

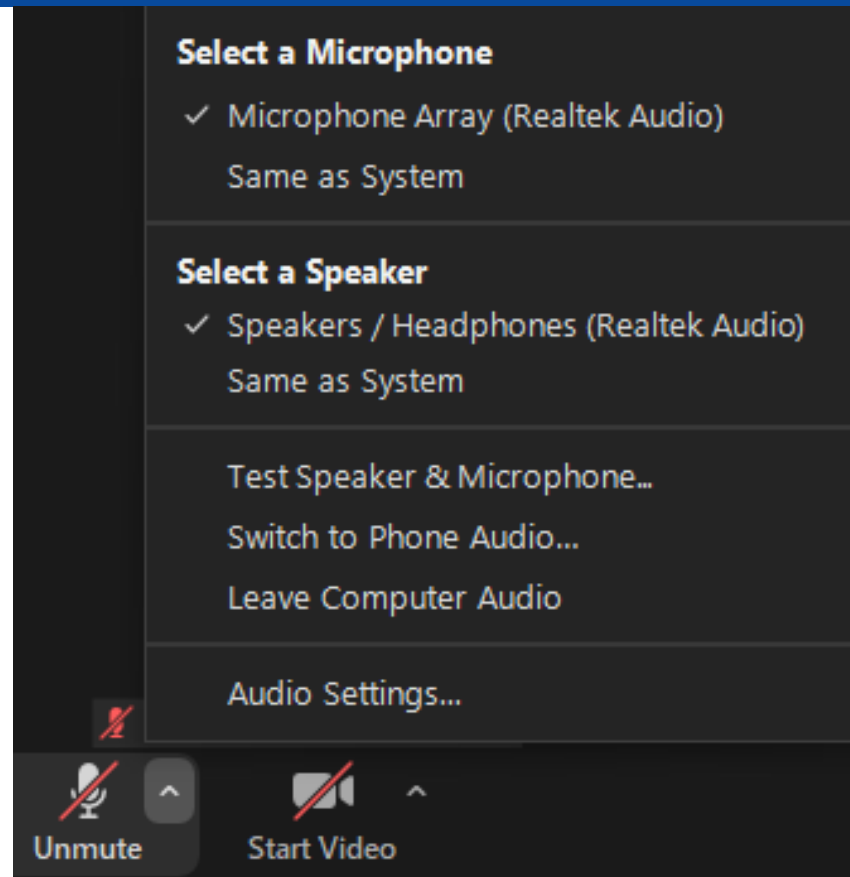
# Medicare Health Outcomes Survey 2025 Survey Vendor Update Training

Welcome! Training will begin shortly.

For attendance purposes, please be sure your name appears in Zoom as your first and last name, followed by your organization name in parentheses.

**Please link your audio to the Zoom webinar.**

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



**Select a Microphone**

- ✓ Microphone Array (Realtek Audio)  
Same as System

**Select a Speaker**

- ✓ Speakers / Headphones (Realtek Audio)  
Same as System

Test Speaker & Microphone...

Switch to Phone Audio...

Leave Computer Audio

Audio Settings...

Unmute Start Video



# Medicare Health Outcomes Survey 2025 Survey Vendor Update Training



*March 20, 2025*



# Welcome and Introduction

**NCQA**

*Alyssa Hart, MPH  
HOS Project Director*

# 2025 HOS Survey Vendor Update Training Agenda

Time (ET)	Agenda Item	Presenter
11:30 – 11:40 a.m.	Welcome and Introduction	Alyssa Hart
11:40 – 11:55 a.m.	HOS CMS Update	Alyssa Rosen
11:55 – 12:10 p.m.	HOS 2025 Administration Updates	Erik Krause
12:10 – 12:30 p.m.	HOS 2024 Survey Results	Patrick Leon Jael Rodriguez
12:30 – 12:45 p.m.	Survey Material Updates	Louie Amog
12:45 – 12:55 p.m.	Break	
12:55 – 1:10 p.m.	Data Coding and Submission	Jacky Chon
1:10 – 1:35 p.m.	Data Management	Patrick Leon Jael Rodriguez
1:35 – 2:00 p.m.	Quality Oversight and Project Reporting	Courtney Utter
2:00 – 2:10 p.m.	Questions and Closing	Alyssa Hart
2:10 – 2:30 p.m.	Post-Training Test	



# HOS CMS Update

***CMS***

*Alyssa Rosen, MS  
Contracting Officer's  
Representative (COR)*

# Overview

- Introduction to the HOS
- HOS Primary Goals
- Public Reporting of HOS Data
- Star Ratings Update
- Data Integrity
- Requirements for CMS-Approved Survey Vendors
- Data Use Agreements (DUA)

# Introduction

- The HOS monitors quality of care provided to people with Medicare enrolled in Medicare Advantage Organizations (MAOs) at the contract level by measuring self-reported health status, physical and mental functioning, and outcomes of care
- The HOS is a longitudinal or “cohort” survey administered to a random sample of members from each MAO at the beginning (Baseline) and end (Follow-Up) of a two-year period
  - 2025 Round 28 will survey Cohort 28 (Baseline) and resurvey Cohort 26 (Follow-Up)

# Introduction

- HOS Participants: Medicare members aged 18 or older who are currently enrolled in a Medicare Advantage (MA) contract and reside in the U.S. or its territories
  - Baseline: No continuous enrollment requirement
  - Follow-Up: Members resurveyed after two years if they are enrolled in the same plan



# HOS Primary Goals

## HOS Primary Goals

Provide Medicare enrollees and the general public with information to help them make more informed enrollment choices

Provide MAOs with metrics that allow them to identify problems and improve quality of care at the contract level

Enhance CMS's ability to monitor health plan performance

Measure quality of care from the enrollee's perspective for use in calculating MA Quality Bonus Payments (QBPs)

Estimate frailty for use in payment adjustment for Fully Integrated Dual Eligible (FIDE) Special Needs Plans (SNP) and Programs of All-Inclusive Care for the Elderly (PACE)

# Public Reporting of HOS Data

HOS results are publicly reported by CMS for each participating contract



Medicare Plan Finder is a consumer-friendly online tool that allows users to compare coverage options ([www.medicare.gov](http://www.medicare.gov))



HOS data are also included in the Part C and D Star Ratings and used to calculate QBPs (<http://go.cms.gov/partcanddstarratings>)

# Star Ratings: Measures

- HOS measures for the 2026 Star Ratings:
  - Two Functional Health (Outcome) Measures:
    - Improving or Maintaining Physical Health\*
    - Improving or Maintaining Mental Health\*
  - \*Will have a weight of 1 for 2026 and a weight of 3 starting in 2027
  - Three HEDIS® Effectiveness of Care Measures:
    - Monitoring Physical Activity
    - Improving Bladder Control
    - Reducing the Risk of Falling

# Star Ratings: Data Sources

- HOS data sources for 2026 Star Ratings
  - Functional Health (Outcome) Measures:
    - 2022-2024 Cohort 25 Performance Measurement Results (2022 HOS Baseline and 2024 HOS Follow-Up data)
  - Effectiveness of Care measures:
    - Cohort 25 Follow-Up (2024) and Cohort 27 Baseline data (2024)

# Data Integrity

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

# Data Integrity (Cont'd)

- MAOs and HOS vendors **MAY NOT**:
  - Attempt to influence responses to HOS survey questions
  - Imply that positive feedback will reward or benefit the MAO
  - Offer incentives of any kind
  - Show the HOS questionnaire and cover letter to members
- MAOs and HOS vendors **MAY**:
  - Notify all members of a contract that they may be asked to participate in the 2025 HOS
- **Reminder:** Encouraging participation without biasing results can be tricky. To avoid jeopardizing a client's results, consult the HOS Project Team if you have questions or concerns.

# Requirements for CMS-Approved Survey Vendors

- Adhere to the HOS Minimum Business Requirements, Rules of Participation, and Program Requirements outlined in the *Medicare HOS Quality Assurance Guidelines and Technical Specifications V2.9 (QAG)*
- Execute an HOS Data Use Agreement (DUA) with CMS and keep up to date
- Verify authorization to submit data on behalf of MAOs
- Perform quality checks on sample files

# Requirements for CMS-Approved Survey Vendors (Cont'd)

- Administer HOS and oversee the organization's staff, subcontractors, and external partners
- Conform with HOS protocols and promptly report discrepancies (within one (1) business day)
- Refrain from providing any data from sample files, HOS measure results, or calculations other than contract-level response rates to MAOs
- Participate in quality oversight activities with NCQA
- Submit data files and attest to data quality



# Data Use Agreement (DUA) Terms and Restrictions

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

# 2025 DUA Updates

- CMS-approved HOS vendors must complete the following steps in Enterprise Privacy Policy Engine (EPPE):
  - Verify only current staff and subcontractors are listed; update if needed
  - Submit signed [Addendum](#) to add individuals or organizations to DUA
  - Update DUA to add 2025 HOS data by **April 3, 2025**

# DUA Timeline

- Submit updated DUA to the HOS Project Team by **April 17, 2025**
- Notify the HOS Project Team immediately of any changes in key personnel or subcontractors that occur after initial submission
  - Update DUA to add or remove individuals or organizations within three (3) business days of a change and send updated DUA to the HOS Project Team
- Extend DUA when prompted and submit an extended DUA to the HOS Project Team by **September 26, 2025**

# Helpful DUA Links

- Change contacts: <https://www.cms.gov/files/document/cont-03.pdf>
- Update subcontractors: <https://www.cms.gov/files/document/cont-08.pdf>
- Add new data files: <https://www.cms.gov/files/document/cont-12.pdf>
- Upload supporting documents: <https://www.cms.gov/files/document/cont-13.pdf>
- Extend DUA: <https://www.cms.gov/files/document/cont-15.pdf>
- Addendum: <https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS-R-0235A.pdf>
- EPPE Help Desk: 844-EPPE-DUA (844-377-3382)

# Questions?





# HOS 2025 Administration Updates

***NCQA***

Erik Krause, MPH, CHES  
*HOS Project Manager*

# Overview

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

# Data Collection Protocol

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



# Standardized Data Collection

- Survey vendors must use the standardized data collection protocol outlined in *Medicare HOS Quality Assurance Guidelines and Technical Specifications V2.9 (QAG)*
- Standardized data collection ensures survey data collected across contracts by CMS-approved HOS survey vendors are comparable
- Survey vendors may **NOT** change the wording or order of HOS questions, mailing materials, or the telephone script

# Mail Protocol

- Standardized mailing materials and questionnaire
  - Prenotification letter
  - Two survey mailings containing survey cover letter, questionnaire, and business reply envelope
- Survey vendors send mailing materials as assigned by the member's protocol path
- Survey vendors may **NOT** send materials to a member that differ from the member's assigned protocol path

# Telephone Protocol

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

# Telephone Protocol (Cont'd)

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

# Telephone Protocol (Cont'd)

- Telephone attempts must occur on
  - Different times of day
  - Different days of the week
  - Different weeks (at least three calendar weeks)
  - 9 a.m. to 9 p.m. call window (member local time)
- The first call attempt must occur within the first 10 calendar days of the telephone protocol
- The fifth attempt must occur no sooner than 21 calendar days after the first call attempt
- 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
- Interviewers must be trained on how to address technical issues (e.g., system failure) during a telephone interview
  - All processes must be documented in the survey vendor's Quality Assurance Plan (QAP)

# Telephone Protocol (Cont'd)

- Caller ID Enhancement
  - Caller IDs may be programmed, with the permission of the health plan's HIPAA/Privacy Office with “on behalf of [Health Plan Name]”
  - May **NOT** code display as:
    - Only “[Health Plan Name]”
    - “on behalf of [Medicare]”
- Survey vendors may begin obtaining telephone numbers from MAOs as soon as contracting agreements are in place

# Determining Language Preferences

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



# Russian Survey Administration

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

# Customer Support Services

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

# Member Confidentiality

- Sampling procedures are designed so MAOs cannot identify members selected to participate in the survey
- Maintain confidentiality of sampled members and do **NOT** provide MAOs with member names or other member-identifying information
  - Survey vendors will not be provided a supplemental file
  - MAOs will provide addresses and telephone numbers for their entire membership
- Provide only the **minimum data necessary** to subcontractors to perform activities

# Subcontractors

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

# Subcontractor Oversight

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

# Subcontractor Oversight (Cont'd)

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

# Sharing Data with Clients

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

# Data Collection Timeline

Task	Date (2025)
Send sample files to vendors	June 23
Mail <b>Baseline</b> and <b>Follow-Up</b> prenotification letter	July 14
Open survey vendor customer support telephone and email	July 14
Open inbound electronic telephone interviewing	July 14
Mail <b>Baseline</b> and <b>Follow-Up</b> first questionnaire	July 21



# Data Collection Timeline (Cont'd)

Task	Date (2025)
Mail <b>Baseline</b> and <b>Follow-Up</b> second questionnaire	August 25
Conduct <b>Baseline</b> and <b>Follow-Up</b> outbound telephone interviewing	September 15 – November 3
Submit interim data files	September 30 – October 2
End Baseline and Follow-Up data collection	November 3
Prepare and submit final data files	November 3 –17
<b>Final data files due</b>	November 17

# Data Retention

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



# **HEDIS Volume 6 Updates**

# Summary of Changes

- **NEW:** Updated HOS Instrument to include new OMB expiration date and removal of six items



# Fielding Non-CMS Surveys with HOS Questions

# Fielding Non-CMS Surveys with HOS Questions

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

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

- To download the HOS and HOS-M questionnaires and HEDIS Volume 6, visit NCQA's [HOS webpage](#)
- Survey vendors fielding off-cycle, non-CMS sponsored surveys using the HOS or HOS-M instruments or questions derived from the HOS must complete a HOS [Survey Use Application](#) and acknowledge and sign the HOS [Terms of Use](#)
- HEDIS Volume 6 is accessible from the [NCQA Store](#)

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

- Example of a Denied Survey Use Request
  - A health plan requested to house a copy of the HOS on their virtual library of tools and resources
  - This request was denied as it violates NCQA's Terms of Use by making the survey available for use eight weeks prior to and during the official HOS administration, the project not having an established end date, and the survey instrument being widely available without monitoring



# Questions?





# HOS 2024 Survey Results

*Health Services  
Advisory Group (HSAG)*

*Patrick Leon, MPH  
Healthcare Analyst*

*Jael Rodriguez, MBA, MPH  
Healthcare Analyst*

# Overview

- HOS 2024 Survey Administration
- Response Rate Trends
- Survey Response Rates
  - Cohort 27 Baseline
  - Cohort 25 Follow-Up
- Survey Disposition Components
  - Cohort 27 Baseline
  - Cohort 25 Follow-Up
- Highlights

