# MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 \*Technical Corrections and Clarifications\*

Issued November 2024

Subsequent to the production of the MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 (QAP&TS V14.0), it has been determined that there are specific items that require content corrections. These items are identified below.

- 1. Chapter II. Introduction and Overview New for 2024 section
  - The description of the planned changes to Getting Appointments and Care Quickly composite measure scoring for 2024 data has been added

CHANGE MADE	CURRENT	REVISED
Added text describing the changes to composite scoring for 2024 data	N/A	the Announcement of Calendar Year (CY) 2024 Medicare Advantage (MA) Capitation Rates and Part C and Part D Payment Policies, CMS is dropping Q8 (Wait time includes time spent in the waiting room and exam room. In the last 6 months, how often did you see the person you came to see <a href="within 15 minutes">within 15 minutes</a> of your appointment time?) from scoring of the composite measure Getting Appointments and Care Quickly starting with the 2025 Star Ratings. The item remains in the 2024 MA-Only and MA-PD Survey versions but will not be included in scoring for the Getting Appointments and Care Quickly measure.

## **Technical Corrections and Clarifications**

Issued November 2024

### 2. Chapter II. Introduction and Overview – New for 2024 section

• A description of the removal of the skip pattern at Q20 of the MA-Only and MA-PD survey versions has been added

CHANGE MADE	CURRENT	REVISED
Added text describing the removal of the skip pattern at Q20 of the MA-Only and MA-PD survey versions	N/A	Removed skip logic: The Q20 skip logic for the "Never" response option has been removed in the 2024 MA-Only and MA-PD survey versions.

# MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 Technical Corrections and Clarifications

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- 3. Chapter II. Introduction and Overview New for 2024 section
  - A description of the changes to the timing of inbound CATI protocol has been added

CHANGE MADE	CURRENT	REVISED
Added text describing the changes to the timing of inbound CATI protocol	N/A	Timing of Inbound CATI Protocol: Beginning with 2024 MA & PDP CAHPS Survey administration, inbound CATI protocol will begin at the time of the mail-out of the web invite letter to enrollees without an email address.

### **Technical Corrections and Clarifications**

Issued November 2024

- 4. Chapter VI. Data Collection Protocol Data Collection Schedule
  - The date to submit interim data files with returned web, mail, and inbound CATI survey data to CMS (RAND) in the data collection scheduled has been corrected

CHANGE MADE	CURRENT		REVISED	
	Survey Vendor Task	Date	Survey Vendor Task	Date
<ul><li>Corrected typo for first interim data submission</li></ul>	Submit interim data files with returned web, mail, and inbound CATI survey data to CMS (RAND). Survey vendors may begin to submit data on 4/23/2024 but <b>must</b> have an interim data file submitted, and deemed to be fully correct and accepted, by 4/25/2024. No interim submission of MMP data is required.	4/23/2024 – 4/25/ <mark>2025</mark>	Submit interim data files with returned web, mail, and inbound CATI survey data to CMS (RAND). Survey vendors may begin to submit data on 4/23/2024 but <b>must</b> have an interim data file submitted, and deemed to be fully correct and accepted, by 4/25/2024. No interim submission of MMP data is required.	4/23/2024 – 4/25/2024

### Technical Corrections and Clarifications

Issued November 2024

### 5. Chapter VI. Data Collection Protocol – Data Collection Schedule

• The timing of the start of inbound CATI protocol in the data collection schedule has been corrected

CHANGE MADE	CURRENT	CURRENT		REVISED	
Corrected the timing of inbound CA-protocol to begin at the same time a web administration the data collection schedule	Survey Vendor Task  Mail out web invite letter to enrollees without an email address	<b>Date</b> 3/1/2024	Survey Vendor Task  Mail out web invite letter to enrollees without an email address. Begin inbound computer assisted telephone interviews (CATI) protocol.	<b>Date</b> 3/1/2024	
Removed the start of inbound CA protocol from the start of mail administration the data collection schedule	Survey Vendor Task  Mail-out of the first questionnaire with cover letter.  Begin inbound computer assisted telephone interviews (CATI) protocol.	Date 3/12/2024- 3/13/2024	Survey Vendor Task  Mail-out of the first questionnaire with cover letter.	Date 3/12/2024- 3/13/2024	

## MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 Technical Corrections and Clarifications Issued November 2024

- 6. Chapter VI. Data Collection Protocol Inbound CATI Protocol section
  - The timing of the start of inbound CATI protocol has been corrected

CHANGE MADE	CURRENT	REVISED
Corrected timing for the start of inbound CATI protocol	This will require that CATI scripts and supporting programs be fully operational for all survey types (including applicable supplemental questions) for inbound requests at the start of the mail administration protocol time period (i.e., mailing of the first survey packet).	This will require that CATI scripts and supporting programs be fully operational for all survey types (including applicable supplemental questions) for inbound requests at the start of the web administration protocol time period (i.e., mailing of web invite letter to enrollees without an email address).

