



Medicare Health Outcomes Survey 2021 Survey Vendor Update Training



May 27, 2021



Welcome, Introduction, and Overview

2021 Survey Vendor Update Training Agenda

Time (p.m., ET)	Agenda Item
1:00 – 1:10	Welcome, Introduction, and Overview
1:10 – 1:25	HOS CMS Update
1:25 – 1:45	HOS 2021 Administration Updates
1:45 – 2:00	HOS 2020 Survey Results
2:00 – 2:20	Survey Material Updates
2:20 – 2:45	Data Coding and Data Submission
2:45 – 2:55	Break
2:55 – 3:25	Data Management
3:25 – 3:55	Quality Oversight and Project Reporting
3:55 – 4:10	Questions and Closing
4:10 – 4:30	Post-Training Test



HOS CMS Update

Overview

- Introduction to the HOS
- HOS Primary Goals
- Other HOS Data Uses
- HOS Survey Administration Timeframe
- Public Reporting
- Data Integrity
- Star Ratings Update
- HEDIS HOS Report
- Data Use Agreements (DUA)

Introduction to the HOS

- Monitors quality of care provided to Medicare beneficiaries enrolled in Medicare Advantage Organizations (MAOs) by measuring self-reported health status, physical and mental functioning, and outcomes of care
- Participants: Medicare beneficiaries at least 18 years of age who are currently enrolled in an 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

- Gather valid, reliable, and meaningful data that are used to:
 - Monitor health plan performance
 - Reward top-performing Medicare Advantage (MA) contracts (Quality Bonus Payments)
 - Estimate frailty and adjust payments for Fully Integrated Dual Eligible (FIDE) Special Needs Plans (SNP) and Programs of All-Inclusive Care for the Elderly (PACE) based on the average plan frailty
 - Provide metrics that allow plans to monitor the health of their enrollment and to target quality improvement activities for vulnerable subgroups
 - Provide data to beneficiaries that allow them to make more informed enrollment decisions

Other HOS Data Uses

- Assess frailty, health disparities, and quality of life in the Medicare Advantage population
- Advance the science of functional health outcomes measurement
- Support research by CMS, other federal agencies, and external researchers
 - Public Use Files (PUF)
 - Limited Data Sets (LDS)
 - Research Identifiable Files (RIF)
 - SEER-MHOS data resource provides information about elderly MA enrollees with cancer (NIH/NCI)

HOS Survey Administration Timeframe

- HOS 2020 survey administration was delayed due to safety concerns during the public health emergency
- CMS will continue to field the HOS and HOS-M surveys on a similar timeline in 2021 and going forward
- In response to industry request, CMS is shortening the turnaround time to return HOS performance measurement data to MAOs

Public Reporting of HOS Data

- HOS results are publicly reported by CMS for each contract
- Medicare Plan Finder (MPF) at www.medicare.gov displays basic, consumer-friendly information
- Additional details can be found at <http://go.cms.gov/partcanddstarratings>

Star Ratings: Impact

- Public Reporting
 - HOS data are used to create Star Ratings which consumers can use along with benefit and cost information to make plan choices
- Marketing/Enrollment
 - CMS makes special enrollment provisions for outlier performing contracts
- Financial
 - The Affordable Care Act established CMS's Star Ratings as the basis of Quality Bonus Payments

Star Ratings: 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

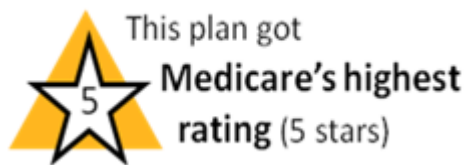
Star Ratings: Integrity (Cont'd)

- MAOs and HOS Vendors **MAY**:
 - Notify all members of a contract that they may be asked to participate in the 2021 HOS
- MAOs and HOS Vendors **MAY NOT**:
 - Attempt to influence beneficiaries' responses to HOS survey questions in any way
- Encouraging participation without biasing the results is tricky
 - Please consult with the HOS Project Team rather than jeopardizing your clients' results by having them labeled as biased

2021 Star Ratings

- CMS highlights outlier performance in the Star Ratings in two ways:

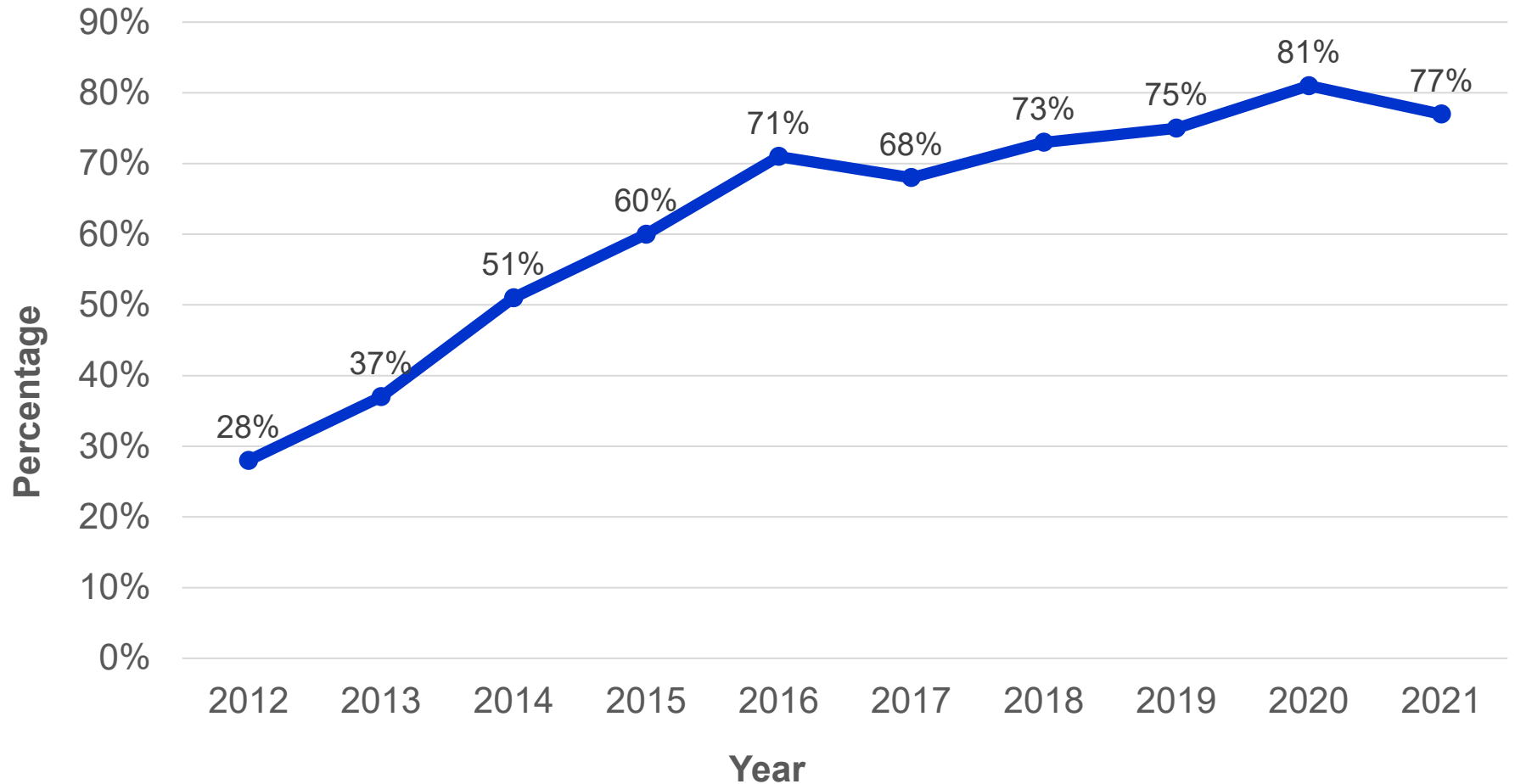
- The 5-star icon



- Consistently Low Performer Indicator (LPI) icon



Percentage of MA enrollees in contracts with 4 or more stars, 2012-2021




Star Ratings: Measures

- 5 HOS measures are used in Star Ratings
 - Functional Health (Outcome) measures
 - *Improving or Maintaining Physical Health*
 - *Improving or Maintaining Mental Health*
 - HEDIS® Effectiveness of Care measures
 - *Monitoring Physical Activity*
 - *Improving Bladder Control*
 - *Reducing the Risk of Falling*

2022 Star Ratings: Data Sources

- HOS data sources for *2022 Star Ratings*
 - PCS/MCS: 2018 – 2020 HOS Cohort 21 Performance Measurement Results (2018 HOS Baseline data and 2020 HOS Follow-Up data)
 - Effectiveness of Care measures: Cohort 21 Follow-Up (2020) and Cohort 23 Baseline data (2020)
- *2022 Star Ratings* release date: Fall 2021

HOS Results Disseminated to MAOs

-  **NEW: HEDIS HOS Report**
 - HEDIS HOS results will now be disseminated to MAOs in the HEDIS HOS Report
 - The HEDIS HOS report contains HEDIS HOS results from the previous round of survey administration (i.e., Round 23)
 - HEDIS HOS reports will be released on the same timeline as the annual Performance Measurement Report

Data Use Agreement (DUA)

Terms and Restrictions

- Each HOS survey vendor must have a current, fully updated and fully-executed DUA
- In signing the DUA, each survey vendor and their subcontractor(s) agree to ensure the integrity, security, and confidentiality of CMS and HOS data
- Survey vendors and subcontractors must not release CMS or HOS data to any unlisted entity, including their MAO clients and MA members
- Survey vendors are prohibited from using HOS sample files for any other purpose, ***including de-duplicating the samples for other client surveys***

Annual DUA Process

- CMS-approved HOS survey vendors must execute the following steps in EPPE:
 - Verify all current staff and subcontractors are listed
 - Submit signed [DUA Addendums](#) for contract changes
 - Submit an update request to add 2021 HOS data by **June 4, 2021**
- Submit fully-executed DUA to the HOS Project Team by **June 11, 2021**

Annual DUA Process (Cont'd)

- CMS will not process DUA requests for any entity with an expired DUA for any CMS project
 - Survey vendors should proactively manage DUA renewals
 - Expiration of one DUA jeopardizes approval of *all* CMS DUAs



HOS 2021 Administration Updates

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 instrument for 2021

Question	Change
HEDIS Osteoporosis Testing in Older Women (OTO)	Question removed
Question 38 (Pain)	Question scale revised to start at zero for no pain

Data Collection Protocol

- Mixed mode data collection
- Longitudinal to assess health over time
 - Sample member at Baseline, then 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 V2.5* (QAG)
- Standardized data collection ensures survey data collected across the CMS-approved HOS survey vendors are comparable
- Survey vendors may not change the wording or order of the survey questions, mailing materials, or telephone script

Mail Protocol

- Standardized mailing materials and questionnaire (Appendix E in the QAG)
 - Prenotification letter
 - Two survey mailings containing survey cover letter, questionnaire, and business reply envelope
 - Reminder/thank-you postcard
 - Two reminder/thank-you postcards for Russian mailing materials


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 (Appendix F in the QAG)
- Must have enough interviewers to support data collection timeline

Telephone Protocol (Cont'd)

- Six to nine telephone attempts
 - Different times of day
 - Different days of the week
 - Different weeks
 - 9 a.m. to 9 p.m. call window (member local time)
- Interviewers may not leave voicemail messages

Telephone Protocol (Cont'd)

- 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
-  **NEW:** Interviewers must be trained on how to address technical issues (e.g., system failure) during a telephone interview
 - Established processes must be documented in the survey vendor's Quality Assurance Plan (QAP)

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
 - Two standardized mailing materials and questionnaires, and two reminder/thank-you postcards (one after each mailing)
 - If a member received a mail survey 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

Russian Survey Administration Updates

-  **NEW:** Russian Follow-Up Protocol
 - HOS administration now includes two additional protocol paths for Russian Follow-Up

Protocol Paths	Protocol Identifier Flag
Russian Follow-Up—No Proxy at Baseline	10
Russian Follow-Up—Proxy at Baseline	11

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 member-identifying information
 - The **only** file that can be shared with the MAO is the Supplemental File
- 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 and DUA

Subcontractor Oversight

- Electronic images, files, and recordings must be kept on the survey vendor's systems and retained per QAG record storage requirements
- Conduct onsite and remote quality checks and monitoring
- Ensure that 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 telephone monitoring in addition to its subcontractor's monitoring
 - Survey vendors must conduct a sufficient percentage of telephone interviewer monitoring to identify issues with interviews completed by its subcontractors

Sharing Data with Clients

- Limit data reported to MAOs to the data elements 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 (2021)
Send sample files to vendors	June 28
Mail Baseline and Follow-Up prenotification letter	July 19
Open survey vendor customer support telephone and email	July 19
Open inbound electronic telephone interviewing	July 19
Mail Baseline and Follow-Up first questionnaire	July 26

Data Collection Timeline (Cont'd)

Task	Date (2021)
Mail Baseline and Follow-Up reminder/thank-you postcard	August 2
Mail Baseline and Follow-Up second questionnaire	August 30
Mail Baseline and Follow-Up second reminder/thank-you postcard (<i>Russian only</i>)	September 7
Conduct Baseline and Follow-Up outbound telephone interviewing	September 20 – November 1

Data Collection Timeline (Cont'd)


Task	Date (2021)
Submit interim data files	October 5 – October 7
End Baseline and Follow-Up data collection	November 1
Prepare and submit final data files	November 2 – November 12
Final data files due	November 12

Data Retention

- **NEW:** Retain all data files (electronic or paper) for a minimum of **three years** onsite at the survey vendor's facilities
 - Paper Questionnaires: Retain through **December 31 of the following survey administration year**, may destroy paper surveys following electronic imaging and QA
 - Telephone Data: Retain all telephone survey data and recordings in all fielded languages, onsite, including subcontractor telephone interview recordings
- **NEW:** Establish a process for data destruction after **three years** and complete an attestation of data destruction

HEDIS Volume 6 Updates

HEDIS Volume 6 Title Change

-  **NEW:** HEDIS publication titles now refer to the HEDIS measurement year
 - HEDIS Measurement Year [year], shortened to “HEDIS MY [year]”
- *HEDIS MY 2020 Volume 6*, published in May 2021, refers to the data collected from August 2020 to November 2020

Summary of Changes

Physical Functioning Activities of Daily Living (PFADL)

- **NEW:** Added description of the PFADL change score measure

Russian Follow-Up

- **NEW:** Updated Data Collection Protocol section to reflect the inclusion of Russian Follow-Up protocol

Summary of Changes

HOS Reporting

- **NEW:** Added HEDIS HOS Effectiveness of Care Report and report description

OTO Measure

- **NEW:** Removed OTO Measure specifications to correspond to measure retirement

HOS Mailing Materials


- **NEW:** Updated Follow-Up Proxy at Baseline cover letters

Fielding Non-CMS Surveys with HOS Questions

Fielding Non-CMS Surveys with HOS Questions

- NCQA prohibits survey vendors from fielding additional surveys containing HOS questions **8 weeks** before and during the official HOS (May through November)
- Fielding surveys similar to the HOS, even in the off-season, may negatively impact HOS response rates
 - If the HOS response rate is too low, the contract risks not having enough data to calculate outcome measures or Star Ratings, which may impact the contract's quality bonus payments

