CMS
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MA & PDP CAHPS® Survey Vendor Training



November 2026

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Welcome and Training Logistics



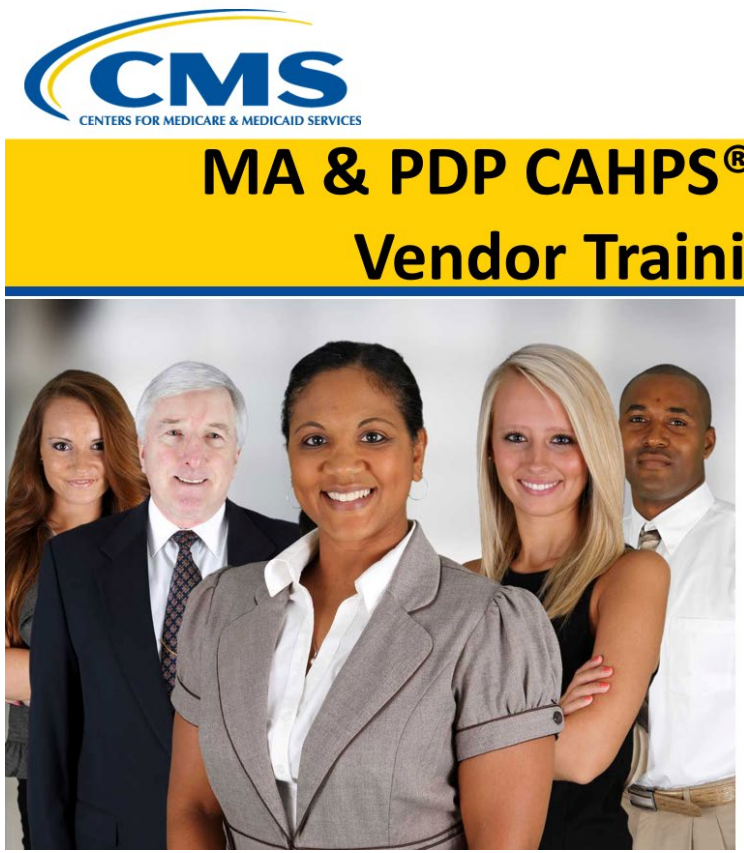
Welcome!

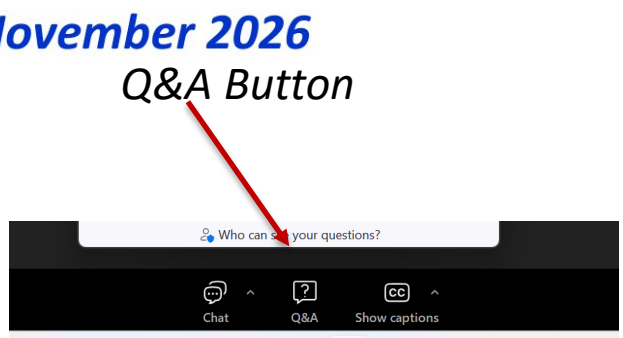
In today's MA & PDP CAHPS Survey training, we will:

- Review Key Concepts and Protocols
- Review the 2027 Data Collection Schedule
- Administer the Post Training Quiz

Online Question Submission *(1 of 2)*

To submit a question, please select the Q&A icon.





Online Question Submission *(2 of 2)*

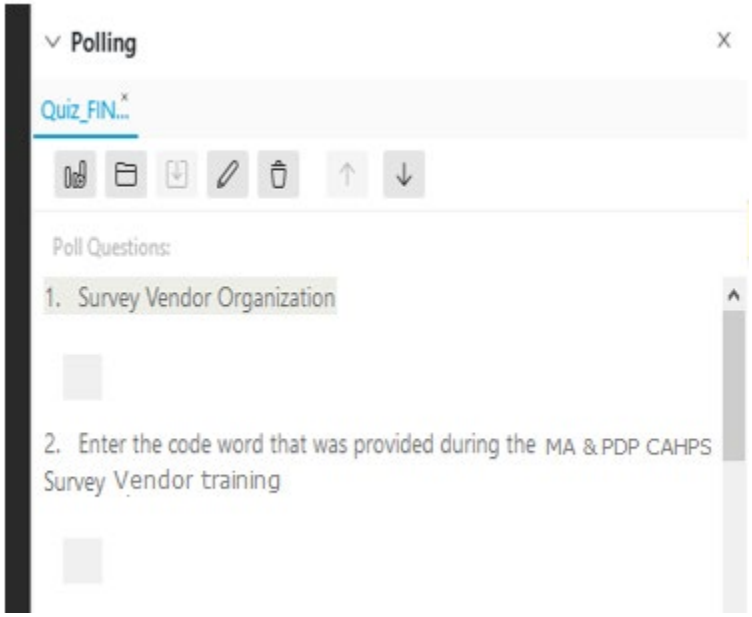
This opens the Q&A panel and allows you to type your question into the space provided.



Evaluation and Quiz Submission

A polling window will appear.

Evaluation and quiz



Post Training Quiz

- Each survey vendor must complete and pass a Post Training Quiz in order to be approved to administer the 2027 MA & PDP CAHPS Survey
- Post Training Quiz must be completed following training immediately after the Evaluation
- One Quiz Form per vendor organization
- We will notify survey vendors of their Post Training Quiz results by November 9, 2026

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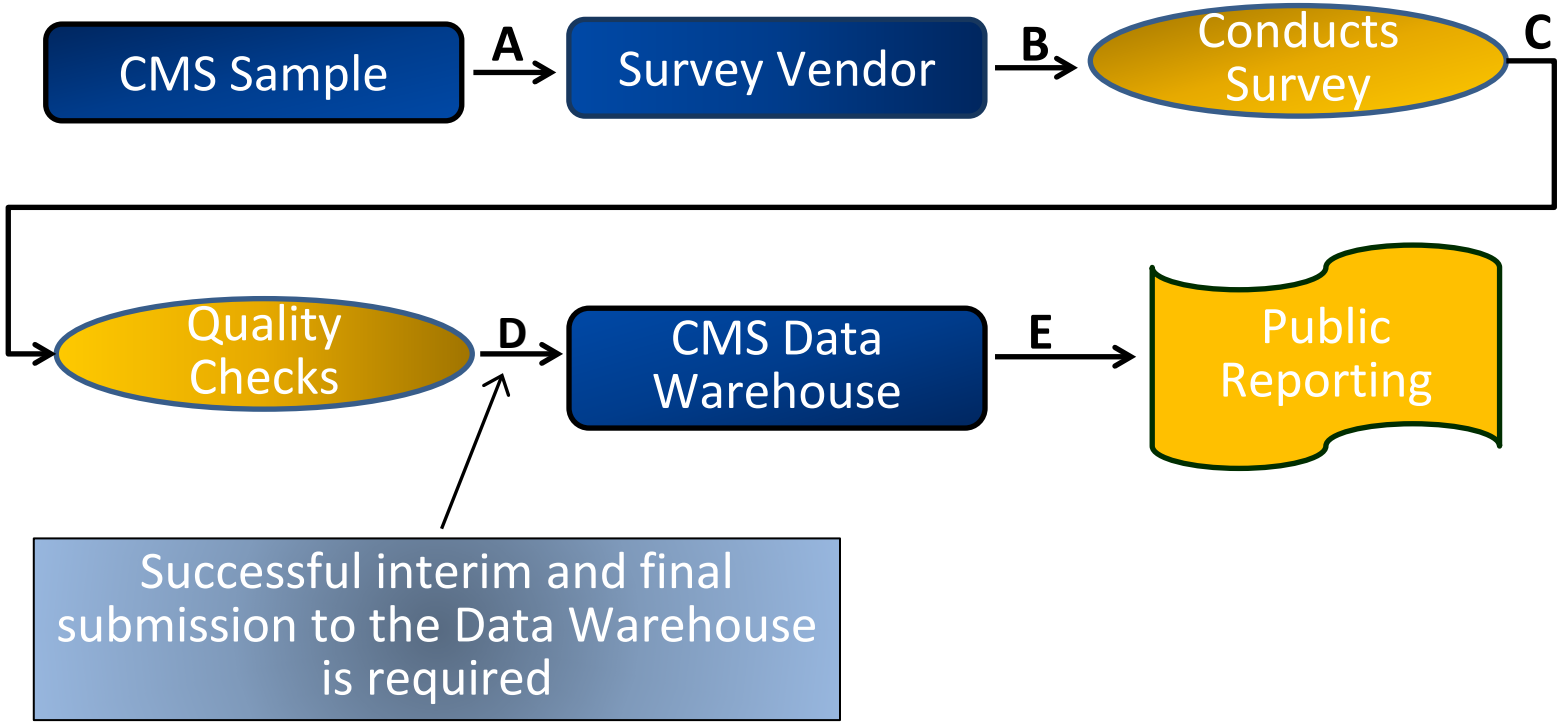
Overview and Background