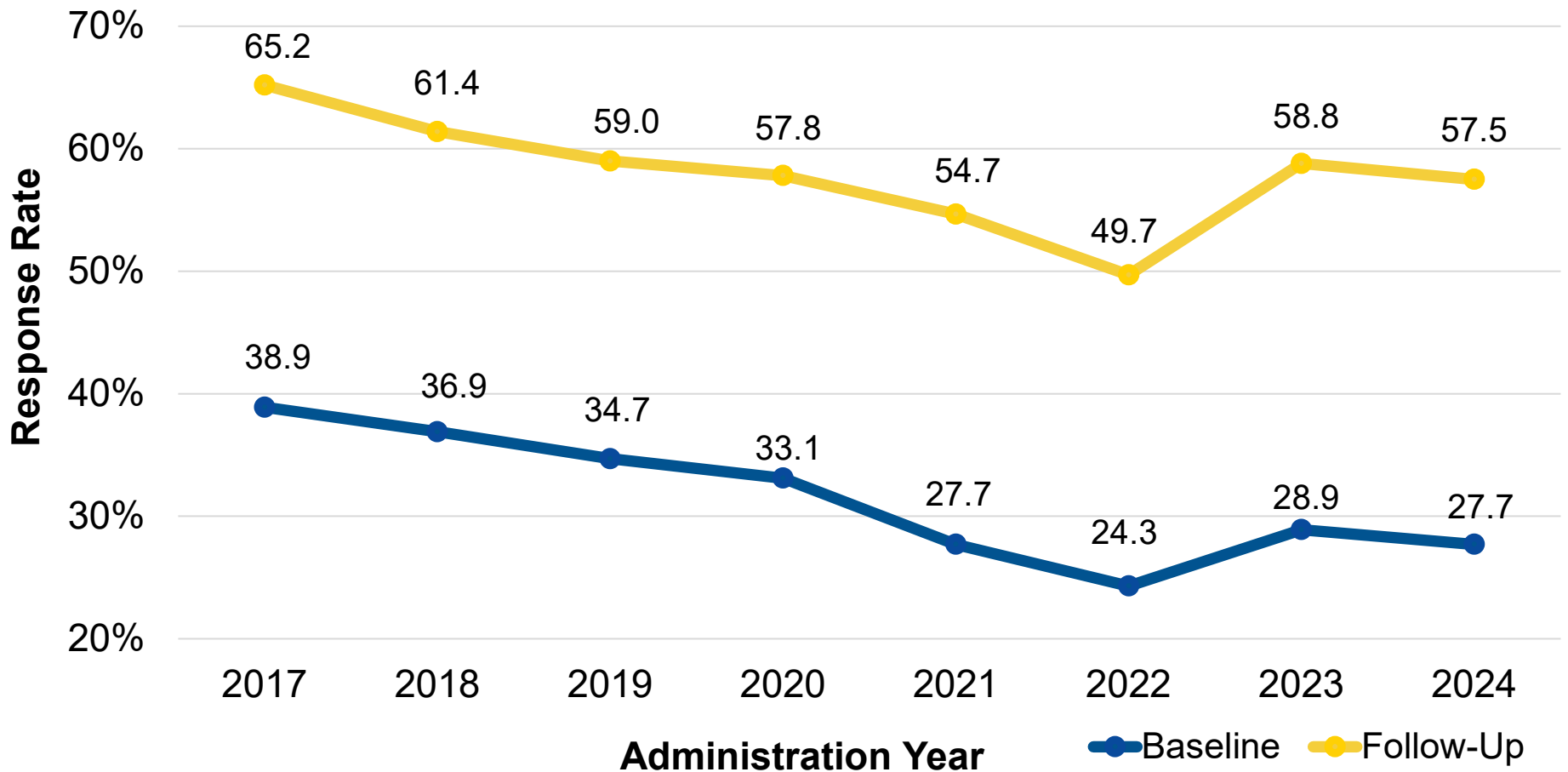
# HOS 2024 Survey Administration

- Four survey vendors were approved to administer the HOS
- Survey vendors are randomly assigned a letter (A-C) in this presentation

Survey	Number of Contracts
Total Unique Contracts	647
Cohort 27 Baseline	638
Cohort 25 Follow-Up	550