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

-  **NEW:** The NCQA website now hosts an [HOS webpage](#) with information about the HOS survey and how to access the HOS and HOS-M questionnaires and HEDIS Volume 6
- Survey vendors fielding off-cycle, non-CMS sponsored surveys using the HOS or HOS-M instruments or questions must complete an HOS [Survey Use Application](#) and acknowledge and sign the HOS [Terms of Use](#)
- HEDIS Volume 6 is accessible from the [NCQA Store](#)



HOS 2020 Survey Results

Overview

- HOS 2020 Survey Administration
- Response Rate Trends
- Survey Response Rates
 - *Cohort 23 Baseline*
 - *Cohort 21 Follow-Up*
- Survey Disposition Components
 - *Cohort 23 Baseline*
 - *Cohort 21 Follow-Up*
- Key Points

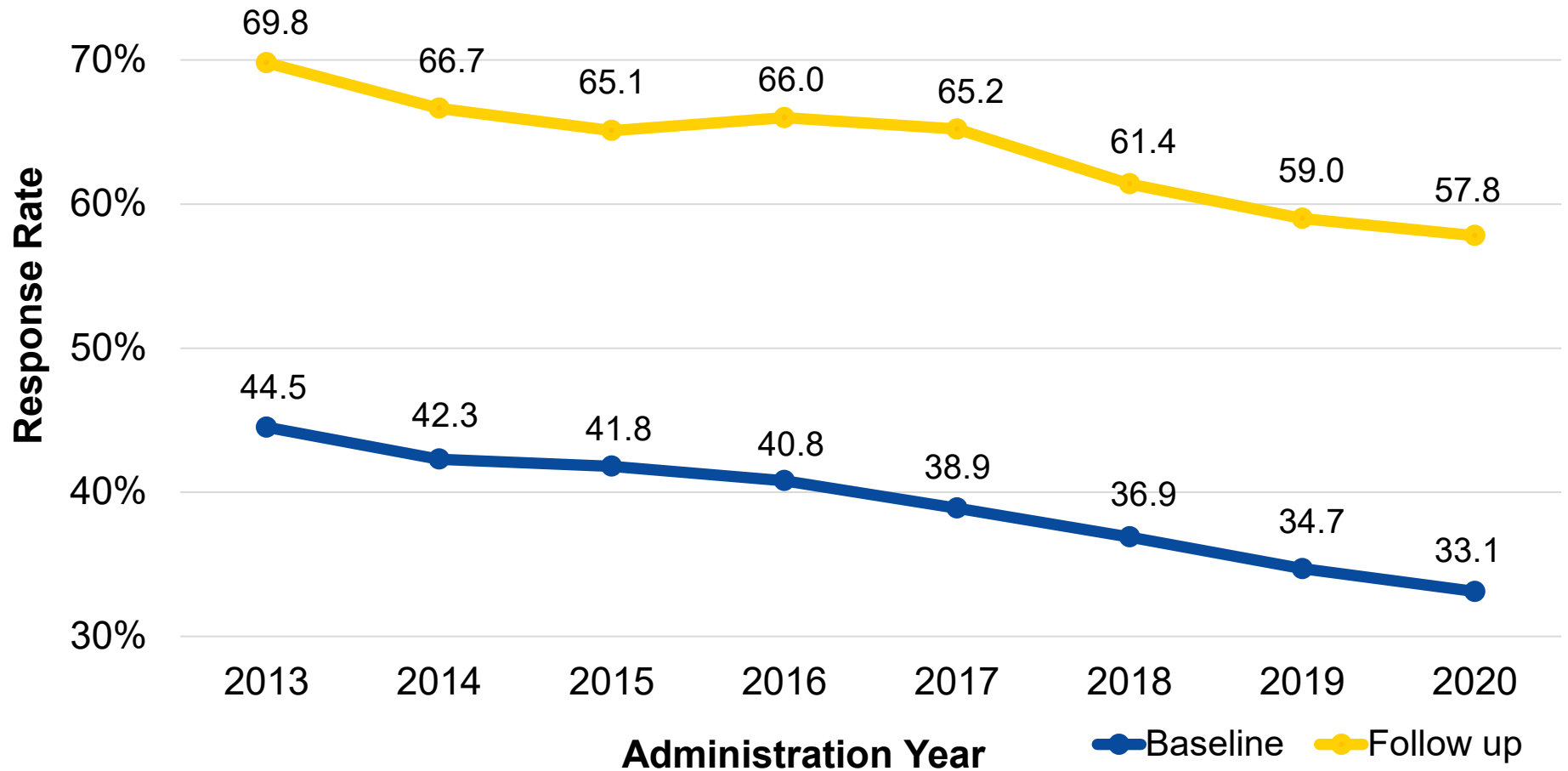
HOS 2020 Survey Administration

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

Survey	Number of Contracts
Total Unique Contracts	516
Cohort 23 Baseline	509
Cohort 21 Follow-Up	435

