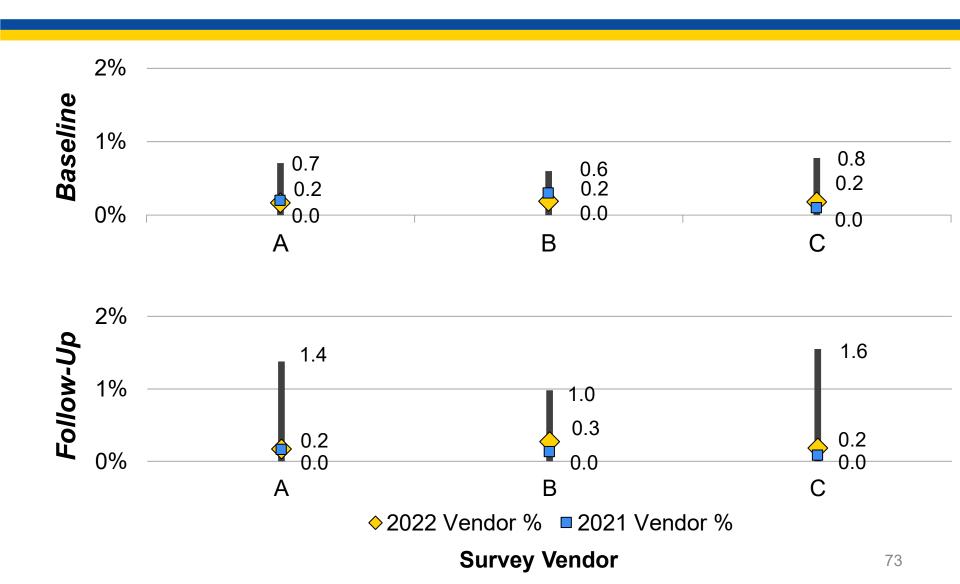
Mail Nonresponse After Max Attempts: M36



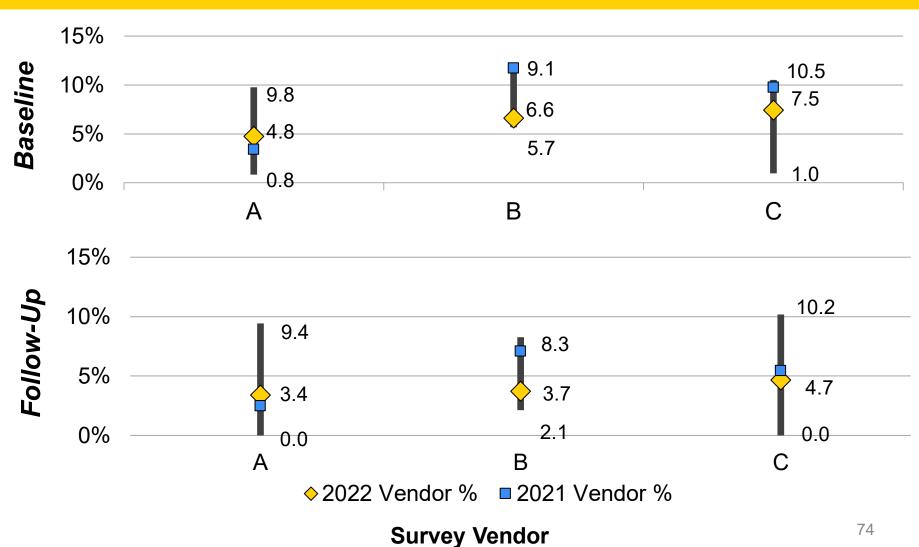
Telephone Nonresponse After Max Attempts: T36



Mail Refusal: M32



Telephone Refusal: T32



Key Points

- Both Baseline and Follow-Up response rates continued to decrease in 2022
- Over 85% of surveys completed by mail
- First mailing captures larger number of respondents than second mailing
- Similarly, first telephone attempt obtains most responses while subsequent attempts have a decreased success trend
- Wide ranges in response rates across contracts were evident for some survey vendors

Questions?





Survey Material Updates

NCQA

Courtney Utter, BS HOS Project Analyst

Overview

- Mailing Material Updates
- Instrument Updates
- Telephone Specification Updates
- Customer Support and FAQ Updates

Mailing Material Updates

Questionnaire

NEW: Updated HOS Questionnaire Cover

Prenotification and Cover Letters

- NEW: All Prenotification and Cover Letters in all languages were updated by CMS using plain language guidelines
 - Baseline and Follow-Up Prenotification Letters
 - Baseline Cover Letters
 - Follow-Up (No Proxy) Cover Letters
 - Follow-Up (Proxy) Cover Letters

Mailing Material Updates (Cont'd)

Postcard

 NEW: Removed the Reminder/Thank-You Postcard from mailing materials and HOS protocol

CMS Letterhead

- NEW: CMS return address and survey vendor names removed from CMS letterhead for cover letters <u>only</u>
 - Prenotifications letters will still include CMS's return address on CMS letterhead

Centers for Medicare & Medicaid Services c/o Survey Processing [SURVEY VENDOR RETURN ADDRESS]



CENTER FOR MEDICARE

Mailing Material Updates (Cont'd)

 NEW: On all outgoing envelopes survey vendors will use the following block format:

[CMS logo] c/o Survey Processing [survey vendor mailing address]

Business reply envelope may use either CMS logo or "Centers for Medicare & Medicaid Services"

Mailing Material	Logo/Letterhead
Prenotification Outgoing Envelope	CMS logo with c/o Survey Processing (and survey vendor return address)
First and Second Questionnaire Outgoing Envelope	CMS logo with c/o Survey Processing (and survey vendor return address)
Business Reply Envelope	CMS logo with c/o Survey Processing (and survey vendor return address) or "Centers for Medicare & Medicaid Services" with c/o Survey Processing (and survey vendor return address)

