Medicare Advantage and Prescription Drug Plan (MA & PDP) CAHPS® Survey

2027 Prescription Drug Plan Survey CATI Script

[PROGRAMMING SPECIFICATIONS:
- NEVER DISPLAY "88 [NOT APPLICABLE]" ON INTERVIEWER SCREEN
- NEVER DISPLAY "M [MISSING]" ON INTERVIEWER SCREEN
- NEVER DISPLAY "[GO TO]" INSTRUCTIONS OR ANY OTHER PROGRAM LOGIC ON INTERVIEWER SCREEN]

<INTRO1-OUT IS FOR OUTBOUND CALLS. THE PURPOSE OF THE INTRO1-OUT SCREEN IS TO PROTECT THE PRIVACY OF THE ENROLLEE. THE INTERVIEWER DOES NOT PROVIDE DETAILS ABOUT THE SURVEY UNTIL HE IS SPEAKING WITH THE ENROLLEE. AT NO POINT DOES THE INTERVIEWER MENTION WHAT PRESCRIPTION DRUG PLAN THE ENROLLEE IS A MEMBER OF TO ANYONE OTHER THAN THE ENROLLEE. IN ADDITION, NO MESSAGES ARE TO BE LEFT ON AN ANSWERING MACHINE OR VOICE MAIL.>

[INTRO1-OUT]

Hello, may I please speak to [ENROLLEE NAME]?

1	YES	➔	[GO TO INTRO 2-OUT]
2	NO, NOT AVAILABLE RIGHT NOW	➔	[SET CALLBACK]
3	NO [REFUSAL]	➔	[GO TO TERMINATE SCREEN]

<MENTALLY/PHYSICALLY INCAPABLE ➔[GO TO INTRO 3]
IF IT BECOMES CLEAR THAT THE ENROLLEE CANNOT COMPLETE THE TELEPHONE INTERVIEW HIMSELF/HERSELF (FOR EXAMPLE, IF HE/SHE IS HARD OF HEARING, HAS A SPEECH IMPEDIMENT, OR IS TOO ILL OR FRAIL TO DO THE INTERVIEW), OR REQUIRES ASSISTANCE IN COMPLETING THE INTERVIEW, ONLY THE ENROLLEE CAN GIVE PERMISSION FOR A PROXY TO COMPLETE THE SURVEY. [GO TO INTRO3]>

<IF ASKED WHO IS CALLING:>

<IF NOT SPEAKING TO THE ENROLLEE >
This is [INTERVIEWER NAME] calling from [SURVEY VENDOR NAME]. I'd like to speak to [ENROLLEE NAME] about a study about health care.

<IF SPEAKING TO THE ENROLLEE [GO TO INTRO2-OUT]>

<INTRO1-IN IS FOR INBOUND CALLS. AS WITH INTRO1-OUT, THE PURPOSE OF THE INTRO1-IN SCREEN IS TO PROTECT THE PRIVACY OF THE ENROLLEE. THE INTERVIEWER DOES NOT PROVIDE DETAILS ABOUT THE SURVEY UNTIL HE IS SPEAKING WITH THE ENROLLEE. AT NO POINT DOES THE INTERVIEWER MENTION WHAT PRESCRIPTION DRUG PLAN THE ENROLLEE IS A MEMBER OF TO ANYONE OTHER THAN THE ENROLLEE.>

[INTRO1-IN]

Hello, am I speaking to [ENROLLEE NAME]?

1	YES	→	[GO TO INTRO 2-IN]
2	NO, NOT AVAILABLE RIGHT NOW	→	[SET CALLBACK]
3	NO [REFUSAL]	→	[GO TO TERMINATE SCREEN]

[INTRO2-OUT]

Hello, this is [INTERVIEWER NAME] calling on behalf of [PD PLAN NAME] and Medicare. This is not a sales call. I'm calling because [PD PLAN NAME] is asking plan members like you to give feedback on the quality of care they provide. The information you share will help [PD PLAN NAME] and Medicare improve the care they provide. You may have received a letter in the mail or an email telling you about this study.

Your participation is voluntary and completely confidential. We really appreciate your feedback. My questions take about 10 minutes [OR VENDOR SPECIFY]. Why don't we try a few questions now? This call may be monitored or recorded for quality improvement purposes. <NOTE: THE NUMBER OF MINUTES WILL DEPEND ON WHETHER SUPPLEMENTAL QUESTIONS ARE INTEGRATED WITH MA & PDP CAHPS SURVEY SPECIFIC QUESTIONS.>

[INTRO2-IN]

My name is [INTERVIEWER NAME] and [PD PLAN NAME] is asking plan members like you to give feedback on the quality of care they provide. You may have received a letter in the mail or an email telling you about this study.