# Response Rate Trends

Rounds 20-27, Baseline and Follow-Up Surveys: 2017–2024



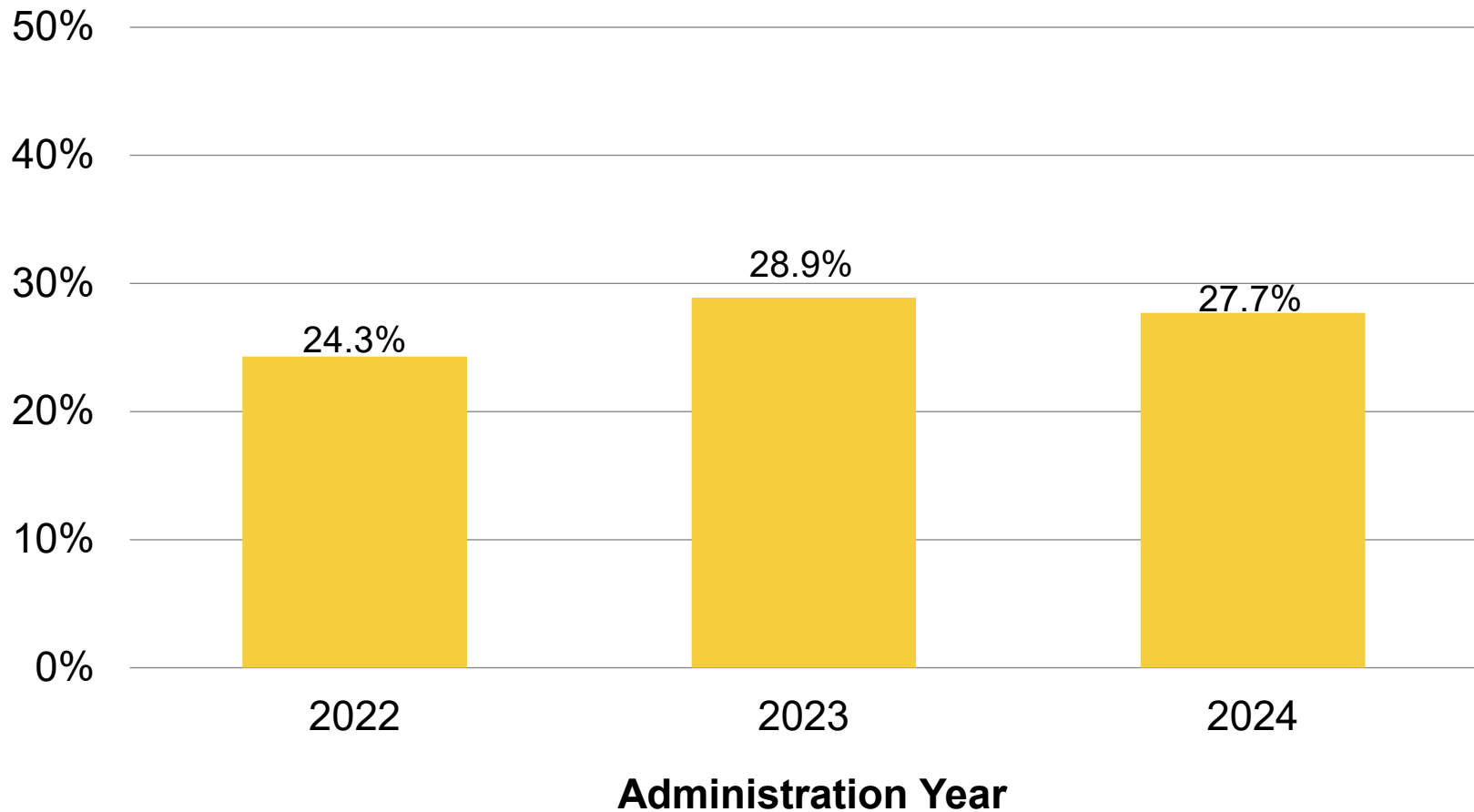


# Survey Response Rates

## Cohort 27 Baseline

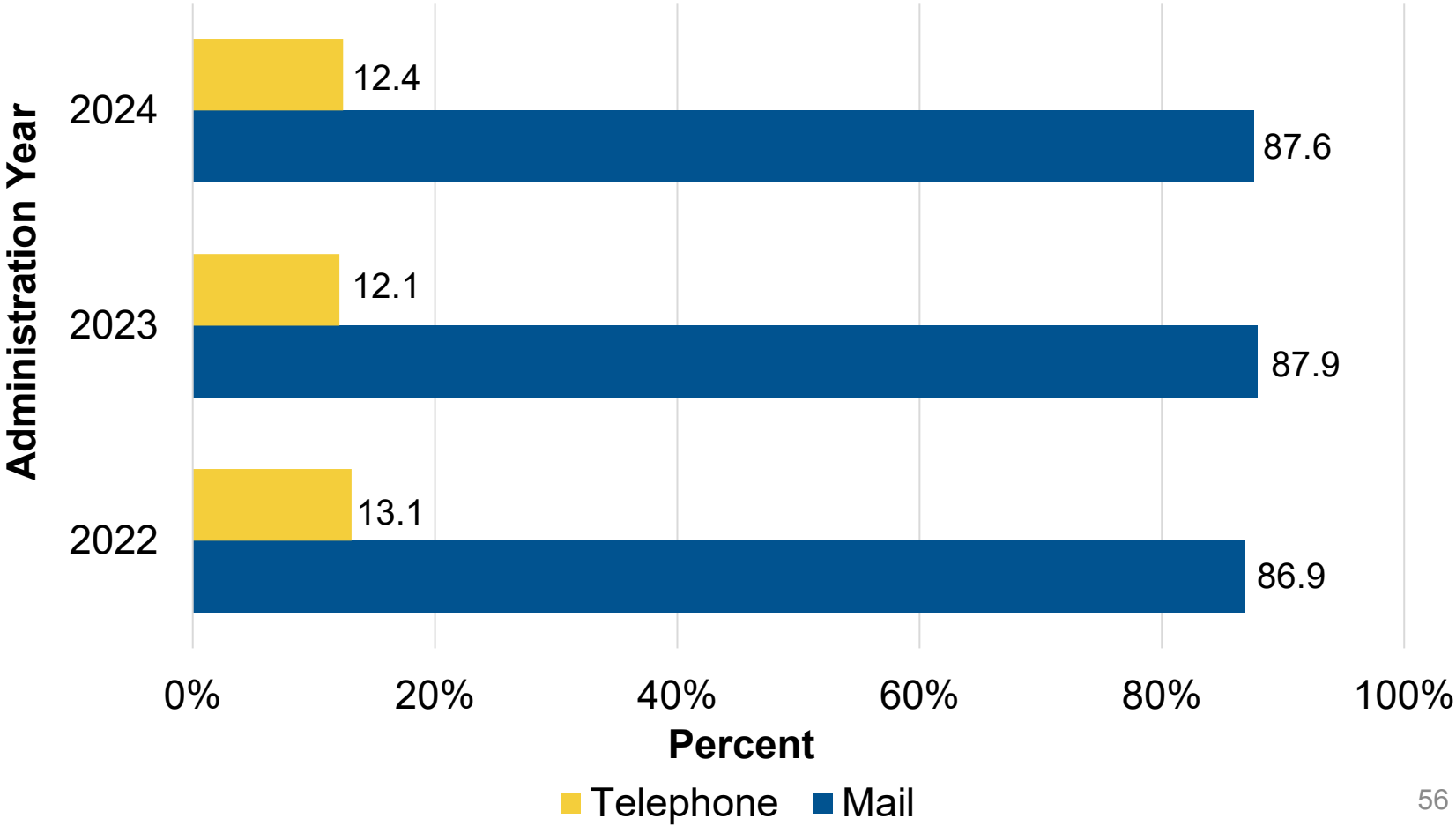
# Baseline Response Rates Trend

Cohorts 25-27, Survey Years: 2022-2024



# Completed Baseline Surveys by Mode

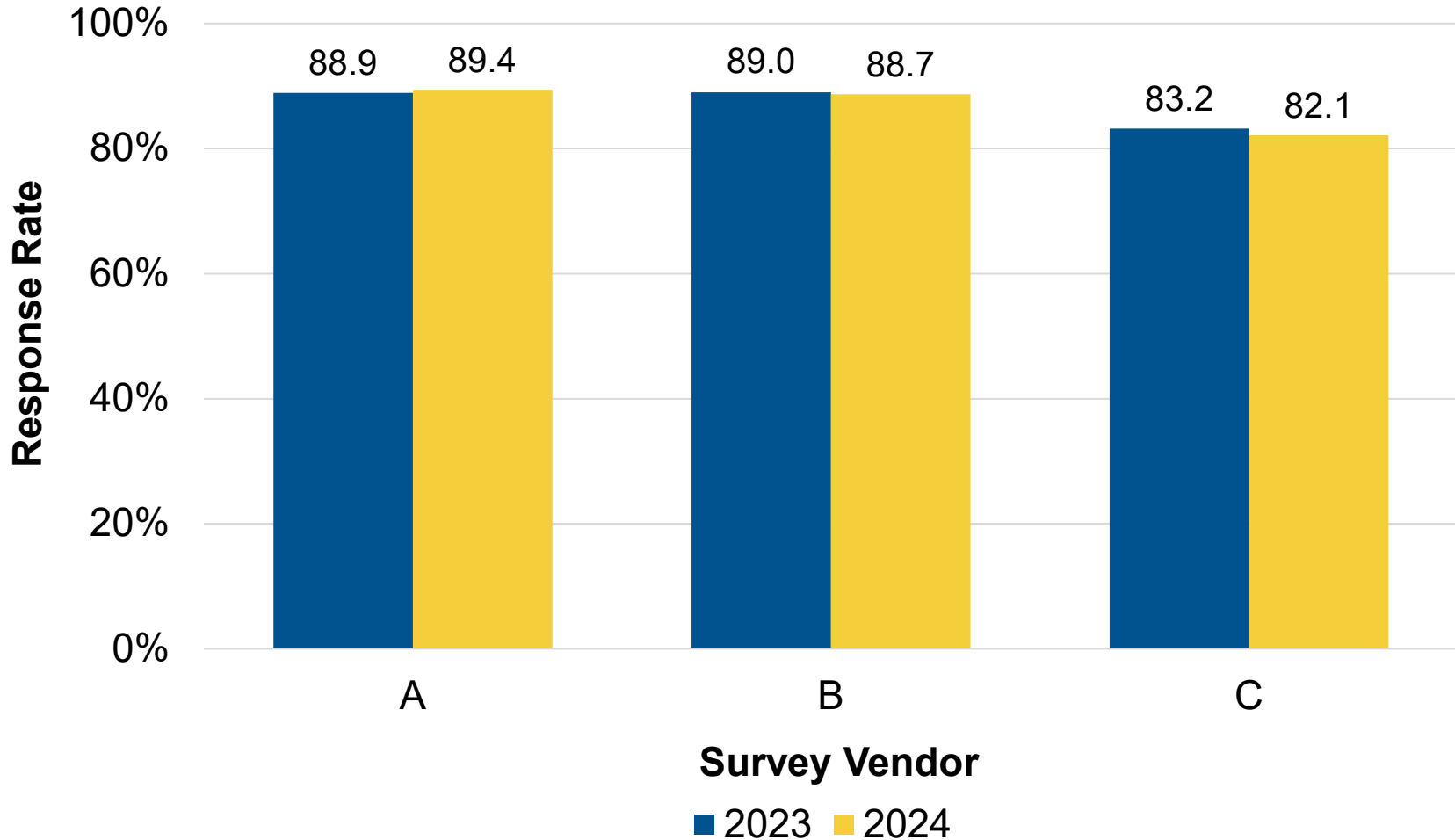
Cohorts 25-27, Years: 2022-2024





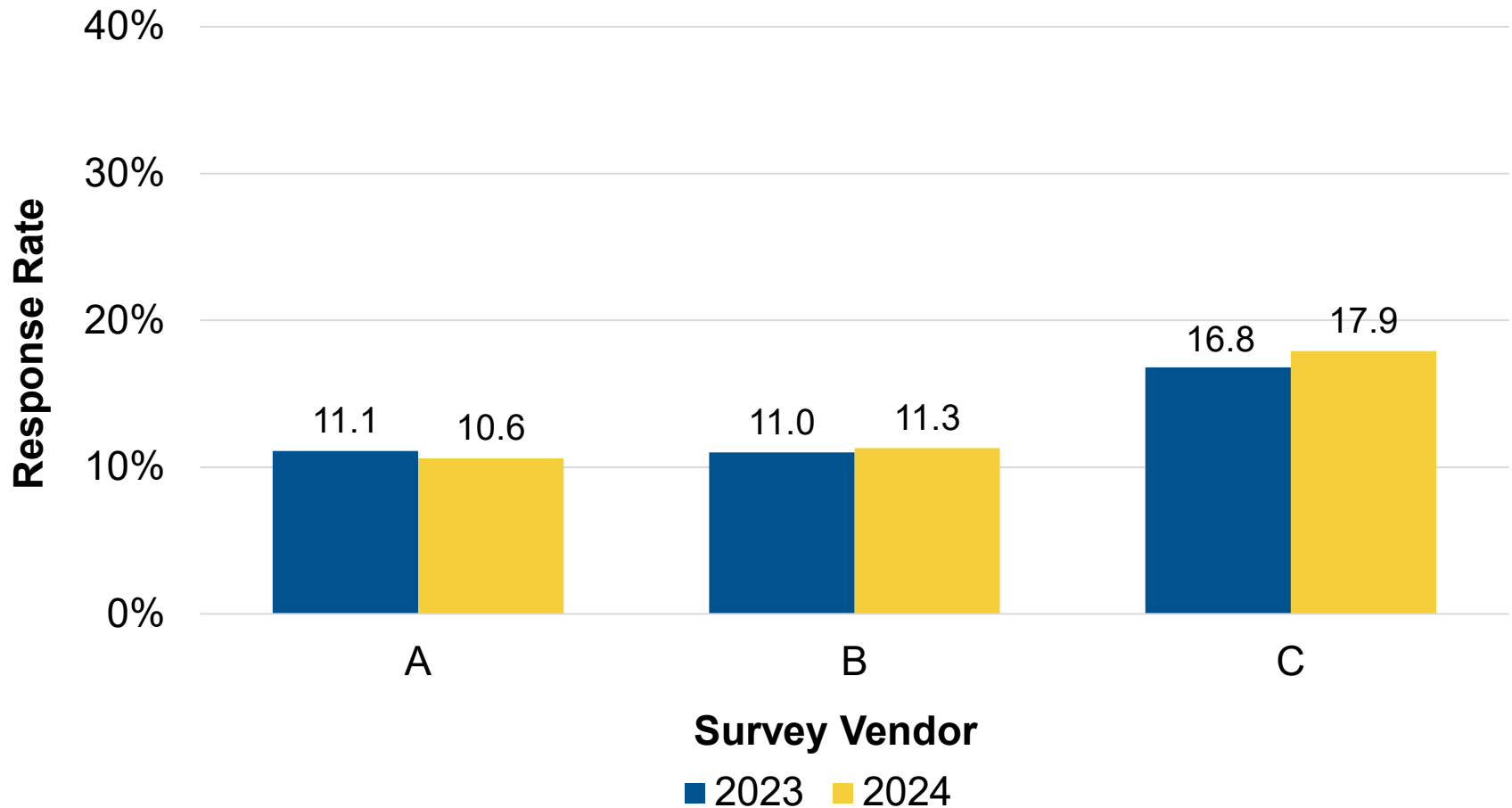
# Completed Mail Survey Rates by Vendor

Cohorts 26-27, Baseline Surveys: 2023-2024



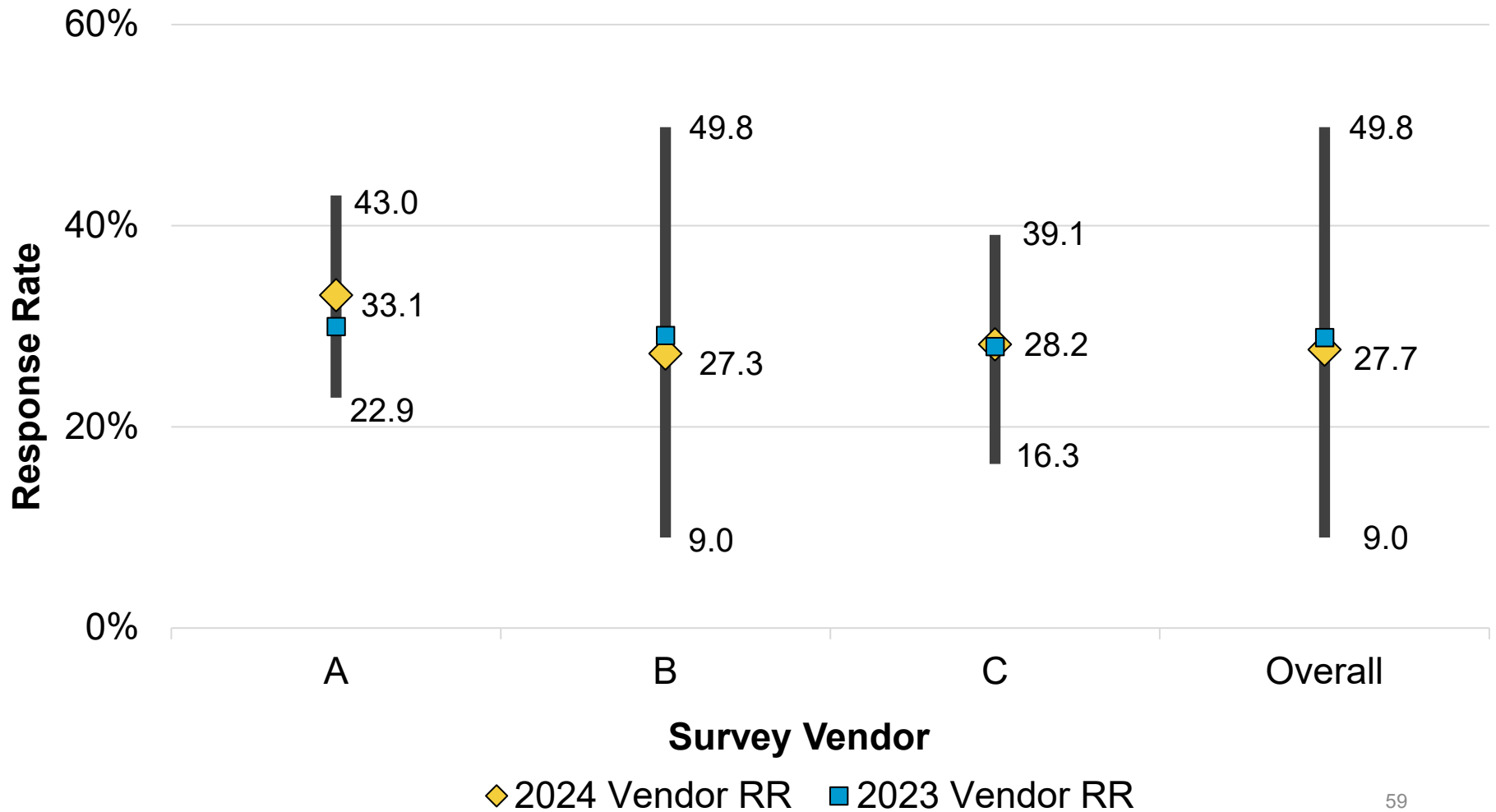
# Completed Telephone Survey Rates by Vendor

Cohorts 26-27, Baseline Surveys: 2023-2024



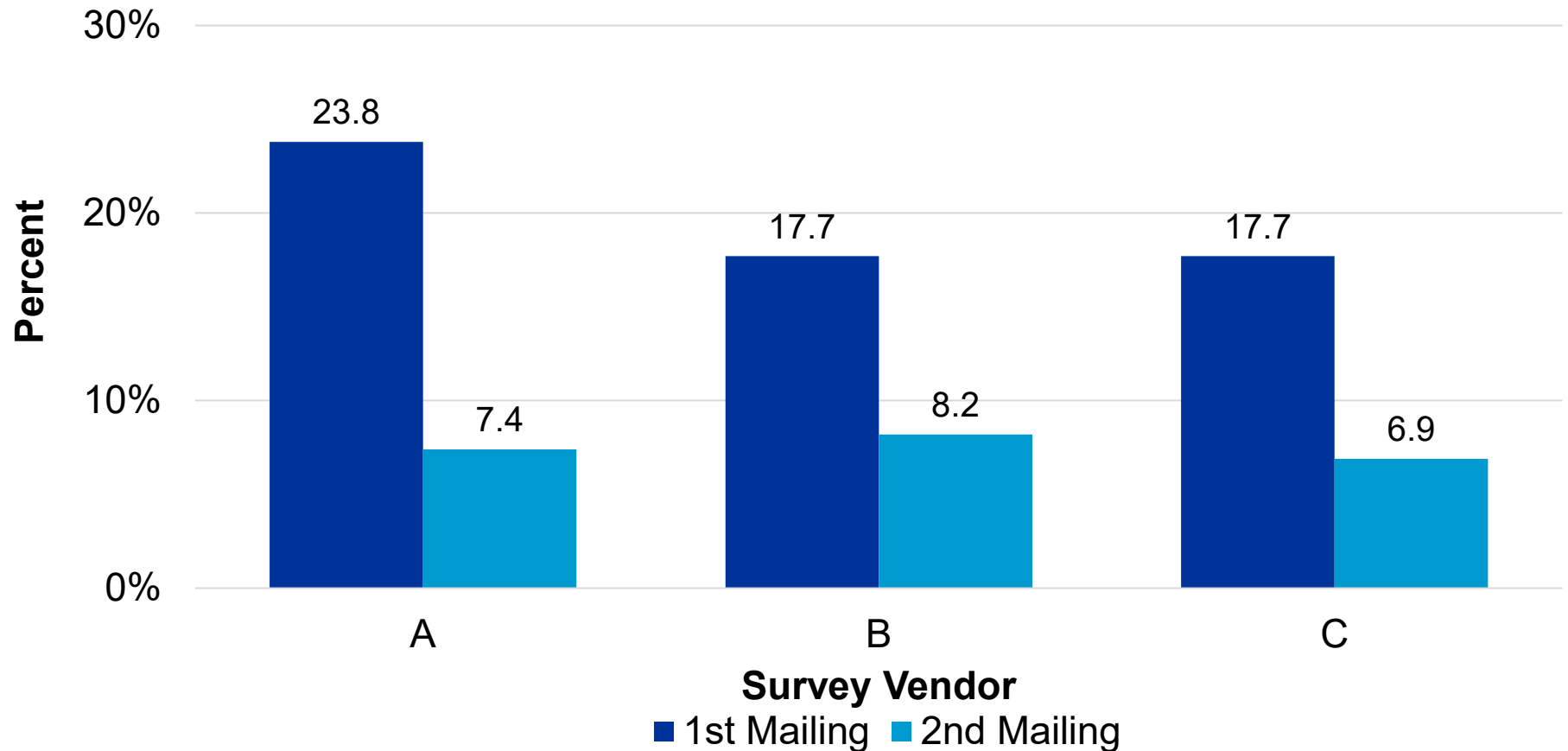
# Variability of Completed Survey Rates by Vendor