Objectives

- Introduction to the 2027 MA & PDP CAHPS Survey
- Primary Goals of the Survey
- About the Survey
- Key Updates for 2027
- Public Reporting and Use of the 2027 MA & PDP CAHPS Survey Data

MA & PDP CAHPS Survey Process



Introduction to the 2027 MA & PDP CAHPS Survey

- CMS collects information about Medicare enrollees' experiences with, and ratings of, Medicare Advantage (MA-Only), Medicare Advantage Prescription Drug (MA-PD), and Prescription Drug Plans (PDP) via the Medicare CAHPS Survey
- MA and PDP contracts with 600 or more enrollees as of July 2026 are required to administer MA & PDP CAHPS in 2027
- Enrollees must be continuously enrolled in the contract for 6 months or more at the time of the sample draw in January 2027

Primary Goals of the Survey

- Provide Medicare enrollees and the general public with information to help them make more informed choices
- Help MA-Only, MA-PD, and PDP contracts identify problems and improve the quality of care and services at the contract level
- Enhance CMS's ability to monitor the quality of care and performance of MA-Only, MA-PD, and PDP contracts
- Measure the quality of care from the enrollee's perspective for use in MA Quality Bonus Payments

About the Survey *(1 of 4)*

- Some questions are combined into publicly reported composite measures
  - Getting Needed Care
  - Getting Appointments and Care Quickly
  - Doctors Who Communicate Well (reported to contracts – not reported to consumers)
  - Customer Service
  - Getting Needed Prescription Drugs (MA-PD & PDP)
  - Care Coordination

About the Survey *(2 of 4)*

- In addition to publicly reported composite measures, surveys include "member overall" ratings based on a 0-10 scale, where 0 is the lowest rating and 10 is the highest
  - Rating of Health Plan (MA-Only and MA-PD)
  - Rating of Health Care Quality (MA-Only and MA-PD)
  - Rating of Drug Plan (MA-PD and PDP)

About the Survey *(3 of 4)*

- The MA CAHPS Survey also includes publicly reported single item measures
  - Annual Flu Vaccine
  - Pneumonia Vaccine (reported to contracts – not reported to consumers)

About the Survey *(4 of 4)*

- Other measures reported to contracts:
  - Reminders to fill prescriptions
  - Reminders to take medications

NOTE: Although these items are included in Appendix K, List of Reportable Measures, of the QAP&TS V17.0, they are not part of the calculation of reportable measures used to calculate survey completeness

Key Updates for 2027

- Key Updates for 2027:
  - Clarification of data security and safeguarding
    - TIN and Tax ID (or similar) are treated as PII/PHI and must be handled in a secure manner in data append requests
    - Vendors will provide greater detail in the QAP on how your organization protects and limits access to identifiable enrollee data
  - Vendors will include a Risk Identification and Mitigation table in the QAP to document possible errors that might occur during survey programming and production and the steps your organization takes to mitigate each error

Public Reporting and Use of the 2027 MA & PDP CAHPS Survey Data

Survey results are publicly reported by CMS for each contract in:

- Medicare & You Handbook published each Fall
- Medicare Plan Finder website (www.medicare.gov)
- CAHPS data are included in the Star Ratings and used to calculate MA Quality Bonus Payments

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Program Requirements



Objectives

- Communicating About the MA & PDP CAHPS Survey
- Fielding Other Surveys
- Survey Vendor Approval
- Marketing Materials and MA & PDP CAHPS Survey Data
- Roles and Responsibilities
  - Survey Vendors
- DUA Guidance for New and Existing Vendors
- DUA Requirements

Communicating About the MA & PDP CAHPS Survey

- Communicating with enrollees about the MA & PDP CAHPS Survey
  - Contracts and survey vendors may:
    - Notify all enrollees they may be asked to participate in the 2027 MA & PDP CAHPS Survey
  - Contracts and survey vendors may NOT:
    - Attempt to influence or encourage enrollees to answer survey questions in a particular way
    - Imply that the contract, its personnel, or agents will be rewarded or gain benefits for positive feedback
    - Offer incentives of any kind to prompt, influence, or increase participation
    - Show or provide survey materials to enrollees prior to survey administration period
    - Indicate the health plan's goal is to be rated a *10* or *Always*

Fielding Other Surveys

- CMS strongly discourages contracts and survey vendors from:
  - Fielding other surveys of enrollees 4 weeks prior to, during, and 4 weeks after the 2027 Medicare CAHPS Survey administration (approximately February to July 2027)
  - This guidance does not apply to other CMS surveys
- Additional information on response rates and the risks of off-cycle surveys may be found on the MA & PDP CAHPS website

Survey Vendor Approval Term *(1 of 2)*

- Approval is for a fixed 1-year term
- In addition to the minimum business requirements, CMS will consider past performance as a survey vendor or subcontractor in support of CMS activity
- Performance criteria include, but are not limited to:
  - Occurrence of similar substantive errors within or across projects
  - Significant deficiency or non-compliance with specifications, procedures, and timelines during survey administration
  - Receipt of a corrective action memo from CMS
  - Receipt of a request for a quality improvement plan from CMS
  - Withdrawal of approval for a CMS survey
- Approval as a survey vendor in prior years does not guarantee future approval

Survey Vendor Approval Term *(2 of 2)*

- Vendors successfully completing this training will be approved for the 2027 survey cycle, which ends summer 2027
- Approved vendors are expected to adhere to the schedule, specifications, and protocols detailed in the QAP&TS V17.0 and vendor training slides
  - Vendor performance during 2027 survey cycle may affect approval for future survey cycles

Marketing Materials and MA & PDP CAHPS Survey Data *(1 of 2)*

- References to the MA & PDP CAHPS Survey in vendor marketing materials must be limited to the vendor's data collection services
- Materials must not state or imply that an organization's CAHPS survey scores or Star Ratings will improve if the vendor administers the survey
  - Applies to all media: print brochures, emails, webpages, social media, podcasts, webcasts, videos, or other media
- Vendors marketing quality improvement services must not state or imply that an organization's CAHPS survey scores or Star Ratings will improve by contracting for such services

Marketing Materials and MA & PDP CAHPS Survey Data *(2 of 2)*

- Survey vendors cannot:
  - Use any MA & PDP CAHPS survey data for any purpose beyond reports to support client quality improvement activities
  - Share findings from MA & PDP CAHPS Survey data beyond quality improvement reports provided to clients
  - Publish survey results on public facing websites or in marketing materials
- CMS and the MA & PDP CAHPS project team will periodically review vendor websites and other marketing materials for adherence to these guidelines

Roles and Responsibilities
Survey Vendors *(1 of 3)*

- Survey vendors will:
  - Adhere to all program requirements contained in the *Quality Assurance Protocols & Technical Specifications V17.0*
  - Inform CMS of changes in key project staff, organizational structure, and ownership in a timely manner
  - Participate in MA & PDP CAHPS Survey vendor training and successfully complete the Post Training Quiz at the conclusion of training
    - CMS requires any subcontractors responsible for programming or hosting the web survey, insertion or survey packet preparation, processing of completed web surveys or returned mail surveys, or conducting telephone interviews (CATI administration) to attend training
  - Complete and submit the Vendor Access to MA & PDP CAHPS Data Warehouse Form
    - Due November 12, 2026
    - Data Administrator, Back-up Data Administrator, and Project Manager required
  - Receive and perform checks of each contract's enrollee sample file to ensure completeness
  - Verify each contract's survey vendor authorization

Roles and Responsibilities
Survey Vendors *(2 of 3)*

- Survey vendors will:
  - Maintain confidential and secure data operations
  - Receive CMS approval prior to performing any survey administration activities remotely
  - Maintain the confidentiality of enrollees (either directly or indirectly)
    - HIPAA (PHI and PII)
    - Confidentiality agreements must be reviewed and re-signed annually by staff and subcontractors
  - Develop and update a Quality Assurance Plan (QAP)
  - Administer the survey(s) and oversee staff
    - Including subcontractor staff (if applicable)
  - Participate in a test of the Data Warehouse prior to delivery of sample to confirm that vendor accounts are correctly set up and exchange test files
  - Submit files to the secure Data Warehouse
    - The first interim data submission must include all returned web, mail, and inbound CATI surveys received up to 3 days prior to the opening of the data submission window
    - The second interim data submission must include all returned web, mail, inbound, and outbound CATI surveys received up to 3 days prior to the opening of the data submission window
    - Survey vendors must submit a signed Attestation Statement with both interim submissions and the final data submission files affirming the accuracy and completeness of the data files
  - Review data submission reports
  - Participate in all oversight activities (includes subcontractors)

