2019 MA & PDP CAHPS Survey
Quality Assurance Protocols & Technical Specifications V9.0
Summary of Updates

This document is a reference tool that highlights the major changes from the MA & PDP CAHPS *Quality Assurance Protocols & Technical Specifications (QAP&TS) V8.0 to V9.0.* This document is not a substitute for reviewing the MA & PDP CAHPS *QAP&TS V9.0* in its entirety or, if applicable, the most recent Technical Corrections and Clarifications document posted on the MA & PDP CAHPS Web site. The MA & PDP CAHPS *QAP&TS V9.0* manual is effective upon its release in October 2018. General format and minor wording revisions have occurred throughout the manual and are not included in the table below. Please contact MA & PDP CAHPS Survey Technical Assistance for any specific questions.

Section of the QAP&TS V9.0	Summary of Key Changes in V9.0
Miscellaneous	• Changed V8.0 to V9.0 • Revised dates as necessary, e.g., 2018 to 2019 • Minor wording or formatting updates as needed
I. Reader's Guide	
	• No Changes
II. Introduction and Overview	
	Added items that are new for 2019 survey administration; including the following: • Korean as a new translation • A requirement that monitoring procedures for all languages must be in place at the start of the outbound CATI period • A requirement that monitoring of recorded calls must be completed within three days of the recording and any needed performance feedback must be delivered to interviewers no later than their next scheduled work shift after review of the recording • A requirement that survey vendors must complete and submit an MA & PDP CAHPS Vendor Report of Outbound CATI. The Excel template will be provided to survey vendors via email and the first report is due May 3, 2019. Vendors may be required to submit follow-up reports during outbound CATI. • A requirement that data append requests must include the categories of identifier plus their associated counts • Guidance regarding the use of colored paper for printing questionnaires • Clarification on determining which final disposition code to select when two final disposition codes may apply

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III. Program Requirements	
	• Revised the guidance related to data append request submission to note that survey vendors must include counts appropriate to the identifier (such as the number of beneficiaries in a region or number of providers in a medical group) • Revised survey vendor staff who are recommended to attend training to include staff members who decrypt the sample file, perform sample file quality checks, program the CATI script, and prepare and submit the survey data file • Added a reference to the MA & PDP CAHPS Web site Quality Assurance page where the Data Collection Schedule is posted to locate the date for QAP submission
IV. Sampling	
	• Added text to clarify eligibility criteria and communicate all of the sample exclusions
V. Communications and Technical Support	
	• No Changes

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VI. Data Collection Protocol	
	- Revised Data Collection Schedule for 2019 survey administration - Revised guidance to indicate cover letters for both survey mailings may contain optional language text (Chinese, Korean and/or Vietnamese) inviting beneficiaries to call the survey vendor's toll-free number to request a translation of the questionnaire - Updated OMB expiration date to 4/30/21 - Revised guidance for questionnaire formatting and printing specifications: - To add a requirement that survey vendors must place their return address for mail processing on the back cover of the questionnaire and the bottom of the last page containing survey questions (may be the same page) - To allow survey vendors to print questionnaires on colored paper, which is limited to pastel hues; colors that may reduce readability, such as neon or dark colors, are prohibited - Revised guidance to indicate that pre-codes may be placed to the left of the response options as superscript or subscript - Revised guidance to indicate that use of windowed envelopes is permissible for mailing survey materials, provided no personal information – other than beneficiary name and address – is visible through the window - Clarified that the 5th outbound call attempt must occur no sooner than 21 days after the first call attempt if a 5th call attempt is necessary - Revised text to clarify that all sampled members must be called five times over no fewer than 21 calendar days unless they are found to be ineligible for any reason - Added a requirement that survey vendors must provide information on "in progress" response rates during outbound CATI by completing and submitting an MA & PDP CAHPS Vendor Report of Outbound CATI using an Excel template to be provided by the MA & PDP CAHPS project team. Vendors may be asked to submit updated reports on a weekly basis during the outbound CATI window. - Revised guidance related to telephone monitoring and oversight: - To emphasize that in addition to providing quality control, monitoring promotes identification of interviewers in need of retraining and communication of feedback to interviewers