Cohort 27 Baseline Survey: 2024



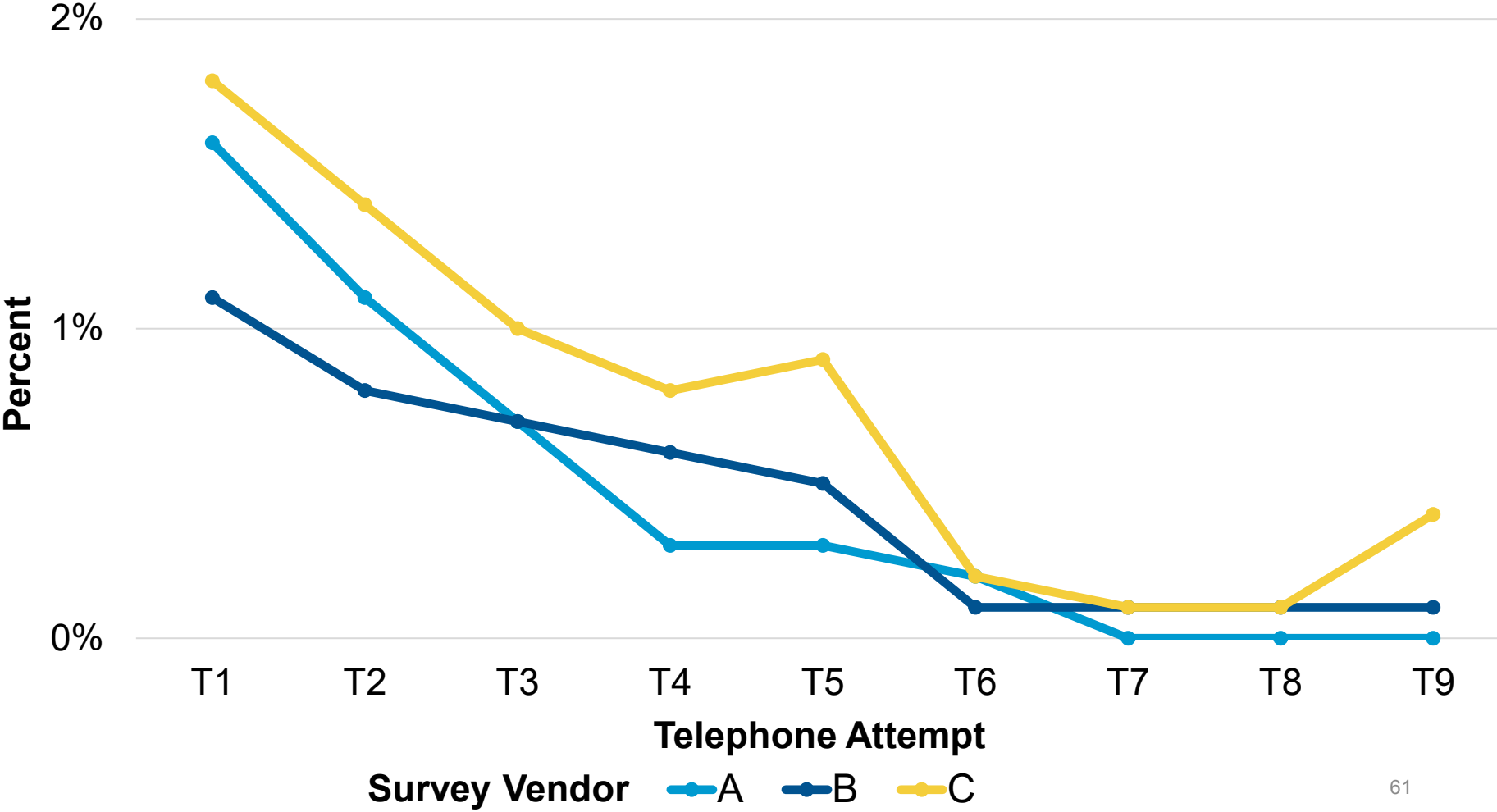
# Percent of Sample Responding by Mail

Cohort 27 Baseline Survey: 2024



# Percent of Sample Responding by Telephone

Cohort 27 Baseline Survey: 2024



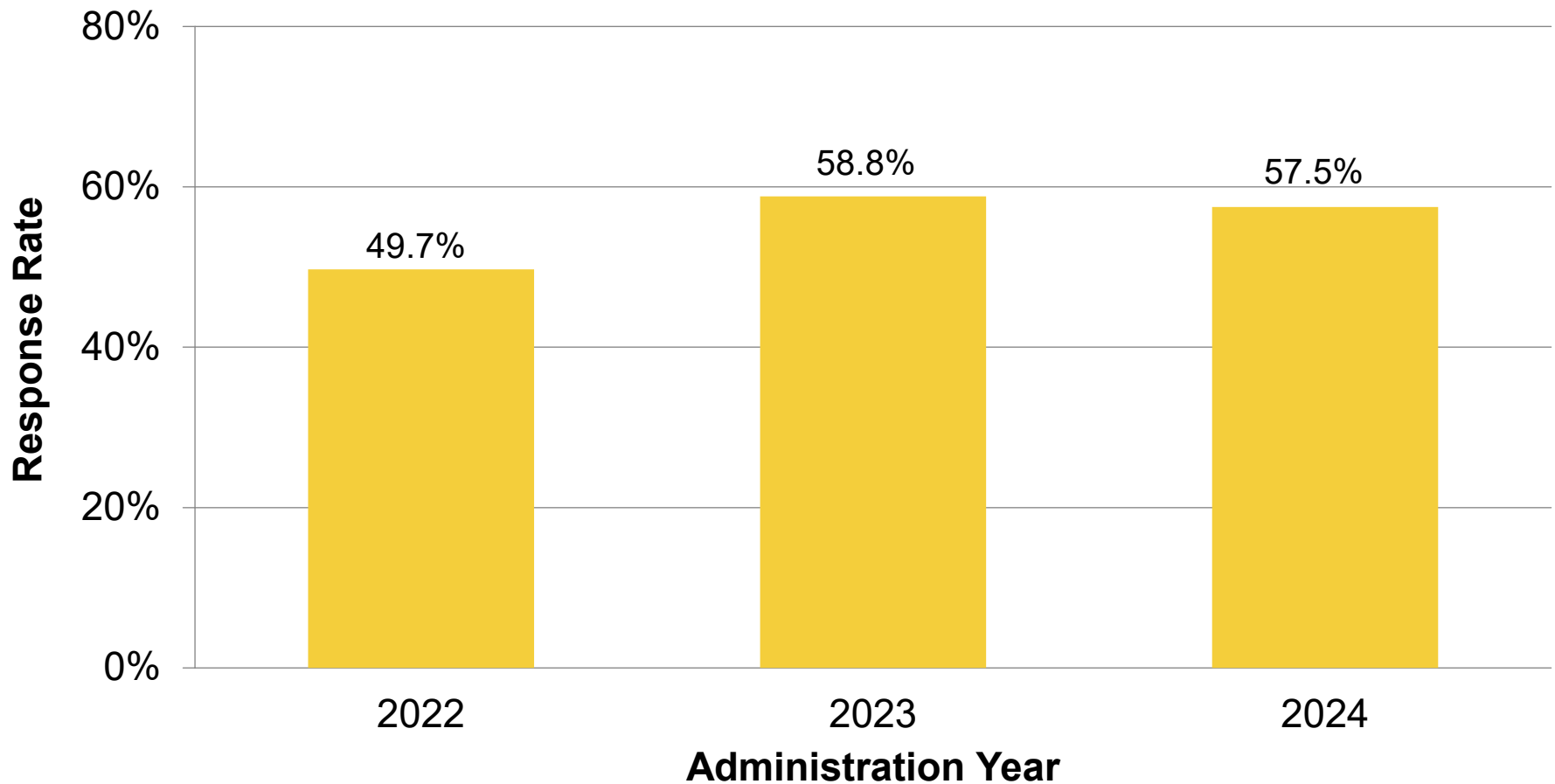


# Survey Response Rates

## Cohort 25 Follow-Up

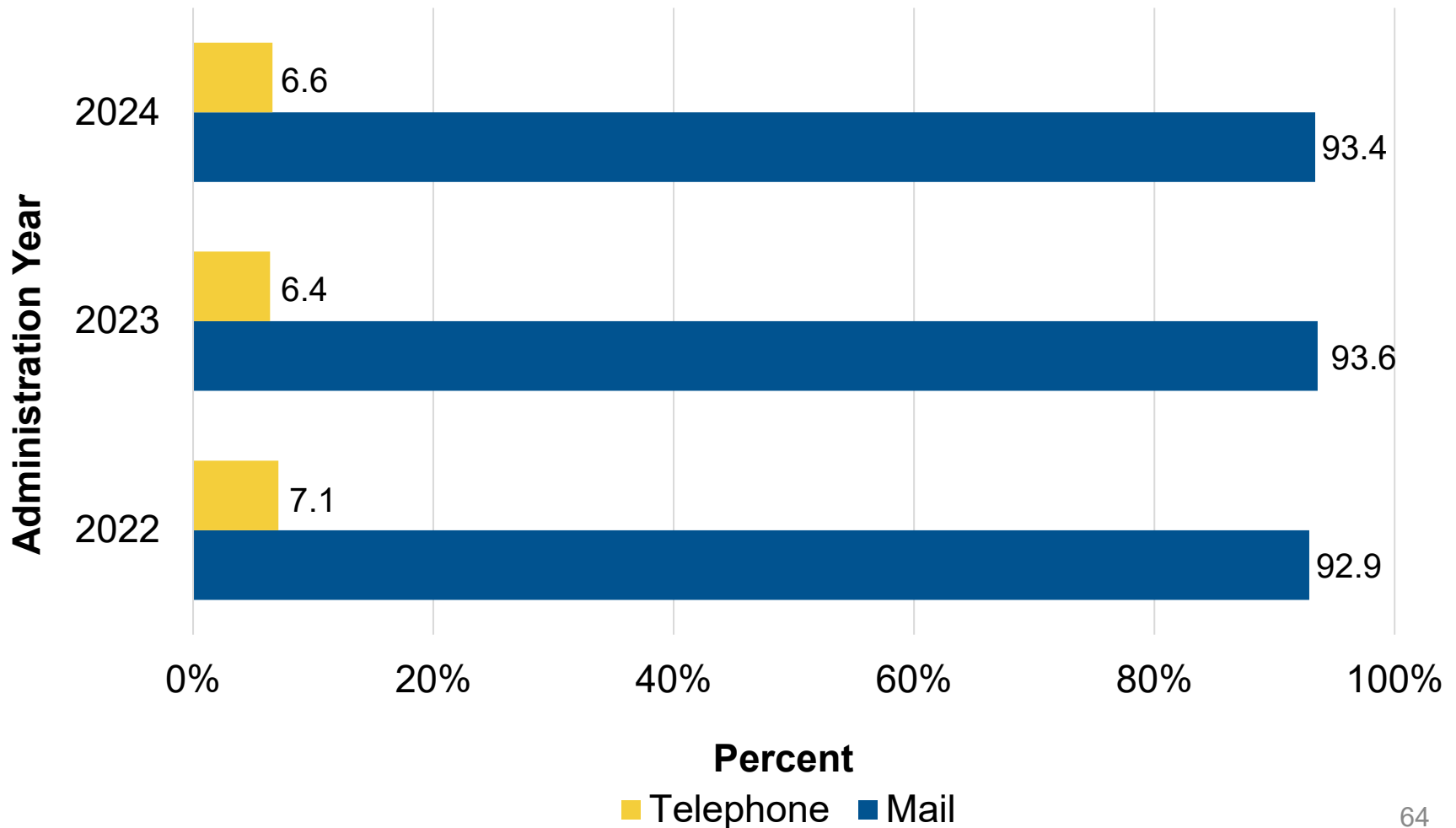
# Follow-Up Response Rates Trend

Cohorts 23-25, Survey Years: 2022–2024



# Completed Follow-Up Surveys by Mode

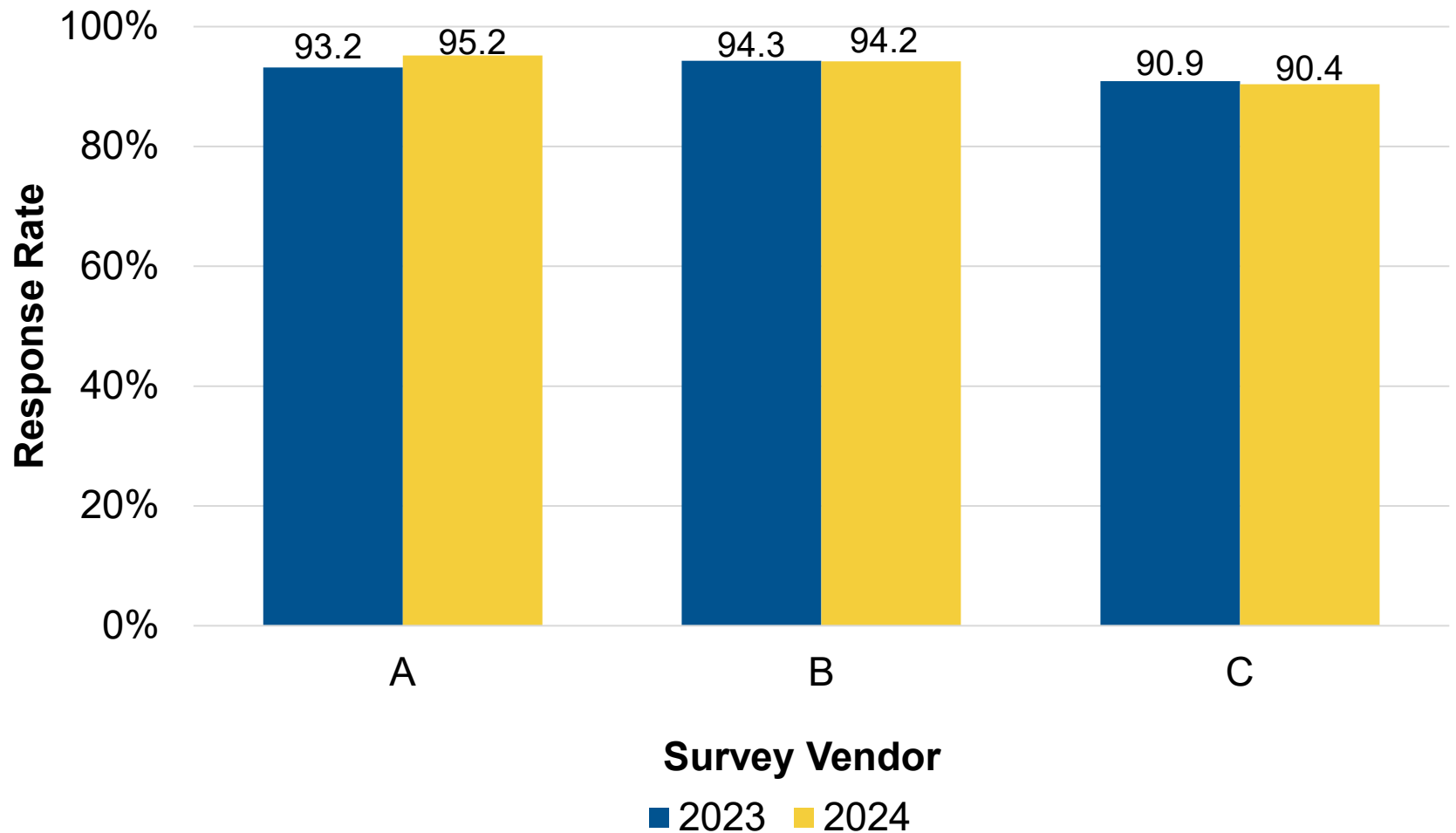
Cohorts 23-25 Years: 2022-2024





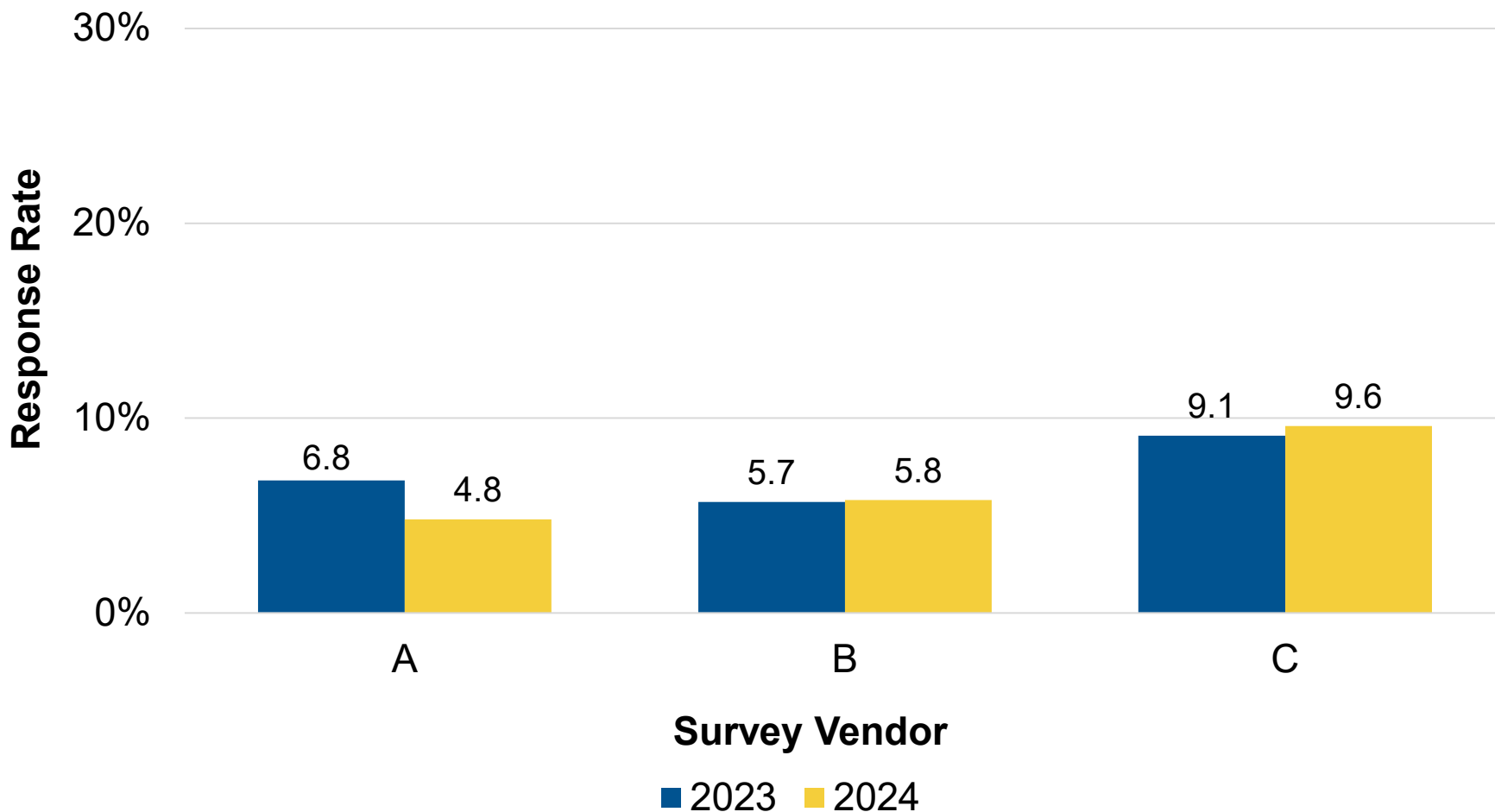
# Completed Mail Survey Rates by Vendor

Cohorts 24-25 Follow-Up Surveys: 2023-2024



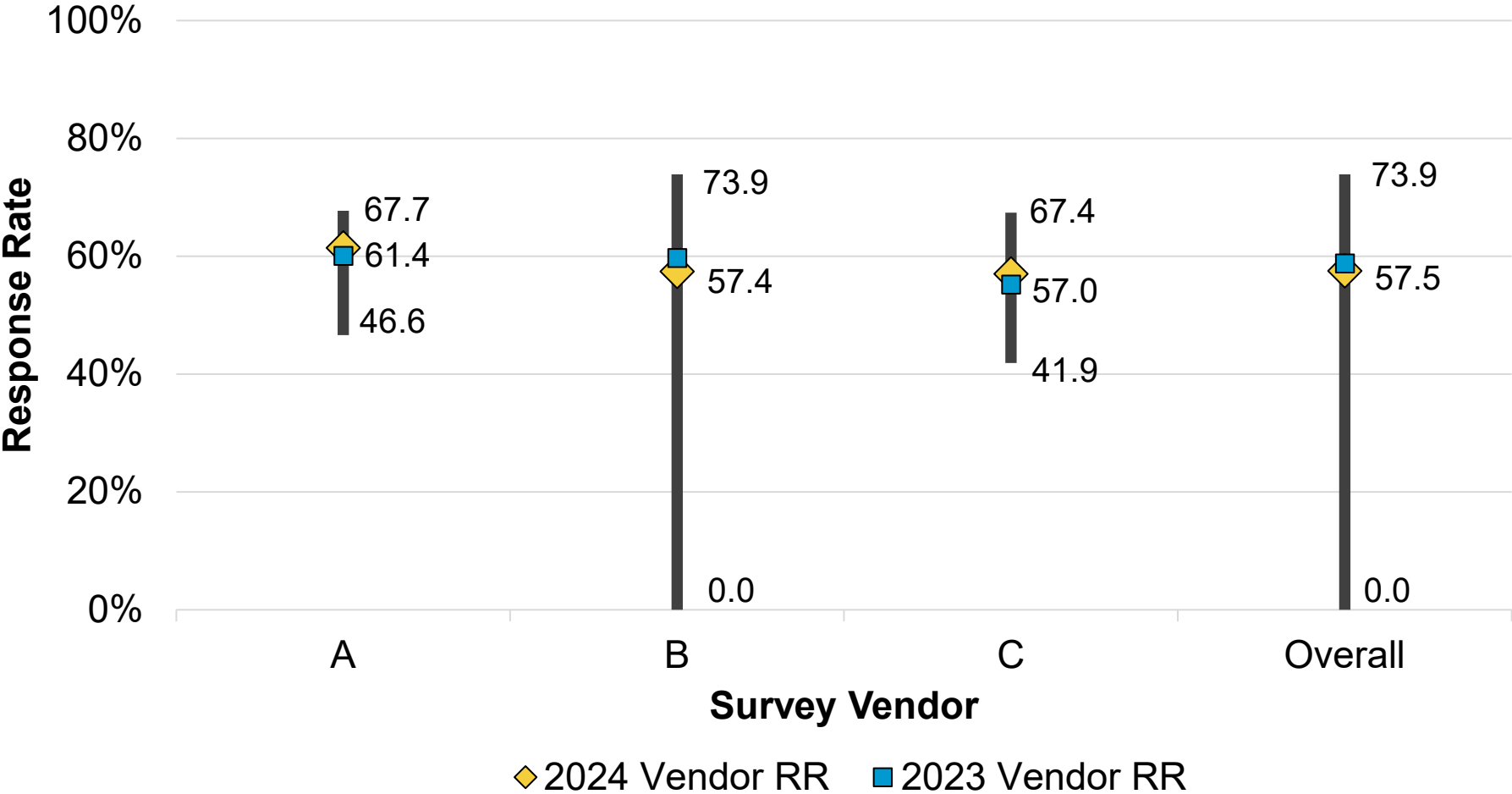
# Completed Telephone Survey Rates by Vendor