Roles and Responsibilities
Survey Vendors *(3 of 3)*

- Survey vendors will:
  - Obtain and maintain a CMS Data Use Agreement (DUA) with CMS by utilizing the electronic Enterprise Privacy Policy Engine (EPPE)
    - https://www.cms.gov/Research-Statistics-Data-and-Systems/Files-for-Order/Data-Disclosures-Data-Agreements/Enterprise-Privacy-Policy-Engine.html
    - Existing vendors must maintain their MA & PDP CAHPS DUA with CMS, including ensuring all contact information is correct
      - DUA must be updated within 3 business days when there is a change in contact information
- Your CMS DUA prohibits release of enrollee level data to any entity other than the MA & PDP CAHPS Project Team
- CMS DUAs are specific to a project
- CMS will not approve the DUA if your organization has another DUA that has expired
- CMS DUA Resources:
  - go.cms.gov/privacy

Executing a DUA for the First Time

- Newly participating vendors with clients must execute a DUA through the EPPE system
  - Vendors must complete EPPE training before accessing the system to submit DUA actions
  - For information and training materials on how to establish a new DUA, visit: https://www.cms.gov/Research-Statistics-Data-and-Systems/Files-for-Order/Data-Disclosures-Data-Agreements/DUA-Contractors
  - For assistance with EPPE, review the EPPE FAQs on the CMS website:

    https://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/Privacy/Downloads/EPPE_FAQ.PDF

DUA Guidance for Existing Vendors *(1 of 2)*

- Existing vendors must complete the following steps through the EPPE system:
  1. Extend existing DUA for another year to retain MA & PDP CAHPS sample and survey data well in advance of the DUA expiration date
     - Vendors must not change the contract end date of the executed DUA
  2. Update existing DUA to include 2027 MA & PDP CAHPS sample and survey data
  3. If applicable, document a new subcontractor by submitting an addendum to the DUA
     - Complete form CMS-R-0235A
     - Any subcontractor with direct access to the PII and/or PHI provided by CMS must be included in your existing DUA
       - Subcontractors may not interact with an enrollee and/or come into contact with data about or from an enrollee without being on the vendor's DUA
     - Upload the signed form in EPPE
     - DUAs must be updated for the removal or addition of subcontractors within 3 business days

DUA Guidance for Existing Vendors *(2 of 2)*

- After your organization's DUA request has been submitted in EPPE, you will receive email notification of approval
- This process may take several weeks from start to finish
- Your organization's DUA must be updated prior to receiving the sample file
- Survey vendor must confirm with the project team that all DUA activities have been completed
  - Email a copy of your extended and updated DUA to MA & PDP CAHPS Technical Assistance at MA-PDPCAHPS@hsag.com by 1/4/2027

DUA Requires Safeguarding of PII and PHI

- The MA & PDP CAHPS sample file delivered to each vendor contains PII and PHI
- As a CMS data user, you are required to keep PII and PHI secure
- When transmitting PII to service providers (e.g., for phone look-up), or PII and PHI to subcontractors for web survey, mail survey, or telephone interviews, you must use secure methods
  - Secure file transfer protocol (SFTP) ensures an encrypted transmission connection
  - If email is used, files must be securely encrypted, and the password or key to decrypt the file must be communicated directly (not via email, or left on voicemail)
- The project team will provide vendors an informational flyer regarding DUA requirements
  - We encourage survey vendors to share this with service providers and subcontractors
  - Outlines CMS data user responsibilities
  - Includes guidance for protecting PII/PHI

DUA Restricts the Use of Sample and Survey Data

- DUA requirements apply to all client reports
- No data may be appended without advance written permission from CMS
  - Survey vendors must submit all requests via email to MA-PDPCAHPS@hsag.com for review and approval
  - The request must include:
    - A list of the specific data items that are to be appended, including a clear description of the data items
    - The categories the data items would be classified into plus their associated counts. Counts of enrollees are required for all identifiers.
    - The year of survey data
    - The source of the data items
    - A brief summary (approximately 3 to 5 sentences) that clearly explains the proposed analysis
  - Data append requests must be submitted using the Excel template format included in Appendix Q
    - Include a new spreadsheet each time a request is submitted (i.e., do not add new identifiers to a previously submitted spreadsheet and resubmit)
    - Requests that are duplicative of reports CMS provides directly to plans will not be approved
    - Requests containing TIN, Tax ID, or similar identifiers must be submitted via SAFE with an email follow up to Technical Assistance, or the request should display only the last 4 digits of the TIN or Tax ID
  - Approvals to append data are for the 2027 calendar year only
  - Additional guidance on appending data can be found in Appendix Q

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Sample Design and Enrollee Selection



Objectives

- Administration of the MA & PDP CAHPS Survey
- Sample Selection via 2-Stage Random Sampling
- Sample File Content and Layout
- Delivery of Sample File

Administration of the MA & PDP CAHPS Survey

- Contracts may provide their "Do Not Survey" list to supplement survey vendor's list
  - If a vendor uses a "Do Not Survey" list provided by a contract, the vendor must document the process used by the contract to place enrollees on the list
- If an enrollee named in the survey vendor's or contract's "Do Not Survey" list appears in the sample drawn by CMS and data collection has not been initiated:
  - Remove the enrollee from the sample and assign a Final Disposition Code of *40 – Excluded from survey*. Minimum matching includes both name and address.
- If an enrollee named in the survey vendor's or contract's "Do Not Survey" list appears in the sample drawn by CMS and data collection has been initiated:
  - Assign the enrollee a Final Disposition Code of *32 – Refusal*
- Enrollees who refuse participation in future surveys should be added to the survey vendor's "Do Not Survey" list

Two-Stage Random Sampling *(1 of 2)*

- Stage 1 sampling creates the frame for the sample draw using January 2027 HPMS data and excludes:
  - Enrollees who have not been continuously enrolled in the MA or PDP contract for 6 or more months
    - Determined using CMS monthly enrollment data for July 2026 through January 2027
  - Enrollees known to be institutionalized
  - Enrollees who cannot be merged with other CMS data due to absence of geographic data

Two-Stage Random Sampling *(2 of 2)*

- Stage 2 sampling creates the final sample draw using the stage 1 sampling frame and excludes:
  - Enrollees < 18 years of age
  - Enrollees known to be deceased
  - Enrollees with duplicate MBI or duplicate name and address
  - Enrollees residing outside the U.S.
  - Enrollees with invalid or missing addresses
  - Enrollees with an institutional address
- CMS sample procedures prevent the selection of more than 1 enrollee per household
- CMS uses the final stage 2 random sample draw to construct the sample file delivered to each contract's authorized survey vendor

Sample Selection for MA Contracts

- Samples for the 2027 MA & PDP CAHPS Survey will be selected for MA and PDP contracts' current enrollees, including 1876 cost contracts, in January
- Sample size varies by type of contract:
  - For MA contracts with 800 or more eligible enrollees, CMS will sample 800 cases
    - Contracts may request a larger sample
  - For MA contracts with between 600 and 799 eligible enrollees, CMS will sample all eligible cases
  - MA contracts with between 450 and 599 eligible enrollees have the option to participate in the survey, but participation is not required
    - Contracts that choose to participate will have their scores reported and used in Star Ratings
  - MA contracts with fewer than 450 eligible enrollees may not participate in the survey

Survey Version for Sampled MA Enrollees

- The survey version for MA contract enrollees is determined by the plan benefit package at the time of the January sample draw
  - When less than 1% of a contract's sample draw and fewer than 90 enrollees have the PD benefit, only enrollees without the PD benefit will be sampled
  - When less than 1% of a contract's sample draw and fewer than 90 enrollees do not have the PD benefit, only enrollees with the PD benefit will be sampled

Sample Selection for PDPs

- For PDP contracts with 1,500 or more eligible enrollees, CMS will sample 1,500 cases
  - Contracts may request a larger sample
- For PDP contracts with between 600 and 1,499 eligible enrollees, CMS will sample all eligible cases
- PDP contracts with between 450 and 599 eligible enrollees have the option to participate in the survey, but participation is not required
- PDP contracts with fewer than 450 eligible enrollees may not participate in the survey