Response Rate Trends

Rounds 16-23 Baseline and Follow-Up Surveys: 2013–2020

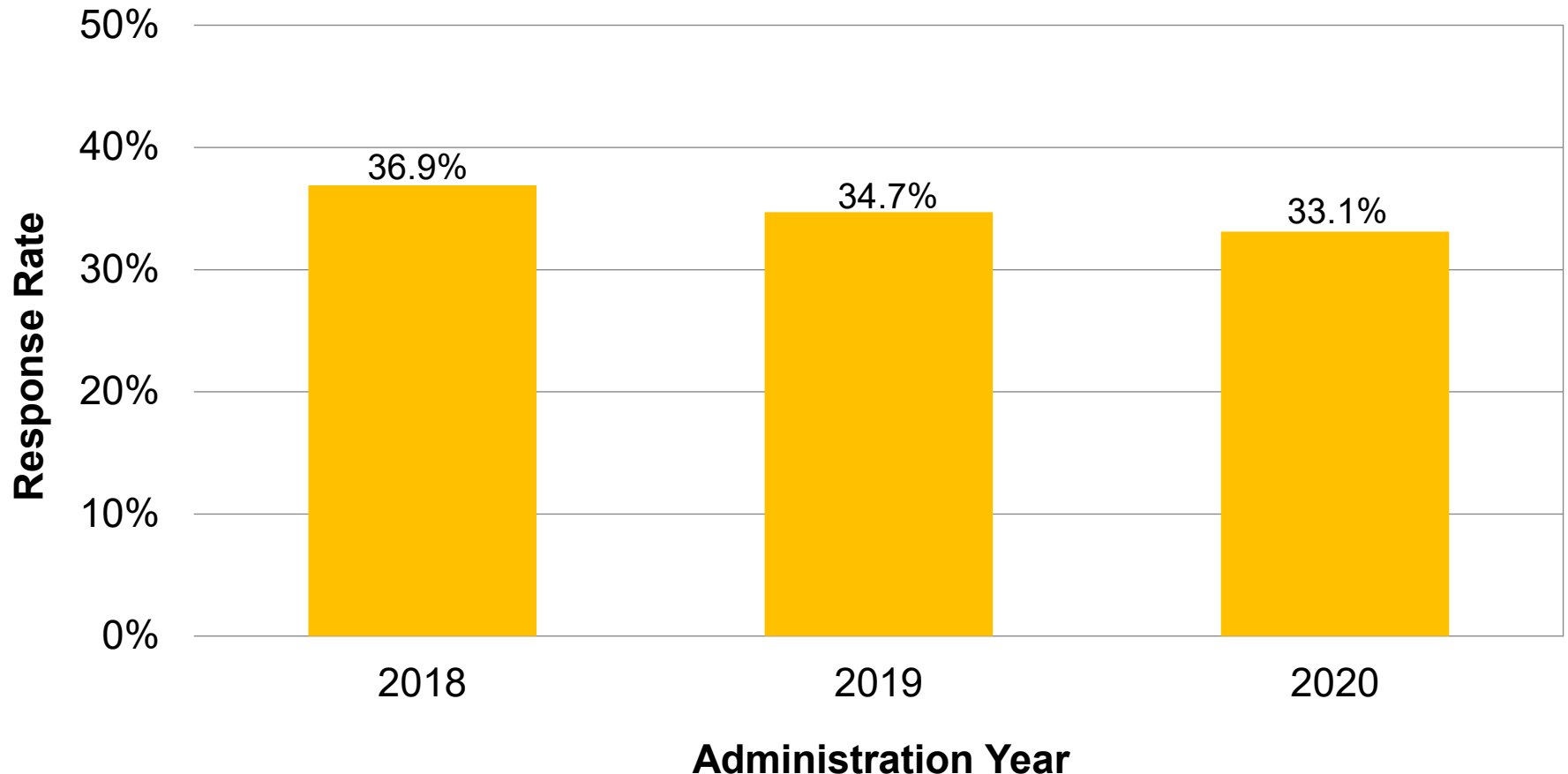


Survey Response Rates

Cohort 23 Baseline

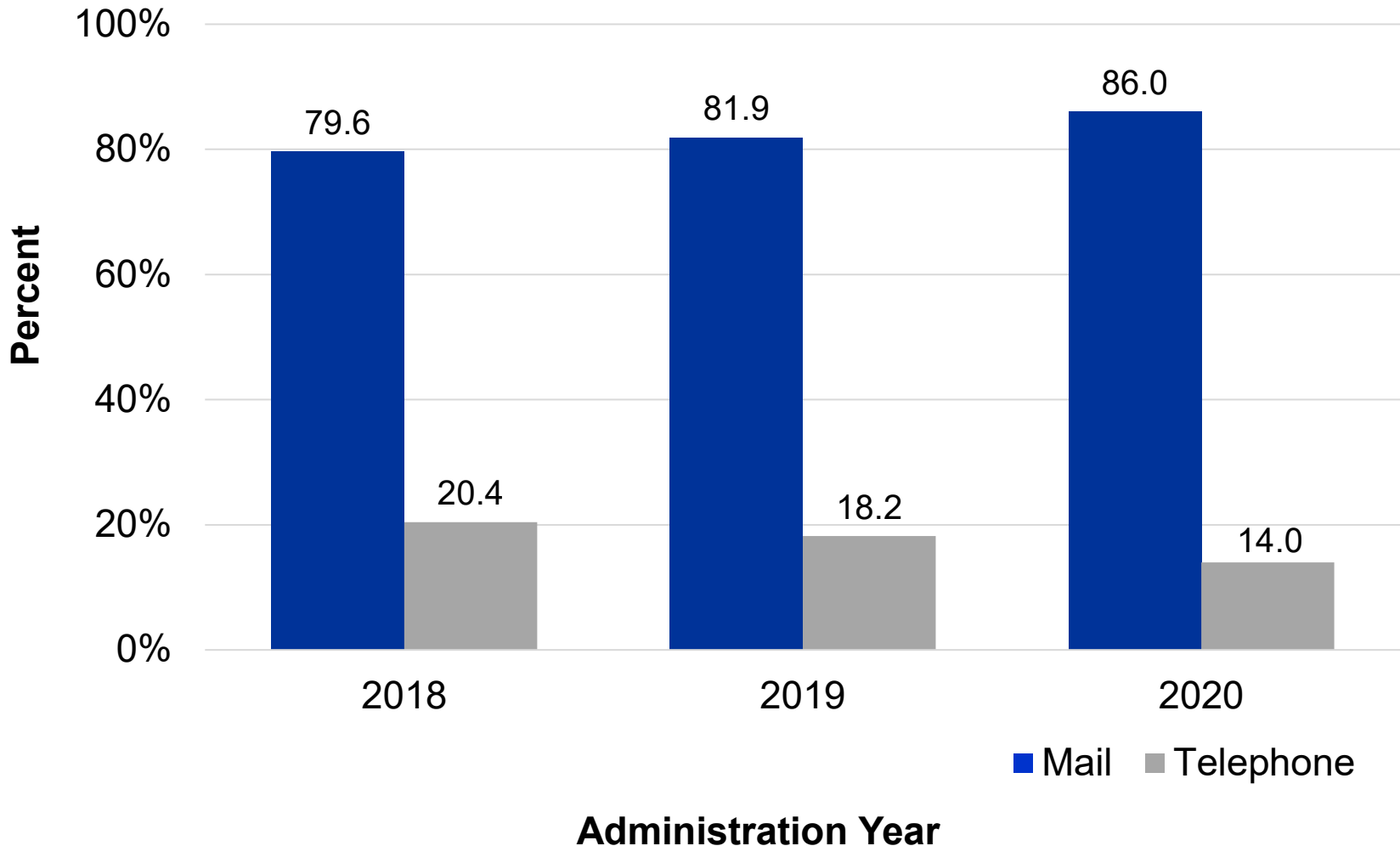
Overall Response Rates Trend

Cohorts 21-23 Baseline Surveys: 2018-2020



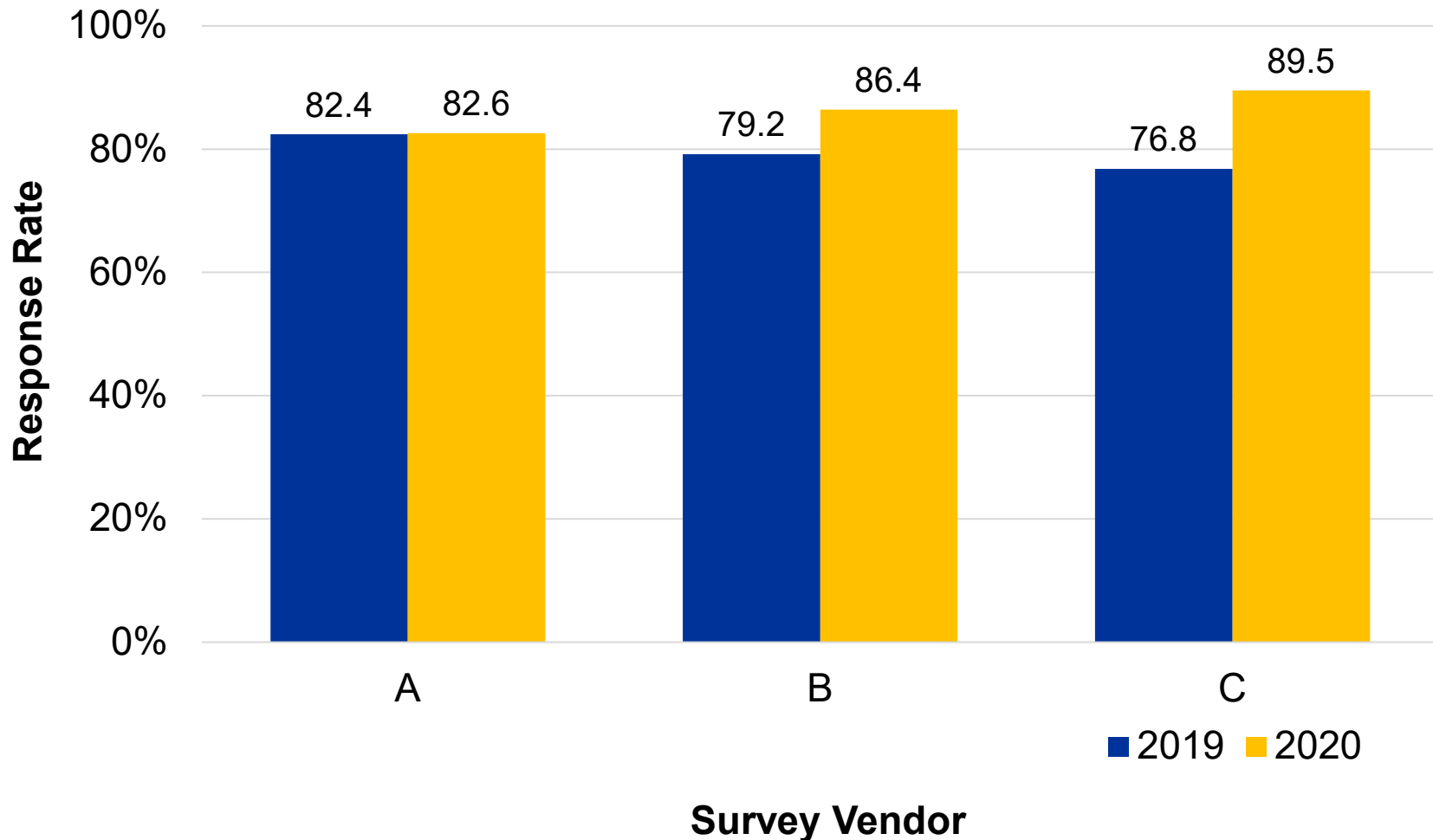
Completed Surveys by Mode

Cohorts 21-23 Baseline Surveys: 2018-2020



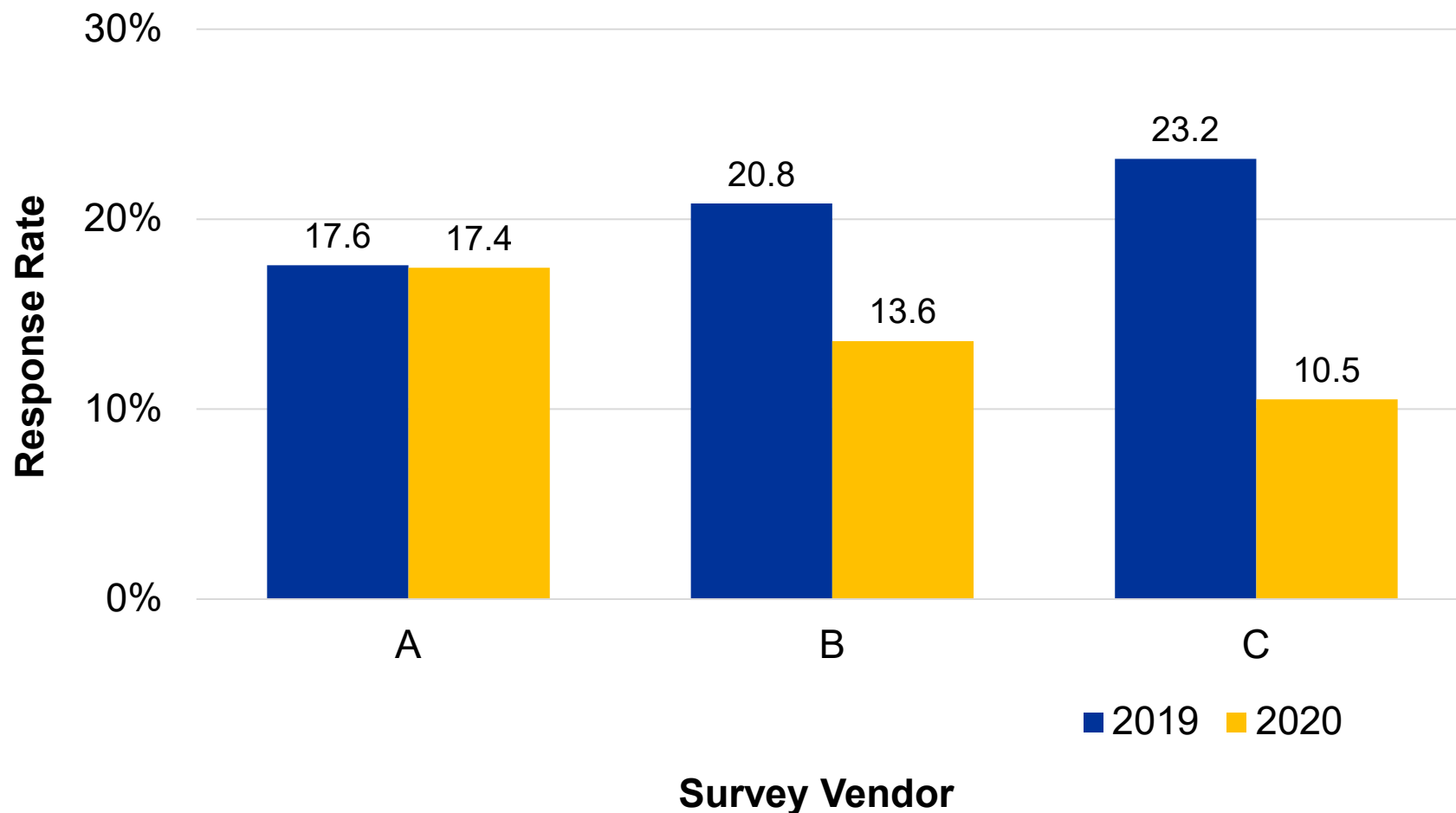
Completed Mail Survey Rates by Vendor

Cohorts 22-23 Baseline Surveys: 2019-2020



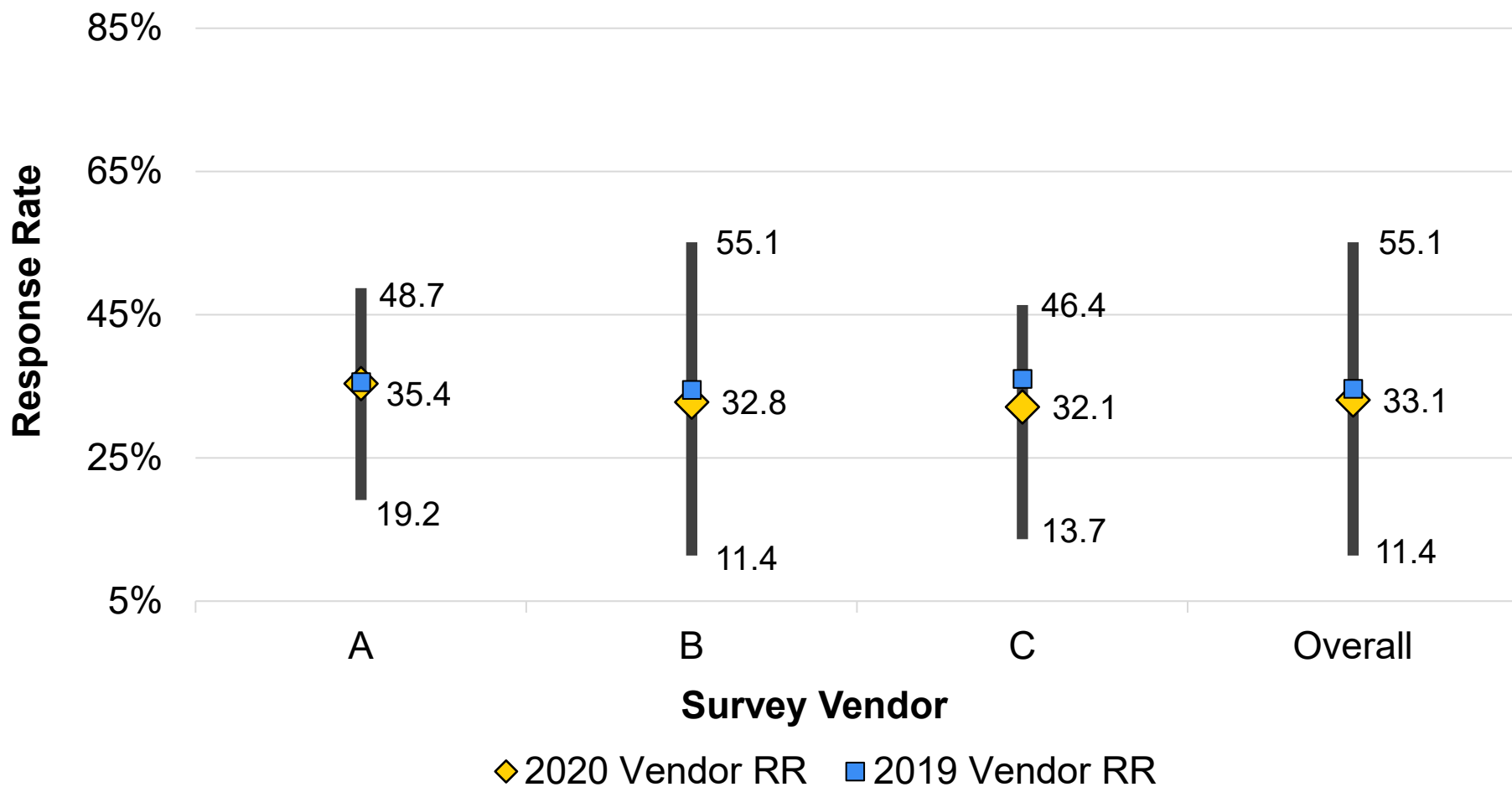
Completed Telephone Survey Rates by Vendor

Cohorts 22-23 Baseline Surveys: 2019-2020



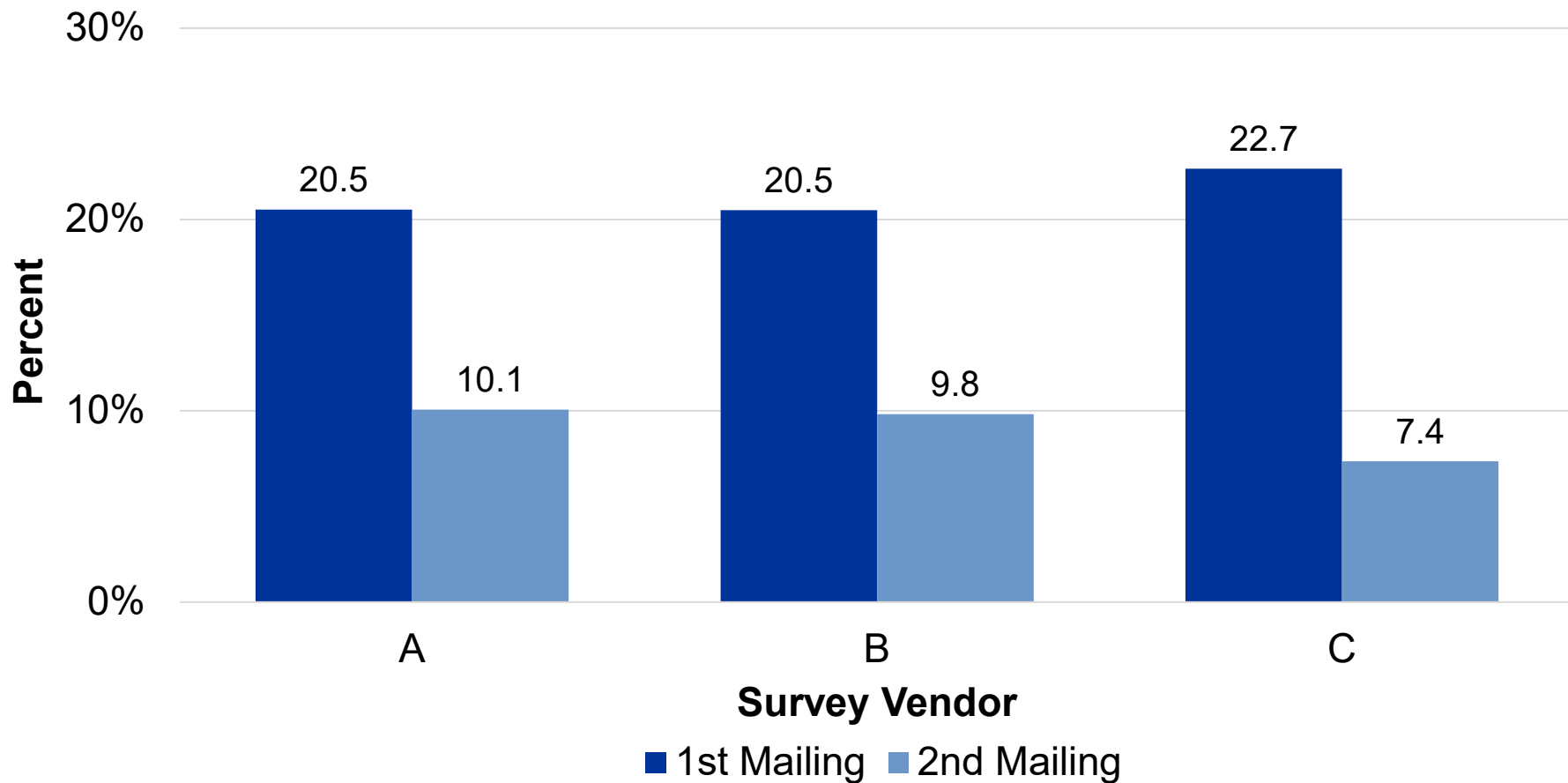
Variability of Completed Survey Rates by Vendor