Cohorts 24-25 Follow-Up Surveys: 2023-2024



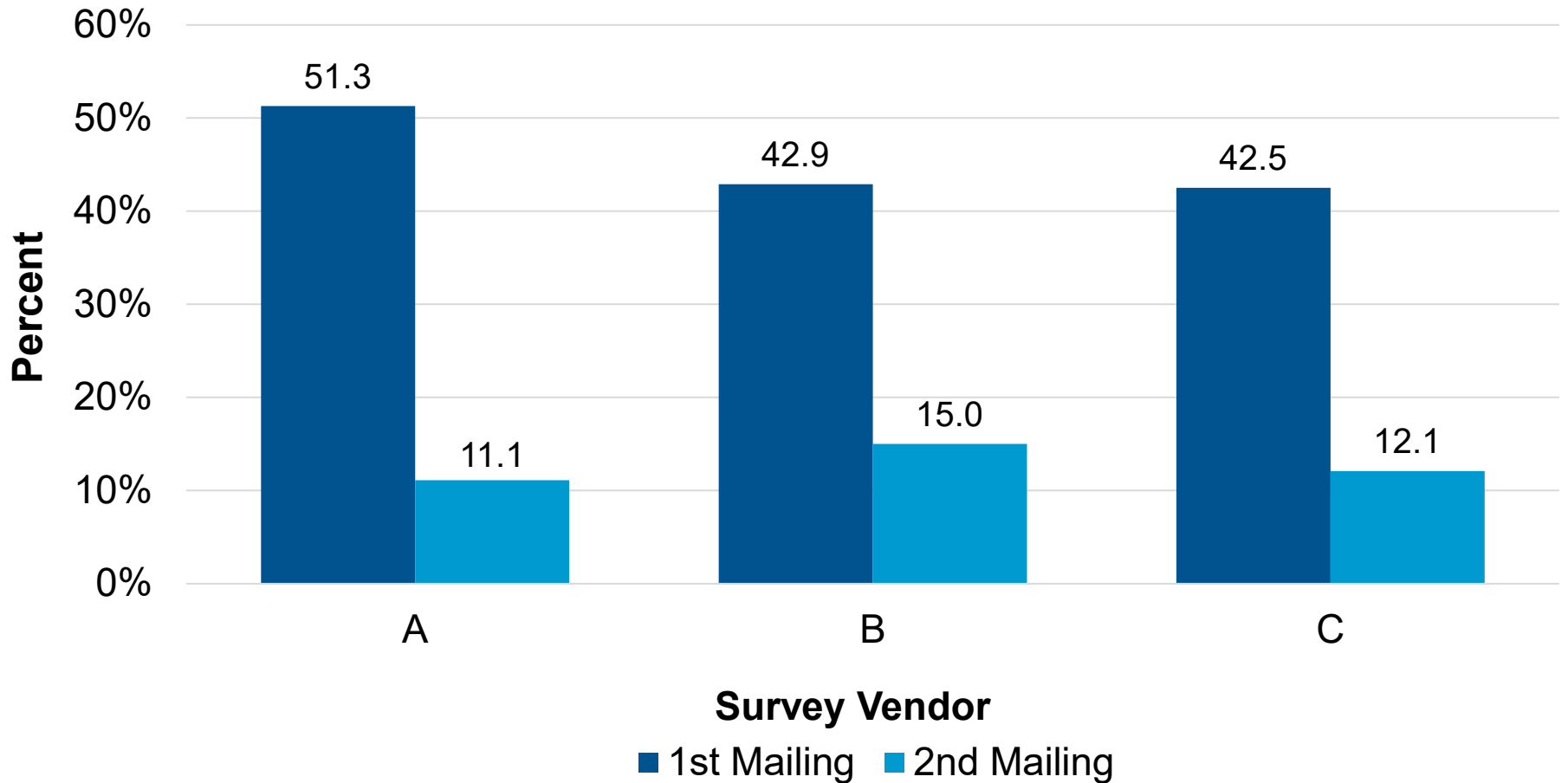
# Variability of Completed Survey Rates by Vendor