Your participation is voluntary and completely confidential. We really appreciate your feedback. My questions take about 10 minutes [OR VENDOR SPECIFY]. Why don't we try a few questions now? This call may be monitored or recorded for quality improvement purposes. <NOTE: THE NUMBER OF MINUTES WILL DEPEND ON WHETHER SUPPLEMENTAL QUESTIONS ARE INTEGRATED WITH MA & PDP CAHPS SURVEY SPECIFIC QUESTIONS.>

<AFTER INTRO2-OUT and INTRO2-IN

[GO TO Q1] OR

(READ OPTIONAL QUESTION) OR

IF SPEAKING TO THE ENROLLEE AND IT APPEARS THE ENROLLEE MAY NEED HELP [GO TO INTRO3 – Request for Proxy]>

(OPTIONAL QUESTION)
Do you have any questions about this study that I can answer for you at this time?

1 YES ➔ <REFER TO FAQs>
2 NO ➔ [GO TO Q1]
3 NO, DOESN'T WANT TO PARTICIPATE [REFUSAL]
➔ [GO TO TERMINATE SCREEN]

[INTRO3 – Request for Proxy]

If you need help in completing this interview or if you feel you are unable to complete the interview by yourself, you can have a family member or close friend help you or do the interview for you. This person needs to be someone who knows you very well and would be able to answer health related questions accurately on your behalf. <THE INTERVIEWER MUST OBTAIN THE ENROLLEE'S PERMISSION TO HAVE A PROXY RESPONDENT ASSIST HIM/HER IN THE CATI INTERVIEW. IF THE INTERVIEWER IS UNABLE TO SPEAK TO THE ENROLLEE DIRECTLY IN ORDER TO OBTAIN PERMISSION AND IDENTIFY A PROXY RESPONDENT, DO NOT PROCEED WITH THE INTERVIEW.> [GO TO INTRO3 Q1]

[INTRO3 Q1]
Is there someone who could help you do the interview or who could do the interview for you?

1 YES ➔ [GO TO INTRO 3 Q2]
2 NO ➔ <THANK THE ENROLLEE AND TERMINATE THE INTERVIEW>

[INTRO3 Q2]
May we have your permission to conduct the telephone interview with this person on your behalf?

1 YES ➔ [GO TO INTRO3 Q3] OR [GO TO PROXY_INTRO 1]
2 NO ➔ <THANK THE ENROLLEE AND TERMINATE THE INTERVIEW>

[INTRO3 Q3]
Is this person available to talk to us now?

1 YES ➔ [GO TO PROXY_INTRO 1]

2 NO ➔ <COLLECT NAME AND TELEPHONE NUMBER OF PROXY AND SET A CALLBACK, OR IF NO PROXY EXISTS, [GO TO Q_END]. IF ENROLLEE RESIDES IN AN INSTITUTION CODE AS INSTITUTIONALIZED; OTHERWISE CODE AS MENTALLY/PHYSICALLY INCAPABLE>

[PROXY_INTRO 1]

Hello, this is [INTERVIEWER NAME] calling on behalf of [PD PLAN NAME] and Medicare. This is not a sales call. I'm calling because [ENROLLEE NAME] was selected to give feedback on the quality of care [PD PLAN NAME] provides. [ENROLLEE NAME] has given permission for you to answer the study questions on his/her behalf.

[ENROLLEE NAME]'s participation in this survey is voluntary and completely confidential. The interview will take about 10 minutes [OR VENDOR SPECIFY] to complete. This call may be monitored or recorded for quality improvement purposes. <NOTE: THE NUMBER OF MINUTES WILL DEPEND ON WHETHER SUPPLEMENTAL QUESTIONS ARE INTEGRATED WITH MA & PDP CAHPS SURVEY SPECIFIC QUESTIONS.>

[PROXY_INTRO 2]

As you answer the study questions, please remember that you are answering the questions for [him/her] and that all questions refer to [his/her] experiences with [his/her] prescription drug plan. Please do not answer based on your own care.

[INTERVIEWER: ➔ GO TO Q1]

CALL BACK TO RESUME A SURVEY

RESUME1

Hello, may I please speak to [ENROLLEE NAME]?

(IF NEEDED:) I'm calling on behalf of the Centers for Medicare & Medicaid Services to finish an interview with [ENROLLEE NAME].