Cohort 23 Baseline Survey: 2020



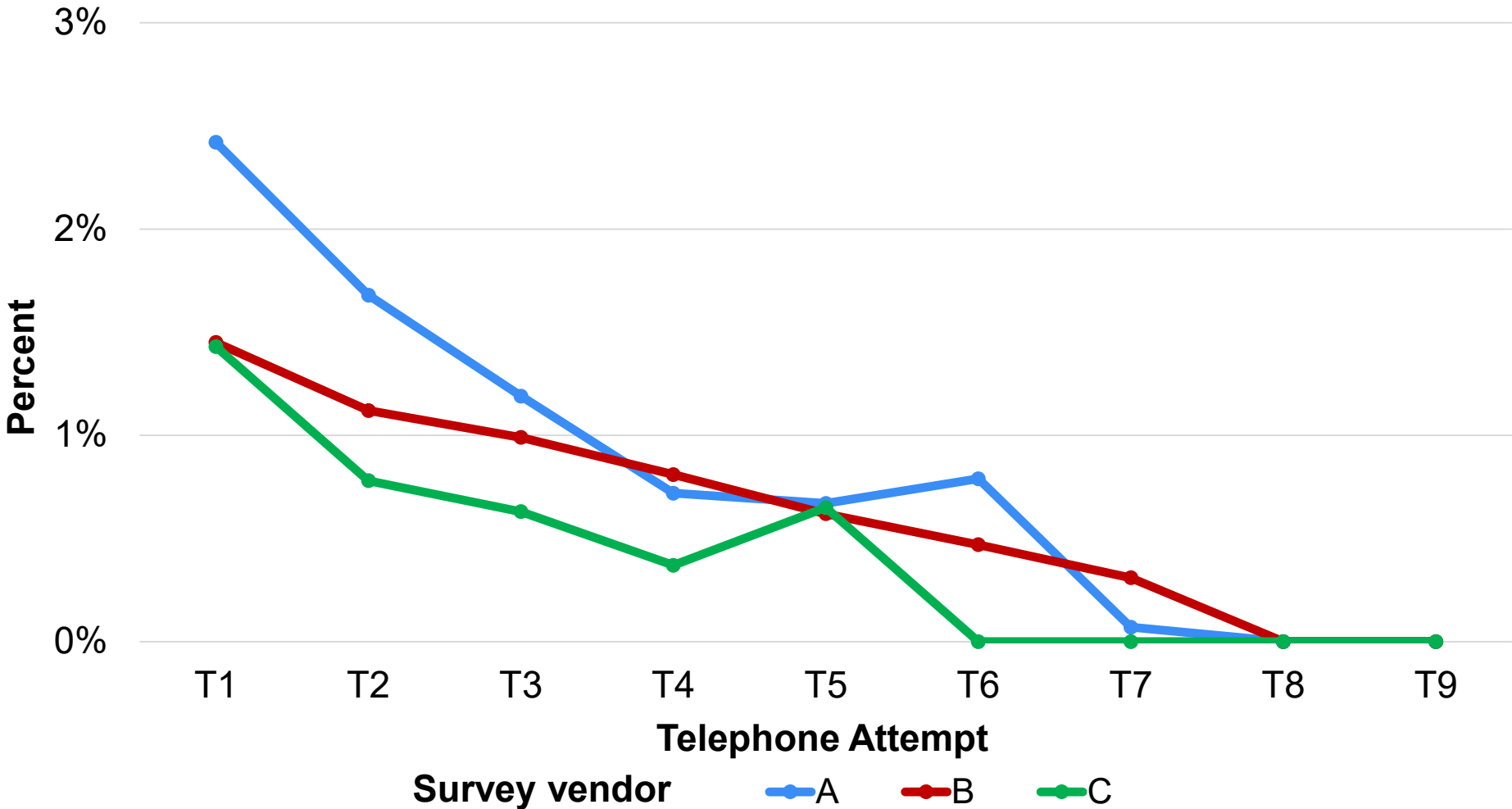
Percent of Sample Responding by Mail

Cohort 23 Baseline Survey: 2020



Percent of Sample Responding by Telephone

Cohort 23 Baseline Survey: 2020

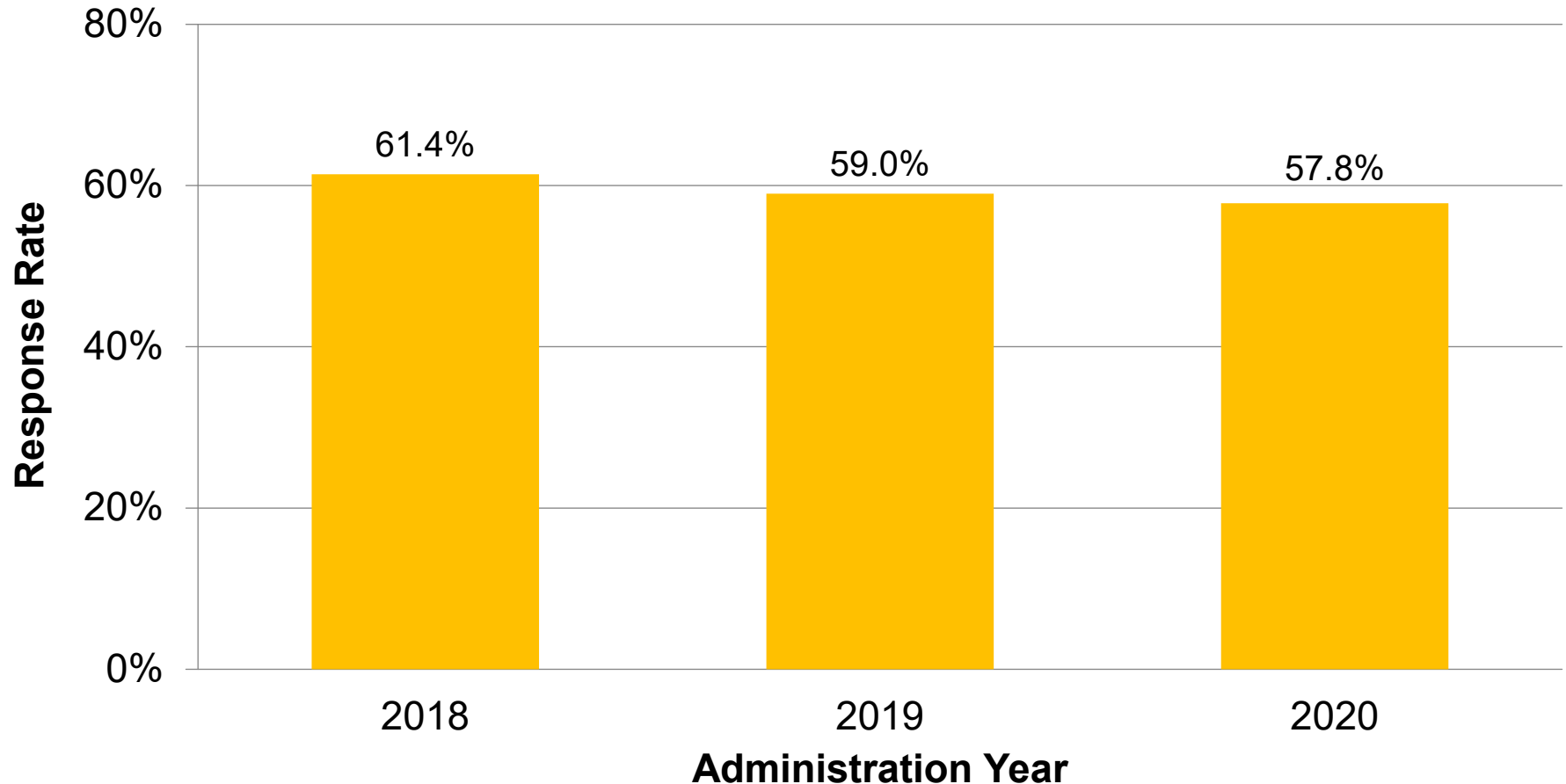


Survey Response Rates

Cohort 21 Follow-Up

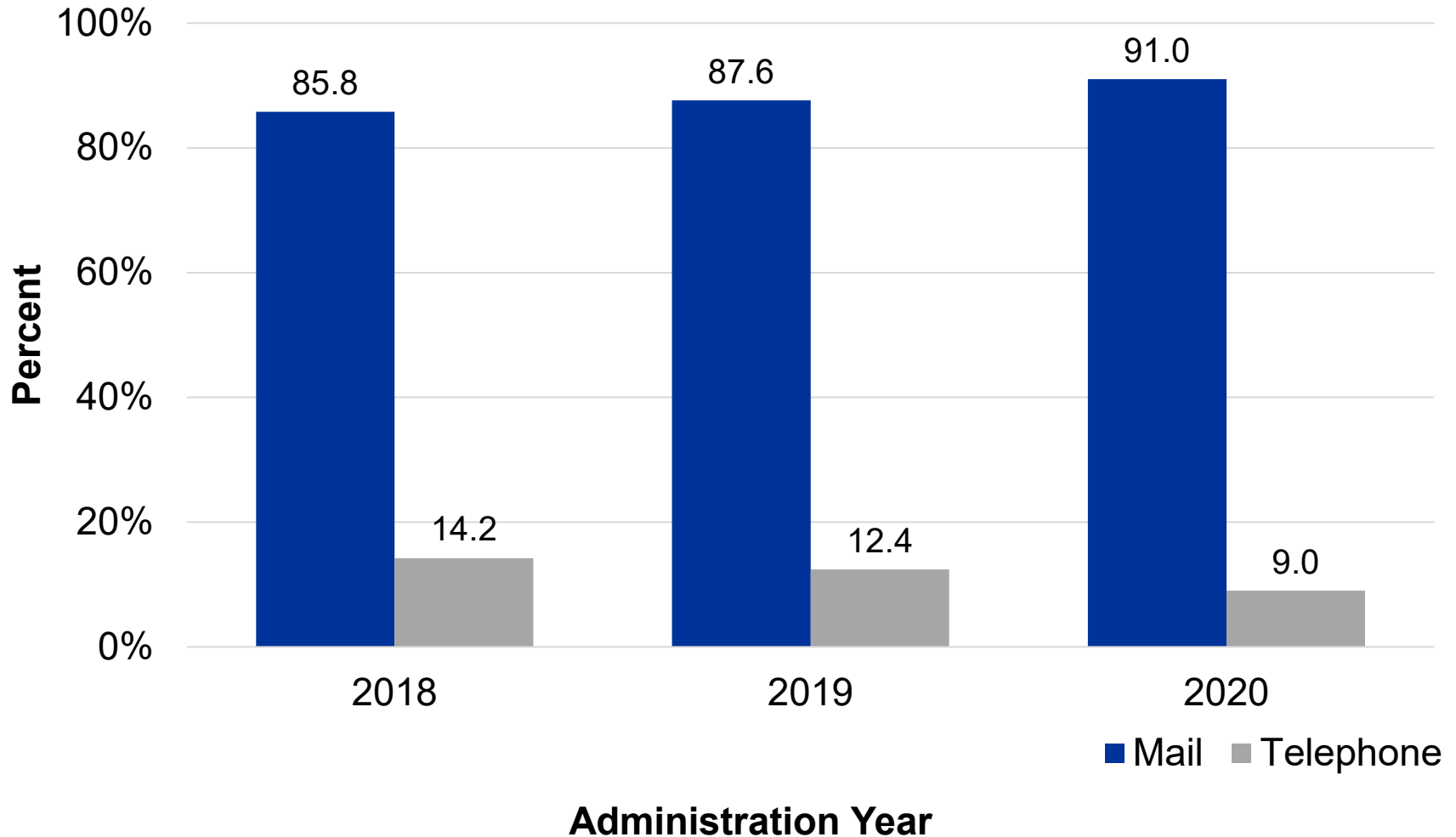
Overall Response Rates Trend

Cohorts 19-21 Follow-Up Surveys: 2018–2020