Cohort 25 Follow-Up Survey: 2024



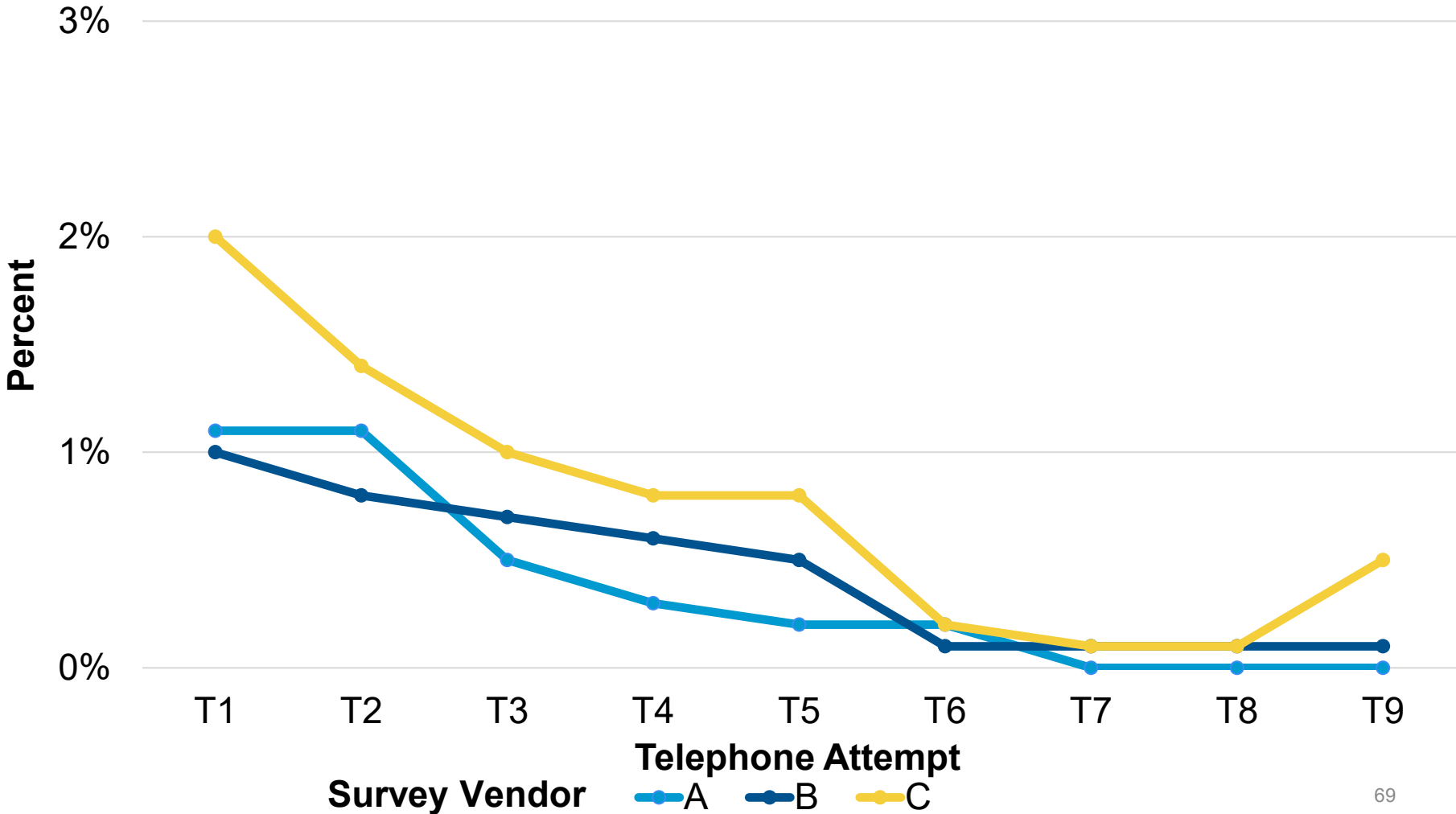
# Percent of Sample Responding by Mail

Cohort 25 Follow-Up Survey: 2024



# Percent of Sample Responding by Telephone

Cohort 25 Follow-Up Survey: 2024

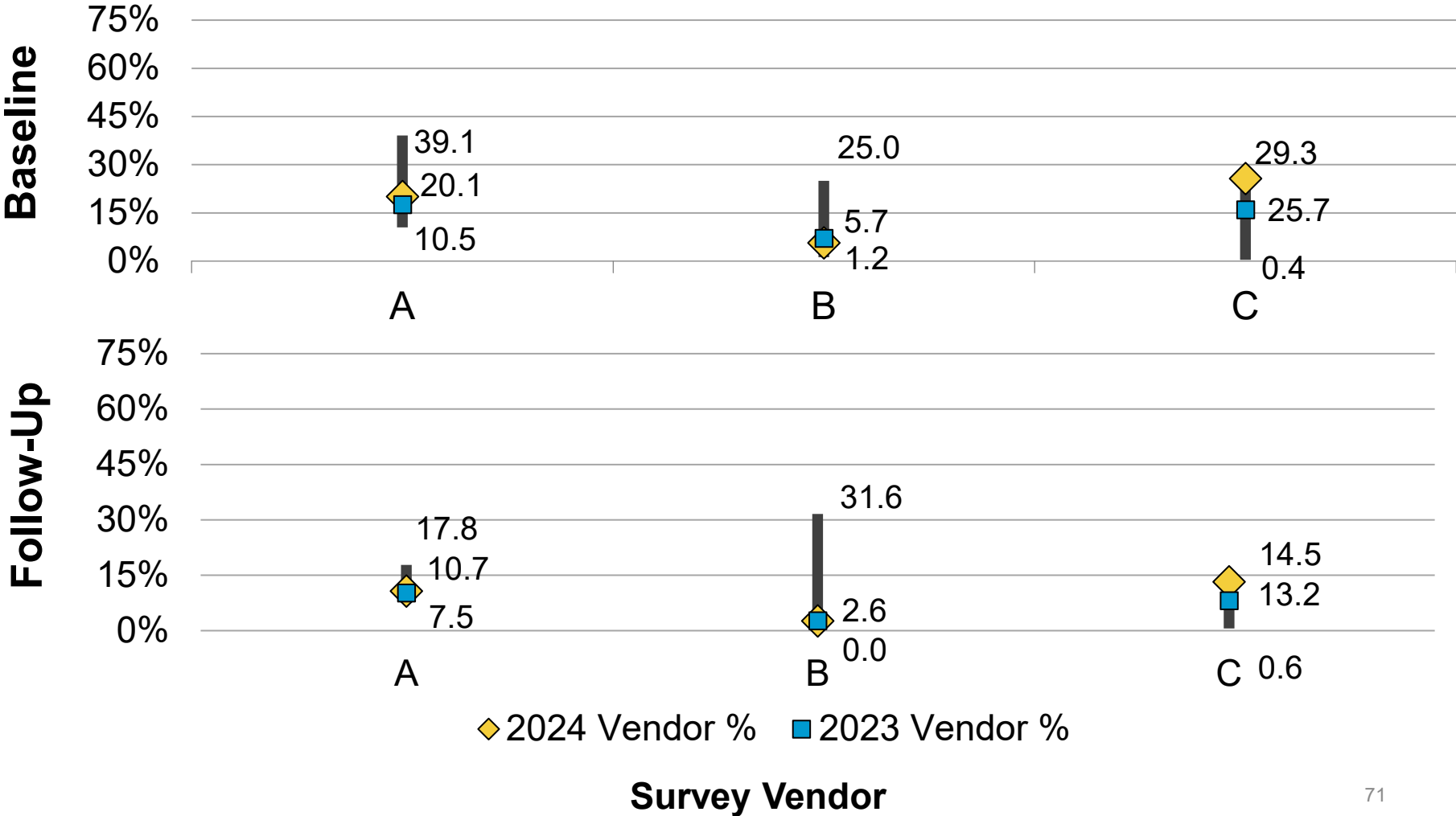




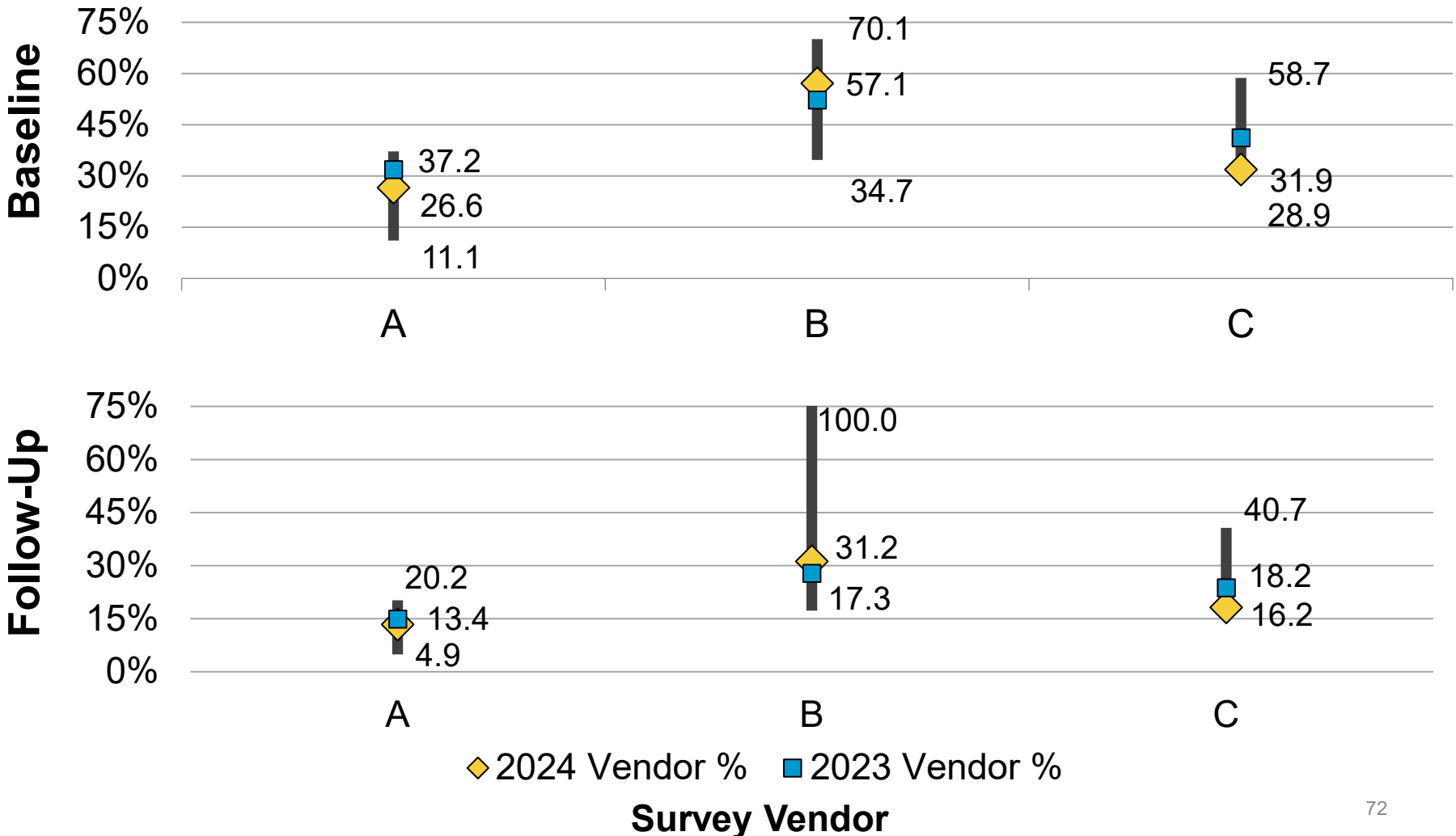
# Survey Disposition Components

## Cohort 27 Baseline and Cohort 25 Follow-Up

# Mail Nonresponse After Max Attempts: M36

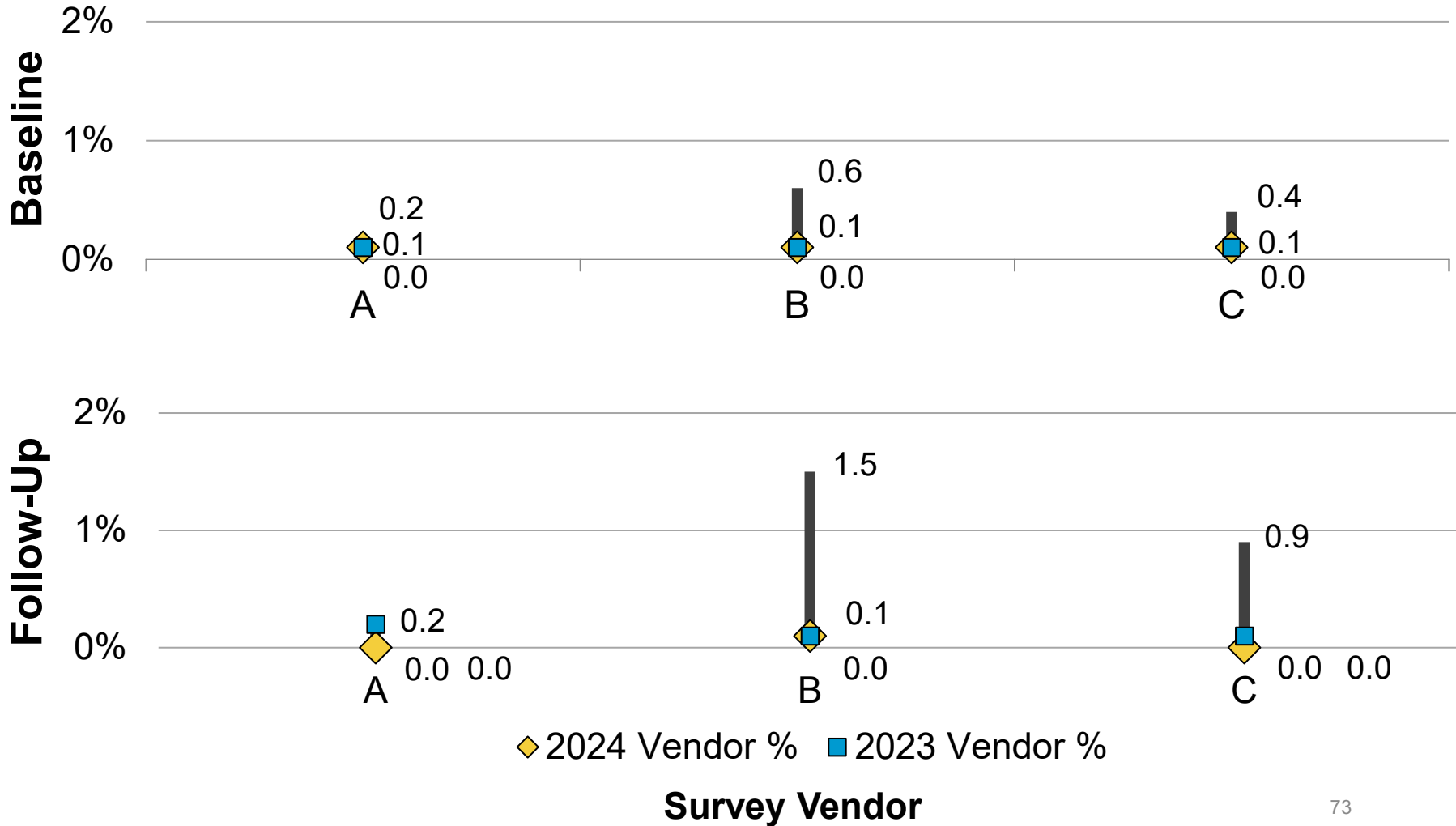


# Telephone Nonresponse After Max Attempts: T36

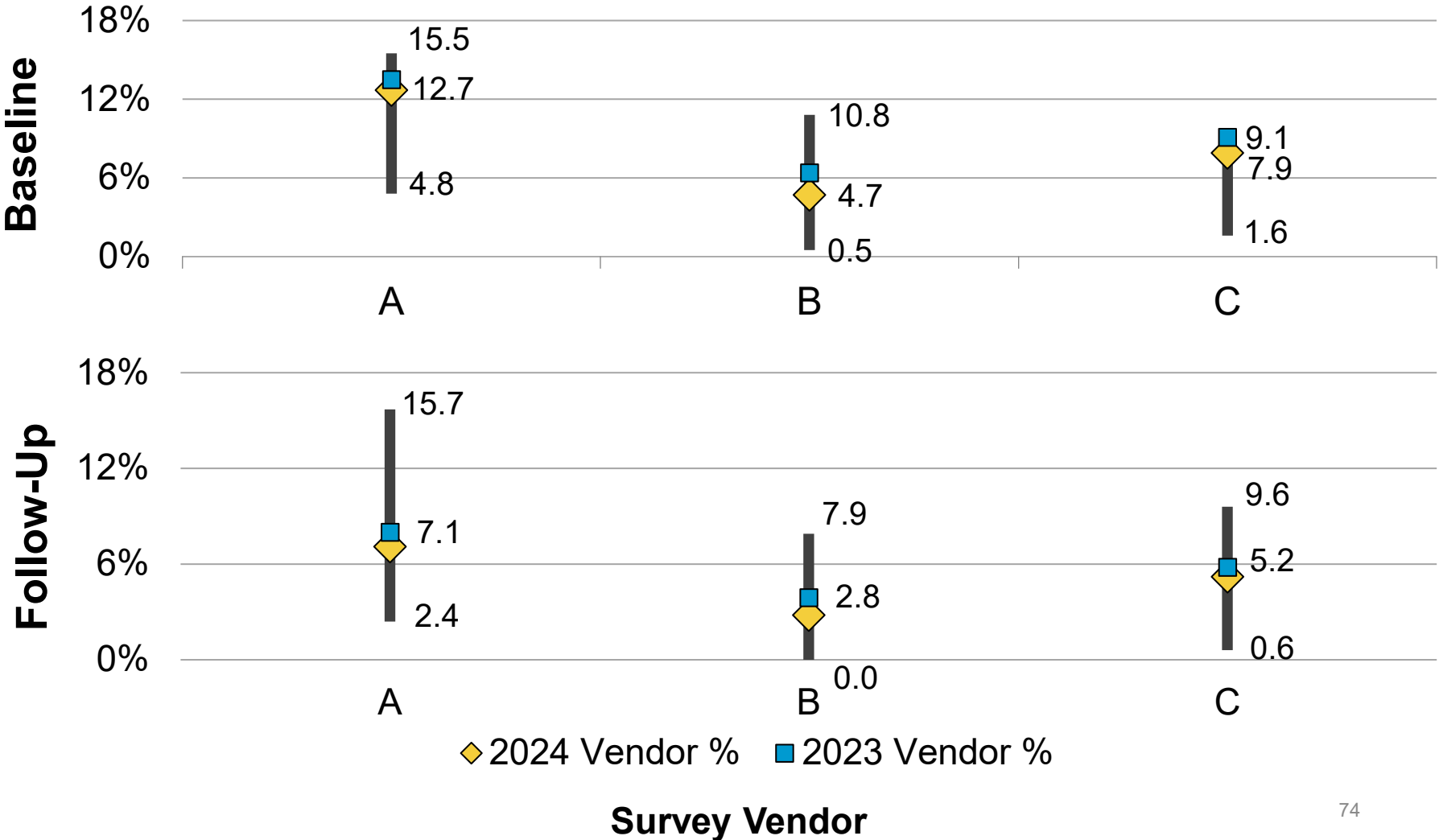




# Mail Refusal: M32



# Telephone Refusal: T32



# Highlights

- 2024 showed a decrease in response rates for both Baseline and Follow-Up
- Well over two-thirds of surveys were completed by mail
- First mailing captures more than twice the respondents compared to the second mailing
- First telephone attempt has most responses while completion trends down with subsequent attempts
- Two out of three survey vendors had a smaller range of variability in response rates across contracts

# Questions?





# Survey Material Updates

**NCQA**

*Louie Amog, BS*  
*HOS Project Analyst*

# Overview

- QAG Updates
- Mailing Material Updates
- Instrument Updates
- Telephone Specification Updates
- Survey File Record Layout Updates
- FAQ Updates

# QAG Updates

- **NEW:** Added general interviewing guidelines for using empathetic language during telephone interviews
- **NEW:** Added guidance that sampled members who are deaf or hard of hearing may use teletypewriters or have an interpreter serve as a proxy during telephone interviews
- **NEW:** Added guidance that survey vendors will receive a death and disenrollment file in August
  - Used to identify sampled members who will not be contacted during telephone administration
- **NEW:** Updated Quality Oversight Schedule to include due dates for submitting member correspondence items
  - Customer support emails submitted **weekly**
  - White mail correspondence submitted **biweekly**

# Mailing Material Updates

## Prenotification and Cover Letters



- **NEW**: All Prenotification and Cover Letters must have **centered** margins
  - Left/Right margins may **NOT** be smaller than **0.75”**
  - Top/Bottom margins may **NOT** be smaller than **0.5”**
- **NEW**: Chinese and Russian footnotes have been removed and will be provided to survey vendors fielding surveys in those languages



# Mailing Material Updates (Cont'd)

## Logo Guidance

- Survey vendors have the option of placing the health plan logo on cover letters
  - CMS and health plan logos are the only logos that may appear on the cover letters
  - All logos must be printed in **black and white**

CMS Logo Only	CMS and Health Plan Logos
<p>Centers for Medicare &amp; Medicaid Services c/o Survey Processing [SURVEY VENDOR RETURN ADDRESS]</p>  <p>The CMS logo consists of the letters 'CMS' in a bold, sans-serif font, with a curved line above it. Below the letters, the text 'CENTERS FOR MEDICARE &amp; MEDICAID SERVICES' and 'CENTER FOR MEDICARE' is written in a smaller font.</p>	<p>[Insert health plan logo here]</p>  <p>Centers for Medicare &amp; Medicaid Services c/o Survey Processing [SURVEY VENDOR RETURN ADDRESS]</p> <p>The CMS logo is identical to the one in the first column, but it is positioned to the right of the return address text.</p>

# Mailing Material Updates (Cont'd)

- On all outgoing envelopes survey vendors will use the following block format
  - Prenotification envelopes and Business Reply envelopes may **NOT** include health plan logos

Mailing Material	Logo/Letterhead
Prenotification Outgoing Envelope	[CMS logo] c/o Survey Processing [Survey vendor mailing address]
First and Second Questionnaire Outgoing Envelope	[CMS logo; health plan logo, optional] c/o Survey Processing [Survey vendor mailing address]
Business Reply Envelope	[CMS logo] c/o Survey Processing [Survey vendor return address]  or  "Centers for Medicare & Medicaid Services" c/o Survey Processing [Survey vendor mailing address]

# Mailing Material Updates (Cont'd)

- Survey vendors may not use Z-fold or accordion-fold for prenotification letters
- Double-sided survey cover letters must be folded in such a way that only one language is visible
- The visible survey language must correspond to the sampled member's language preference

# Instrument Updates

- **NEW:** Updated OMB expiration date\*

\*Updated language and materials will be provided following training

- **NEW:** Removed the following items from the HOS instrument:

- Instrumental Activities of Daily Living (Q11a-c)
- Healthy Days (Q12, Q13, Q14)
- Patient-Reported Outcomes Measurement Information System (PROMIS) Pain Item (Q35)
- Gender (Q52)

# Instrument Updates (Cont'd)

- **NEW:** Survey vendors may include page numbers, centered on the bottom of each page
  - Survey vendors may include just the page number or include “Page” before the page number

# Telephone Specification Updates

- **NEW:** Updated question numbering to align with updated HOS instrument
- **NEW:** Added interviewer probe for Q45 (Weight) and Q46 (Height) for instances when respondents answer in metric units

# Survey File Record Layout Updates

- **NEW:** Updated field descriptions and field positions to align with updated HOS instrument
- **NEW:** Added clarification to “Survey Vendor Telephone Interviewer ID” field that all telephone records, except **T24** and **T36** cases, should have a VUCATI ID

# FAQ Updates

- **NEW:** New FAQ which asks if members receive a reward for completing the survey

**51. Is there a reward for completing the survey?**

We do not offer incentives of any kind for participation in the survey. However, your answers are valuable and completing the survey will help CMS improve the quality of Medicare health plans and help others choose a health plan. The survey takes just a few minutes to complete, and your information is kept private by law. Participation is voluntary.



# FAQ Updates (Cont'd)

- **NEW:** Added language to Q9 to aid in verifying who the survey vendor is and why they are contacting the member.

9. **Who are you? Are you with Medicare? If Medicare is administering the survey, then why isn't Medicare calling me?**

I'm an interviewer with [VENDOR NAME]. We are an organization approved by the Centers for Medicare & Medicaid Services, the federal agency that runs Medicare. They have asked us to contact you on their behalf to learn about the quality of care that you receive from your health plan.

# FAQ Updates (Cont'd)

- **NEW:** Added notes to Q2 and Q44 to assist survey vendor staff with questions in which the answer may differ depending on when they were asked during administration

**2. Duplicate Surveys: I already mailed the survey back. Why did you send another?**

If you recently returned the Medicare Health Outcomes Survey, please disregard this duplicate survey. This survey was probably mailed to you before we received the one you completed. Thank you for participating in this survey.

**Note:** Confirm in the system that the survey has been received. If the survey has not been received, offer to do the interview with the member over the telephone now.

**44. How can you tell I did not return the first questionnaire?**

Each survey has an identification number that lets us keep track of which questionnaires have been returned. However, the names and addresses are stored separately from the answers to the survey questions, so that once you complete the questionnaire, your answers are not associated with your name.