Instrument Updates

 NEW: Added proxy information and removed HIPAA language from the instructions page

 NEW: All English wording in Chinese materials updated to sans serif font for readability

Instrument Updates (cont'd)

- NEW: Updated third sentence in instructions to correct the characters for the word "about" in Chinese questionnaire
- NEW: Updated character for "we" Question 8 introduction in Chinese questionnaire

Telephone Specification Updates

 NEW: Moved the interviewer instructions for Question 54d1 and Question 54k1 (Race/Ethnicity)

>Q54d1<	>Q54d1<
Are you Asian?	Is [he/she] Asian?
IF YES: {READ ALL CATEGORIES IN PARTS Q54d-j.}	IF YES: {READ ALL CATEGORIES IN PARTS Q54d-j.}
<0> NO OR NOT ASCERTAINED	<0> NO OR NOT ASCERTAINED
<1> YES [Q54k1] [Q54d]	[Q54k1] <1> YES [Q54d]
>Q54k1<	>Q54k1<
{Are you} Native Hawaiian or Other Pacific Islander?	{Is [he/she]} Native Hawaiian or Other Pacific Islander?
IF YES: {READ ALL CATEGORIES IN	IF YES: {READ ALL CATEGORIES IN
PARTS Q54k-n.}	PARTS Q54k-n.}
<0> NO OR NOT ASCERTAINED [Q55a]	<0> NO OR NOT ASCERTAINED
<1> YES [Q54k]	[Q55a]
	<1> YES [Q54k]

Telephone Specification Updates (cont'd)

 NEW: Updated the fourth response option for Question 61 from "A Professional Caregiver" to "Caregiver"

> Q61 WHO	< ARE YOU INTERVIEWING	?	> Q61 WHO	< ARE YOU INTERVIEWING?	,
<1>	PERSON TO WHOM SURV ADDRESSED,	EY WAS [Q1]	<1>	PERSON TO WHOM SURVADDRESSED,	EY WAS [Q1]
{IF SOMEONE ELSE, PROBE: How are you related to [MEMBER NAME]? Are you a:}			{IF SOMEONE ELSE, PROBE: How are you related to [MEMBER NAME]? Are you a:}		
<2> <3> <4>	family member or relative, a friend, or a caregiver?	[Q62] [Q62] [Q62]	<2> <3> <4>	family member or relative, a friend, or a caregiver?	[Q62] [Q62] [Q62]
<9>	NOT ASCERTAINED	[Q62]	<9>	NOT ASCERTAINED	[Q62]

Telephone Specification Updates (cont'd)

• NEW: Spanish member script updated for to use the correct wording for "give me".

>Q6a<

Las siguientes preguntas se refieren a cómo se siente usted y a cómo le han ido las cosas durante las **últimas 4 semanas**. Por cada pregunta que le lea, por favor deme la respuesta que más se acerca a la manera como se ha sentido usted.

¿Cuánto tiempo durante las **últimas 4** semanas se ha sentido tranquilo(a) y sosegado(a)? ¿Diría que:

- <1> Siempre,
- <2> Casi siempre,
- <3> Muchas veces,
- <4> Algunas veces,
- <5> Casi nunca, o
- <6> Nunca?
- <9> NOT ASCERTAINED

>Q6a<

Las siguientes preguntas se refieren a cómo se siente [MEMBER NAME] y a cómo le han ido las cosas durante las **últimas 4 semanas**. Por cada pregunta que le lea, por favor deme la respuesta que más se acerca a la manera como se ha sentido [él/ella].

¿Cuánto tiempo durante las **últimas 4** semanas [él/ella] se ha sentido tranquilo(a) y sosegado(a)? ¿Diría que:

- <1> Siempre,
- <2> Casi siempre,
- <3> Muchas veces,
- <4> Algunas veces,
- <5> Casi nunca, o
- <6> Nunca?
- <9> NOT ASCERTAINED

[Q6b]

[Q6b]

Customer Support Updates

Toll-Free Customer Support Telephone

 Lines must have sufficient capacity so that 90 percent of incoming calls each day are answered "live"

After-Hours Greetings

- After-hours greeting must reference the Medicare Health Outcomes Survey, regular call hours, and that calls will be returned within 24 hours (or the next business day)
 - The after-hours greeting must be presented in English and Spanish (and Chinese and Russian, if applicable)

Questions?



Polling Question 2

What should be listed on the cover letterhead under CMS and above the survey vendor return address?



Data Coding and Data Submission

NCQA

Tochi Obioha, MPH HOS Task Lead

Overview

- File Specifications Review
- File Layout Changes
- Data Coding Guidelines
 - Decision Rules
 - Percent Complete
 - Disposition Codes
- Data Submission Process
 - Data Validation
 - Prepare and Submit Data Files
 - Data Submission

File Specifications Review

- Submit survey data in .txt file format
- One text file for each MA contract with record-level data for sampled members
- Sample file data included in data submission files must match original sample file data
 - No changes or modifications permitted

File Specifications Review (Cont'd)

- Two records
 - Header Record: Contract-level information
 - Member-Level Record: Member-level information
 - Sample File Layout
 - Survey File Record Layout

File Layout Changes

Supplemental File Layout

 NEW: Removed Supplemental File Process and Supplemental File Layout

Survey File Record Layout

- NEW: Survey Completion Date valid values
 - Updated valid values to align with 2023 survey administration dates

Field	Field Position			Valid Values
Description	Start	End	Length	
Survey Completion Date	281	288	8	MMDDYYYY 07172023 - 11012023 <i>July 17, 2023 - November 1, 2023</i> 9999999 = Not applicable