### MA & PDP CAHPS Survey

### Quality Assurance Protocols & Technical Specifications V14.0

### Technical Corrections and Clarifications

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### 7. Chapter IX. Data Analysis and Public Reporting - Care Coordination Composite Scoring

• The instructions for scoring the Care Coordination Composite have been updated

СН	ANGE MADE	CURRENT		REVISED
<b>CH</b> ▶	Corrected instructions regarding scoring the Care	Care Coordination Composite Scorin The Care Coordination Composite measure  Item 1: Personal MD had medical records or other info about care  Item 2: How often talk about Rx medications  Item 3: MD informed about care from specialists  Item 4: Get needed help to manage care		Care Coordination Composite Scoring  The Care Coordination Composite measure is comprised of 6 survey items.  Response Options  Item 1: Personal MD had medical records or other info about care  Usually (3) Always (4)  Item 2: How often talk about Rx medications  Never (1) Sometimes (2) Usually (3) Always (4)  Item 3: MD informed about care from specialists  Never (1) Sometimes (2) Usually (3) Always (4)  Item 4: Get needed help to manage care  No (2) Yes, somewhat (3)
scoring the	Item 4: Get needed help to manage care  Item 5: MD office follow-up to give test results*	No (2) Yes, somewhat (3) Yes, definitely (4) Never (1) Sometimes (2) Usually (3)	Always (4)  Item 4: Get needed help to No (2) manage care Yes, somewhat (3) Yes, definitely (4)  Item 5: MD office follow-up to Never (1)	
	·	Item 6: Got test results as soon as needed**  *Note that those answering item 5 as Never		Usually (3) Always (4)  Item 6: Got test results as soon as needed*  Never (1) Sometimes (2) Usually (3)
			n item 6 assumes a value of Never (1) regard answered. Items 5 and 6 are averaged to gen	

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CHANGE MADE	CURRENT	REVISED
	The general formula for converting items from their original response scale to the 0-100 scale is: (score on original scale - minimum possible on original scale) * 100 / (maximum possible on original scale).	The general formula for converting items from their original response scale to the 0-100 scale is: (score on original scale - minimum possible on original scale) * 100 / (maximum possible on original scale).
	To score the composite, the weighted average of 6 scores is calculated:  The score for items 1-4, each with a weight of 1, and The score for item 5, with a weight of ½, and The score for item 6, recoded if applicable, with a weight of ½	To score the composite, the weighted average of 5 scores is calculated:  The scores for items 1-4  The average score of items 5 and 6

# MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 \*Technical Corrections and Clarifications\*

### Issued November 2024

- 8. Chapter IX. Data Analysis and Public Reporting Data Cleaning Prior to Case-Mix Adjustment
  - The note regarding data cleaning when a respondent answers a dependent question that should have been skipped has been updated

<ul> <li>If the response to a screener question is valid, but the respondent violates the skip instruction by answering dependent questions that should have been skipped, the response to the screener question is retained and the responses for the dependent question is retained and the responses for the dependent question is retained and the responses for the dependent question is retained and the responses for the dependent question is retained and the responses for the dependent question is retained and the responses for the dependent question is retained and the responses for the dependent question is retained and the responses for the dependent questions are set to "M – Missing" (with the exception of Customer Service, item 3 as referenced above)</li> </ul>	CH	ANGE MADE	CURRENT	REVISED
	<i>&gt;</i>	Corrected note regarding	<ul> <li>If the response to a screener question is valid, but the respondent violates the skip instruction by answering dependent questions that should have been skipped, the response to the screener question is retained and the responses for the dependent questions are set to "M – Missing" (with two exceptions for Care Coordination composite, items 5 and 6, and Customer Service,</li> </ul>	<ul> <li>If the response to a screener question is valid, but the respondent violates the skip instruction by answering dependent questions that should have been skipped, the response to the screener question is retained and the responses for the dependent questions are set to "M – Missing" (with the exception of</li> </ul>

# MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 Technical Corrections and Clarifications

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- 9. Chapter IX. Data Analysis and Public Reporting 2024 Measures That Will be Publicly Reported
  - The note regarding the list of reportable measures included in Appendix K has been corrected

CHANGE MADE	CURRENT	REVISED
<ul><li>Corrected note regarding Appendix K</li></ul>	Other measures reported to contracts (MA-PD and PDP):  Reminders to fill prescriptions Reminders to take medications  Note: These items are not included in Appendix K, List of Reportable Measures, as they are not part of the calculation of reportable measures used to assign survey status.	Other measures reported to contracts (MA-PD and PDP):  Reminders to fill prescriptions Reminders to take medications  Note: These items are included in Appendix K, List of Reportable Measures, but they are not part of the calculation of reportable measures used to assign survey status.