**Note:** Offer to do the interview with the member over the telephone now.

# Questions?



***Break***





# Data Coding and Submission

**NCQA**

*Jacky Chon, BS*  
*HOS Project Analyst*

# Overview

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

# File Specifications Review

- Submit survey data in .txt file format
- Sample file data included in data submission files must match original sample file data
  - No changes or modifications permitted
- Two records
  - **Header Record:** Contract-level information
  - **Member-Level Record:** Member-level information
    - Sample File Layout
    - Survey File Record Layout

# File Layout Changes

## Survey File Record Layout

- **NEW:** Survey Completion Date valid values
  - Updated valid values to align with 2025 survey administration dates
- **NEW:** Changed CMS Administrative “Gender” to “Sex”
- **NEW:** Removed Q11a-c (IADLs), Q12-14 (Healthy Days), Q35 (PROMIS), Q52 (Gender)
- **NEW:** Added T25 disposition code (Ineligible: removed from sample)



# Decision Rules

## Open-ended Questions

- Q49b (Primary Language – Please Specify)
  - Code response exactly as provided, regardless of appropriateness
- Q56a and Q56b (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 Q49b and Q56
  - Record response as ILLEGIBLE
  - Use all caps
  - Do **NOT** use any punctuation

# Percentage Answered

- HOS contains 71 potential response items
- Exclude 11 skip pattern items from calculation
  - Q28a-28e, Q34, Q35, Q36, Q38, Q54, Q56
- Denominator is 60 items

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

# Percentage Answered (Cont'd)

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

# Disposition Codes

## Coding Demographic Fields

- Survey vendors do **NOT** code a record T31 if only demographic information is collected from member or proxy
  - Only Q55 and Q56 answered
  - Interview ends before Q1
- Continue telephone attempts to reach the member or proxy to complete the survey. Survey vendors must make up to five telephone attempts to each available telephone number

# Data Coding Guidance

## 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 Interactive Data Submission System (IDSS)
  - Survey vendors will receive instructions closer to the scheduled data submission periods
- Upload maximum of 80 files across all folders within a zip file
- Allow each zip file to process before uploading another

# Prepare and Submit Data Files (Cont'd)

- Error Messages
  - Correct and reupload 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 **September 30, 2025**, and closes **October 2, 2025**
- All data received up to **three (3) business days** prior to the Interim Data Submission due date (**September 29, 2025**) must be processed and submitted

# Interim Data Submission (Cont'd)

- Survey vendors review records thoroughly prior to submission to confirm all data are accurate
- Interim data files will be cleaned and analyzed
- The HOS Project Team will provide findings to survey vendors, if applicable, prior to Final Data Submission
- Some 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 **November 3, 2025**
- Complete data attestation prior to marking files “Final”
- Final data files due **November 17, 2025**
- Final data files will be cleaned and analyzed
  - Data collection issues identified during Final Data Submission may warrant Discrepancy Reports

# Questions?





# Data Management

## *HSAG*

*Patrick Leon, MPH  
Research Analyst*

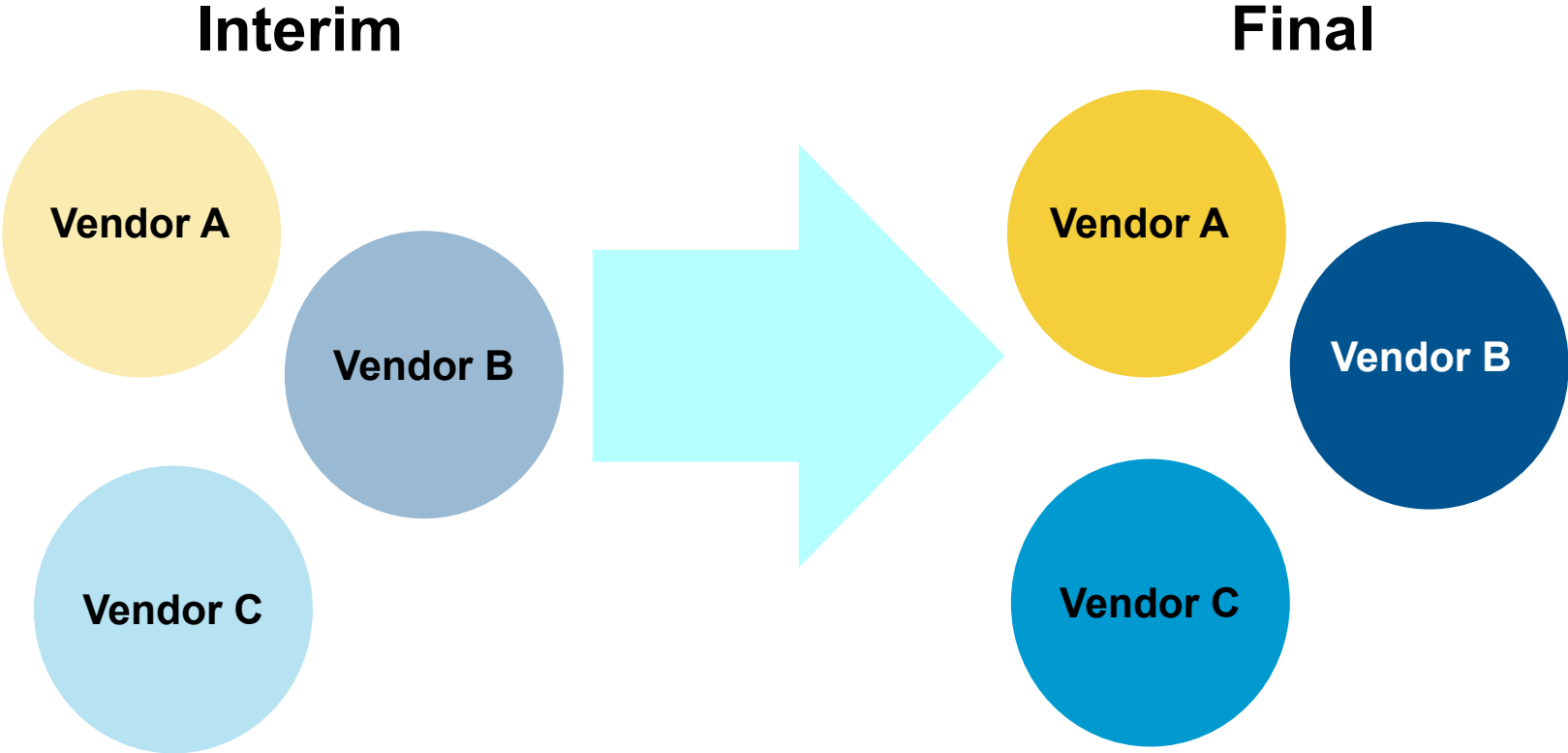
*Jael Rodriguez, MBA, MPH  
Healthcare Analyst*

# Overview

- Data Submission and Review Process
- HSAG's Data Evaluation Process
- Types of Discrepancies Investigated
- Suggested Quality Checks for Survey Vendors
- MA Contract Data Requests for Cohort 24
- HOS Case-Mix
- PFADL Change Score Measure



# Data Submission and Review Process



# HSAG's Data Evaluation Process

- HSAG combines the survey vendor files into one data set:
  - Examines vendor, mode, and language differences
- HSAG also:
  - Compares response distributions for missing values and variations from historical values
  - Identifies potential response issues for new and modified survey items

# Types of Discrepancies Investigated

**Questionable Data Distributions**

**Skip Pattern Violations**

**Out of Range and Inappropriate Values**

**Inconsistent or Missing Data**

**Inappropriate Cleaning**

**Missing Sections**

# Questionable Data Distributions

- Responses to each question by survey vendor
  - Overall
  - By survey mode: telephone and mail
  - By survey language
- Historical trends
- New questions
- Open-ended questions
- Questions with multiple answers permitted
  - Hispanic ethnicity
  - Race
  - Living arrangement

# Skip Pattern Violations

- Mail Survey Data:
  - Skip pattern violations by members **are expected**
- Telephone Survey Data:
  - Skip pattern violations **are NOT expected**
  - Further investigation may be warranted in situations when violations do not follow the expected pattern

# Out of Range and Inappropriate Values

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

# Inconsistent or Missing Data

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

# Inconsistent or Missing Data (Cont'd)

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



# Inappropriate Cleaning: Mail Surveys

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

# Example 1: Inappropriate Cleaning

Q51 Height in Inches Portion (not corresponding to other examples)	Survey Vendor (percent)			
	A	B	C	D
Valid (00-98)	93.8	92.15	93.75	92.57
Inappropriate Answer (88)	1.23	0.33	0.77	0.00
Missing (99)	4.97	7.52	6.25	5.73

- Unexpected mail survey results with no inappropriate responses
- Mail survey responses should not be cleaned

# Missing Responses

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

# Example 2: 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 missing response clusters

# Suggested Quality Checks for Survey Vendors

- Check for:
  - Skip pattern inconsistencies in telephone records
  - Missing responses indicating possible coding errors
  - Response distribution with improbable results in mail surveys
  - Coding errors in fields with extreme frequencies (0 percent or 100 percent) for any one response

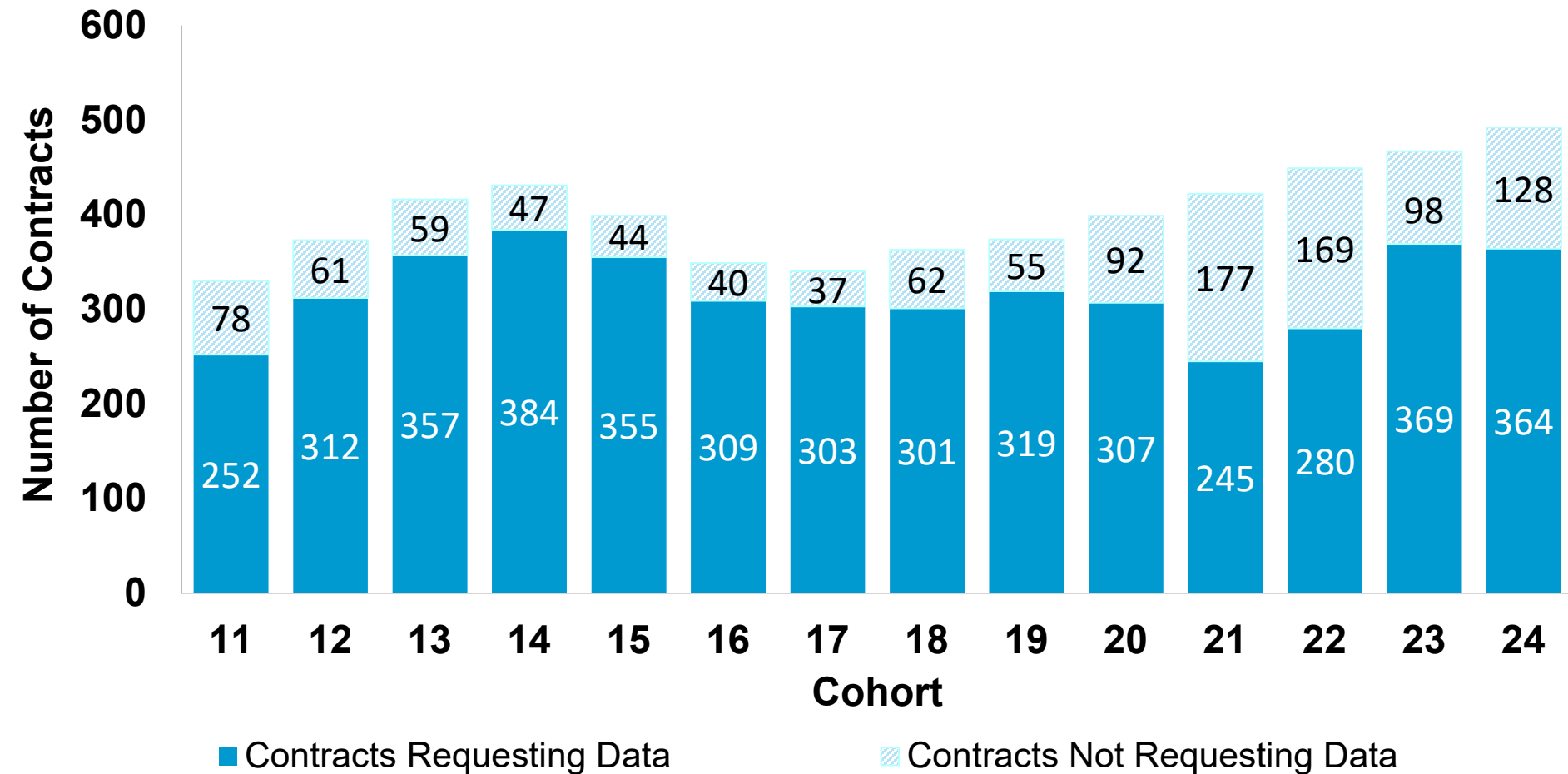
# Suggested Quality Checks for Survey Vendors (Cont'd)

- Verify:
  - Coding of responses has not been reversed
  - All HOS codes are present for each reporting field, rather than only flagging invalid codes
- Identify and investigate:
  - Clusters of missing responses
  - Revised data files for unexpected changes, and submit explanation for any unexpected changes with resubmitted files

# Suggested Quality Checks for Survey Vendors (Cont'd)

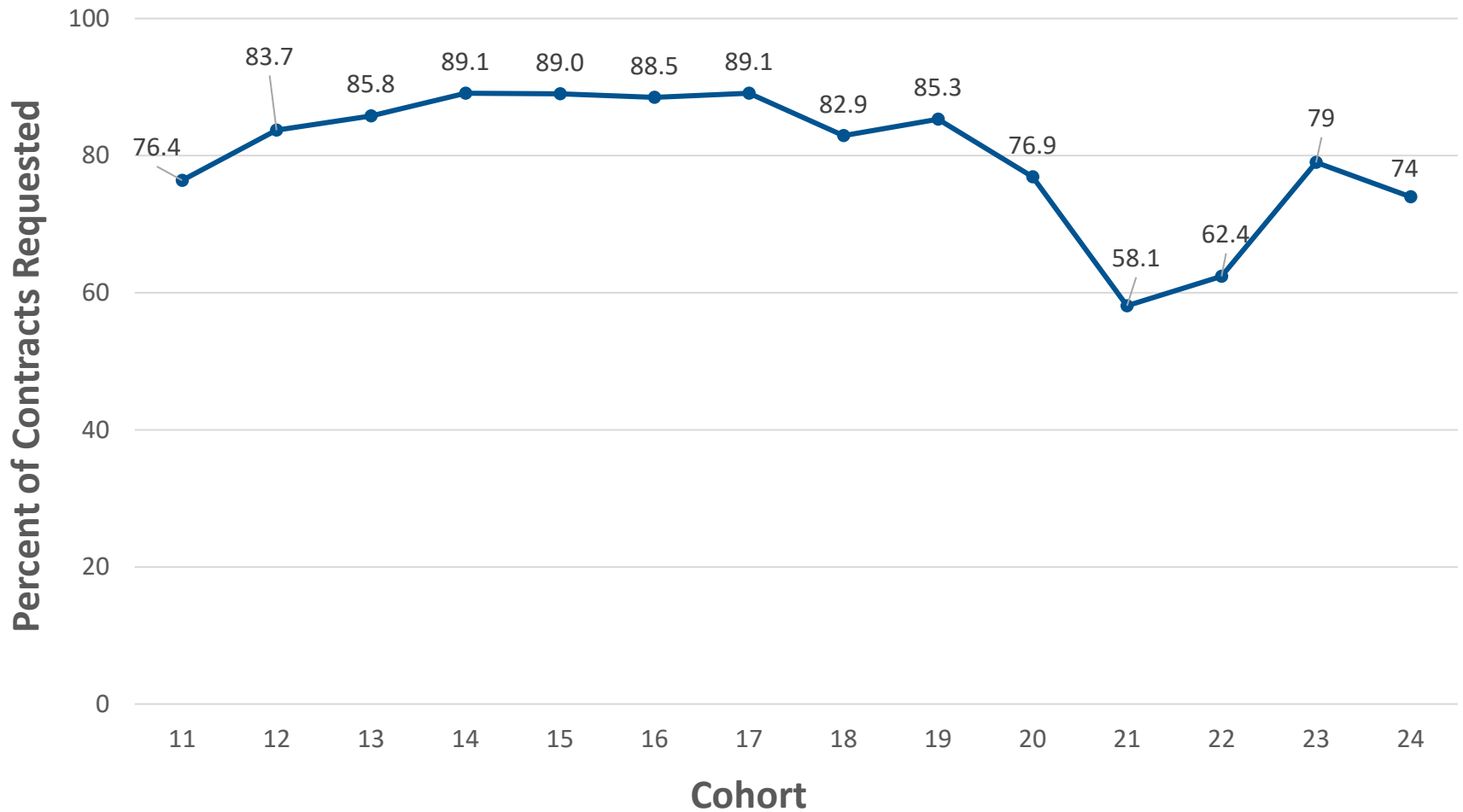
- Verify:
  - Mail survey responses are not cleaned prior to submission
  - Electronic telephone interviewing program prevents skip pattern violations
  - Names do not have accents or other special characters