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	o To require monitoring procedures for all languages to be in place at the start of outbound CATI o To require that monitoring of recorded calls be completed within three days of the recording and any needed performance feedback be delivered to interviewers no later than their next scheduled work shift after review of the recording
VII. Data Coding and Data Preparation	
	• Updated the website URL indicating where PGP software may be purchased • Added text explaining that for cases when two disposition codes may be equally applicable, the hierarchy for determining the appropriate codes is built into the disposition code values, and the final disposition code with the lowest number should be used. A few examples are provided. • Added Korean as a current translation to the Language Barrier code in the Final Survey Disposition Codes table
VIII. Data Submission	
	• The time of day for the interim and final data submission files to be submitted has been revised to 9:59 p.m. on the file submission due dates • Revised text regarding the data submission process to note that data administrators new to the MA & PDP CAHPS project will receive an email from RAND with a link to the data warehouse that will allow the data administrator to activate his/her login • Revised text recommending that survey vendors submit data files early in the submission window to assure files are accepted and pass all data checks before the data submission deadline

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IX. Data Analysis and Public Reporting	
	• Added Korean to the Asian language survey completion case-mix variable
X. Oversight	
	• No changes
XI. Event Reports	
	• No changes
Appendix A – Minimum Business Requirements	
	• Revised to require that survey vendors must have a minimum of 3 years of experience conducting surveys with the Medicare population; administering CAHPS surveys within the most recent 5-year time period; and conducting large scale Mixed Mode surveys within the most recent 2-year time period • Revised to require that project managers must have a minimum of 3 years relevant Mixed Mode survey experience • Revised to require that mail survey supervisors, telephone survey supervisors and lead/primary programmers must have a minimum 1 year experience in their role • Added text to clarify the minimum criteria that System Resources must include, such as physical facilities, electronic equipment and software for data collection processing and reporting, as well as an electronic survey protocol that protects the confidentiality of PII and survey data received from beneficiaries • Added a bullet that survey vendors must have the capacity to maintain an interviewer pool that meets the needs of beneficiaries in all languages in which the survey is administered • Added a bullet that survey vendors must have the capacity to conduct accurate monitoring of interviews in all languages in which the survey is administered • Revised text to add Korean and Vietnamese to the optional languages survey vendor technical assistance/customer service must accommodate when those surveys are being administered

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	• Removed references to Introduction Training and Update Training, and added bullet that participation in any refresher training sessions or webinars is required • Added bullet that clarifies that project staff responsible for certain essential functions are recommended to attend training, including decrypting the sample file and performing sample file quality checks, programming the CATI script and preparing and submitting the survey data file • Revised text to clarify the survey vendor must maintain at least one active survey client for a minimum of one of two consecutive survey administration periods
Appendix B - DUA	
	• Added the new contract number to the DUA • Updated the DUA Addendum Form CMS-R0235A
Appendix C – 2019 Vendor Access to MA & PDP CAHPS Data Warehouse Form	
	• Date change

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Appendix D – Model Quality Assurance Plan	
	- Added Korean as new optional translation - Added a bullet that survey vendors must include the number of clients who intend to provide beneficiary membership files with phone numbers to append to the sample file. The project team will follow-up after the start of fielding to request a list of contracts that provided membership files with phone numbers. - Added a bullet that survey vendors must indicate the length of time between the date of recorded calls and the date for listening to the recording and providing interviewer feedback - Revised a bullet to add that survey vendors must include the length of time between the receipt of a survey and completion of data verification when describing the process of logging surveys when returned by mail and the subsequent processing of those surveys - Added a bullet that survey vendors must detail the quality control activities that were implemented as a result of items noted during 2018 site visits - Added Korean to the language distribution table - Added note that the project team will follow-up with survey vendors after interim data submission to request an updated table to include any adjustments to survey language administration that may have been implemented after the QAP was submitted
Appendix E – General Interviewing Guidelines for Conducting Telephone Surveys	
	- Revised a bullet to add that interviewers must know how to clearly and correctly pronounce all text, including medical terminology (e.g., pneumococcal vaccine) - Removed "Okay" from list of permitted neutral acknowledgment words - Added a bullet that interviewers must be familiar with the pronunciation of client contract names

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Appendix F – Frequently Asked Questions for Customer Support	
	• Added new FAQ for situations when beneficiaries request a survey in a language that is not currently offered • Added new FAQ for situations when beneficiaries have changed health or drug plans for the coming year • Added Chinese version of the FAQs
Appendix G – Instructions for Survey Vendors on Accessing the MA & PDP CAHPS Data Warehouse	
	• Revised text to provide guidance for those in their first year as an MA & PDP CAHPS Project Manager, Data Administrator or Back-up Data Administrator that indicates they will receive an email invitation to the Data Warehouse four weeks before the transfer of sample files that will allow them to log-in and establish a password • Added updated screenshots • Added note that logins and passwords are person-specific and may not be shared with others within the organization
Appendix H – Sample File Record Layout	
	• No changes