### Technical Corrections and Clarifications

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### 10. Appendix H-1 MA-Only Response Section

• Corrected the valid value for CATI Q48 a through j for the "DON'T KNOW" response option; this revision affects two columns: CATI Specifications and Valid Values

CHANGE MADE	CURRENT	REVISED
Corrected coding for Q48 a-j DON'T KNOW response	Q48 In the last 6 months, did anyone from a clinic, emergency room, or doctor's office where you got care treat you in an unfair or insensitive way because of any of the following things about you?  a. A health condition? (READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 3 DON'T KNOW 99 <refused> M [MISSING]</refused>	Q48 In the last 6 months, did anyone from a clinic, emergency room, or doctor's office where you got care treat you in an unfair or insensitive way because of any of the following things about you?  a. A health condition? (READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 98 DON'T KNOW 99 <refused> M [MISSING]</refused>

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CHANGE MADE	CURRENT	REVISED
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) b. A disability?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) b. A disability?
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)
	1 YES	1 YES
	2 NO	2 NO
	3 <don't know=""></don't>	98 <don't know=""></don't>
	99 <refused></refused>	99 <refused></refused>
	M [MISSING]	M [MISSING]
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) c. Your age?	READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) c. Your age?
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)
	1 YES	1 YES
	2 NO	2 NO
	3 <don't know=""></don't>	98 <don't know=""></don't>
	99 <refused></refused>	99 <refused></refused>

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	M [MISSING]	M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) d. Your culture or religion?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) d. Your culture or religion?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW> 99 < REFUSED> M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) e. Your language or accent?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) e. Your language or accent?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 < DON'T KNOW>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW>	
	99 <refused></refused>	99 <refused></refused>	

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	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)
	f. Your race or ethnicity?	f. Your race or ethnicity?
	1. Four face of ethinicity:	1. Four face of ethinicity:
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)
	1 YES	1 YES
	2 NO	2 NO
	3 <don't know=""></don't>	98 <don't know=""></don't>
	99 <refused> M [MISSING]</refused>	99 <refused> M [MISSING]</refused>
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	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY
	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)
	g. Your sex (female or male)?	g. Your sex (female or male)?
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)
	1 YES	1 YES
	2 NO	2 NO
	3 <don't know=""></don't>	98 <don't know=""></don't>
	99 <refused></refused>	99 <refused></refused>

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	M [MISSING]	M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) h. Your sexual orientation?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) h. Your sexual orientation?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 98 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) i. Your gender or gender identity?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) i. Your gender or gender identity?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 3 <don't know=""></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW>	
	99 <refused></refused>	99 <refused></refused>	

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	M [MISSING]	M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) j. Your income?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) j. Your income?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW> 99 < REFUSED> M [MISSING]	

### Technical Corrections and Clarifications

Issued November 2024

### 11. Appendix H-2 MA-PD Response Section

• Corrected the valid value for CATI Q53 a through j for the "DON'T KNOW" response option; this revision affects two columns: CATI Specifications and Valid Values

CHANGE MADE	CURRENT	REVISED	
Corrected coding for Q53 a-j response DON'T KNOW	Q53 In the last 6 months, did anyone from a clinic, emergency room, or doctor's office where you got care treat you in an unfair or insensitive way because of any of the following things about you?  a. A health condition? (READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 3 DON'T KNOW 99 <refused> M [MISSING]</refused>	Q53 In the last 6 months, did anyone from a clinic, emergency room, or doctor's office where you got care treat you in an unfair or insensitive way because of any of the following things about you?  a. A health condition? (READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 98 DON'T KNOW 99 <refused> M [MISSING]</refused>	

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CHANGE MADE	CURRENT	REVISED	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) b. A disability?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) b. A disability?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES	
	2 NO	2 NO	
	3 <don't know=""></don't>	98 <don't know=""></don't>	
	99 <refused></refused>	99 <refused></refused>	
	M [MISSING]	M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE	READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE	
	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY	
	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)	
	c. Your age?	c. Your age?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	
	1 YES	1 YES	
	2 NO	2 NO	
	3 <don't know=""></don't>	98 <don't know=""></don't>	
	99 <refused></refused>	99 <refused></refused>	