Decision Rules

Open-ended Questions

- Q55b (Primary Language Please Specify)
 - Code response exactly as provided, regardless of appropriateness
- Q62a and Q62b (Proxy First and Last Name)
 - Code response exactly as provided, regardless of appropriateness
 - Clean the data only in the following instances:
 - Separate Last Name and First Name into their own fields
 - Romanize Traditional Chinese or Cyrillic characters for interim and final data files

Decision Rules (Cont'd)

- Illegible data for Q55b and Q62
 - Record response as ILLEGIBLE
 - Use all caps
 - Do NOT use any punctuation

Percent Complete

- HOS contains 79 potential response items
- Exclude 12 skip pattern items from calculation
 - Q14, Q32a-32e, Q39, Q40, Q41, Q43, Q60, Q62
 - Note: Q52b is excluded from percent complete calculation because it is only asked in the telephone survey as part of a skip pattern

$$\% Complete = \frac{Total \ Number \ of \ Answered \ Items \ (Exclude \ Skip \ Pattern \ Items)}{Total \ Response \ Items - Excluded \ Items} \ X \ 100$$

Percent Complete (Cont'd)

- An HOS survey is considered complete if it is 80 percent or more complete with all six ADL questions (Q10a-f) answered
- Once an HOS survey reaches 80 percent or more complete with all six ADL questions, no further attempts are made to the member

Disposition Codes

Coding Demographic Fields

- Survey vendors do NOT code a record T31 if only demographic information is collected from member or proxy
 - Only Q61 and Q62 answered
 - Interview ends before Q1
- Continue telephone attempts to reach the member or proxy to complete the survey. Survey vendors must make up to 5 telephone attempts to each available telephone number

Data Coding Guidance (Cont'd)

Assigning Survey Vendor-Generated Variables

- All survey vendor-generated variables should be associated with the round in which the data were collected
- Telephone Interviewer ID variable should be associated with the telephone attempt corresponding to final disposition code and to the telephone interviewer who conducts the telephone interview

Data Coding Guidance (Cont'd)

Survey Round

 NEW: Beginning with the 2023 HOS survey, telephone disposition code of T9 indicates 9 or more telephone attempts.

Field Description	Field Position		Field	Valid Values
	Start	End	Length	
Survey Round	280	281	2	T1 = 1st telephone T2 = 2nd telephone T3 = 3rd telephone T4 = 4th telephone T5 = 5th telephone T6 = 6th telephone T7 = 7th telephone T8 = 8th telephone T9 = 9th telephone or greater

Data Submission Process

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

Data Validation

- Conduct record-level evaluations
- Confirm files contain a record for each member sampled in MA contract
- Compare data submission file to original sample file for an exact match across select variables
- Four general types of validations
 - Valid values, logic variable agreement, skip pattern logic, survey completion level

Prepare and Submit Data Files

- Submission and Organization IDs will be provided in the Header Record
- Submit all interim and final data files via the HOS Interactive Data Submission System (IDSS)
 - Survey vendors will receive instructions closer to the scheduled data submission periods
- Upload maximum of 80 files across all folders within a zip file
- Allow each zip file to process before uploading another

Prepare and Submit Data Files (Cont'd)

- Error Messages
 - Correct and re-upload data files
 - Cannot complete submission or mark files as "Final" unless all errors corrected
- Warning Messages
 - Review all warning messages
 - Verify accuracy of data

Interim Data Submission

- Allows opportunity to investigate data submission issues before Final Data Submission
- System opens Tuesday, October 3 and closes
 Thursday, October 5
- All data received up to three business days prior to the Interim Data Submission due date (Monday, October 2) must be processed and submitted

Interim Data Submission (Cont'd)

- Survey vendors review records thoroughly prior to submission to confirm all data are accurate
- Interim data files will be cleaned and analyzed
- The HOS Project Team will provide findings to survey vendors, if applicable, prior to Final Data Submission
- Data collection issues identified during Interim Data Submission may warrant Discrepancy Reports
- Survey vendors must correct any issues identified prior to Final Data Submission

Final Data Submission

- Final Data Submission opens Thursday,
 November 2
- Complete data attestation prior to marking files "Final"
- Final data files due Wednesday, November
 15
- Final data files will be cleaned and analyzed
 - Data collection issues identified during Final Data Submission may warrant Discrepancy Reports

Questions?



Break





Data Management

HSAG

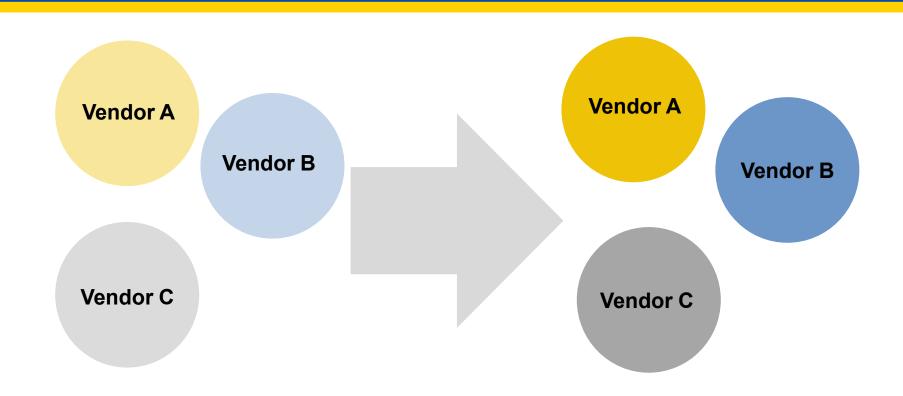
Alana Berrett, MPH Research Analyst

Jael Rodriguez, MPH Healthcare Analyst

Overview

- Data Submission and Review Process
- HSAG's Data Evaluation Process
- Types of Discrepancies Investigated
- Suggested Quality Checks for Survey Vendors
- MA Contract Data Requests for Cohort 22
- HOS Case-Mix
- PFADL Change Score Measure