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Appendix I – Vendor Survey File Record Layout	
	• Added Korean to the coding notes for the Dispo_Lang field and updated the valid codes to 1-5 • Added to the Change Language Item field to indicate: INTR = Language switch occurred prior to Q1 of the survey; added INTR as a valid code
Appendix I – MA-only Data Submission File Layout	
	• Revised Q1 CATI specifications to revise "Insert Plan Name Here" to "Health Plan Name" • Added response option Missing to Q62 CATI specifications and valid values
Appendix I – MA-PD Data Submission File Layout	
	• Revised Q1 CATI specifications to revise "Insert Plan Name Here" to "Plan Name" • Revised Q41b to read "To make sure you were taking medicine as directed?" • Added response option Missing to Q67 CATI specifications and valid values
Appendix I – PDP Data Submission File Layout	
	• Revised Q1 CATI specifications to revise "Insert Plan Name Here" to "PD Plan Name" • Revised Q3b to read "To make sure you were taking medicine as directed?" • Added response option Missing to Q25 CATI specifications and valid values
Appendix J – Event Report	
	• No changes
Appendix K – MA-only Survey Items ATA	
	• No changes

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Appendix K – MA-PD Survey Items ATA	
	• No changes
Appendix K – PD Survey Items ATA	
	• No changes
Appendix L – List of Reportable Measures	
	• No changes
Appendix M – MA-only and MA-PD 2nd Mailing Cover Letter	
	• No changes
Appendix M – PDP 2nd Mailing Cover Letter	
	• No changes
Appendix M – MA-only Mail Survey	
	• Added instruction that beneficiary should answer the questions thinking about his/her experiences in the last 6 months of 2018, if he/she changed Medicare plans for 2019 • Updated OMB clearance statement expiration date to 4/30/2021
Appendix M – MA-PD Mail Survey	
	• Added instruction that beneficiary should answer the questions thinking about his/her experiences in the last 6 months of 2018, if he/she changed Medicare plans for 2019 • Updated OMB clearance statement expiration date to 4/30/2021 • Revised Q41b to read "To make sure you were taking medicine as directed?"

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Appendix M – PDP Mail Survey	
	• Added instruction that beneficiary should answer the questions thinking about his/her experiences in the last 6 months of 2018, if he/she changed Medicare plans for 2019 • Updated OMB clearance statement expiration date to 4/30/2021 • Revised Q3b to read "To make sure you were taking medicine as directed?"
Appendix N – CATI Instructions and CATI Scripts	
	• Added a bullet to note that interviewers should be familiar with the correct pronunciation of all survey text, including medical terminology (e.g., pneumococcal vaccine) and contract names read as part of the introductory scripts • Removed "Okay" from the list of permitted neutral acknowledgment words • In MA-only, MA-PD and PDP CATI scripts, revised wording of Monitor script to state that this call may be monitored or recorded for quality improvement purposes
Appendix N – MA-only CATI Script	
	• Revised Q1 from [Insert Plan Name Here] to [Health Plan Name] • Added M [MISSING] as a response option for Q36 • Moved programming specifications from before Q62 to before Q63 • Added M [MISSING] as a response option for Q62 • Moved the programming instructions from Q61 to Q63

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Appendix N – MA-PD CATI Script	
	• Revised Intro2-Out and Intro2-In from "your health care plan" to "your health and prescription drug plan" • Added "and prescription drug" to Proxy_Intro1 and Proxy_Intro2 • Revised Q1 from [Insert Plan Name Here] to [Plan Name] • Revised Q41b to read "To make sure you were taking medicine as directed?" • Added M [MISSING] as a response option for Q67
Appendix N – PDP CATI Script	
	• Revised Intro1Out from "Health Plan" to "Prescription Drug Plan" • Revised Intro2-Out, Intro2-In and Resume2 from [Health Plan Name] to [PD Plan Name] • Revised Proxy_Intro1 and Proxy_Intro2 from "health plan" to "prescription drug plan" • Revised Q1 from [Insert Plan Name Here] to [PD Plan Name] • Revised Q3b to read "To make sure you were taking medicine as directed?" • Added M [MISSING] as a response option for Q25
Appendix O – Guidance on Supplemental Questions	
	• No changes

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Appendix P – Guidance on Appending Data	
	- Added guidance that a new spreadsheet should be provided each time a request is submitted - Added guidance that data append requests should include counts of beneficiaries or providers as appropriate to the requested identifiers and it should be clearly noted whether the count refers to beneficiaries or providers - Added a note stating that survey vendors should submit additional information requested by the project team in the same format and order in which the original request was submitted - In the Excel template, the example was updated for the Categories of Identifier column to include the count of beneficiaries or providers, as appropriate