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	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) d. Your culture or religion?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) d. Your culture or religion?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) e. Your language or accent?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) e. Your language or accent?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 3 <don't know=""></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW>	
	99 <refused></refused>	99 <refused></refused>	

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	M [MISSING]	M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) f. Your race or ethnicity?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) f. Your race or ethnicity?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW> 99 < REFUSED> M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) g. Your sex (female or male)?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) g. Your sex (male or female)?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES 2 NO 3 <don't know=""></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW>	
	99 <refused></refused>	99 <refused></refused>	

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	IVI [IVII33IIVO]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE
	FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE	
	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY
	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)
	h. Your sexual orientation?	h. Your sexual orientation?
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)
	1 YES	1 YES
	2 NO	2 NO
	3 <don't know=""></don't>	98 <don't know=""></don't>
	99 <refused></refused>	99 <refused></refused>
	M [MISSING]	M [MISSING]
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE
	FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE	,
	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY	YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY
	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)	BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?)
	i. Your gender or gender identity?	i. Your gender or gender identity?
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)	(READ RESPONSE OPTIONS ONLY IF NECESSARY)
	1 YES	1 YES
	2 NO	2 NO
	3 <don't know=""></don't>	98 <don't know=""></don't>
	99 <refused></refused>	99 <refused></refused>

## Technical Corrections and Clarifications Issued November 2024

CHANGE MADE	CURRENT	REVISED	
	NA [NAICCINIC]	A. Tauggurol	
	M [MISSING]	M [MISSING]	
	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) j. Your income?	(READ ONLY IF NECESSARY: IN THE LAST 6 MONTHS, DID ANYONE FROM A CLINIC, EMERGENCY ROOM, OR DOCTOR'S OFFICE WHERE YOU GOT CARE TREAT YOU IN AN UNFAIR OR INSENSITIVE WAY BECAUSE OF ANY OF THE FOLLOWING THINGS ABOUT YOU?) j. Your income?	
	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  3 <don't know=""> 99 <refused> M [MISSING]</refused></don't>	(READ RESPONSE OPTIONS ONLY IF NECESSARY)  1 YES  2 NO  98 < DON'T KNOW> 99 < REFUSED> M [MISSING]	

### **Technical Corrections and Clarifications**

Issued November 2024

### 12. Appendix K. Medicare Advantage and Prescription Drug Plan (MA & PDP) CAHPS® Survey List of Reportable Measures

• Question regarding wait times has been removed from the Getting Appointments and Care Quickly composite measure

CHANGE MADE	CURRENT		REVISED	
<ul> <li>Question has been removed from the Getting Appointments and Care Quickly composite measure</li> </ul>	Getting Appointments and Care Quickly	In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?  MA-Only - #4 MA-PD - #4 PDP - N/A  In the last 6 months, how often did you get an appointment for a checkup or routine care as soon as you needed?  MA-Only - #6 MA-PD - #6 PDP - N/A  Wait time includes time spent in the waiting room and exam room. In the last 6 months, how often did you see the person you came to see within 15 minutes of your appointment time?  MA-Only - #8 MA-PD - #8 PDP - N/A	Getting Appointments and Care Quickly	In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?  MA-Only - #4 MA-PD - #4 PDP - N/A  In the last 6 months, how often did you get an appointment for a checkup or routine care as soon as you needed?  MA-Only - #6 MA-PD - #6 PDP - N/A

# MA & PDP CAHPS Survey Quality Assurance Protocols & Technical Specifications V14.0 Technical Corrections and Clarifications

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### 13. Appendix M-9 2024 MA-Only Web Survey English

• The programming specification to skip to Q22 for a response of "Never" to Q20 has been removed

CHANGE MADE	CURRENT	REVISED	
Removed skip logic from Q20	20. In the last 6 months, when your personal doctor ordered a blood test, x-ray or other test for you, how often did someone from your personal doctor's office follow up to give you those results?  O Never O Sometimes O Usually O Always  BACK  NEXT  [PROGRAMMING SPECIFICATION: A RESPONSE OF "NEVER" AT 20 SKIPS TO 22]	20. In the last 6 months, when your personal doctor ordered a blood test, x-ray or other test for you, how often did someone from your personal doctor's office follow up to give you those results?  O Never O Sometimes O Usually O Always  BACK  NEXT	