Data Submission and Review Process



Interim data submission to NCQA

Final data submission to NCQA

HSAG's Data Evaluation Process

- Survey vendors submit plan-level text files to NCQA
- Upon receipt of survey vendor text files from NCQA,
 HSAG combines files into one data set and examines vendor, mode, and language differences
 - Compares response distributions for missing values and variations from historical values
 - Identifies potential response issues for new and modified survey items

Types of Discrepancies Investigated

Questionable Data Distributions

Skip Pattern Violations

Out of Range Values

Inconsistent or Missing Data

Inappropriate Cleaning

Missing Sections

Questionable Data Distributions

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

Skip Pattern Violations

- Skip pattern violations by members in mail survey data <u>are expected</u>
 - Further investigation may be warranted when no skip pattern violations are found across questions that commonly have such violations
- Skip pattern violations in telephone data <u>are</u>
 NOT expected
 - Further investigation may be warranted when skip pattern violations are found in telephone records

Out of Range and Inappropriate Values

- Verify response validity by conducting range checks for survey fields
- Identify data value shifts due to field misalignment in survey vendor text files
- Verify dates are within appropriate ranges
 - Survey dates should correspond to the survey administration window
- Verify appropriate values for the height in feet field
 - More likely between 4-6 feet than above 6 feet or below 4 feet

Inconsistent or Missing Data

- Compare values in member-level data provided by CMS with respondents' survey data
 - Race
 - Gender
- Verify administrative survey fields
 - Round Number
 - Survey Disposition
 - Survey Language
 - Survey Dates
 - Do Not Survey Flag
 - Electronic Telephone Interviewer ID

Inconsistent or Missing Data (Cont'd)

- Investigate inconsistencies across fields
 - Frequency of "ineligible" surveys among survey vendors
 - Percent complete of the survey portion of each record
 - Percent complete vs. survey dispositions
 - Round numbers vs. survey dispositions
- Review similar survey fields for internal consistency
 - Correlations between similar item responses

Example 1: Missing Data

Q52a. Are you male or female? (Survey Gender)

9 = missing

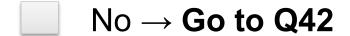
Survey Disposition

T10 or T11

Example 2: Inappropriate Missing Pattern

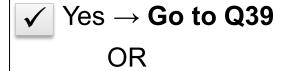
 Q38: Many people experience leakage of urine, also called urinary incontinence. In the <u>past</u> <u>6 months</u>, have you experienced leaking of urine?





Inappropriate Missing Pattern (Cont'd)

Answer to Q38:



✓ No \rightarrow Go to Q42

Answer of "Yes" or "No" Indicates go to Q39 or Q42, respectively

Q39: During the **past** six months, how much did leaking of urine make you change your daily activities or interfere with your sleep?

Answer & proceed to Q40-41

Months, did you talk with a doctor or other health provider about your level of exercise or physical activity? For example, a doctor or other health provider may ask if you exercise regularly or take part in physical exercise.

Proceed as indicated

Inappropriate Cleaning: Mail Surveys

- Open-ended numeric questions (healthy days, weight, height)
 - Enter as written by respondent, except as directed by QAG
 - Small number of invalid or inappropriate values expected
- Skip patterns
 - Enter 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 survey vendor

Example 3: Inappropriate Cleaning

	Survey Vendor (percent)					
Q. 51 Height in Inches Portion (not corresponding to other examples)	А	В	С			
Valid (00-98)	93.8	92.15	93.75			
Inappropriate Answer (88)	1.23	0.33	0.00			
Missing (99)	4.97	7.52	6.25			

- Unexpected mail survey results with no inappropriate responses for a survey vendor
- Mail survey responses should not be cleaned prior to submission

Missing Responses

- Recognize gate questions
- Examine key questions like Veterans
 RAND 12-Item Health Survey and
 Activities of Daily Living (VR-12, ADLs) for
 unexpected sequences
 - Entire survey section is blank
- Missing data at contract and survey vendor levels
- Variations by survey language

Example 4: Missing Responses

Record	Q1	Q2a	Q2b	Q3a	Q3b	Q4a	Q4b	Q5	Qба	Q6b	Q7	Q8	Q9	Q10a	Q10b	Q10c	Q10d	Q10e	Q10f	Q11a	Q11b	Q11c	Q12
54	2	3	1											1	2	1	1	1	2	1	2	3	2
55	1	2	1											3	3	3	2	2	3	3	2	1	8
56	3	1	1											1	1	2	2	1	2	1	1	2	7
57	1	2	2											2	2	3	2	1	1	3	2	2	0
58	1	2	2											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 Q3a Q9
- Identify and investigate missing response clusters

Suggested Quality Checks for Survey Vendors

- Check telephone records for skip pattern inconsistencies
- Check for missing responses indicating possible coding errors
- Review response distributions for improbable results in mail surveys
- Identify coding errors in fields with extreme frequencies (0% or 100%) for any one response

Suggested Quality Checks for Survey Vendors (Cont'd)