Sample File Content

- CMS will provide the most complete and current contact information available for sampled enrollees
- CMS contact information will include:
  - Mailing address
  - Phone number when available
- CMS contact information will not include email address
  - Survey vendors must emphasize to clients the importance of providing emails for web mode data collection
- Contracts may request oversample for 2027 survey administration by December 3, 2026
  - Oversample requests will be made via a web-based form
    - If insufficient eligible enrollees are available to completely fill an oversample request, CMS attempts to fill the request up to the number of eligible enrollees
- Sample file will include eligible contract enrollment counts by coverage type (MA-Only, MA-PD, PDP)

Sample File Layout *(1 of 4)*

RAND Field Name	Starting Position in Record	Field Length	Valid Codes	Field Contents
FINDER	1	8	Numeric	Unique Respondent Finder Number Assigned by MA & PDP CAHPS Survey Data Coordination Team
FNAME	9	30	Text	CMS Enrollee First Name
MNAME	39	15	Text	CMS Enrollee Middle Name
LNAME	54	40	Text	CMS Enrollee Last Name
DOB_C	94	8	yyyymmdd	Date of Birth
ZIP	102	9	Char	Mailing Address ZIP Code
ADDR1FINAL	111	50	Text	Mailing Address Line 1
ADDR2FINAL	161	50	Text	Mailing Address Line 2
CITY	211	40	Text	Mailing Address City Name
PR_CD	251	28	Text	Puerto Rican Urbanization Code
STATE	279	2	Char	Mailing Address USPS State Code
FIPS_STATE	281	2	Char	CMS State FIPS Code, 2 numbers with leading zeros
FIPS_CNTY	283	3	Char	CMS County FIPS code, 3 numbers with leading zeros
SEX	286	1	1-2	Code: 1 = Male, 2 = Female

Sample File Layout *(2 of 4)*

RAND Field Name	Starting Position in Record	Field Length	Valid Codes	Field Contents
CONTRACT	287	5	[H,R,E,S]nnnn	Five character contract number: Beginning with a letter, H, R, E, or S, followed by 4 numbers
TYPE	292	1	1-3	Survey Type code: indicating which survey version to administer: 1 = MA-Only; 2 = MA-PD; 3 = PDP
MARKETNAME	293	50	Free text	Contract Marketing Name from CMS
TELEPHONE NUMBER	343	10	Char	Telephone Number
LAND/MOBILE PHONE	353	1	L/M/U	L = Land line; M = Mobile; U = Unknown
SPANISH PREFERENCE INDICATOR	354	1	Y/N	"Y" Indicates the enrollee requested Medicare & You materials in Spanish

Sample File Layout *(3 of 4)*

RAND Field Name	Starting Position in Record	Field Length	Valid Codes	Field Contents
LIS*	355	1	Y/N/U	Low Income Subsidy Indicator for those who are NOT Dual Eligible Data values: Y = Yes, eligible; N = No, not eligible; U = Eligibility unknown
DUAL ELIGIBLE*	356	1	Y/N/U	Dual Eligible indicator Data values: Y = Yes, eligible; N = No, not eligible U = Eligibility unknown
PREDICTED SPANISH PREFERENCE	357	1	Numeric	Predicted Spanish Preference Estimates using MBISG 2.1.2 Data values: 1 = High probability enrollee prefers Spanish 2 = Medium probability 3 = Low probability 4 = Very low probability enrollee prefers Spanish

**Notes:*

1. *The field LIS identifies the Low Income Subsidy indicator for those who are NOT Dual Eligible (DE). A value of Y identifies non-DE cases eligible for LIS. A value of N identifies cases that are either DE or non-DE not eligible for LIS.*
2. *The LIS and DUAL ELIGIBLE fields are blank in the initial sample delivery and delivered in a refreshed sample file in March of each calendar year.*

Sample File Layout *(4 of 4)*

RAND Field Name	Starting Position in Record	Field Length	Valid Codes	Field Contents
MA-ONLY ENROLLMENT	358	7	Numeric	Count of Medicare Advantage contract's MA-Only members with 6 months of continuous enrollment. Valid values are 0000000 through 9999999.
MA-PD ENROLLMENT	365	7	Numeric	Count of Medicare Advantage contract's MA-PD members with 6 months of continuous enrollment. Valid values are 0000000 through 9999999.
PDP ENROLLMENT	372	7	Numeric	Count of Medicare Prescription Drug Plan's members with 6 months of continuous enrollment. Valid values are 0000000 through 9999999.

Delivery of Sample File

- The MA & PDP CAHPS Survey Project Team will:
  - Create a separate file for each survey vendor
  - Distribute the sample file via the MA & PDP CAHPS Survey Data Warehouse
    - Survey vendor access is restricted to their own files
    - Encrypted to PGP standard required
    - Public Key encryption required
  - Authorize survey vendors to access the Survey Data Warehouse

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Data Collection Protocol



Objectives

- Overview
- 2027 Data Collection Schedule
- Inbound Customer Support
- Web Protocol
- Inbound CATI Protocol
- Mail Protocol
- Telephone Protocol
- Supplemental Questions
- Administering the Survey in Other Languages

Overview

- Web-mail-phone survey administration
  - Mail a pre-notification letter to all sampled enrollees
  - Mail a web invitation letter to sampled enrollees without an email address
  - Up to 2 emails to enrollees with an email address
  - Up to 2 mail surveys to enrollees who do not complete a web survey
  - Up to 5 telephone attempts to enrollees who do not respond by web or mail
- CMS will provide templates of survey materials for each version of the MA & PDP CAHPS Survey (MA-Only, MA-PD, and PDP) in all available languages
- Proxy respondents are permitted
  - Sampled enrollees who are unable to directly respond
  - Permission must be received from the enrollee to interview a proxy by telephone
- Approved survey translations
  - Spanish (required)
  - Chinese (optional)
  - Korean (optional)
  - Tagalog (optional)
  - Vietnamese (optional)

2027 Data Collection Schedule: Pre-Data Collection Tasks *(1 of 3)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Survey vendors must complete and email a Vendor Access to MA & PDP CAHPS Data Warehouse Form to MA-PDPCAHPSTECHSUPPORT@rand.org	11/12/2026	-104 days
English pre-notification letters and mail survey materials: Survey vendors must submit the English pre-notification letters, pre-notification letter envelope, English cover letters, mail survey envelope, and mail MA-Only, MA-PD, and PDP surveys to MA-PDPCAHPS@hsag.com	11/16/2026	-100 days
Survey vendors must submit any supplemental questions for approval	11/20/2026	-96 days
English web survey materials: Survey vendors must submit web invitation and reminder emails (for enrollees with emails), web invitation mail letter (for enrollees without emails), and web survey test links (test links must remain available for testing until web materials are approved by the project team and allow for multiple testers to conduct tests simultaneously) for the MA-Only, MA-PD, and PDP surveys to MA-PDPCAHPS@hsag.com	11/30/2026	-86 days
Survey vendors must submit any client requests for cover letter taglines or branding language	12/1/2026	-85 days
Plan request for contract-level oversample (authorized contract staff submit a web-based request in which they select the desired contract, then enter the size of the requested oversample)	12/3/2026	-83 days

2027 Data Collection Schedule: Pre-Data Collection Tasks *(2 of 3)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Contract must complete the web-based survey vendor authorization process to authorize survey vendor to administer the 2027 MA & PDP CAHPS Survey	12/3/2026	-83 days
Spanish and optional language web and mail materials: Survey vendors must submit Spanish (and Chinese, Korean, Tagalog, and/or Vietnamese if applicable) pre-notification letters, MA-Only, MA-PD, and PDP mail surveys, web invitation and reminder emails, web invitation letters, and web survey test links (test links must remain available for testing until web materials are approved by the project team and allow for multiple testers to conduct tests simultaneously) to the MA-Only, MA-PD, and PDP web surveys to MA-PDPCAHPS@hsag.com	12/11/2026	-75 days
English CATI materials: Survey vendors must submit CATI test links for the English MA-Only, MA-PD, and PDP CATI surveys; test links must remain available for testing until CATI is approved by the project team and allow for multiple testers to conduct tests simultaneously. Screenshots that include skip logic and reflect the programmed survey that will be used for 2027 telephone survey administration may be submitted if provision of test links is not possible to MA-PDPCAHPS@hsag.com.	12/18/2026	-68 days