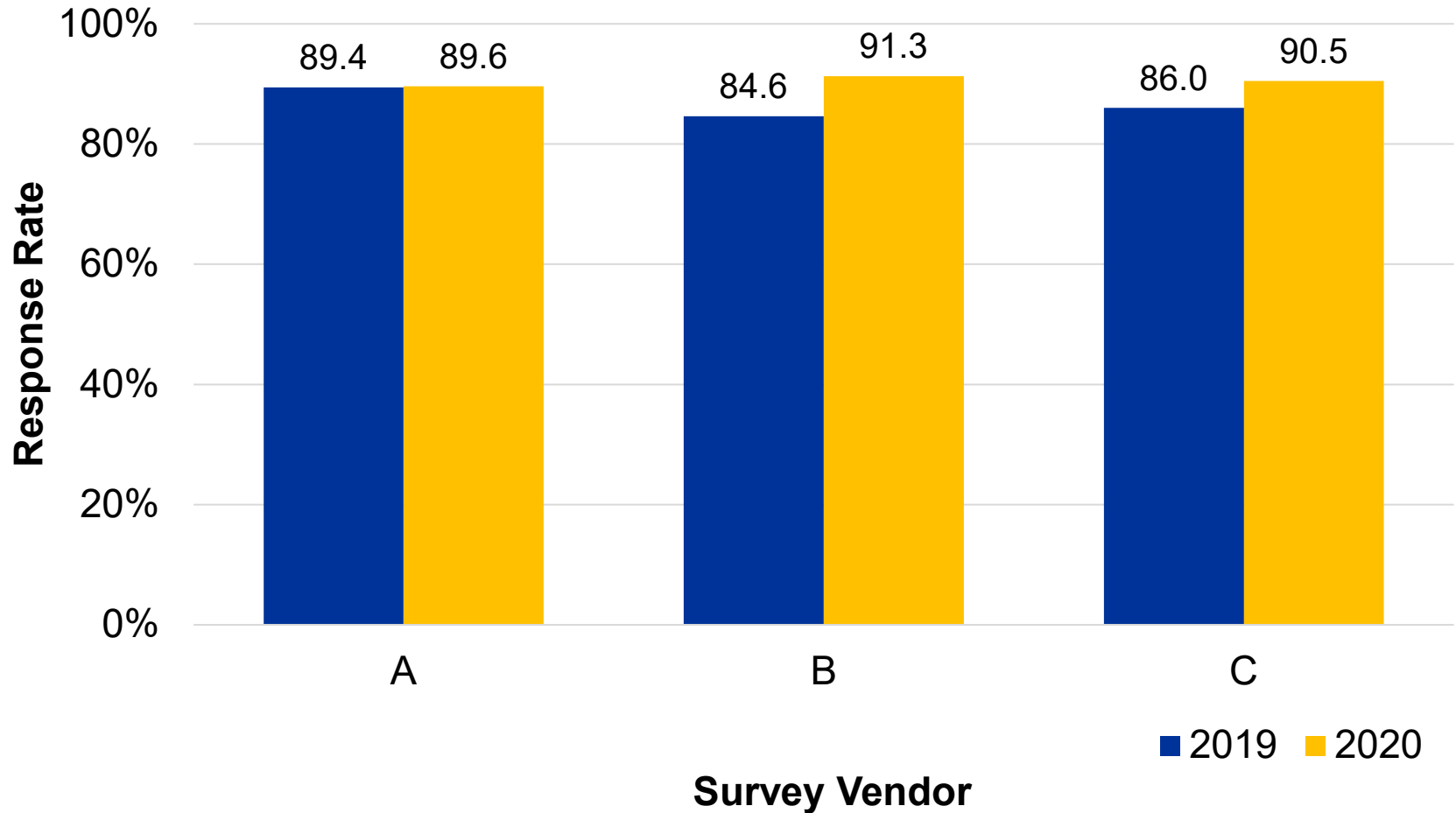
Completed Surveys by Mode

Cohorts 19-21 Follow-Up Surveys: 2018-2020



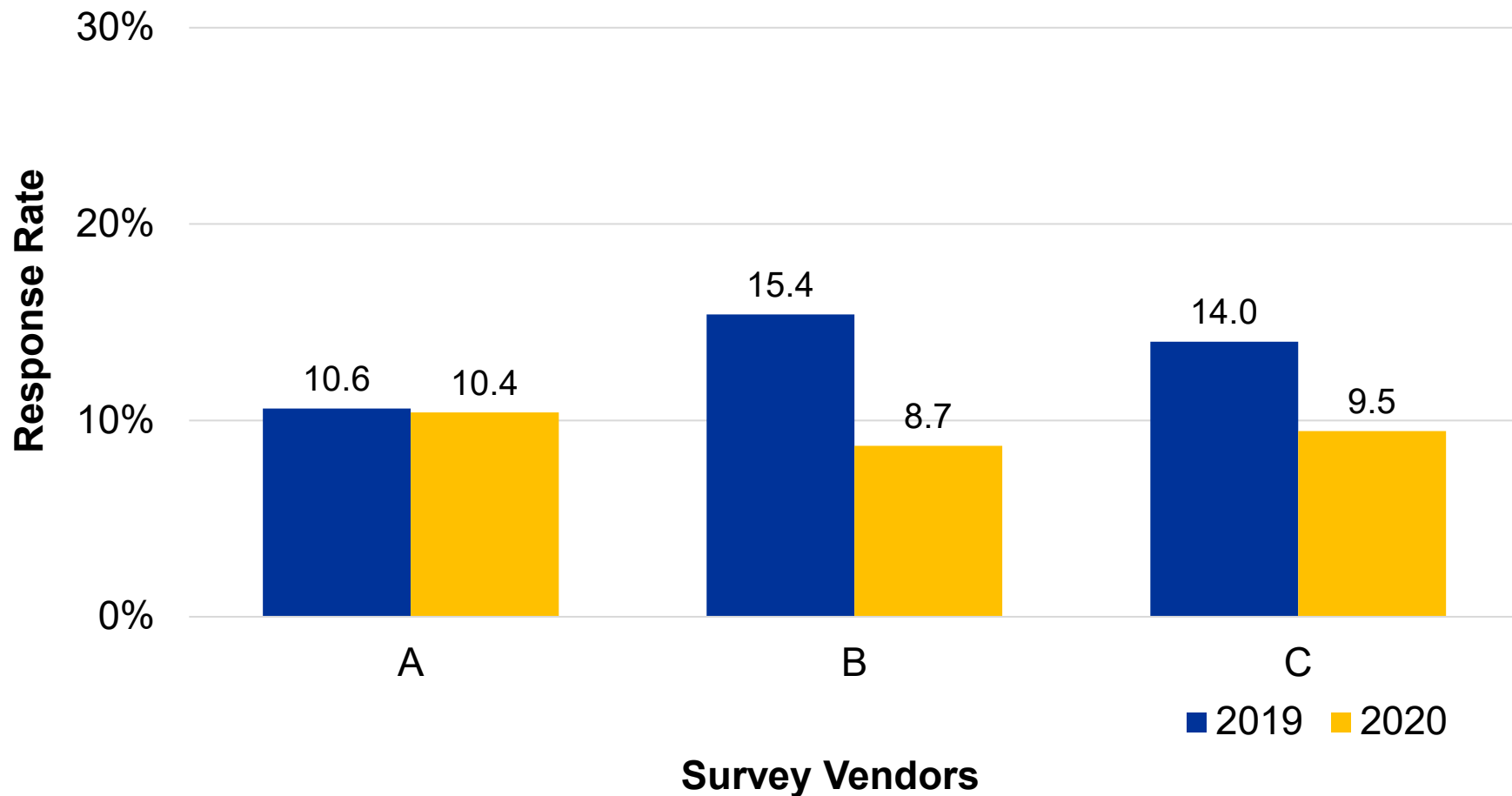
Completed Mail Survey Rates by Vendor

Cohorts 20-21 Follow-Up Surveys: 2019-2020



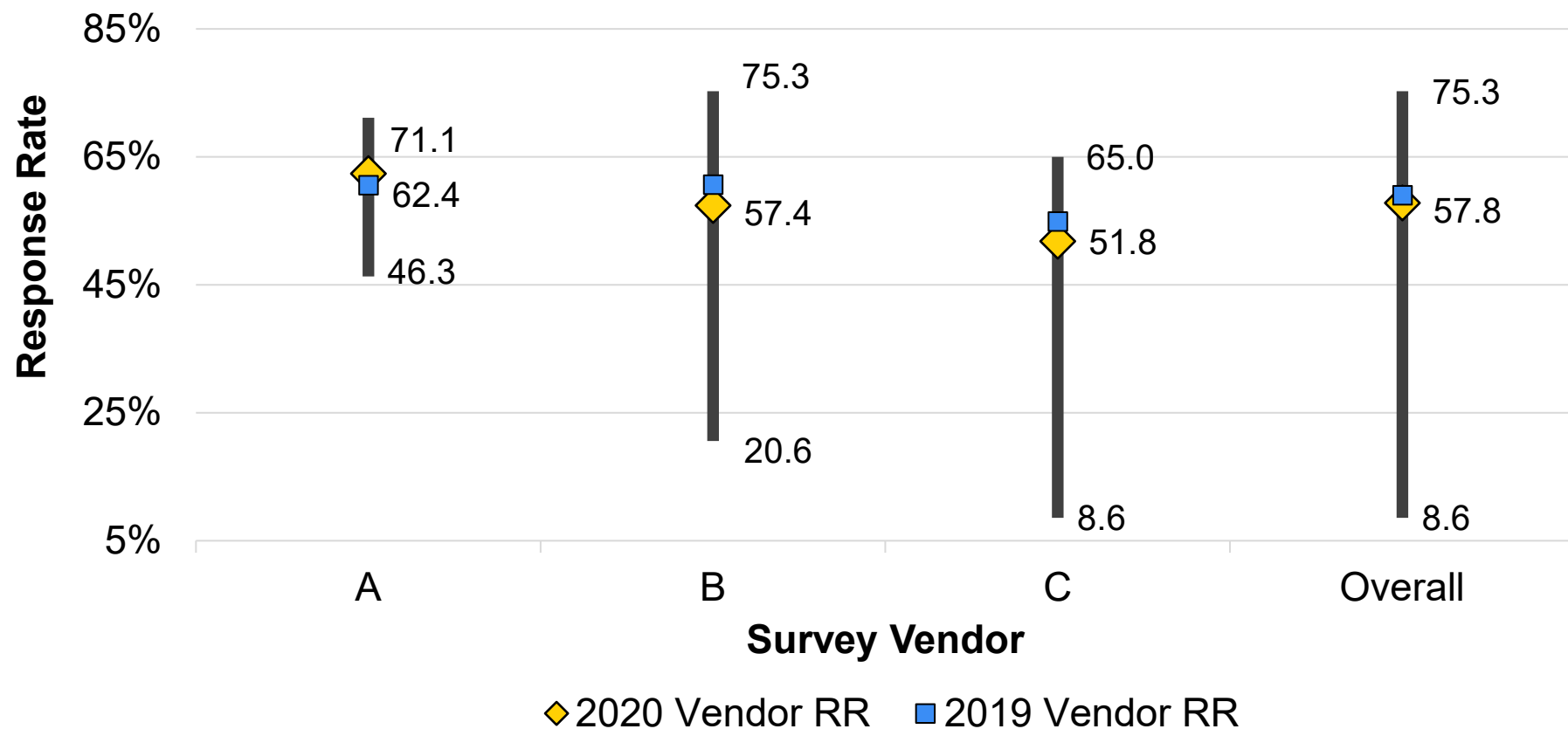
Completed Telephone Survey Rates by Vendor

Cohorts 20-21 Follow-Up Surveys: 2019-2020



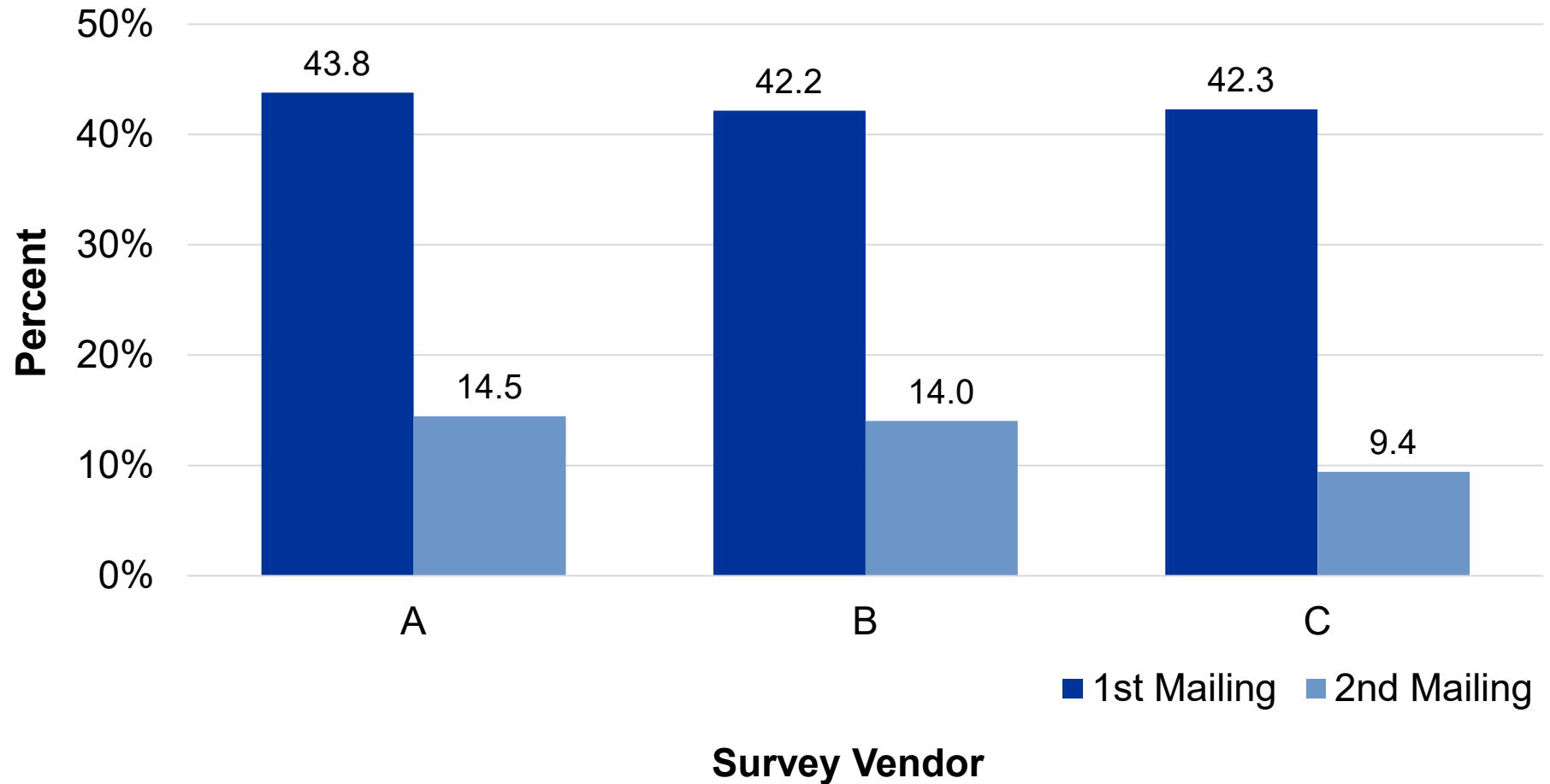
Variability of Completed Survey Rates by Vendor