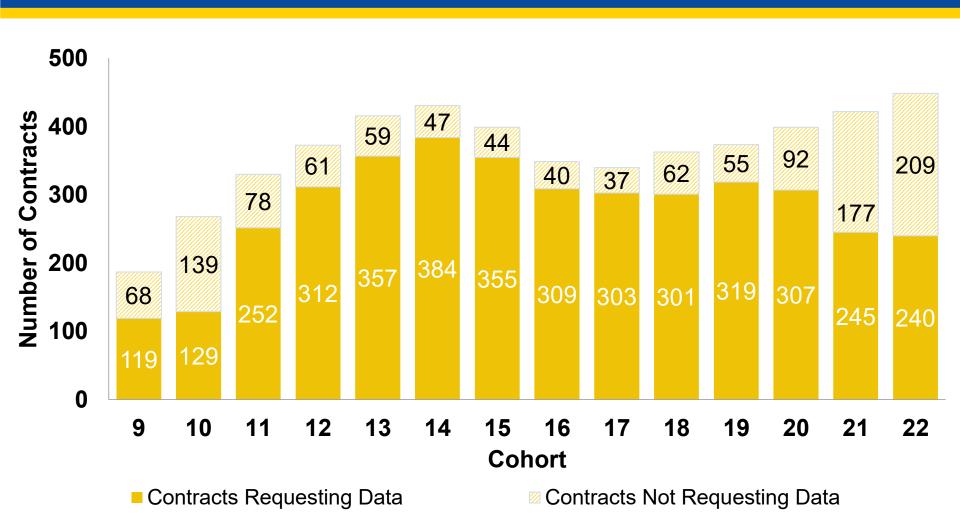
- Verify coding of responses has not been reversed
- Identify and investigate clusters of missing responses
- Check revised data files for unexpected changes, and submit explanation for any unexpected changes with resubmitted files
- Verify all HOS codes are present for each reporting field, rather than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

Suggested Quality Checks for Survey Vendors (Cont'd)

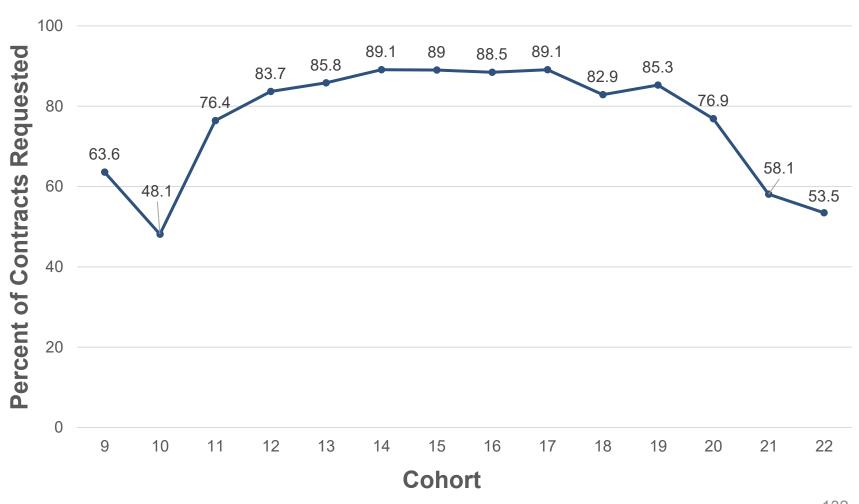
Verify:

- Mail survey responses are not cleaned prior to submission
- Electronic telephone interviewing program does not permit skip pattern violations
- Names do not contain accents or other special characters

MA Contract Data Requests for Cohort 22



MA Contract Data Requests for Cohort 22 (Cont'd)



HOS Case-Mix

- HOS Performance Measurement outcomes are death, change in physical health from physical component summary (PCS) score, and change in mental health from mental component summary (MCS) score
- Actual health outcomes are assessed at Baseline and Follow-Up from the VR-12; members are categorized as better, same, or worse at follow up
- Expected results are derived using logistic regression to predict expected probability of death and expected PCS and MCS change for each member
- Baseline demographic and socioeconomic indicators, and baseline health status are included in case-mix adjustment models for expected results

HOS Case-Mix (Cont'd)

- National averages are calculated for actual outcomes of death, PCS same or better, and MCS same or better
- Actual and expected outcomes are aggregated percentages for each MAO, and death is incorporated with physical health only
- Final HOS outcomes adjusted by combining differences between actual and expected results for each MAO with national averages
- In summary, Performance Measurement Analysis determines percentages of members in an MAO who are better, same, or worse than expected at two-year follow up compared to national averages

PFADL Change Score Measure

- The longitudinal Physical Functioning Activities of Daily Living (PFADL) change score measure is part of 2023 display measures on CMS website and Health Plan Management System (HPMS)
- The PFADL change score measure combines two physical functioning questions (limitations in moderate activities and climbing stairs) with six ADL items to create a Likert-type scale, computed at Baseline and Follow-Up
- The PFADL change score measure can be interpreted as approximating percent of function retained over two years by the average member in an MAO
- Detailed methodology used to create the PFADL change score measure is described on the Survey Results page of the HOS website (<u>www.HOSonline.org</u>)

Health Services Advisory Group

For inquiries, please contact Medicare HOS Information and Technical Support

(888) 880-0077

or

hos@hsag.com

Website: www.HOSonline.org

Questions?





Quality Oversight and Project Reporting

NCQA

Alyssa Hart, MPH HOS Task Lead

Overview

- Oversight Activities
 - Before Survey Administration
 - During Survey Administration
 - After Survey Administration
 - Ongoing Activities
- Technical Support
- Accellion

Before Survey Administration

Oversight Activity	Due Date	Comments from NCQA	Finalize Materials			
Mailing Material Review	Friday, June 9	Friday, June 23	Wednesday, July 5			
Electronic Telephone Interviewing Material Review	Friday, June 23	Friday, July 7	Monday, July 17			
Survey Vendor QAP	Friday, June 30	Survey Vendor Conference Call (Monday July 17 – Monday, July 31)	Within 5 Business Days of call			

Mailing Materials

- Review final print-ready HOS mailing materials
- Survey vendors should title their questionnaires with tracking numbers when submitting to NCQA for review.
- Survey vendors must submit materials for review in the format in which they will be printed
- Due Friday, June 9
 - Send electronic copies to hos@ncqa.org
 - Comment/approve by Friday, June 23
 - All materials must be final by Wednesday, July 5

Mailing Materials (Cont'd)

Common Findings

- Omission of footnote about how sampled members may request materials in their preferred language
- Incorrect formatting
- Incorrect font and font size