1	YES	[GO TO RESUME2]
2	NO, CALLBACK	[SET CALLBACK]
3	REFUSAL	[GO TO TERMINATE SCREEN]

RESUME2

This is [INTERVIEWER NAME] calling on behalf of [PD PLAN NAME] and Medicare.
I would like to confirm that I am speaking with [ENROLLEE NAME]?
I am calling to finish the interview about the health care and services you receive.
[RESUME SURVEY WHERE PREVIOUSLY LEFT OFF].

MONITOR

Before we begin I need to tell you that this call may be monitored or recorded for quality improvement purposes.

<START INTERVIEW>

Q1 Our records show that in 2026 your prescriptions were covered by the Medicare prescription drug plan named [PD PLAN NAME].
Is that right?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)

1 YES [GO TO Q3]
2 NO [GO TO Q2]

98 <DON'T KNOW> [GO TO Q2]
99 <REFUSED> [GO TO Q2]
M [MISSING]

Q2 What is the name of the Medicare prescription drug plan you had in 2026? Please complete the rest of the survey based on the experiences you had with that plan.
<ENTER PLAN NAME> _____

88 [NOT APPLICABLE]
98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

[PROGRAMMING SPECIFICATIONS:

- IF Q2 IS ASSIGNED ANSWER "98 – DON'T KNOW" OR "99 – REFUSED" THE INTRO TEXT BEFORE Q3 SHOULD READ: Now I am going to ask you questions about your prescription drug plan in the last 6 months. Please answer the questions thinking about the plan you were enrolled in during 2026, and the times you got health care in person, by phone or by video call.
- FOR ALL OTHERS, INTRO TEXT BEFORE Q3 SHOULD READ: Now I am going to ask you questions about your prescription drug plan in the last 6 months, and the times you got health care in person, by phone or by video call.]

Q3 In the last 6 months, did anyone from a doctor's office, pharmacy or your prescription drug plan contact you…

Q3a. To make sure you filled or refilled a prescription?
(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 DOCTOR'S OFFICE, PHARMACY OR YOUR PRESCRIPTION DRUG PLAN CONTACT YOU…)

Q3b. To make sure you were taking medicine as directed?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)

1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q4 In the last 6 months, how often was it easy to use your prescription drug plan to get the medicines your doctor prescribed? Would you say…

1 Never,
2 Sometimes,
3 Usually,
4 Always, or
5 I did not use my prescription drug plan to get any medicines in the last 6 months

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q5 In the last 6 months, did you ever use your prescription drug plan to fill a prescription at your local pharmacy?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)

1 YES
2 NO [GO TO Q7]

98 <DON'T KNOW> [GO TO Q7]
99 <REFUSED> [GO TO Q7]
M [MISSING]

Q6 In the last 6 months, how often was it easy to use your prescription drug plan to fill a prescription at your local pharmacy? Would you say…

1 Never,
2 Sometimes,
3 Usually, or
4 Always

88 [NOT APPLICABLE]
98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q7 In the last 6 months, did you ever use your prescription drug plan to fill a prescription by mail?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)

1 YES
2 NO [GO TO Q9]

98 <DON'T KNOW> [GO TO Q9]
99 <REFUSED> [GO TO Q9]
M [MISSING]

Q8 In the last 6 months, how often was it easy to use your prescription drug plan to fill a prescription by mail? Would you say…

1 Never,
2 Sometimes,
3 Usually, or
4 Always

88 [NOT APPLICABLE]
98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q9 Using any number from 0 to 10, where 0 is the worst prescription drug plan possible and 10 is the best prescription drug plan possible, what number would you use to rate your prescription drug plan?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)

0 - WORST PRESCRIPTION DRUG PLAN POSSIBLE
1
2
3
4
5
6
7
8
9
10 - BEST PRESCRIPTION DRUG PLAN POSSIBLE

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Now I am going to ask some questions about you.

Q10 In general, how would you rate your overall health? Would you say it is…
1 Excellent,
2 Very good,
3 Good,
4 Fair, or
5 Poor

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q11 In general, how would you rate your overall mental or emotional health? Would you say it is…
1 Excellent,
2 Very good,
3 Good,
4 Fair, or
5 Poor

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q12 What language do you mainly speak at home? Would you say…
1 English,
2 Spanish,
3 Chinese,
4 Korean,
5 Tagalog,
6 Vietnamese, or
7 Some other language? [PROGRAMMING SPECIFICATION: IF Q12 IS ASSIGNED ANSWER "7 – SOME OTHER LANGUAGE" INTERVIEWER MUST ENTER NAME OF OTHER LANGUAGE.]

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q13 In the last 6 months, did you spend one or more nights in a hospital?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q14 In the last 6 months, did you delay or not fill a prescription because you felt you could not afford it?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO
3 MY DOCTOR DID NOT PRESCRIBE ANY MEDICINES FOR ME IN THE LAST 6 MONTHS

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q15 Has a doctor ever told you that you had any of the following conditions?