2027 Data Collection Schedule: Pre-Data Collection Tasks *(3 of 3)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Survey vendors must complete a new DUA or update existing DUA and submit to CMS and provide a copy of the new or updated DUA to MA-PDPCAHPS@hsag.com. Subcontractors that interact with an enrollee and/or come into contact with data about or from an enrollee (e.g., name, address, telephone number, email) must also have a DUA Addendum in place with CMS.	1/5/2027	-51 days
Spanish and optional language CATI materials: Survey vendors must submit test links to the Spanish (and Chinese, Korean, Tagalog, and/or Vietnamese, if applicable) MA-Only, MA-PD, and PDP CATI surveys that must remain available for testing until CATI is approved by the project team and allow for multiple testers to conduct tests simultaneously (screenshots that include skip logic and reflect the programmed survey that will be used for 2027 telephone survey administration may be submitted if provision of test links is not possible) to MA-PDPCAHPS@hsag.com	1/5/2027	-51 days
Survey vendors must submit QAP to MA-PDPCAHPS@hsag.com	1/11/2027	-44 days

2027 Data Collection Schedule: Data Collection Tasks *(1 of 4)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Vendors download 2027 sample file	2/5/2027	-19 days
Mail out a pre-notification letter to all sampled enrollees	2/24/2027	day 1
Customer support telephone center opens (toll-free telephone number required) and customer support email is operational	2/25/2027	days 2-95
Mail out web invite letter to enrollees without an email address. Begin inbound computer assisted telephone interviews (CATI) protocol.	2/26/2027	day 3
Email web survey invite to enrollees with an email address	3/1/2027	day 6
Email web survey reminder	3/4/2027	day 9
Mail-out of the first questionnaire with cover letter	3/9/2027 – 3/10/2027	days 14-15

2027 Data Collection Schedule: Data Collection Tasks *(2 of 4)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Survey vendors must submit the first Vendor Report of Web and Mail Survey Activity & Returns to MA-PDPCAHPS@hsag.com. Additional reports are due every 2 weeks after the first report until the end of data collection.	3/23/2027	day 28
Mail-out of the second questionnaire with cover letter to all non-respondents	3/29/2027 – 3/30/2027	days 34-35
Submit first interim data files with returned web, mail, and inbound CATI survey data to CMS (RAND). Survey vendors may begin to submit data on 4/20/2027 but must have an interim data file submitted, and deemed to be fully correct and accepted, by 4/22/2027.	4/20/2027 – 4/22/2027	days 56-58
Initiate telephone follow-up by CATI for all non-respondents to the web or mail survey (first attempt must occur during this time)	4/21/2027 – 5/1/2027	days 57-67

2027 Data Collection Schedule: Data Collection Tasks *(3 of 4)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Conduct additional telephone attempts by CATI according to the following specifications: • Call attempts must occur in 3 different calendar weeks • Call attempts must be scheduled at different times of the day and on different days of the week • The fifth call attempt must occur no sooner than 21 days after the first call attempt, if a fifth call attempt is necessary	5/2/2027 – 5/29/2027	days 68-95
Survey vendors must submit the first Vendor Report of Outbound CATI to MA-PDPCAHPS@hsag.com	5/3/2027	day 69
Submit second interim data files with web, mail, and telephone survey data to CMS (RAND). Survey vendors may begin to submit data on 5/4/2027 but must have an interim data file submitted, and deemed to be fully correct and accepted, by 5/6/2027	5/4/2027 – 5/6/2027	days 70-72

2027 Data Collection Schedule: Data Collection Tasks *(4 of 4)*

Survey Vendor Task	Date	Time Frame in Survey Field Period
Survey vendors must submit the second Vendor Report of Outbound CATI to the MA & PDP CAHPS Survey Project Team via MA-PDPCAHPS@hsag.com	5/10/2027	day 76
Cutoff date to complete web surveys	5/29/2027	day 95
Customer support toll-free line and customer support email closes	5/29/2027	day 95
Outbound telephone interviewing ends	5/29/2027	day 95
Cutoff date for returned mail surveys	5/31/2027	day 97
Submit final MA & PDP CAHPS data files to CMS approximately 2 weeks after close of data collection via the Data Submission website provided by RAND. Data can be submitted as early as 6/8/2027, but vendors must have a final data file submitted, and deemed to be fully correct and accepted, by 6/10/2027.	6/8/2027 – 6/10/2027	days 105-107

Inbound Customer Support *(1 of 2)*

- Survey vendors must maintain a toll-free customer support telephone line with a live operator during regular business hours to answer questions about the MA & PDP CAHPS Survey
  - All calls answered by a live operator must be logged in a call log. The use of a Super Intelligence* (SI) agent, conversational SI, voice-based SI agent, or other SI interviewer is prohibited.
  - Voicemail messages must generate a return call within 48 hours
  - Live and returned calls must be documented in a call log that must include:
    - For returned calls, whether the call was answered
    - The specific question(s) the caller asked
    - The information or response communicated to the caller
    - Whether the call was transferred to the call center for telephone administration of the survey
    - Any other action taken during or after the call
  - The project team, if needed, may request to receive the details of a call and the vendor must be able to provide the information

*Also called Artificial Intelligence

Inbound Customer Support *(2 of 2)*

- Survey vendors must conduct quality control monitoring of 10% of inbound calls to the customer support line throughout survey administration to assure:
  - The line is working
  - The operators answering the phone are providing responses that adhere to the Frequently Asked Questions (FAQs) for Customer Support provided by CMS
- Monitoring of the customer support line is required from the day the line goes live to the completion of survey administration
- The monitoring must be documented

Web Protocol *(1 of 5)*

- Obtaining and Validating Email Addresses:
  - Email addresses will not be included in the sample file
  - Survey vendors should request email address data from the contracts to match against the sample file using name, address, city, and state. For matching purposes, date of birth may be used in place of street address.
    - If a contract provides email address data, the data must include all contract enrollees for whom an email address is available
    - Contracts that provide email address data must be documented in the vendor's QAP (see Appendix C for more details)
  - Survey vendors have the option to validate email addresses using an email validation service provider
  - Exclude email addresses that do not contain the required components of a valid email address: username followed by @ and a domain name
  - Exclude email addresses that do not include a valid U.S. email extension
    - Valid U.S. email extensions include .com, .co, .org, .edu, .net, .mil, .biz, .mobi, .museum, .pro
- Should your organization identify more than 1 email address for any of your enrollees, please contact MA & PDP CAHPS technical assistance

Web Protocol *(2 of 5)*

- The web survey should present similarly on different browser applications, browser sizes, and platforms. The survey should automatically re-size for the enrollee's screen (phone, tablet, computer) and be 508 compliant.
- A customer support email address is required to accommodate queries via web
  - The customer support email address will be printed on web invitation letters and included in web emails
  - Staff must be available during regular business hours to respond to enrollee emails asking for technical assistance to access or complete the web survey

Web Protocol *(3 of 5)*

- Survey vendors are responsible for programming English, Spanish, and if applicable, Chinese, Korean, Tagalog, and/or Vietnamese survey materials including web surveys, invitations, and reminder emails required for the administration of the survey
  - Vendors must not use “noreply” or “donotreply” email addresses or email accounts that can send messages but not receive them (e.g., no-reply@surveyvendorname.com or donotreply@surveyvendorname.com)
- Survey vendors may use the web survey system and software of their choice
- The web survey system must:
  - Link electronically to the survey management system to allow tracking of sampled enrollees
  - Allow enrollees to initiate or resume the web survey without requiring creation of a password
  - Support capture of data from surveys that are initiated and suspended without submission of a completed survey
  - Allow web surveys to be suspended and resumed at a later date, returning to the first unanswered question

Web Protocol *(4 of 5)*

- The web survey system must *(cont'd)*:
  - Enable survey administration in English and Spanish, and if applicable, the optional languages offered by CMS (Chinese, Korean, Tagalog and Vietnamese)
  - Support the use of a URL that is a maximum of 25 characters and the use of a survey PIN that is a maximum of 10 characters that is unique to sampled enrollee
    - Enrollee-specific URL and PIN must be stored in vendor's survey management system
  - Track and report whether web survey was initiated using the:
    - URL/PIN combination provided in the pre-notification letter, web invitation (email or mail), or web reminder email, or
    - QR code printed in the pre-notification letter or web invitation letter, if applicable
  - Allow enrollee to select their preferred language (English, Spanish, or optional) upon initiating the web survey
    - The language selection screen must display only the languages offered by the contract, English instructions should be in bold text, and there should be a line break between each language