Electronic Interviewing Materials

- Review telephone interviewing screenshots and skip pattern logic
- Due Friday, June 23
 - Two weeks after submitting mailing materials
 - Send electronic copies to hos@ncqa.org
 - Comment/approve by Friday, July 7
 - All materials must be final by Monday, July 17
- Survey vendors may also send website links to functioning telephone systems for the HOS Project Team to review, in addition to the screenshots
- Subcontractor(s) must follow the same review schedule

Electronic Interviewing Materials (Cont'd)

Common Findings

- Missing instructions and probes
- Missing emphasis on select words
- Grammatical errors
- Improper usage of parentheses
- Missing skip pattern documentation

Survey Vendor QAP

- Describes survey vendor compliance with the HOS protocols and quality oversight processes
- QAPs must follow the Model QAP format (Appendix B in the QAG)
 - Due Friday, June 30

Survey Vendor QAP (Cont'd)

Common Findings

- Outdated protocols
- Missing detail on subcontractor oversight
- Omission of Spanish, Chinese, and Russian protocol details
- Incorrect or missing survey disposition code crosswalk

During Survey Administration

Oversight Activities	Dates (2023)
Survey Vendor Conference Calls	Monday, July 17 – Monday, July 31
Seeded Mailings	July – September
Customer Support Reviews	July – August
Survey Vendor Progress Reports	July – December
Site Visits	October
Data Record Review	September – October
Electronic Telephone Interviewing Monitoring	September – October
Interim Data File Submission Deadline	Thursday, October 5

Survey Vendor Conference Calls

- Held Monday, July 17 Monday, July 31
- Provide feedback on QAPs
 - If QAP revisions are needed, vendors must submit revisions within five business days
- Review major issues from previous year and discuss updates to survey administration

Seeded Mailings

- Assess timeliness of delivery and accuracy of mailing materials
- Include HOS Project Team in all survey mailings that are sent to members (including prenotification letters)
- Document seeded mailing process in detail in QAP
- Seeded mailings must be created in the member mailing database as a QA tool

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				•••	
				•••	
				•••	
Alyssa Hart	1100 13 th St NW	Third Floor	Washington	DC	20005
Courtney Utter	1100 13 th St NW	Third Floor	Washington	DC	20005
Laura Giordano	3133 E Camelback Rd	Ste 140	Phoenix	AZ	85016

Seeded Mailings (Cont'd)

- Proxy name for use in Follow-Up—Proxy at Baseline protocol: John Smith
- Seed information:

Laura Giordano	Alyssa Hart	Courtney Utter
3133 E Camelback Rd	1100 13 th Street NW,	1100 13 th Street NW,
Ste 140	Third Floor	Third Floor
Phoenix, AZ 85016	Washington, DC 20005	Washington, DC 20005

Customer Support Review

- Assess customer support responses to the specifications in QAG and FAQ
- Customer support review: Telephone
 - HOS Project Team makes anonymous calls to customer support line
- Customer support review: Email
 - Securely forward all customer support emails with responses on a weekly basis
 - Survey vendors may be asked to send member contact information and/or English translations of emails to HOS Project Team

Customer Support Review (Cont'd)

Common Findings

- Emails not responded to within 24 hours
- Customer support representatives unable to answer questions according to the FAQ
- Long delays and pauses while responding

Survey Vendor Progress Reports

- Tracks survey vendor status for adherence to the HOS protocols during survey administration
 - Submit progress reports to hos@ncqa.org
- Deadlines and report requirements in QAG
 - Recurring deliverables
 - Narrative Reports (Reports #2-8)
 - Summary Status Reports (Reports #3-9)
 - Telephone Attempt Reports (Reports #6-9)
 - Member Correspondence (Reports #2-10)
 - One-time deliverable
 - Sample of MAO progress reports (Report #7)

Narrative Reports

Survey Progress and Vendor Experience

- Overview of mail and telephone protocols
 - Verification of mail out dates
- Summary of challenges/difficulties encountered
- Experience to date
- Customer support summary statistics

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_C26B_MM-DD-YY.xls
 - Survey Vendor Name_SSR_C24F_MM-DD-YY.xls
- Use 2023 template provided prior to fielding

Telephone Attempt Report

- Summary status report includes template to report on progress with telephone attempts to date
 - Submit with Progress Reports #6-9
 - Report plan H-number, plan name, total number of cases to receive calls, number of telephone attempts made, and number of closed cases
 - Template provided to survey vendors ahead of fielding

	Plan Details			
Plan H-Number	Plan Name	Cases to Receive	Cases with No	Number of Active Cases with One Attempt

MAO Progress Report Sample

Sample of MAO Progress Reports (Report #7)

- One-time deliverable
- 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

Biweekly Progress Reports

Reporting Requirements	Due Date
 REPORT #2 Narrative Report: Overview of Baseline and Follow-Up prenotification letter and first questionnaire printing, fulfillment, and mailing processes. Verification of mail out dates of Baseline and Follow-Up prenotification 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. Other Deliverable: Member correspondence (white mail), if applicable. 	Friday, July 28

Reporting Requirements	Due Date
REPORT #3 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: Outstanding issues or concerns. Other Deliverable: Member correspondence (white mail), if applicable.	Friday, August 11
REPORT #4 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: Overview of progress with protocol to date. Detail problems or issues to date. Outstanding issues or concerns. Other Deliverable: Member correspondence (white mail), if applicable.	Friday, August 25

Reporting Requirements	Due Date
 REPORT #5 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: Overview of Baseline and Follow-Up second questionnaire mailing. Verification of mail out dates of Baseline and Follow-Up second questionnaire mailing (e.g., USPS generated report). Overview of progress with protocol to date. Detail problems or issues to date. Provide high-level summary statistics on respondent calls to customer support line or email (summarize FAQ) and number of requests for Spanish (Chinese and Russian, if applicable) version of the instrument. Specify number of calls and/or emails requesting information regarding an internet version of the survey. Describe telephone protocol and training. Outstanding issues or concerns. Other Deliverable: Member correspondence (white mail), if applicable. 	Friday, September 8

Reporting Requirements	Due Date
REPORT #6	Friday,
Summary Status Report:	September
Baseline and Follow-Up Cohorts.	22
 Telephone attempt progress to date. 	
Narrative Report:	
 Overview of progress with protocol to date. 	
 Detail problems or issues to date. 	
 Describe process of converting partially completed surveys to 	
complete, and progress.	
 Report on progress of Baseline and Follow-Up electronic telephone interviewing implementation. 	
Other Deliverable: Member correspondence (white mail), if applicable.	