Q15a. A heart attack?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

(READ ONLY IF NECESSARY: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD…)
Q15b. Angina or coronary heart disease?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

(READ ONLY IF NECESSARY: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD…)
Q15c. Hypertension or high blood pressure?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

(READ ONLY IF NECESSARY: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD…)
Q15d. Cancer, other than skin cancer?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

(READ ONLY IF NECESSARY: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD…)
Q15e. Emphysema, asthma or COPD (READ THE FOLLOWING ONLY IF NECESSARY) also called chronic obstructive pulmonary disease?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

(READ ONLY IF NECESSARY: HAS A DOCTOR EVER TOLD YOU THAT YOU HAD…)
Q15f. Any kind of diabetes or high blood sugar?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q16 Do you have serious difficulty walking or climbing stairs?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q17 Do you have difficulty dressing or bathing?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q18 Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q19 What is the highest grade or level of school that you have completed? Would you say…
1 8th grade or less,
2 Some high school, but did not graduate,
3 High school graduate or GED,
4 Some college or 2-year degree,
5 4-year college graduate, or
6 More than 4-year college degree

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20 I am going to read a list of race and ethnicity categories. For each category, please say yes or no if it describes your race or ethnicity. I must ask you about all categories in case more than one applies.

(IF RESPONDENT WANTS TO KNOW WHY YOU ARE ASKING WHAT RACE THEY ARE, SAY: "We ask about your race or ethnicity for information purposes only.")

(IF RESPONDENT SAYS, "I ALREADY TOLD YOU MY RACE," SAY: "I understand. I am required to read all the categories to make sure our results are accurate. If a category does not apply to you, please answer "No." Thank you for your patience.")

<PLEASE NOTE THAT RESPONDENTS MAY CHOOSE MORE THAN ONE RACE>

Q20a. Are you American Indian or Alaska Native?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20b. Are you Asian?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20c. Are you Black or African American?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20d. (Are you) Hispanic or Latino?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20e. (Are you) Middle Eastern or North African?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20f. (Are you) Native Hawaiian or Pacific Islander?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q20g. (Are you) White?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q21 How many people live in your household now, including yourself? Would you say…
1 1 person
2 2 to 3 people, or
3 4 or more people

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q22 Do you ever use the internet at home?
(READ RESPONSE OPTIONS ONLY IF NECESSARY)
1 YES
2 NO

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

Q23 May the Medicare Program follow up with you to learn more about your health care, or to invite you to a group discussion or interview on topics related to health care? Would you say…
1 Yes, or
2 No

98 <DON'T KNOW>
99 <REFUSED>
M [MISSING]

<THIS QUESTION TO BE COMPLETED BY THE INTERVIEWER>
Q24 <DID SOMEONE HELP THE ENROLLEE COMPLETE THE SURVEY?>
1 YES
2 NO [GO TO END]

98 <DON'T KNOW>
M [MISSING]

<THIS QUESTION TO BE COMPLETED BY THE INTERVIEWER. PLEASE MARK ONE OR MORE.>
Q25 <HOW DID THAT PERSON HELP THE ENROLLEE COMPLETE THE SURVEY?>
[PROGRAMMING SPECIFICATIONS: THE CATI SYSTEM SHOULD BE PROGRAMMED TO ALLOW THE INTERVIEWER TO SELECT MULTIPLE RESPONSES.]

Q25a. <READ THE QUESTIONS TO THE ENROLLEE>
1 YES
2 NO

88 [NOT APPLICABLE]
98 <DON'T KNOW>
M [MISSING]

Q25b. <RELAYED THE ANSWERS THE ENROLLEE GAVE TO THE INTERVIEWER>

1 YES
2 NO

88 [NOT APPLICABLE]
98 <DON'T KNOW>
M [MISSING]

Q25c. <ANSWERED THE QUESTIONS FOR THE ENROLLEE>

1 YES
2 NO

88 [NOT APPLICABLE]
98 <DON'T KNOW>
M [MISSING]

Q25d. <TRANSLATED THE QUESTIONS INTO THE ENROLLEE'S LANGUAGE>

1 YES
2 NO

88 [NOT APPLICABLE]
98 <DON'T KNOW>
M [MISSING]

Q25e. <HELPED IN SOME OTHER WAY>

1 YES
2 NO

88 [NOT APPLICABLE]
98 <DON'T KNOW>
M [MISSING]

[END] Those are all the questions I have. Thank you for taking part in this important interview.