Web Protocol *(5 of 5)*

- Web survey seeds for all survey versions in all languages being administered must be created and tracked. Check for timeliness of delivery and accuracy of the email seed upon receipt.
  - It is strongly encouraged that recipients of the seeded email be MA & PDP CAHPS Survey vendor staff at an email address other than the vendor's business email address
  - Vendors must maintain documentation of web survey seeds to include date of receipt and any quality checks conducted on the seeds
  - The MA & PDP CAHPS Survey project team must receive a web survey seed in English and Spanish for each of the 3 survey types, MA-Only, MA-PD, and PDP (as applicable), as well as any optional languages being administered. Survey vendors may choose the contracts for their seeds.
- Completed web surveys must be tracked by date of submission, the data validated within 3 business days, and those records removed from further web, mail, or CATI follow-up, as appropriate

Web Protocol FAQs

- **May the contract share enrollee email addresses with its CMS-approved MA & PDP CAHPS Survey vendor?**
  - Contracts are encouraged to provide their MA & PDP CAHPS Survey vendor with email addresses for all enrollees to support email delivery of web survey invitations to enrollees sampled for the survey. The contract should review the Business Associate Agreement (BAA) executed with their survey vendor to make sure it includes sharing of their enrollee email address data.
- **Will CMS allow vendors to send out initial email invitation across multiple days?**
  - CMS anticipates that vendors will employ common practices to manage and promote the delivery of emails to sampled enrollees. Actions for your organization to consider include acquiring additional Internet Protocol (IP) addresses; measuring the reputation of your IP addresses; use of domain-based message authentication, reporting, and conformance (DMARC); and/or use of DomainKeys identified mail (DKIM). CMS expects all survey vendors to implement data collection on the schedule indicated in Chapter VI: Data Collection Protocol of the QAP&TS.
- **See the FAQs page of the MA & PDP CAHPS website for more Web Protocol FAQs**

Inbound CATI Protocol *(1 of 2)*

- Survey vendors are required to provide inbound Computer Assisted Telephone Interviewing (CATI) interviews during the web and mail component of web-mail-phone mode data collection
  - After the web invitation letter mailing has occurred on February 26, 2026
  - Sampled member calls survey vendor customer support requesting to complete the survey by telephone
  - All inbound CATI interviews must be administered by live interviewers. The use of an SI agent, conversational SI, voice-based SI agent, or other SI interviewer is prohibited.
  - Requires CATI data collection to be fully operational for all survey types (including supplemental questions, if applicable) for inbound requests at the start of the web administration time period
  - Procedures must be in place to conduct regular monitoring of inbound telephone calls from the start of survey administration across all languages in which the survey is administered and processes must be documented in the survey vendor's QAP
  - The CATI script includes introductory text for inbound calls from enrollees requesting to complete the survey

Inbound CATI Protocol *(2 of 2)*

- If an interviewer is not available at the time of the sampled member's inbound call, survey vendor is permitted to:
  - Schedule an appointment to call sampled member at the time requested by sampled member
    - If survey vendor calls at the scheduled time and receives no response, survey vendor must make at least 1 additional attempt (on the next day at the same time) to contact sampled member
- If an MA & PDP CAHPS Survey is not completed as a result of the inbound CATI protocol, then standard web, mail, and telephone CATI protocols should be resumed and continued
  - Inbound CATI call attempts with an unsuccessful survey completion do not count toward the telephone protocol 5 call attempts

Pre-notification Letter *(1 of 2)*

- CMS will provide 2 template versions (1 for MA-Only/MA-PD and 1 for PDP) in each language that will include the required CMS signature block
- CMS logo and survey vendor return address block must be printed at the top of the letter exactly as indicated in the templates provided by CMS
  - Placement variations, such as printing the address upside down or on back of the letter are not permitted
- Letter generated by survey vendors must be dated February 24, 2027
- Contains a salutation personalized to include the enrollee's name using the sample variables FNAME and LNAME
- Include URL and PIN to access the web survey
- Include survey vendor's customer support telephone number and customer support email address
- CMS logo must appear in the return address section of the letter and with the survey vendor's return address on the envelope

Pre-notification Letter *(2 of 2)*

- Font equal to or larger than Times New Roman 12, Arial 12, Calibri 12, or Helvetica 12
- Pre-notification letter required to be printed with English on 1 side and Spanish on the other side; however, if a contract contains a substantial number of Chinese, Korean, Tagalog, or Vietnamese speakers, option of including an English-Chinese, or English-Korean, or English-Tagalog, or English-Vietnamese letter is permitted
- Pre-notification letters must be folded using half-fold or tri-fold
  - Accordion style fold (zigzag or fan fold) is not permitted
- Vendors have the option to include a QR code containing the survey URL and enrollee-specific PIN
  - QR code does not replace the URL and PIN; the URL and PIN must be printed on the letter
  - If QR code is used, it must appear in letters for all languages being administered
- No banners are permitted to be printed on any mailing envelopes (e.g., Important Information Enclosed)
- The pre-notification letter envelope must:
  - Include enrollee full name and address
  - Include 1 of the following: “Return Service Requested,” “Address Service Requested,” “Change Service Requested,” “Electronic Service Requested,” or an Intelligent Mail Barcode (IMb) with the appropriate service codes to include address updates
  - Be white; colored envelopes are not permitted

Email Invitation and Web Reminder Email *(1 of 2)*

- CMS will provide 2 template versions of the email web invitation and web reminder email (1 for MA-Only/MA-PD and 1 for PDP) in each language. The emails must:
  - Use the subject line “Medicare wants your feedback about your health plan” (for MA-Only/MA-PD contracts) or “Medicare wants your feedback about your drug plan” (for PDP contracts)
  - Display the CMS logo below the subject line and before the salutation. It is optional to include the MA or PDP contract logo (or the MA or PDP parent organization logo).
  - Contain a salutation using the sample variables FNAME and LNAME
  - Contain a personalized embedded link comprised of the survey URL and a PIN unique to the sampled enrollee so the enrollee may click on the link to initiate the web survey
  - Include the customer support telephone number and the customer support email address
  - **Clarification for 2027**: If using “unsubscribe” or “opt out” text on emails, the text should appear at the bottom of the email, be specific to the survey, and the “unsubscribe” or “opt out” web page link should make clear that the enrollee is unsubscribing from this specific survey, not all surveys in general

Email Invitation and Web Reminder Email *(2 of 2)*

- The template versions of the email web invitation and web reminder must:
  - Use Times New Roman, Arial, Calibri, or Helvetica font that is equal to or larger than 12-point font size
  - Default language for email invitations is English
    - Vendors may identify sampled enrollees requiring a Spanish invitation email by using
      - language preference data from the contract
      - the Spanish Preference Indicator field in the sample data
      - the Predicted Spanish Preference field in the sample data, or
      - calls or emails from enrollees requesting a Spanish survey
    - If the survey vendor is administering the MA & PDP CAHPS Survey in 1 of the optional languages (Chinese, Korean, Tagalog, or Vietnamese), the web invitation emails should be provided in the optional languages

Web Survey Specifications *(1 of 3)*

- The web survey software must display only 1 item per screen, and all questions must allow paging through without requiring a response
- Sampled enrollee's name must not appear on any web survey screen
- When displayed, the "BACK" button appears in the lower left of each screen and the "NEXT" button appears in the lower right of each screen
- A header should appear on each screen which may be distinguished using shading or color

Web Survey Specifications *(2 of 3)*

- Use of blank space to distinguish:
  - Response options from the question text
  - Navigation buttons from response options
- A progress bar at the top of the screen starting at Q1
- The ability for sampled enrollees to select the preferred language from English, Spanish, and any offered optional translations
- Programming the Office of Management and Budget (OMB) clearance statement, number and expiration date (11/30/2027) on the instruction screen
- Not altering the wording of questions or answer categories (all answer categories must be listed vertically, including 0-10 rating scales)

Web Survey Specifications *(3 of 3)*

- No changes are permitted to the order of the survey questions or answer categories for the Core and About You questions
- None of the questions from the CMS survey templates, including the About You questions, can be eliminated from the survey. The About You questions may be placed before or after any supplemental questions.
- Question and answer categories must remain together on the same screen
- The presentation of questions and response options (vertical vs. horizontal presentation of response options, use of matrix or grid format) cannot deviate from the format presented in the survey templates provided by the MA & PDP CAHPS Survey project team