Reporting Requirements	Due Date
REPORT #7	Friday,
Summary Status Report:	October 6
Baseline and Follow-Up Cohorts.	
 Telephone attempt progress to date. 	
Narrative Report:	
Outstanding issues or concerns.	
Detail problems or issues to date.	
 Report on progress of Baseline and Follow-Up electronic telephone 	
interviewing implementation.	
 Report on experience with submitting interim data files. 	
Other Deliverable:	
 Member correspondence (white mail), if applicable. 	
 Submit a sample of the interim/progress report that is provided to HOS clients. 	

Reporting Requirements	Due Date
REPORT #8 Summary Status Report: • Baseline and Follow-Up Cohorts. • Telephone attempt progress to date. Narrative Report:	Friday, October 20
 Overview of progress with protocol to date. Detail problems or issues to date. Report on progress of Baseline and Follow-Up electronic telephone interviewing implementation. Other Deliverable: Member correspondence (white mail), if applicable. 	
 REPORT #9 Summary Status Report Baseline and Follow-Up Cohorts. Telephone attempt progress to date. Other Deliverable: Member correspondence (white mail), if applicable. 	Friday, November 3

Blinded Response Rates

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

Member Correspondence

White mail sent biweekly to HOS Project Team:

- Written notes/letters, notes on cover letters, prenotification letters, survey covers, or envelopes must be sent
- Forward any member correspondence that appears to be directed at CMS or the government
- Not required to forward white mail that indicates a member is ineligible (e.g., deceased, institutionalized, wrong address, language barrier)
- Not required to forward marginal comments written on the survey

Member Correspondence (Cont'd)

- When submitting member correspondence, survey vendors must include all white mail received in the previous two weeks.
 - Do NOT send member correspondence via email

Examples of Correspondence to Be Sent	Examples of Correspondence NOT to Be Sent
 Messages intended for CMS Comments about MAO/provider Personal problems Requests for medical assistance and supporting documentation Opinions about the survey instrument or federal government 	 Death notices Address changes Language barrier Institution notice Comments written on or throughout the survey, including marginal comments

Telephone Interviewer Monitoring

- Survey vendors monitor 10%, at a minimum, including subcontractors and across all survey languages
- HOS Project Team will conduct remote silent monitoring of interviewers and interviewing system
 - HOS Project Team will conduct separate remote monitoring sessions with each subcontractor

Telephone Interviewer Monitoring (Cont'd)

HOS Project Team assesses interviewers on:

- Reading script verbatim with correct pronunciations
- Accurate probing
- Speaking clearly
- Maintaining an appropriate pace
- Operating the electronic interviewing system competently
- Capturing accurate responses
- Answering questions appropriately

Telephone Interviewer Monitoring (Cont'd)

Common Findings

- Inappropriate tone maintained with respondents
- Not reading all response options
- Improper probing
- Mispronunciations
- Missing emphasis on key words
- Inappropriate coding of responses
- Incorrect responses to member questions

Site Visits

- Evaluate survey vendor's compliance with the QAG
 - Project organization
 - Survey management system
 - Staff training
 - Sample file processing
 - Oversight of staff and subcontractors
 - Mail and telephone operations
 - Data security
- Site visits may be conducted remotely
 - Survey vendors share and present all required systems, processes, and documentation using web conferencing

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
- HOS Project Team will provide a list of requirements and records prior to the review
- Conduct reviews remotely

Data Record Review (Cont'd)

Common Findings

- Incorrect survey round codes and disposition codes
- Incorrect coding of open-ended questions
- Continuing attempts in English after member requests to be contacted in Spanish
- Coding multiple marked questions

After Survey Administration

Oversight Activities	Dates (2023)
Survey Vendor Final Report	Friday, November 17
Report of HOS Records Stored and Facility Standards for Records Storage Facilities Inspection Checklist	Friday, December 1

Final Detailed Status Report

- Three components:
 - Data synthesis (required)
 - 2. Discussion component (required)
 - Survey implementation, issues encountered, lessons learned, recommendations
 - List any additional language translations requested by MAOs
 - List any additional survey modes requested by MAOs and/or respondents (e.g., internet, text) and number of requests
 - 3. Recommendations for 2024 HOS Administration
- Reports used for:
 - Informing QAG updates
 - Process improvement

Ongoing Activities

- Discrepancy Reports & Corrective Action Plan
- Technical Support

Discrepancy Report & Corrective Action Plan

- Appendix G of QAG
- Complete and submit
 Discrepancy Report within
 one business day
- Provide as much information as possible
 - DiscrepancyDescription
 - Corrective Action Plan

Discrepancy Report Form

Instructions: Submit the Discrepancy Report Form to the <u>HOS Project Team</u> (hos@ncqa.org). Initial discrepancy reports must be submitted within one business day of discovering the discrepancy occurred, regardless of whether the organization is still determining all relevant information. Complete as many fields in this report as possible. Information not known at the time of completing the initial report should be recorded as "Pending." Any information reported as "Pending" must be included in an updated Discrepancy Report due within one week of submitting the original report. More than one updated report may be required. Do not include any PHI/PII in the Discrepancy Report Form or in any emails to the HOS Project Team.