Cohort 21 Follow-Up Survey: 2020



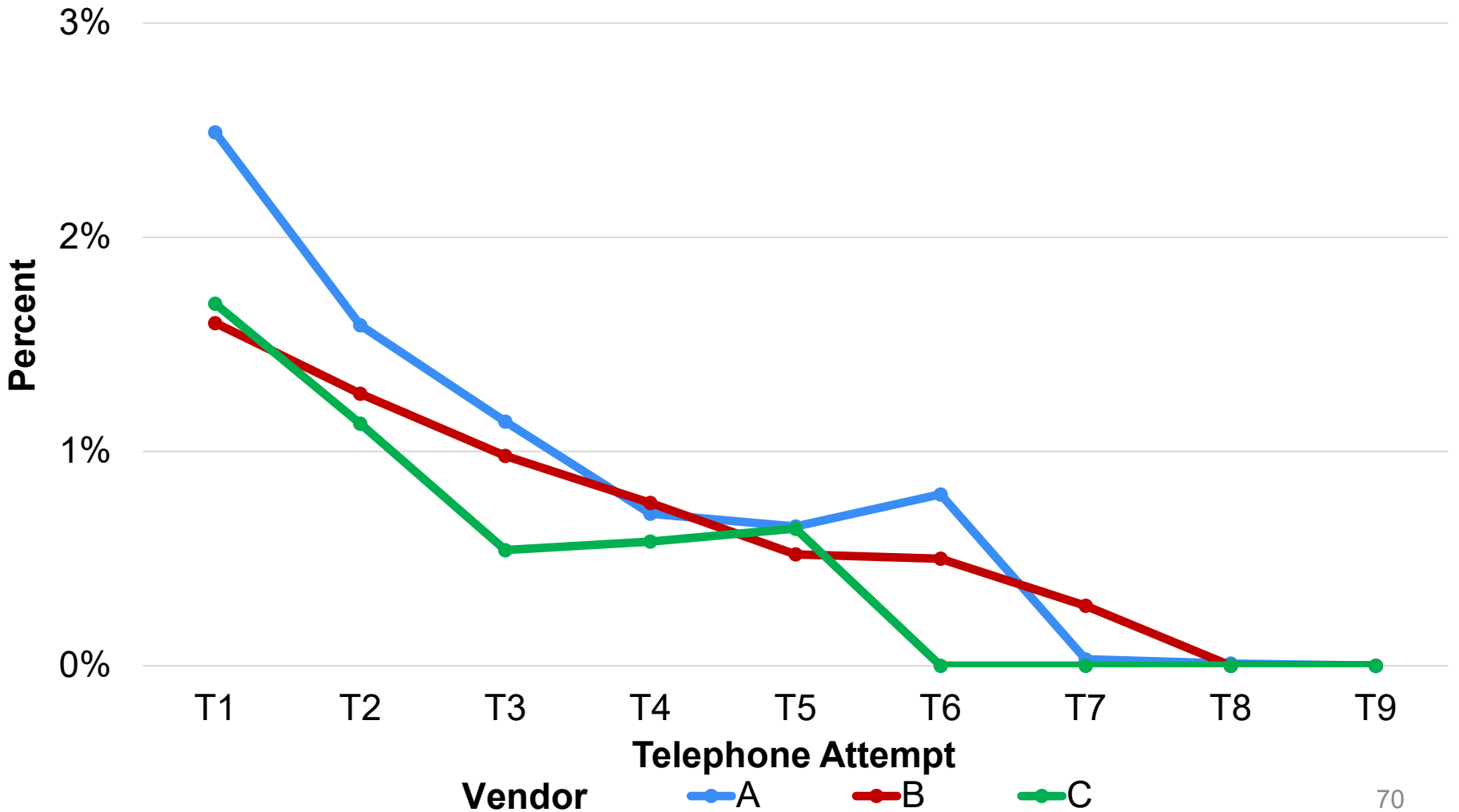
Percent of Sample Responding by Mail

Cohort 21 Follow-Up Survey: 2020



Percent of Sample Responding by Telephone

Cohort 21 Follow-Up Survey: 2020

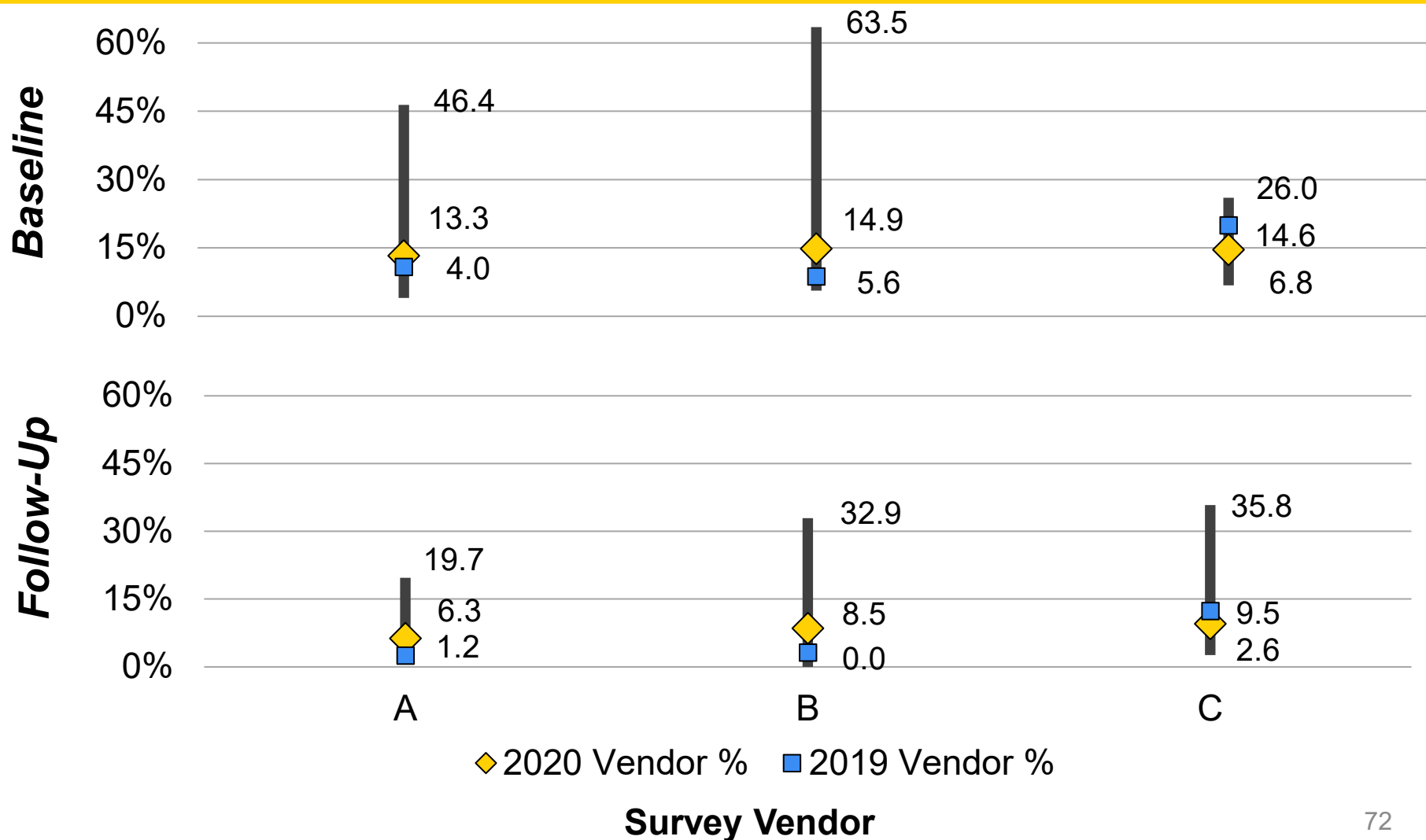




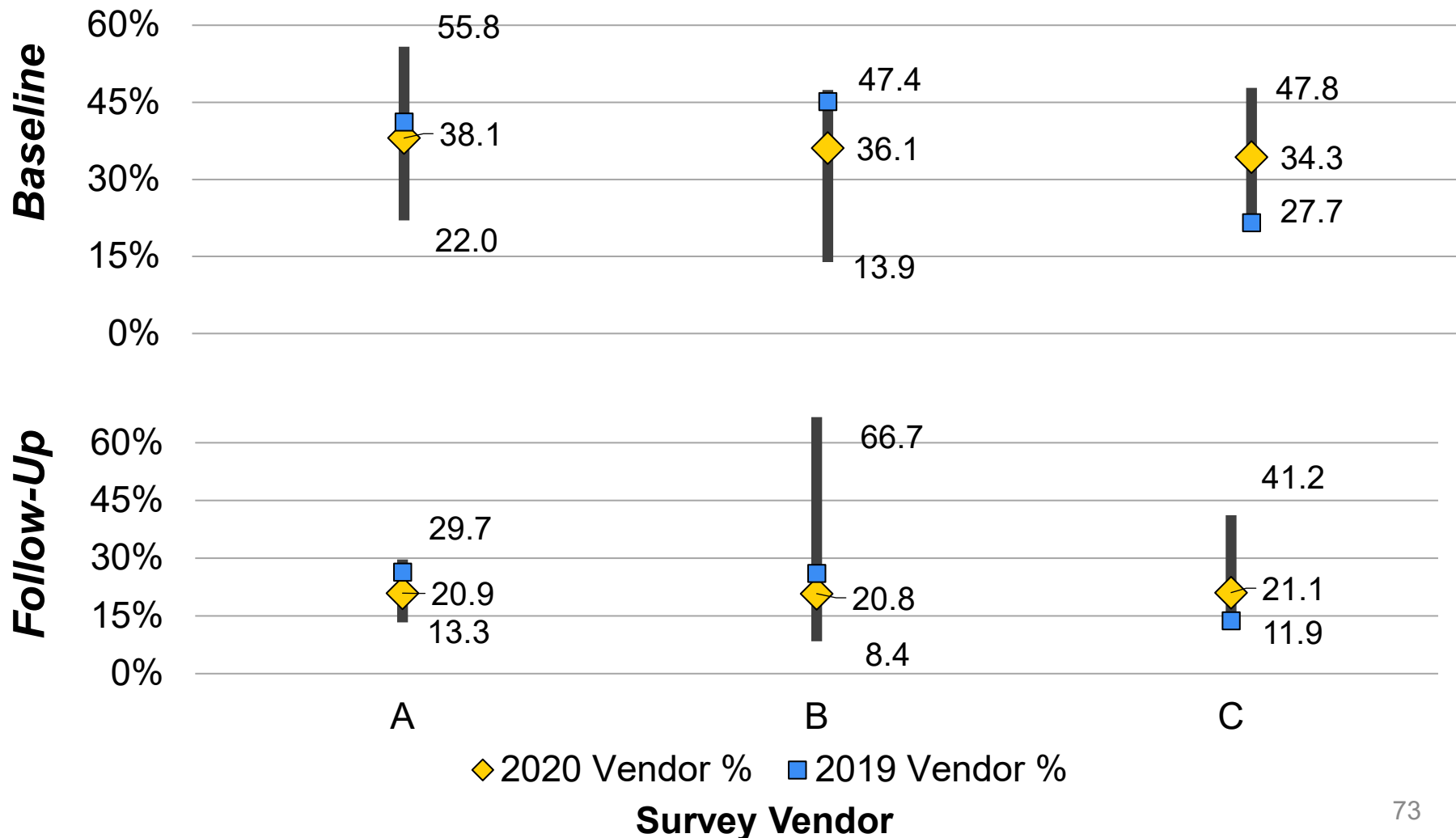
Survey Disposition Components

Cohort 23 Baseline and Cohort 21 Follow-Up

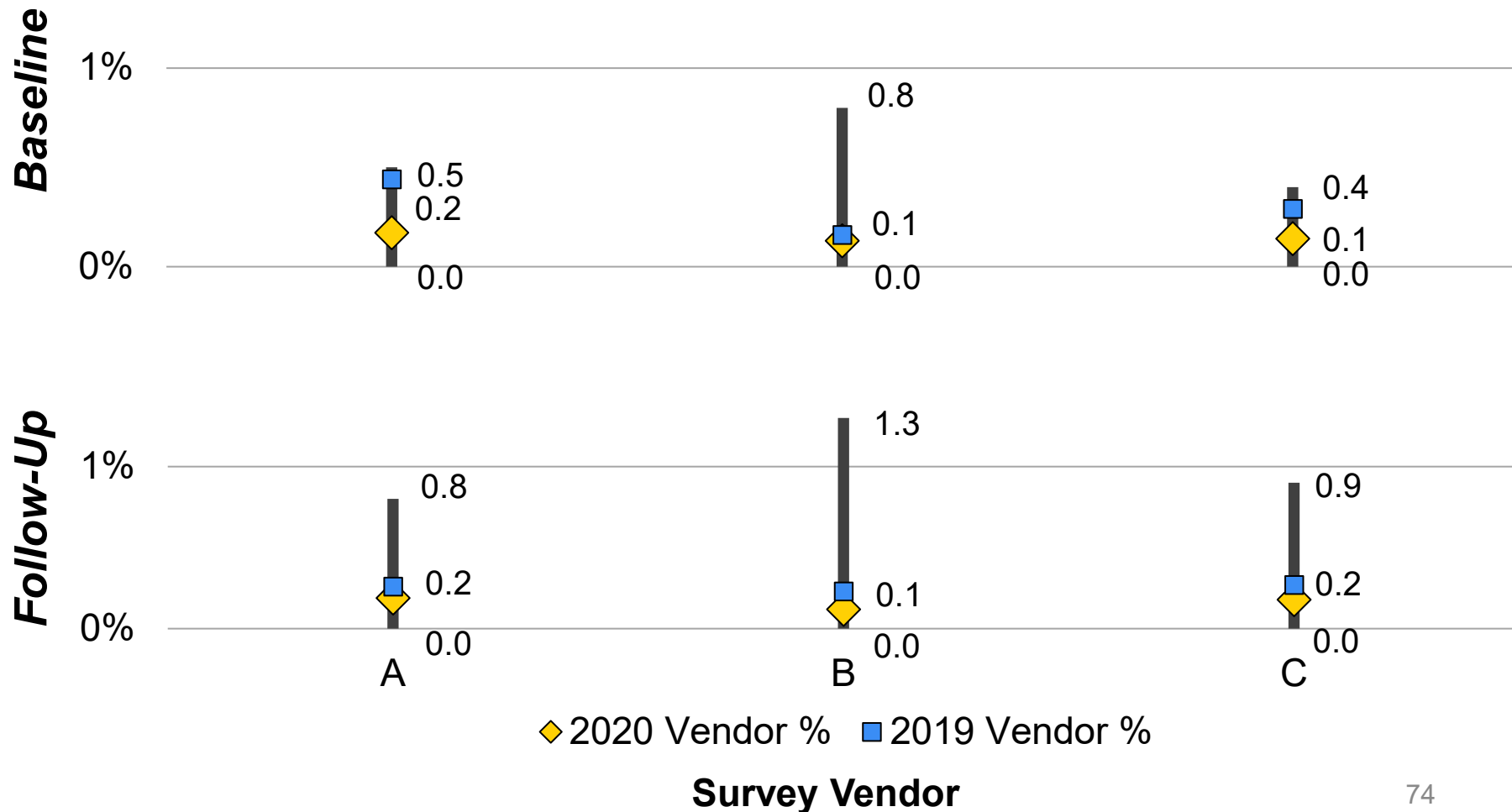
Mail Nonresponse After Max Attempts: M36



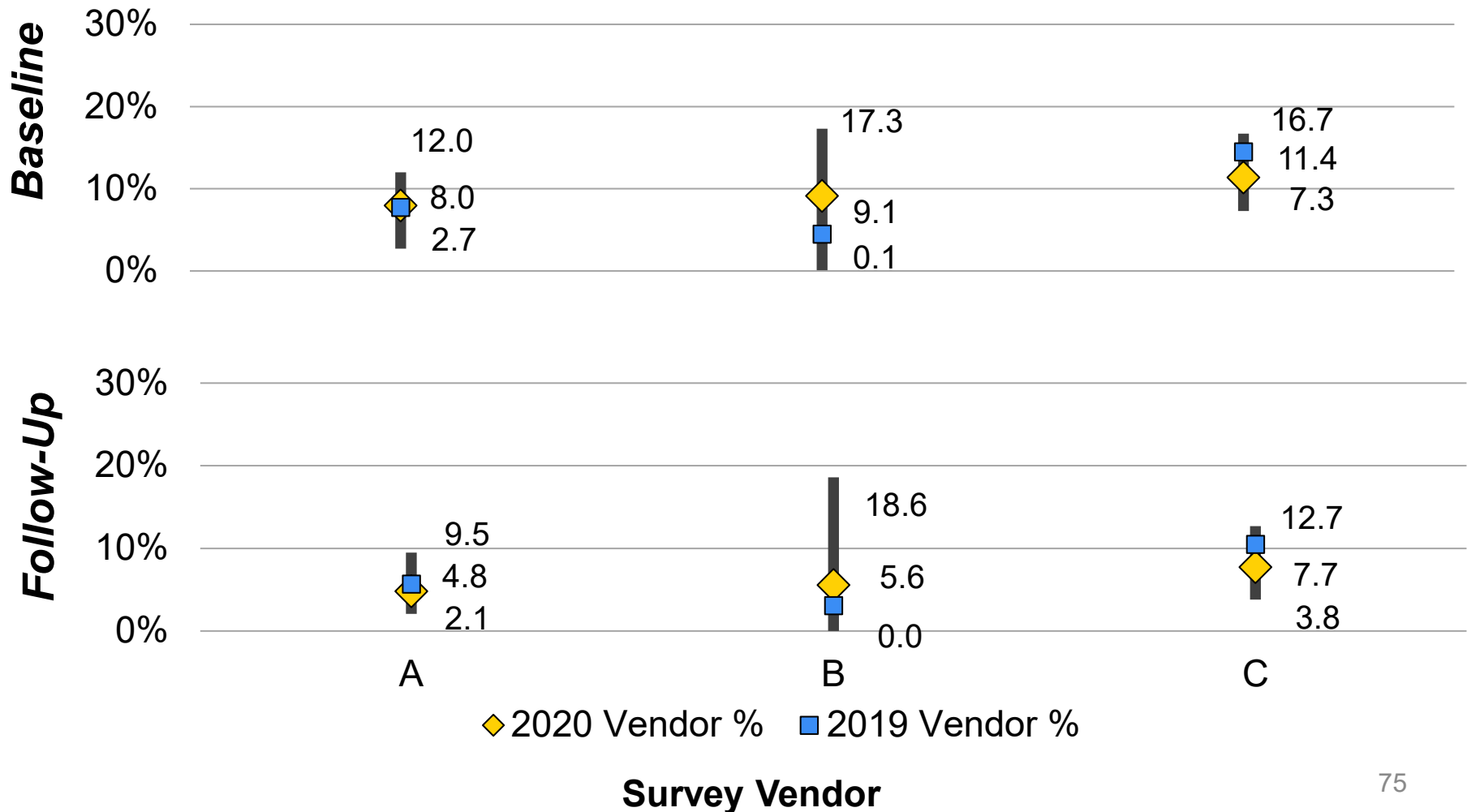
Telephone Nonresponse After Max Attempts: T36



Mail Refusal: M32



Telephone Refusal: T32



Key Points

- Both Baseline and Follow-Up response rates continued to decrease in 2020
- Over 80% of surveys are completed by mail
- The first mailing captures a larger number of respondents than the second
- Similarly, the first telephone attempt obtains the most responses while subsequent attempts have a trend for decreased success
- Wide response rate ranges across contracts were evident for some survey vendors



Survey Material Updates

Overview

- Mailing Material Updates
- Telephone Script Updates
- FAQ Updates
- Distressed Respondents Procedures

Mailing Material Updates

- Use the 2021 versions when preparing your organization's mailing materials (Appendix E in the QAG)

Mailing Material Updates (Cont'd)

Font Requirements


- **NEW:** Print prenotification letters, cover letters, and reminder/thank-you postcards in Times New Roman or Arial 13-point type or larger

Reminder/Thank-You Postcard

- **NEW:** Reminder/Thank-You postcards must be printed on 4" X 5.5" or larger postcard-weight paper (at least 0.007 inches thick)


Mailing Material Updates (Cont'd)

OMB Footer

-  **NEW:** Updated OMB footer for 2021
 - Entire footer must be included on **every** page of the questionnaire

Mailing Material Updates (Cont'd)

Follow-Up Letter for First and Second Questionnaire Mailing – Proxy at Baseline

-  **NEW:** Revised the proxy-specific sentence
 - If Proxy name is missing, this sentence reads, “Our records show that two years ago, the name of the person who helped you complete the survey was not provided.”