Web Quality Control Guidelines

- Survey vendors are responsible for the quality of work performed by any staff and/or subcontractor(s). Quality checks must be conducted on survey versions in all languages being administered.
- To ensure surveys are delivered as required, survey vendors must:
  - Perform validation tests of the URL and unique PIN
  - Perform validation tests of QR code, if applicable
  - Confirm formatting of all screens matches CMS templates and web survey presents similarly on different browser applications, browser sizes, and platforms; and automatically re-sizes for different screens (e.g., phone, tablet, computer)
  - Conduct tests of all versions of the web surveys in all languages being administered to ensure skip logic is correct, screens can advance without requiring a response, and enrollee can exit survey and re-enter at a later time and be returned to the first unanswered question
  - Verify appropriate supplemental questions are displaying for each contract and in all languages
  - Track, review, and document web seeds for timeliness of delivery and accuracy of email seed and any quality checks conducted
  - Monitor web survey responses to ensure data are captured as expected

Survey Cover Letters

- Printed on a separate sheet of paper not attached to questionnaire
- Printed using the CMS logo and the return address of the survey vendor
  - Optional to include the MA or PDP logo (or the MA or PDP parent organization logo)
- Cover letter for first questionnaire mailing dated March 10, 2027
- Cover letter for second questionnaire mailing dated March 30, 2027
- Salutation must be personalized with enrollee name using the sample variables FNAME and LNAME
- Signature block that reads:

  Sincerely,

  Center for Medicare
- Font size equal to or larger than
  - Times New Roman 12
  - Arial 12
  - Calibri 12
  - Helvetica 12
- Provide for a translated survey request, if applicable

Questionnaires: Formatting and Printing *(1 of 5)*

- The questionnaires must be printed as booklets and bound (using staples, stitches, adhesive, etc.) so there are no loose pages
  - Questionnaires may not be printed in any other format (e.g., trifold format)
- Full questionnaire title with year must be placed at the top of page 1
- The enrollee's name must not be printed on the questionnaire
- First page of the questionnaire must include the survey instructions and the OMB clearance statement, number, and expiration date which may be printed in 10-point font
  - The OMB clearance statement, number, and expiration date may also appear on the cover letter
- All survey instructions must be printed at the top of the first page of the questionnaire

Questionnaires: Formatting and Printing *(2 of 5)*

- Question and answer category wording must not be changed
  - All answer categories must be listed vertically except for multi-mark questions with a grid response format
- No changes are permitted to the order of the survey questions or answer categories for the Core and About You questions
- The About You questions cannot be eliminated from the questionnaire and may be placed before or after any supplemental questions
- Question and answer categories must remain together in the same column and on the same page

Questionnaires: Formatting and Printing *(3 of 5)*

- Presentation of questions and response options (vertical vs. horizontal presentation of response options, use of matrix or grid format) cannot deviate from the format presented in the survey templates provided by the MA & PDP CAHPS Survey Project Team
  - The only questions approved for presentation in a matrix or grid format are the required survey items in the questionnaires distributed by CMS (and matrix formatted supplemental questions approved by CMS)
- The contract marketing name provided in the sample file must be printed on the last page of the survey
  - Additional names are permitted on the last page of the survey(s), preceded by the phrase, "You may also know your plan by the following name(s):"
    - The phrase should appear only if additional contract names are printed on the survey.
    - If used, the phrase must be printed in the same language as the survey.
    - The contract number is NOT to be included on the last page of the survey instrument(s).

    Example:
    Contract marketing name: XYZ Plan
    You may also know your plan by the following name(s):
    ABC Plan
    CDD Plan
    EFG Plan

Questionnaires: Formatting and Printing *(4 of 5)*

- Form tracking ID linked to the Unique Respondent Finder Number must be printed on the last page of each survey
  - Placement of an internal tracking barcode next to the Unique Respondent Finder Number on the last page of the survey and other materials is acceptable
- An identifier to differentiate between the first and second mailing must be included on each survey
- Survey vendor's return address for mail processing must appear on **both the back cover of the questionnaire and on the bottom of the last page containing survey questions**
- No deviations from this guidance are permitted

Questionnaires: Formatting and Printing *(5 of 5)*

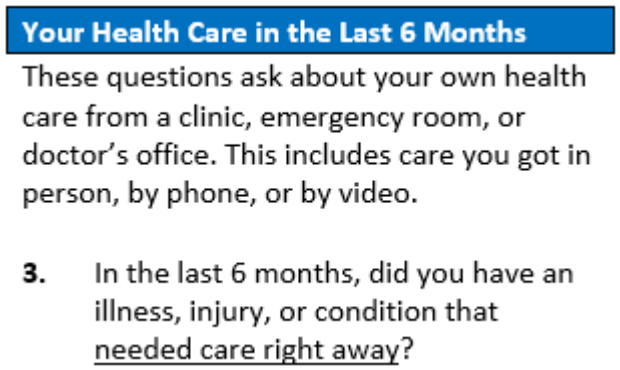
- All questionnaires must be printed using a font size of 12 points or larger and font type Times New Roman, Arial, Calibri, or Helvetica
- All questionnaires must be printed with black text
- Survey vendors may print questionnaires on white paper (with or without a highlight color) or on colored paper
  - Use of colored paper must be limited to pastel hues; colors that may reduce readability, such as neon or dark colors, are prohibited
- Page numbers must be printed at the bottom of each page

Questionnaires: Recommended Formatting Guidelines *(1 of 2)*

- Two-column format
- Wide margins (at least ¾ inches) so that the survey has sufficient white space to enhance readability
- Survey vendors may use ovals or circles instead of boxes for response items
- Survey vendors may place a code on the mail survey in order to facilitate identifying the survey type when assisting enrollees
- Survey vendors may use pre-codes placed to the left of the response options as superscript or subscript. Pre-codes should not be used on 0-10 responses.

Questionnaires: Recommended Formatting Guidelines *(2 of 2)*

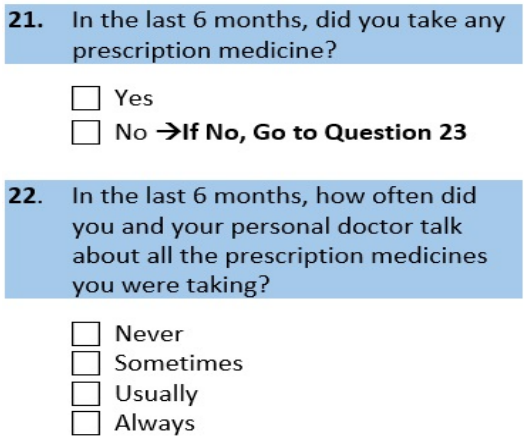
- Place the survey instructions on a separate page, rather than at the top of the first page of substantive survey questions
  - Format the survey instructions using bullets
- Use of color as a visual cue to promote navigation between survey questions (see examples below):



Your Health Care in the Last 6 Months

These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video.

3. In the last 6 months, did you have an illness, injury, or condition that needed care right away?



21. In the last 6 months, did you take any prescription medicine?

- ☐ Yes
- ☐ No →**If No, Go to Question 23**

22. In the last 6 months, how often did you and your personal doctor talk about all the prescription medicines you were taking?

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always

Survey Mailing

- Mail Packet
  - Envelope must be printed with the CMS logo and survey vendor return address
  - Use of window envelopes as a quality measure is permissible to ensure that each sampled member's survey package is mailed to the address of record for that enrollee
    - No personal information, other than enrollee name and address, should be visible through the window
  - Survey vendors have the option of placing the MA or PDP logo on survey mailing envelopes
  - No banners are permitted to be printed on any mailing envelopes (e.g., Important Information Enclosed)
  - A prepaid Business Reply Envelope addressed to the survey vendor or the survey vendor's subcontracted scanning service must be included in each outgoing package

Returned Questionnaires

- Data Receipt and Processing
  - Track survey returns by date received from post office
    - Enter or scan the survey data within 3 business days and remove those records from further mail or CATI follow-up, as appropriate
  - Key-entry or scanning technology
  - Ambiguous responses decision rules

Enrollee Correspondence

- Survey vendors must forward enrollee correspondence received in emailed or written form (i.e., white mail) to the project team on a bi-weekly basis for CMS review with the exception of white mail that only indicates refusal to complete the survey, language barrier, enrollee is ineligible, survey has been completed, a request for a different survey mode, enrollee is deceased, or enrollee change of address
  - Vendors should update their internal files as needed to comply with this guidance
- White mail includes:
  - Notes from members written on separate pieces of paper
  - Separately mailed letters
  - Cover letters, pre-notification letters, and envelopes with enrollee comments
  - Emails to the customer support email inbox with enrollee comments
- If vendors receive comments that indicate an individual's health or well-being is at risk (e.g., signs of neglect or abuse, signs of a distressed respondent, indications of risk, harm, or vulnerability, or correspondence requiring urgent attention or communicating thoughts of suicide), vendors should:
  - Follow their own standard procedures for handling this type of information
  - Immediately notify the project team and forward the correspondence