I. General Information			Select	one:	☐ Initial Report	\square Updated Report	
				I	Report	Submission Date	MM/DD/YY
Name:				Organizati	on:		
Title:				Address:			
Email:				Telephone	:		
II. Descr	iption of D	iscrepancy					
Describe the discrepancy and include any additional information that may help the HOS Project Team understand what occurred. Provide as much detail as possible, including the discrepancy time frame (when the issue occurred during survey administration), how you identified the discrepancy, and causes of the discrepancy.							
Date Discre				Discrepano	cy		
Discovered	l:			Time Fran	ie:		
Detailed Description of Discrepancy and How the Discrepancy Was Discovered:							
III. Impact of Discrepancy Provide a breakdown of affected surveys and impacted members by CMS Contract. Insert one row for each contract impacted. If the issue impacts your entire sample, write in "All" under each category.							
Survey Lar	nguages Impa	icted:	☐ Engl	ish □ Spaı	nish	☐ Chinese ☐ R	ussian
CMS Contr	ract Number	Number of A	Affected S	urveys	Numi	ber of Sampled Me	mbers Impacted
H#### or 2	411						
How Was Estimation of Affected Surveys Reached?							

Technical Support

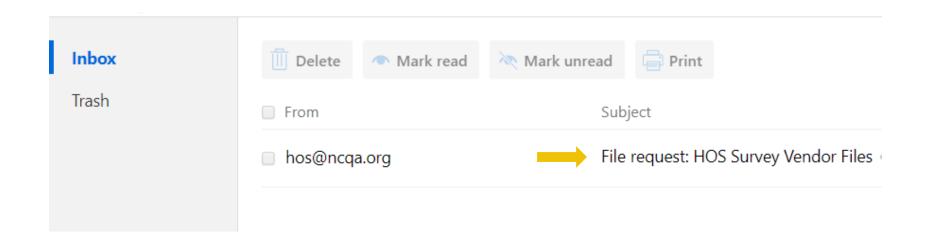
- Email hos@ncqa.org
 - Reports, updates, and questions
- Contact the project team with questions, comments, requests, or concerns
 - Call to report/discuss urgent matters immediately and follow up with email
 - Alyssa Hart (202) 517-8005
 - Ruth Boansi (202) 315-1562

NCQA's Secure Site Accellion

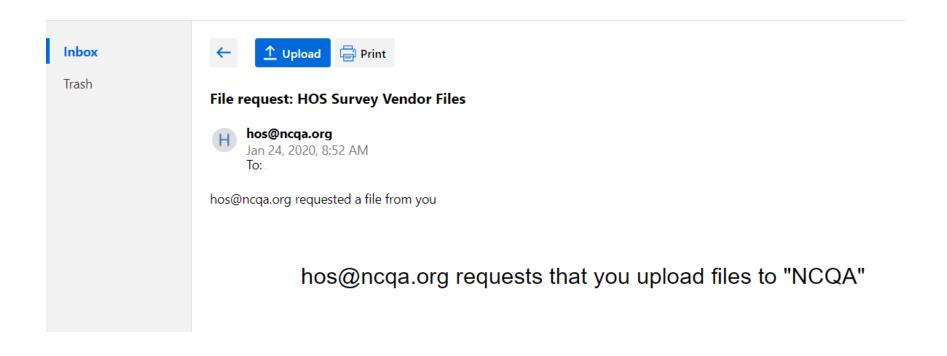
- NCQA uses an Accellion account system
 - All new users must register with the system
- All materials and documents sent are via Accellion
- Sample files will be sent via Accellion
- Survey vendors use Accellion to securely send member correspondence and other deliverables
- Accellion address: https://accellion.ncga.org

- NCQA provides an Accellion file request to survey vendors
- The file request does not expire and should be used to send secure files to the HOS Project Team throughout survey administration
 - Access the file request by logging in to https://accellion.ncqa.org

To open the file request, click the message subject line in your Accellion inbox

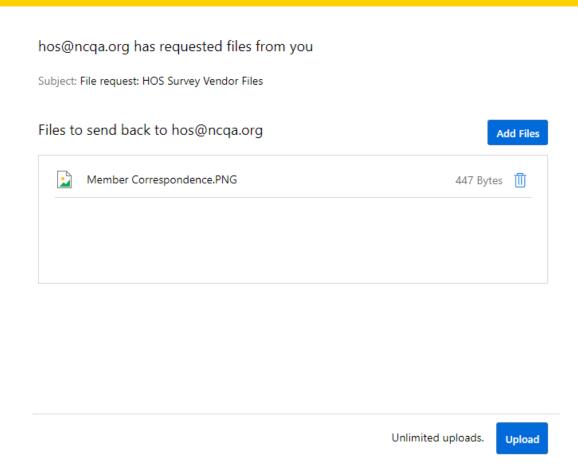


Click the blue **Upload** icon to upload your secure files



Drag and drop files or click **Add Files** to choose files to upload

Click **Upload** in the bottom right to send the files to NCQA



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?



Polling Question 3

How often must survey vendors send white mail to the HOS Project Team?



Questions and Closing

NCQA

Ruth Boansi, MPH HOS Project Director

Post-Training Evaluation

- Following training, survey vendors will receive an email with a link to an online training evaluation
- Intent is to collect feedback to improve future training sessions
- Designate one person from your organization to complete
- Required to obtain final approval
- Evaluation is due Friday, June 2



Post-Training Test

Post-Training Test Instructions

- Only one person from each survey vendor may complete the test
- The test will be administered immediately after the training
- Survey vendors have 20 minutes to complete the test
- Survey vendors must complete to obtain final approval