Mailing Material Updates (Cont'd)

Q38 (Pain)

- **NEW:** Revised response options for Q38 (Pain) to include 0 (No pain) through 10 (Worst imaginable pain)

Mailing Material Updates (Cont'd)

Q52 (Osteoporosis Testing in Older Women)

- **NEW:** Removed Q52 (Osteoporosis Testing in Older Women) from the HOS 2021 questionnaires
 - Updated question numbers accordingly throughout questionnaires


Mailing Material Updates (Cont'd)

Q65 (Who completed this survey form?)

- **NEW:** Revised the skip pattern instructions for Q65 (Who completed this survey form?)

Telephone Script Updates

Preparing the Telephone Script

- Use the 2021 versions when preparing your organization's telephone interviewing system (Appendix F in the QAG)
-  **NEW:** Field positions for Proxy Name referenced in the telephone specifications have been updated to align with the 2021 Sample File Layout

Telephone Script Updates (Cont'd)

Q52 (Osteoporosis Testing in Older Women)

- **NEW:** Removed Q52 (Osteoporosis Testing in Older Women) from the HOS 2021 telephone script
 - Updated question numbers accordingly throughout telephone script

Telephone Script Updates (Cont'd)

Q38 (Pain)

- **NEW:** Revised interview question and response options for Q38 (Pain) to include 0 (No pain) through 10 (Worst imaginable pain)

Telephone Script Updates (Cont'd)

Interviewer Notes


- **NEW:** Revised interviewer note for Q41 (Smoking)
 - *Interviewers must read the first three response options for this question. Do not read the response choice of “Don’t know.” If the respondent indicates they “don’t know” the response to this question, code as <4> DON’T KNOW (not <9> NOT ASCERTAINED).*
- **NEW:** Added an interviewer note to Q59a (Primary Language)
 - *Interviewers must read all response options for this question.*

Telephone Script Updates (Cont'd)

- Changes to the English telephone specifications are also reflected in the Spanish and Chinese telephone specifications
- Review Spanish and Chinese specifications (provided in tracked changes) for all updates made in 2021

FAQ Updates

Frequently Asked Questions (FAQ)

-  **NEW:** Added one new question and revised select questions in Appendix C: Frequently Asked Questions for Customer Support

Distressed Respondent Procedures

- Survey vendors may encounter respondents who are in crisis or potentially suicidal
- Survey vendors must have established procedures in place for handling distressed respondents that cover the various modes of contact (e.g., sending a letter with the survey, emailing customer support, stating concerns during a telephone interview)
- Survey vendors must document their processes (including staff training procedures) in their QAPs
- Survey vendors must **not** share the information of beneficiaries reporting abuse or distress with MAOs

Distressed Respondent Procedures (Cont'd)

The following are suggestions for handling these types of situations:

- When respondents threaten to take their life immediately, attempt to keep the respondent on the line and call 911 or refer the individual to the National Suicide Prevention Lifeline [1-800-273-TALK (8255)]
- When respondents express thoughts about taking their life, refer the respondent to the National Suicide Prevention Lifeline [1-800-273-TALK (8255)]
- When respondents express abuse or neglect, refer the respondent to the National Domestic Violence Helpline [1-800-799-SAFE (7233)]



Data Coding and Data Submission

Overview

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

File Layout Changes

Header Record Layout

-  **NEW:** Updated NCQA Survey Vendor ID valid values to add two organizations and to include a leading zero for each existing ID

Field Description	Field Position		Field Length	Valid Values
	Start	End		
NCQA Survey Vendor ID	81	88	8	001413 = Center for the Study of Services 022255 = Data Recognition Corporation 001415 = DataStat, Inc. 290721 = Market Decisions Research 001463 = SPH Analytics

File Layout Changes (Cont'd)


Sample File Layout

- **NEW:** Added two Protocol Identifier Flags to account for Russian Follow-Up protocol

Field Description	Field Position		Field Length	Added Valid Values
	Start	End		
Protocol Identifier Flag	272	273	2	10 = Russian Follow-Up—No Proxy at Baseline 11 = Russian Follow-Up—Proxy at Baseline

File Layout Changes (Cont'd)

Survey File Record Layout

-  **NEW:** Removed osteoporosis testing question from 2021 survey
- Updated question numbers and field positions accordingly beginning at field position 150

File Layout Changes (Cont'd)


Survey File Record Layout

- **NEW:** Q38 (Pain) valid values
 - Updated range from 01-10 to 00-10
 - Denoted new 00 valid value as "No pain"

Field Description	Field Position		Field Length	Valid Values
	Start	End		
Question 38	134	135	2	00 = 0 No pain 01 = 1 02 = 2 03 = 3 04 = 4 05 = 5 06 = 6 07 = 7 08 = 8 09 = 9 10 = 10 Worst imaginable pain 99 Missing

File Layout Changes (Cont'd)

Survey File Record Layout

-  **NEW:** Q55 (Height in Feet and Inches) valid values
 - Updated guidance to indicate that 1 is not a valid value for height in feet for telephone surveys

Field Description	Field Position		Field Length	Valid Values
	Start	End		
Question 55	155	157	3	Height in feet (155) 8 = Inappropriate answer 9 = Missing <i>1 is not a valid value for telephone surveys.</i> Height in inches (156-157) 88 = Inappropriate answer 99 = Missing

File Layout Changes (Cont'd)


Survey File Record Layout

- **NEW:** Q66 (Proxy First and Last Name) valid values
 - Included instructions for Romanizing proxy names provided in Chinese or Cyrillic characters

Field Description	Field Position		Field Length	Valid Values
	Start	End		
Question 66 (First Name)	229	253	25	First name of person who completed survey.
Question 66 (Last Name)	254	278	25	Last name of person who completed survey. <i>If missing, leave blank. If a proxy name is entered in Traditional Chinese or Cyrillic characters, Romanize in interim and final data files. Do not use accented letters.</i>

File Layout Changes (Cont'd)

Survey File Record Layout

-  **NEW:** Updated Survey Disposition valid values
 - Removed M21/T21 = Ineligible: Not Enrolled in MAO
 - Removed M26 = Ineligible: Duplicate – Member Listed Twice in Sample
 - Reintroduced M24 = Ineligible: Bad Address *and* Mail-Only Protocol (*Russian only*)

File Layout Changes (Cont'd)

Survey File Record Layout

-  **NEW:** Survey Completion Date valid values
 - Updated valid values to align with 2021 survey administration dates

Field Description	Field Position		Field Length	Valid Values
	Start	End		
Survey Completion Date	287	294	8	MMDDYYYY 07192021 – 11012021 <i>July 19, 2021 – November 1, 2021</i> 99999999 = Not applicable

File Layout Changes (Cont'd)

Survey File Record Layout

- **NEW:** Survey Vendor Telephone Interviewer ID valid values
 - Updated valid values to align with revised vendor IDs

Field Description	Field Position		Field Length	Valid Values
	Start	End		
Survey Vendor Telephone Interviewer ID <i>Unique 11-digit ID assigned by the survey vendor that indicates which telephone interviewer conducted the interview.</i>	295	305	11	001413NNNNN = Center for the Study of Services 022255NNNNN = Data Recognition Corporation 001415NNNNN = DataStat, Inc. 290721NNNNN = Market Decisions Research 001463NNNNN = SPH Analytics 99999999999 = Not applicable <i>Use leading zeros if survey vendor uses telephone interviewer IDs less than 5 digits.</i>

Decision Rules

Open-ended Questions

- Q59b (Primary Language – Please Specify)
 - Code response exactly as provided, regardless of appropriateness
- Q66a and Q66b (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 Q59b and Q66
 - Record response as ILLEGIBLE
 - Use all caps
 - Do **NOT** use any punctuation

Percent Complete

- HOS contains 84 potential response items
- Exclude 12 skip pattern items from calculation
 - Q14, Q35a-Q35e, Q43, Q44, Q45, Q47, Q64, Q66
 - **Note:** Q56b is excluded from percent complete calculation because it is only asked in the telephone survey as part of a skip pattern
- Denominator is 72 items

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

Disposition Codes

Complete Survey (M10/T10)

- **NEW:** Per revised 2021 survey, updated number of items required for complete survey

Final Disposition	Disposition Code	Definition/Explanation
Complete Survey	M10/T10	Must meet the following two criteria: <ul style="list-style-type: none">• 80% or more complete (58 items or more).• All six ADL items (Q10a-f) answered.

Disposition Codes (Cont'd)

Partial Complete (M11/T11)

- **NEW:** Per revised 2021 survey, updated number of items required for partial complete survey

Final Disposition	Disposition Code	Definition/Explanation
Partial Complete	M11/T11	Assign in the following two scenarios: <ul style="list-style-type: none">• 50% or more but less than 80% complete (36-57 items).• 80% or more complete (58 items or more) with one or more ADL items unanswered.

Disposition Codes (Cont'd)

Break-off (M31/T31)

- **NEW:** Per revised 2021 survey, updated number of items required for break-off survey

Final Disposition	Disposition Code	Definition/Explanation
Break-off	M31/T31	<ul style="list-style-type: none">• Less than 50% complete (0-35 items).• Independent of whether ADL items answered.

Disposition Codes (Cont'd)

Coding Demographic Fields

- Survey vendors do **NOT** code a record T31 if only demographic information is collected from member or proxy
 - Only Q65 and Q66 answered
 - Interview ends before Q1
- Continue telephone attempts to reach the member or proxy to complete the survey

Disposition Codes (Cont'd)

Bad Address *and* Mail-Only Protocol (M24)

- **NEW:** Due to inclusion of Russian Follow-Up protocol, reintroduced M24 disposition code

Final Disposition	Disposition Code	Definition/Explanation
Bad Address <i>and</i> Mail-Only Protocol	M24	There is evidence that the member's address is bad (e.g., post-office returns questionnaire to survey vendor) and the member is in a mail-only protocol (Russian Follow-Up protocol only).

Disposition Codes (Cont'd)

Example of M24

- Member is in Russian Follow-Up—No Proxy at Baseline protocol
- Survey vendor sends mail survey in Russian, but post-office returns questionnaire to survey vendor (bad address)
 - Member is in a mail-only protocol and does not receive any telephone attempts; therefore, the survey vendor is unable to contact the member by phone
 - Ineligible: Bad Address and No Phone Protocol = M24

Disposition Codes (Cont'd)

Assignment of M24/T24 and M36/T36

- **NEW:** Updated guidance to reflect inclusion of Chinese telephone and Russian Follow-Up mail protocols

	Viable Address	Evidence of Bad Address
Viable Telephone Number (English, Spanish, or Chinese)	T36	T36
Evidence of Bad Telephone Number (English, Spanish, or Chinese)	M36	T24
Mail-Only Protocol (Russian)	M36	M24


Disposition Codes (Cont'd)

Additional Survey Disposition Updates

- **NEW:** Removed two ineligible codes
 - M21/T21—Not Enrolled in MAO
 - M26—Duplicate: Member Listed Twice in Sample
- **NEW:** Clarified definition of one ineligible code
 - In rare instances (e.g., MAO is no longer eligible for the survey), survey vendors may be instructed to use “M25—Ineligible: Removed from Sample”
 - May only be used with prior approval

Data Coding

Assigning Survey Round Variable

-  **NEW:** Clarified appropriate use of Inbound Telephone Survey Round
 - TN = Respondent completed the survey during an inbound telephone attempt
 - Survey vendors must use the TN Survey Round for all surveys completed by telephone prior to the start of outbound telephone dialing
 - Assigned only for T10, T11, and T31 disposition codes
 - Code the Survey Completion Date as the interview date

Data Coding (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 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 Data Submission System
 - New system for 2021
 - 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 5** and closes **Thursday, October 7**
- All data received up to **three business days** prior to the Interim Data Submission due date (**Monday, October 4**) 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
- 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

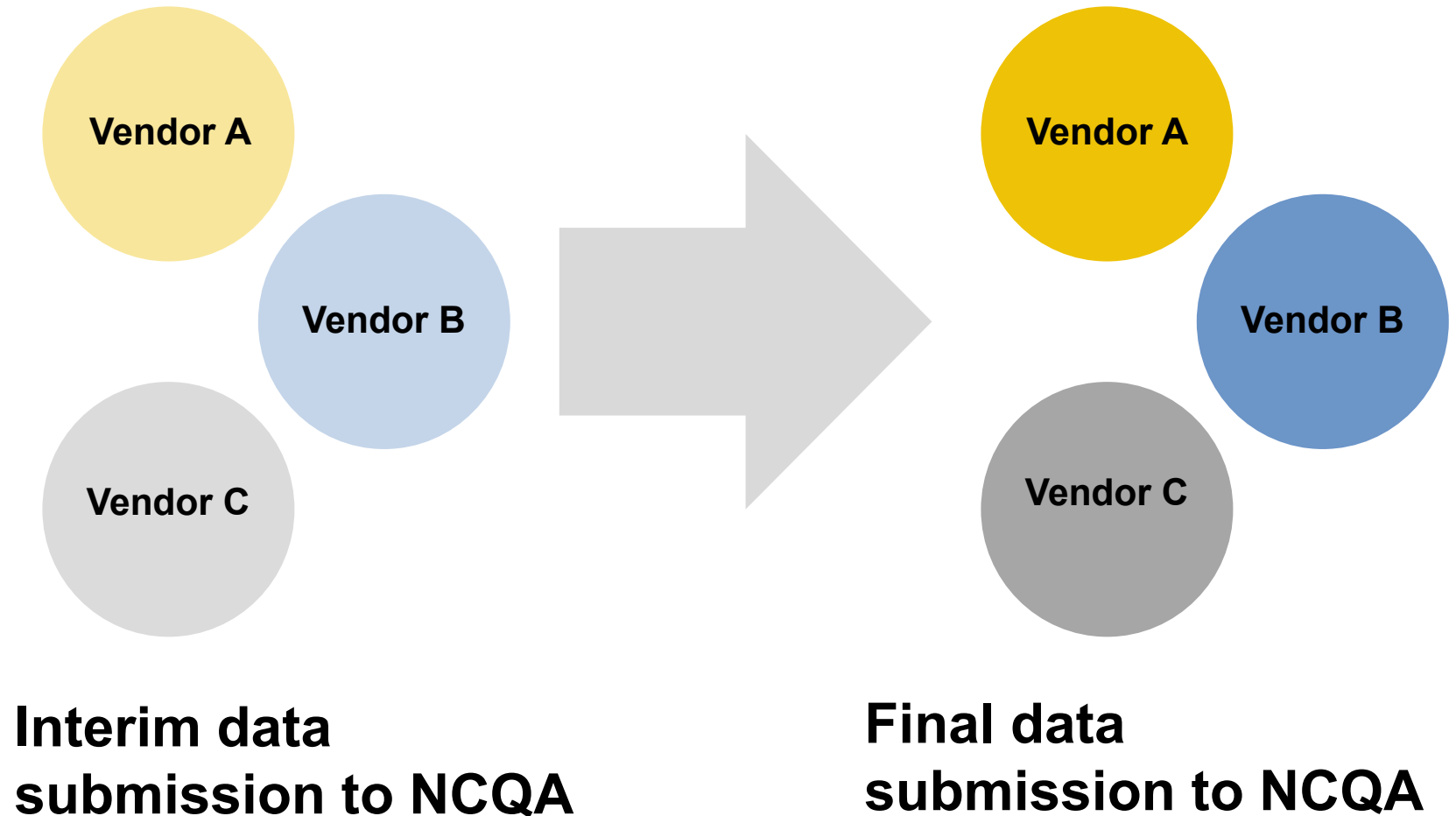
- Final Data Submission opens **Tuesday, November 2**
- Complete data attestation prior to marking files “Final”
- Final data files due **Friday, November 12**
- Final data files will be cleaned and analyzed
 - Data collection issues identified during Final Data Submission may warrant Discrepancy Reports