# MA Contract Data Requests, Cohorts 11-24





# Percent of MA Contract Data Requests, Cohorts 11-24



# HOS Case-Mix

- HOS Performance Measurement outcomes are:
  - Death
  - Change in physical health from physical component summary (PCS) score
  - Change in mental health from mental component summary (MCS) score
- Actual health outcomes are assessed at Baseline and Follow-Up from the VR-12;
  - Members categorized as better, same, or worse at follow up
- Expected results are derived using logistic regression
- Baseline demographic and socioeconomic indicators, and baseline health status are included in case-mix adjustment models

# HOS Case-Mix (Cont'd)

- National averages are calculated
- Actual and expected outcomes are aggregated percentages for each MAO
- Final HOS outcomes are adjusted by combining differences between actual and expected results for each MAO with national averages
- Performance Measurement Analysis determines percentages of members in an MAO who are better, the same, or worse than expected at two-year Follow-Up compared to national averages

# PFADL Change Score Measure

- The Physical Functioning Activities of Daily Living (PFADL) change score measure is longitudinal
- PFADL is part of the display measures on the CMS website
- The measure combines two physical functioning questions with six ADL items to create a Likert-type scale
- PFADL score can be interpreted as approximating the percent of function retained over two years by the average MAO member
- Detailed methodology about the PFADL is available on the Survey Results page of the HOS website ([www.HOSonline.org](http://www.HOSonline.org))

# HOS Tech Support and Website

For inquiries, contact  
Medicare HOS Information and Technical Support:

(888) 880-0077

or

[hos@hsag.com](mailto:hos@hsag.com)

[www.HOSonline.org](http://www.HOSonline.org)

# Questions?





# Quality Oversight and Project Reporting

***NCQA***

*Courtney Utter, MHA  
HOS Project Analyst*

# Overview

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



# Before Survey Administration

Oversight Activity	Due Date (2025)	Comments from NCQA	Finalize Materials
Mailing Material Review	June 6	June 23	July 2
Telephone Interviewing Material Review	June 20	July 1	July 11
Survey Vendor QAP	June 27	Survey Vendor Conference Call (July 14 – July 25)	Within five (5) business days of call

# Mailing Materials

- Review final print-ready HOS mailing materials
- Survey vendors should title their questionnaires with tracking numbers when submitting to NCQA for review
- Survey vendors must submit materials for review in the format in which they will be printed
- Naming conventions:
  - Survey Vendor Name\_Tracking # (CMS Logo).pdf
  - Survey Vendor Name\_Tracking # (CMS and HP Logo).pdf
- **Due June 6, 2025**
  - Send electronic copies to [hos@ncqa.org](mailto:hos@ncqa.org)
  - Comment/approve by **June 23, 2025**
  - All materials must be final by **July 2, 2025**

# Mailing Materials (Cont'd)

## Common Findings

- Omission of footnote about how sampled members may request materials in their preferred language
- Incorrect formatting (e.g., margins, bolding, spacing, logo and return address placement, etc.)
- Incorrect font and font size (e.g., survey vendor return address, oversized signature, etc.)
- Envelopes not fully sealed
- Use of colored font for CMS logos in place of black and white logo

# Electronic Interviewing Materials

- Review telephone interviewing screenshots (or live website links) and skip pattern logic
- **Due June 20, 2025**
  - Two weeks after submitting mailing materials
  - Send electronic copies to [hos@ncqa.org](mailto:hos@ncqa.org)
  - Comment/approve by **July 1, 2025**
  - All materials must be final by **July 11, 2025**
- 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, misplaced, or incorrect instructions, interviewer notes, and probes
- Missing or incorrect coding instructions
- Missing emphasis (e.g., bolding) or capitalization on select words
- Grammatical errors
- Improper usage of parentheses
- Missing skip pattern documentation

# Survey Accessibility

- Individuals with disabilities must have an equal opportunity to participate in the survey
- Survey vendors should be prepared to provide auxiliary aids, if requested
  - All requests will be considered on a case-by-case basis
  - Survey vendors must provide TeleType/Telecommunications Device for the Deaf (TTY/TDD) via 711
- CMS can assist survey vendors with more complex requests (e.g., Braille)
  - Please reach out to the HOS Project Team ([hos@ncqa.org](mailto:hos@ncqa.org)) with these requests for CMS assistance

# 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 HOS QAG)
  - Due **June 27, 2025**

# Survey Vendor QAP (Cont'd)

## Common Findings

- Outdated protocols
- Missing detail about protocols (e.g., data coding, data processing, telephone attempts, and subcontractor oversight)
- Omission of Spanish, Chinese, and Russian protocol details
- Incorrect or missing survey disposition code crosswalk
- Missing formula for calculating percentage answered



# During Survey Administration

Oversight Activities	Dates (2025)
Survey Vendor Conference Calls	July 14 – July 25
Data Record Review	June – July
Customer Support Reviews	July – August
Seeded Mailings	July – September
Survey Vendor Progress Reports	July – November
Electronic Telephone Interviewing Monitoring	September – October
Interim Data File Submission Deadline	October 2
Site Visits	October

# Survey Vendor Conference Calls

- Held **July 14, 2025 – July 25, 2025**
- Provide feedback on QAPs
  - If QAP revisions are needed, vendors must submit revisions within **five (5) business days**
- Review major issues from previous year and discuss updates to survey administration

# Seeded Mailings

- Assess timeliness of delivery and accuracy of mailing materials
- Include HOS Project Team in *all* survey mailings that are sent to members (including prenotification letters)
  - Survey vendors should seed HOS Project Team members in both standard mailing materials and those formatted with the optional health plan logo
  - **NCQA will provide seeded mailing contact information via email following training**
- 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 the HOS QAG and FAQ
- Customer support review: *Telephone*
  - HOS Project Team makes anonymous calls to customer support line
- Customer support review: *Email*
  - **Securely** forward all customer support emails with responses on a weekly basis
  - Survey vendors may be asked to send member contact information and/or English translations of emails to HOS Project Team

# Customer Support Review (Cont'd)

## Common Findings

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

# Survey Vendor Progress Reports

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

# Narrative Reports

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

# Summary Status Reports

- Synthesis of data collected to date
- Monitor response rates for each protocol phase and processing of returned mail surveys
- Submit two files (Baseline and Follow-Up) with naming conventions:
  - Survey Vendor Name\_SSR\_C28B\_MM-DD-YY.xls
  - Survey Vendor Name\_SSR\_C26F\_MM-DD-YY.xls
- Use 2025 template provided prior to fielding



# Telephone Attempt Report

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

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

# MAO Progress Report Sample

## Sample of MAO Progress Reports (Report #7)

- One-time deliverable
- Reports must follow guidelines and only provide information specified in the HOS 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 (2025)
<p><b>REPORT #2</b></p> <p><b>Narrative Report:</b></p> <ul style="list-style-type: none"><li>• Overview of Baseline and Follow-Up prenotification letter and first questionnaire printing, fulfillment, and mailing processes.</li><li>• Verification of mail-out dates of Baseline and Follow-Up prenotification letter and first questionnaire mailing (e.g., USPS generated report).</li><li>• Status of staff training and SMS development.</li><li>• Confirmation of customer support functionality and testing.</li><li>• Outstanding issues or concerns.</li></ul> <p><b>Other Deliverable:</b> Member correspondence (white mail), if applicable.</p> <ul style="list-style-type: none"><li>• Example report to health plans with response rates.</li></ul>	July 25

# Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date (2025)
<b>REPORT #3</b> <b>Summary Status Report:</b> Baseline and Follow-Up Cohorts. <b>Narrative Report:</b> <ul style="list-style-type: none"><li>• Outstanding issues or concerns.</li></ul> <b>Other Deliverable:</b> Member correspondence (white mail), if applicable.	August 8
<b>REPORT #4</b> <b>Summary Status Report:</b> Baseline and Follow-Up Cohorts. <b>Narrative Report:</b> <ul style="list-style-type: none"><li>• Overview of progress with protocol to date.</li><li>• Detail problems or issues to date.</li><li>• Outstanding issues or concerns.</li></ul> <b>Other Deliverable:</b> Member correspondence (white mail), if applicable.	August 22

# Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date (2025)
<p><b>REPORT #5</b> <b>Summary Status Report:</b> Baseline and Follow-Up Cohorts. <b>Narrative Report:</b></p> <ul style="list-style-type: none"><li>• Overview of Baseline and Follow-Up second questionnaire mailing.</li><li>• Verification of mail-out dates of Baseline and Follow-Up second questionnaire mailing (e.g., USPS generated report).</li><li>• Overview of progress with protocol to date.</li><li>• Detail problems or issues to date.</li><li>• Provide high-level summary statistics on respondent calls to customer support line or email (summarize FAQ) and number of requests for Spanish (Chinese and Russian, if applicable) version of the instrument. Specify number of calls and/or emails requesting information regarding an internet version of the survey.</li><li>• Describe telephone protocol and training.</li><li>• Outstanding issues or concerns.</li></ul> <p><b>Other Deliverable:</b> Member correspondence (white mail), if applicable.</p>	September 5

# Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date (2025)
<p><b>REPORT #6</b></p> <p><b>Summary Status Report:</b></p> <ul style="list-style-type: none"><li>• Baseline and Follow-Up Cohorts.</li><li>• Telephone attempt progress to date.</li></ul> <p><b>Narrative Report:</b></p> <ul style="list-style-type: none"><li>• Overview of progress with protocol to date.</li><li>• Detail problems or issues to date.</li><li>• Describe process of converting partially completed surveys to complete, and progress.</li><li>• Report on progress of Baseline and Follow-Up electronic telephone interviewing implementation.</li></ul> <p><b>Other Deliverable:</b> Member correspondence (white mail), if applicable.</p>	September 19

# Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date (2025)
<p><b>REPORT #7</b></p> <p><b>Summary Status Report:</b></p> <ul style="list-style-type: none"><li>• Baseline and Follow-Up Cohorts.</li><li>• Telephone attempt progress to date.</li></ul> <p><b>Narrative Report:</b></p> <ul style="list-style-type: none"><li>• Outstanding issues or concerns.</li><li>• Detail problems or issues to date.</li><li>• Report on progress of Baseline and Follow-Up electronic telephone interviewing implementation.</li><li>• Report on experience with submitting interim data files.</li></ul> <p><b>Other Deliverable:</b></p> <ul style="list-style-type: none"><li>• Member correspondence (white mail), if applicable.</li><li>• Submit a sample of the interim/progress report that is provided to HOS clients.</li></ul>	October 3

# Biweekly Progress Reports (Cont'd)

Reporting Requirements	Due Date (2025)
<p><b>REPORT #8</b></p> <p><b>Summary Status Report:</b></p> <ul style="list-style-type: none"><li>• Baseline and Follow-Up Cohorts.</li><li>• Telephone attempt progress to date.</li></ul> <p><b>Narrative Report:</b></p> <ul style="list-style-type: none"><li>• Overview of progress with protocol to date.</li><li>• Detail problems or issues to date.</li><li>• Report on progress of Baseline and Follow-Up electronic telephone interviewing implementation.</li></ul> <p><b>Other Deliverable:</b> Member correspondence (white mail), if applicable.</p>	October 17
<p><b>REPORT #9</b></p> <p><b>Summary Status Report</b></p> <ul style="list-style-type: none"><li>• Baseline and Follow-Up Cohorts.</li><li>• Telephone attempt progress to date.</li></ul> <p><b>Other Deliverable:</b> Member correspondence (white mail), if applicable.</p>	October 31



# 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
- To facilitate follow up, survey vendors should include contact information with each piece of submitted white mail
  - If a member requests assistance or expresses signs of abuse or neglect, survey vendors should include the member's name, address, and phone number
- 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
- Use the template provided by NCQA when forwarding white mail

# Member Correspondence (Cont'd)

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

Examples of Correspondence to be Sent	Examples of Correspondence NOT to be Sent
<ul style="list-style-type: none"><li>• Messages intended for CMS</li><li>• Comments about MAO/provider</li><li>• Personal problems</li><li>• Requests for medical assistance and supporting documentation</li><li>• Opinions about the survey instrument or federal government</li></ul>	<ul style="list-style-type: none"><li>• Death notices</li><li>• Address changes</li><li>• Language barrier</li><li>• Institution notice</li><li>• Comments written on or throughout the survey, including marginal comments</li></ul>

# Telephone Interviewer Monitoring

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

# Telephone Interviewer Monitoring (Cont'd)

## **HOS Project Team assesses interviewers on:**

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

# Telephone Interviewer Monitoring (Cont'd)

## Common Findings

- Inappropriate tone maintained with respondents
- Poor pacing or emphasis
- 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 HOS QAG
  - Project organization
  - Survey management system
  - Staff training
  - Sample file processing
  - Oversight of staff and subcontractors
  - Mail and telephone operations
  - Data security
- Site visits may be conducted in person or remotely
  - Survey vendors will be asked to share and present all required systems, processes, and documentation

# Data Record Review

- Conducted June – July
- 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
- Reviews conducted 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 (2025)
Survey Vendor Final Report	November 21
Report of HOS Records Stored and Facility Standards for Records Storage Facilities Inspection Checklist	December 1

# 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
    - List any additional survey modes requested by MAOs and/or respondents (e.g., internet, text) and number of requests
  3. Recommendations for 2026 HOS Administration
- Reports used for:
  - Informing QAG updates
  - Process improvement

# Ongoing Activities

---

- Discrepancy Reports and Corrective Action Plan
- Technical Support

# Discrepancy Report and Corrective Action Plan

- Appendix G of HOS QAG
- Complete and submit Discrepancy Report within **one (1) business day** of discovering the discrepancy
  - Submit updated report as soon as possible but not later than **one week** after submitting the initial report
- Provide as much information as possible
  - Discrepancy Description
  - Corrective Action Plan

## Discrepancy Report Form

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

I. General Information			
		Select one: <input type="checkbox"/> Initial Report <input type="checkbox"/> Updated Report	
		Report Submission Date <input type="text" value="MM/DD/YY"/>	
Name:	<input type="text"/>	Organization:	<input type="text"/>
Title:	<input type="text"/>	Address:	<input type="text"/>
Email:	<input type="text"/>	Telephone:	<input type="text"/>
II. Description of Discrepancy			
Describe the discrepancy and include any additional information that may help the HOS Project Team understand what occurred. Provide as much detail as possible, including the discrepancy time frame (when the issue occurred during survey administration), how you identified the discrepancy, and causes of the discrepancy.			
Date Discrepancy Discovered:	<input type="text"/>	Discrepancy Time Frame:	<input type="text"/>
Detailed Description of Discrepancy and How the Discrepancy Was Discovered:			
III. Impact of Discrepancy			
Provide a breakdown of affected surveys and impacted members by CMS Contract. Insert one row for each contract impacted. If the issue impacts your entire sample, write in "All" under each category.			
Survey Languages Impacted:		<input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Chinese <input type="checkbox"/> Russian	
CMS Contract Number	Number of Affected Surveys	Number of Sampled Members Impacted	
<i>H#### or All</i>	<input type="text"/>	<input type="text"/>	
	<input type="text"/>	<input type="text"/>	
How Was Estimation of Affected Surveys Reached?			
<input type="text"/>			

# Technical Support

- Email [hos@ncqa.org](mailto:hos@ncqa.org)
  - Reports, updates, and questions
- Contact the HOS Project Team with questions, comments, requests, or concerns
  - Call to report/discuss *urgent* matters immediately and follow up with email
    - Alyssa Hart – HOS Project Director
    - Erik Krause – HOS Project Manager

# NCQA's Secure Site Kiteworks

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



# NCQA's Secure Site Kiteworks (Cont'd)

- NCQA provides a Kiteworks 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://acellion.ncqa.org>

# Other Resources

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

# Questions?





# Questions and Closing

**NCQA**

*Alyssa Hart, MPH  
HOS Project Director*

# Post-Training Evaluation

- Following training, survey vendors will receive an email with a link to an online training evaluation
- Intent is to collect feedback to improve future training sessions
- Designate one person from your organization to complete
- Required to obtain final approval
- Evaluation is due **March 26, 2025**



# Post-Training Test

# Post-Training Test Instructions

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