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
- MA Contract Data Requests for Cohort 20
- HOS Case-Mix

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

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

Skip Pattern Violations

- Skip pattern violations by beneficiaries that occur in the mail survey data **are expected**
 - 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

Out of Range and Inappropriate 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
- Verify that height in feet field has appropriate values
 - More likely to be between 4-6 feet than above 6 feet or below 4 feet

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)

- Investigate inconsistencies across fields
 - Frequencies 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: Inappropriate Missing Pattern

- Q46: In the past 12 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.
 - ☐ Yes → **Go to Q47**
 - ☐ No → **Go to Q47**
 - ☐ I had no visits in the past 12 months → **Go to Q48**

Inappropriate Missing Pattern (Cont'd)

Answer to Q46:

☒ Yes → **Go to Q47**

OR

☒ No → **Go to Q47**

Answer of “Yes” or
“No” Indicates to go
to Q47

Answer to Q46:

☐ Yes → **Go to Q47**

☐ No → **Go to Q47**

☐ I had no visits in
the past 12 months
→ **Go to Q48**

No response to Q46
Indicates to go to Q47

Answer to Q46:

☒ I had no visits
in the past 12
months →
Go to Q48

This selection
indicates to go to Q48

Example 2: Inconsistent Data

Q56a: Are you male or female?

☐

Male

☐

Female

Example 3: Inconsistent Data

Gender Discrepancies			
	CMS Gender	Survey Gender	Match
Survey Vendor (not corresponding to other examples)	(one record example per vendor)		
A	M	F	x
B	F	F	✓
C	F	M	x

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 4: Inappropriate Cleaning

Height in Inches (not corresponding to other examples)	Survey Vendor (percent)		
	A	B	C
Valid (00-98)	93.8	92.15	93.75
Inappropriate Answer (88)	1.23	0.33	0.00
Missing (99)	3.29	5.12	4.03

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

Missing Responses

- Recognize gatekeeper questions
- 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 5: Missing Responses

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	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 clusters of missing responses

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

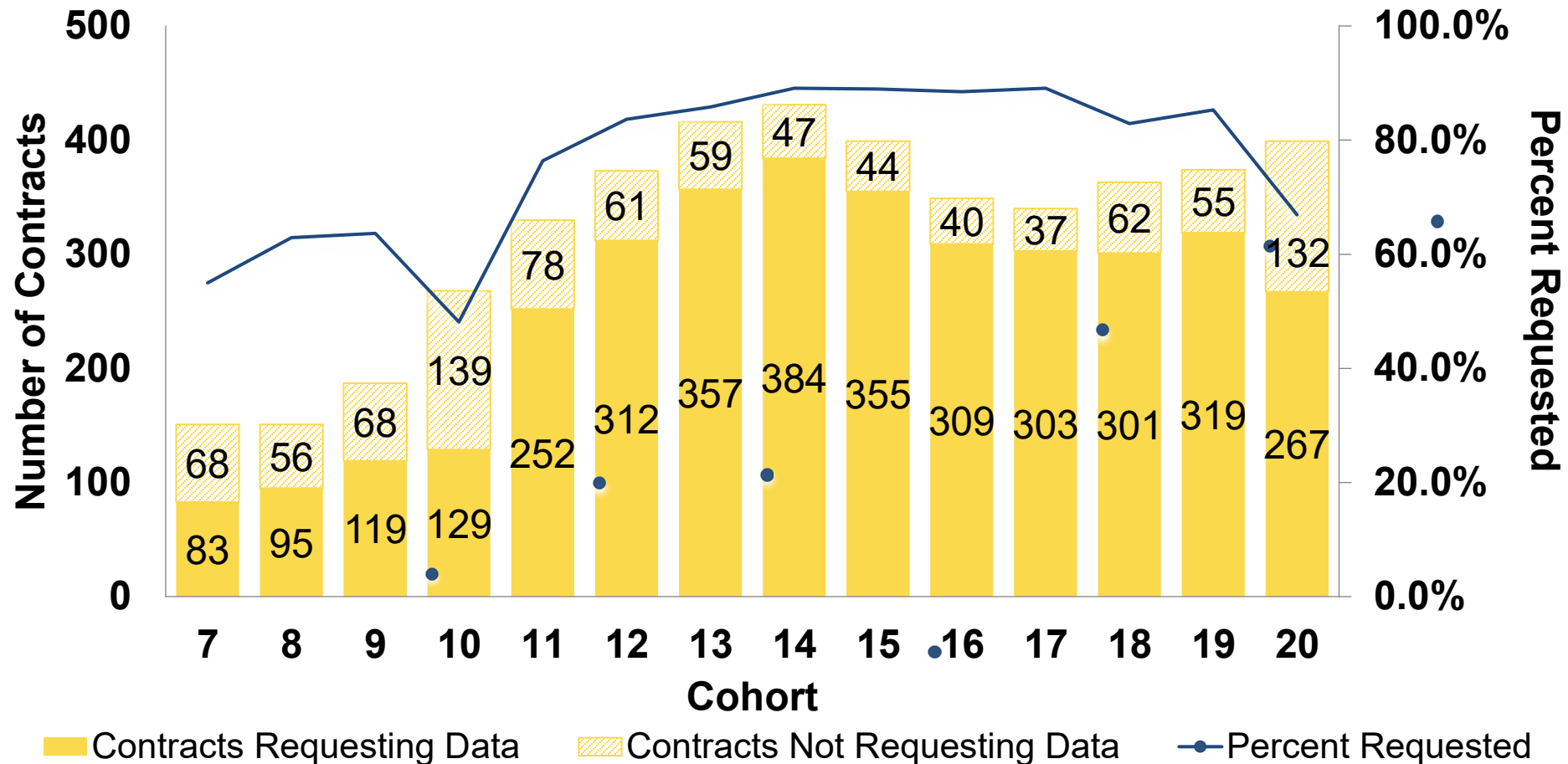
Suggested Quality Checks for Survey Vendors (Cont'd)

- 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 or other special characters

MA Contract Data Requests for Cohort 20



HOS Case-Mix

- The three 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, and beneficiaries are categorized as better, the 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 beneficiary
- Baseline demographic and socioeconomic indicators, and baseline health status are included in the 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 the aggregated percentages for each MAO, and death is incorporated with physical health only
- Final HOS outcomes are adjusted by combining the differences between actual and expected results for each MAO with the national averages
- In summary, the Performance Measurement Analysis determines the percentages of beneficiaries in the MAO who are better, the same, or worse than expected at the two-year follow up in comparison to national averages

PFADL Change Score Measure

- The new longitudinal Physical Functioning Activities of Daily Living (PFADL) change score measure was added to the 2021 display measures on the CMS website and the Health Plan Management System (HPMS)
- The PFADL change score measure combines two PF questions (limitations in moderate activities and climbing stairs) with six ADL items to create a Likert-type scale, computed at baseline and two-year follow up
- The PFADL change score measure can be interpreted as approximating the percent of function retained over two years by the average beneficiary in a Medicare Advantage plan
- A detailed methodology used to create the PFADL change score measure is described on the Survey Results page of the HOS website (<https://www.HOSonline.org>)

Health Services Advisory Group

For inquiries, please contact the Medicare HOS
Information and Technical Support Telephone Line at

Telephone: (888) 880-0077

or

Email Address: hos@hsag.com

HOS Website: <https://www.HOSonline.org>



Quality Oversight and Project Reporting

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 11	Friday, June 25	Tuesday, July 6
Electronic Telephone Interviewing Material Review	Friday, June 25	Friday, July 9	Monday, July 19
Survey Vendor QAP	Friday, July 2	Survey Vendor Conference Call	Within 5 Business Days

Mailing Materials

- Review final print-ready HOS mailing materials
- **Due Friday, June 11**
 - Send electronic copies to hos@ncqa.org
 - Comment/approve by Friday, June 25
 - All materials must be final by **Tuesday, July 6**

Mailing Materials (Cont'd)

Common Findings

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

Electronic Interviewing Materials


- Review telephone interviewing screenshots and skip pattern logic
- **Due Friday, June 25**
 - Two weeks after submitting mailing materials
 - Send electronic copies to hos@ncqa.org
 - Comment/approve by Friday, July 9
 - All materials must be final by **Monday, July 19**
- 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, July 2**
-  **NEW:** 2021 QAPs must include:
 - Description of telephone monitoring across all survey languages
 - Process for addressing technical issues during telephone interviewing
 - Process for handling distressed members
 - Processes and timelines for destruction of electronic data files and paper surveys
 - Disaster recovery plan

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 (2021)
Survey Vendor Conference Calls	Monday, July 19– Friday, July 30
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 7

Survey Vendor Conference Calls

- Held **Monday, July 19 – Friday, July 30**
- 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 and CMS 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

Customer Support Review

- Assess customer support responses to the specifications in QAG and FAQ
- Customer support review: *Telephone*
 - HOS Project Team makes at least two anonymous calls to customer support line
- Customer support review: *Email*
 - **Securely** forward all customer support emails with responses on a weekly basis
 - **NEW:** 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)
 - 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_C24B_MM-DD-21.xls
 - Survey Vendor Name_SSR_C22F_MM-DD-21.xls
- Use 2021 SSR template provided prior to fielding

One-Time Deliverable

Sample of MAO Progress Reports (Report #7)

- 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: <ul style="list-style-type: none">• 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 30

Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date
REPORT #3 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: <ul style="list-style-type: none">• Overview of Baseline and Follow-Up reminder/thank-you postcard mailing.• Verification of mail out date of Baseline and Follow-Up reminder/thank-you postcard mailing (e.g., USPS generated report).• Outstanding issues or concerns. Other Deliverable: Member correspondence (white mail), if applicable.	Friday, August 13
REPORT #4 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: <p>Overview of progress with protocol to date. Detail problems or issues to date. Outstanding issues or concerns.</p> Other Deliverable: Member correspondence (white mail), if applicable.	Friday, August 27

Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date
<p>REPORT #5</p> <p>Summary Status Report: Baseline and Follow-Up Cohorts.</p> <p>Narrative Report:</p> <ul style="list-style-type: none">• Overview of Baseline and Follow-Up second questionnaire mailing and second reminder/thank-you postcard mailing (Russian only).• Verification of mail out dates of Baseline and Follow-Up second questionnaire mailing and second reminder/thank-you postcard mailing (Russian only) (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.<ul style="list-style-type: none">• NEW: Specify number of calls and/or emails requesting information regarding an internet version of the survey.• Outstanding issues or concerns. <p>Other Deliverable: Member correspondence (white mail), if applicable.</p>	Friday, September 10

Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date
REPORT #6 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: <ul style="list-style-type: none">• Overview of progress with protocol to date.• Detail problems or issues to date.• Describe process of converting partially completed surveys to complete, and progress.• Describe telephone protocol and training.• Report on progress of Baseline and Follow-Up electronic telephone interviewing implementation. Other Deliverable: Member correspondence (white mail), if applicable.	Friday, September 24

Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date
REPORT #7 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: <ul style="list-style-type: none">• 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: <ul style="list-style-type: none">• Member correspondence (white mail), if applicable.• Submit a sample of the interim/progress report that is provided to HOS clients.	Friday, October 8

Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date
REPORT #8 Summary Status Report: Baseline and Follow-Up Cohorts. Narrative Report: <ul style="list-style-type: none"> • 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.	Friday, October 22
REPORT #9 Summary Status Report: Baseline and Follow-Up Cohorts. Other Deliverable: Member correspondence (white mail), if applicable.	Friday, November 5

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)

-  **NEW:** Include member contact information for CMS follow-up and an English summary of any pieces of white mail in Spanish, Chinese, or Russian
 - Do **NOT** send member correspondence via email

Examples of Correspondence to Be Sent	Examples of Correspondence NOT to Be Sent
<ul style="list-style-type: none">• Messages intended for CMS• Comments about the MAO/provider• Personal problems• Requests for medical assistance and supporting documentation• Opinions about the survey instrument or federal government	<ul style="list-style-type: none">• 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
 -  **NEW:** Callbacks are not permitted
- 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 review
 - Data security
- If necessary, 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 onsite or 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 (2021)
Survey Vendor Final Report	Friday, November 19
Report of HOS Records Stored and Facility Standards for Records Storage Facilities Inspection Checklist	Friday, December 3

Final Detailed Status Report

- Three components:
 1. Data synthesis (required)
 2. Discussion component (required)
 - Survey implementation, issues encountered, lessons learned, recommendations
 - List any additional language translations requested by MAOs
 - **NEW:** List any additional survey modes requested by MAOs and/or respondents (e.g., internet, text) and number of requests
 3. Recommendations for 2022 HOS Administration
- Reports used for:
 - Informing QAG updates
 - Process improvement

Ongoing Activities

- Discrepancy Reports & Corrective Action Plan
- Technical Support

Discrepancy Report & Corrective Action Plan

- Complete and submit Discrepancy Report within ***one business day***
- Provide as much information as possible
 - Discrepancy Description
 - Corrective Action Plan

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

NCQA's Secure Site Accellion

- NCQA uses an Accellion account system
 - All new users must register with the system
- All materials and documents sent 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.ncqa.org>

NCQA's Secure Site Accellion (Cont'd)

- 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>

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