Guidelines for Submitting Enrollee Correspondence

- Each email or piece of white mail should be scanned separately and saved as an individual PDF
- Each piece of scanned email and white mail should include the enrollee's name, mailing address, and phone number (if available)
- Email and white mail must be categorized by topic, using the following categories:
  - Need/Distressed/Financial
  - Other
- The scanned file should be named with the FINDER (Unique Respondent Finder Number assigned in the sample file) and the 1-word topic associated with that email or piece of white mail
  - e.g., 123444555_Financial.pdf

Vendor Report of Web and Mail Survey Activity and Returns

- Survey vendors must complete and submit an MA & PDP CAHPS Vendor Report of Web and Mail Survey Activity and Returns
  - This report provides CMS information on web and mail survey activities and the progress of processing completed web surveys and returned mail surveys
  - The first report is due 13 days after the first survey mailing on 3/23/2027 and additional reports are due every 2 weeks after the first report
  - The instructions and report template can be found in Appendix S of QAP&TS V17.0

Data Quality

- Quality control
  - Quality checks should include all survey versions in all languages being administered
  - Conduct interval checking of printed mail pieces
  - Include, track, and verify seeded mailings for all survey versions in all languages being administered
    - Strongly encourage that recipients of the seeded mailings be vendor staff at an address other than the vendor's business address
    - Documentation of seeded mailings should include date of receipt and any quality checks conducted on the seeded mail packets
    - The MA & PDP CAHPS Survey project team must receive a seeded mailing in English, Spanish, and each of the optional languages being administered for each of the 3 survey types, MA-Only, MA-PD, and PDP (as applicable)
      - Seeds must be provided for the pre-notification letter, first, and second survey mailings
  - Perform address validation and updates
  - Conduct timely data verification
  - Ensure scanning and key entry staff are trained on and understand decision rules
    - Survey vendors must conduct regular quality checks of scanned survey data to verify decision rules are correctly applied

Data Retention

- Data retention and storage
  - All data files, audio recordings, web surveys, paper questionnaires, and/or scanned images must be stored:
    - In a secure and environmentally controlled location
    - For minimum of 3 years
  - The retention requirement also applies to sample information

Telephone Protocol

- CATI
  - Program with official telephone script
  - Program skip pattern questions appropriately
  - Link electronically to survey management system
  - Predictive or auto dialers are permitted as long as they are compliant with Federal Trade Commission (FTC) and Federal Communications Commission (FCC) regulations as promulgated under the Telephone Consumer Protection Act (TCPA) and there is a live interviewer available to interact with the enrollee. The use of an SI agent, conversational SI, voice-based SI agent, or other SI interviewer is prohibited.
    - Survey vendors may identify cell phone numbers through an external database so that systems with auto dialers do not call cell phone numbers
    - Survey vendor must submit an Attestation form to document that it has met its compliance or legal department's TCPA requirements for dialing cell phones
  - Interviewer records respondent answers electronically.
  - Caller ID may be programmed to display "on behalf of [Health or Drug Plan Name]" with the permission and compliance of the health or drug plan's HIPAA/Privacy Officer
    - Survey vendors must <u>not</u> program the caller ID to display only "[Health or Drug Plan name]"

Eligibility for Telephone Follow-up

- Eligible Enrollees
  - Did not respond to web or mail surveys
  - Returned a blank or incomplete web or mail survey that does not fulfill the rules defining a completed or partially completed survey
  - No valid address available after reasonable attempts to obtain

Telephone Numbers

- To match telephone numbers, vendors should use name, address, city, and state
  - Date of birth may be used in place of address to match client data
- All vendors must pursue telephone numbers for enrollees eligible for telephone follow-up from at least 2 sources from the list below
  - Sample file from CMS
  - Number look-up service for 100% of the sample file
  - Directly from contract
    - A list of numbers for all Medicare contract members
    - Sample must not be shared with contract
    - Share no information with contract that might identify an enrollee
  - Directory websites or applications for 100% of the sample
  - Directory assistance
- Phone numbers that have been identified as bad or nonworking by a phone append vendor must be dialed at least 1 time to verify that the number is still bad or nonworking

Telephone Attempts *(1 of 3)*

- First call attempts must be made within the first 10 days of the start of outbound CATI protocol
- Survey vendor must attempt to reach every enrollee identified for telephone follow-up until the enrollee is contacted, found ineligible, determined to be away for the duration of the data collection period, or the required call attempts have been made:
  - Different times of day, on different days of the week, and in different weeks
  - The fifth call attempt must occur no sooner than 21 days after the first call attempt, if a fifth call attempt is necessary

Telephone Attempts *(2 of 3)*

- Vendors should use multiple numbers if available
  - The maximum number of attempts to a specific phone number is 5; the maximum number of attempts for an enrollee is 5 per each number dialed
  - After 5 attempts to contact the enrollee at a specific number have been made, no further attempts are to be made to that number and a second number, if available, must be dialed
    - If a second or third phone number is dialed for the enrollee, each of those numbers is eligible for 5 attempts
  - Survey vendors must describe the process for handling multiple telephone numbers for a single enrollee during the telephone protocol of data collection in their QAP

Telephone Attempts *(3 of 3)*

- An attempt is defined as:
  - Telephone rings 6 times with no answer
  - Enrollee requests call back
  - Telephone answered by someone other than enrollee who is unavailable
  - Busy signal for each of 3 consecutive attempts (made approximately at 20 minute intervals, if possible)
  - Answering machine or privacy manager reached
    - If number is identified as having call screening (e.g., privacy screen, privacy manager, phone intercept, or blocking of unknown callers), additional attempts must be made (up to the maximum of 5) to reach the enrollee
  - Disconnect/out of service
- Enrollee cases finalized as maximum attempts must have had dialings over no fewer than 21 calendar days

Report of Outbound CATI

- Vendors must complete and submit MA & PDP CAHPS Vendor Reports of Outbound CATI
  - The Excel template for the report may be found in Appendix R of the QAP&TS V17.0
  - First report is due May 3, 2027
  - A second Vendor Report of Outbound CATI must be submitted on May 10, 2027
  - Vendors may be required to submit additional follow-up reports on a weekly basis during outbound CATI, as needed

Telephone Script

- Standardized telephone script provided by CMS
- Text must not be modified
- Script must be read verbatim
- If a survey vendor subcontracts with another firm to conduct telephone interviewing, the survey vendor is responsible for attending/participating in the subcontractor's telephone interviewer training to ensure compliance with protocols, procedures, and guidelines
- Correcting script errors
  - Script programming errors identified during the phone phase of survey administration must be corrected before resuming survey interviews
    - Script text errors not linked to programming logic must be corrected within 2 business days of identification
    - Script errors linked to programming logic must be corrected within 3 business days of identification
    - Quality control checks to ensure programming is accurate must be described in survey vendor's QAP

Interviewer Training Guidance

- Telephone interviewer training
  - Telephone script and CATI programs
  - Survey introduction
  - Guidelines for reaching enrollees
  - Identifying possible ineligible enrollees
  - Definition of telephone attempts
  - Interviewing guidelines and conventions
    - System conventions, e.g., CATI screens, interim disposition codes
    - Avoiding refusals
    - Probing for complete answers
    - Use of neutral acknowledgment words (Thank you, I understand, I see, Yes Ma'am, Yes Sir, or Let me repeat the question/responses for you) is permitted
    - The occasional use of the enrollee's name during the interview is permitted
  - If an enrollee answers *No* to the health or drug plan of record question and does not know the name of their health or drug plan, the interviewer should continue the survey administration and not terminate the call. The interviewer should ask the enrollee to answer the questions as best as they can thinking about the plan they were enrolled in during 2026.
- Customer support FAQs

Monitoring and Oversight of Interviewers *(1 of 2)*

- Survey vendors and subcontractors, if applicable, must share in 10% of all interviews through silent monitoring
  - Attempts and completed interviews
  - All interviewers
  - All times of day
  - Different days of the week
  - All languages in which the survey is administered
- Procedures must be in place to conduct regular monitoring of inbound CATI starting February 26, 2027
- Procedures must be in place to conduct regular monitoring of outbound CATI starting April 21, 2027

Monitoring and Oversight of Interviewers *(2 of 2)*

- Monitoring of recorded calls must be completed within 3 days of the recording
  - Any needed performance feedback must be delivered to interviewers no later than their next scheduled work shift after the review of the recording
    - Interviewers must acknowledge receipt of monitoring feedback
- Interviewers who consistently fail to follow the phone script verbatim, fail to employ proper probes, fail to remain neutral and courteous, are difficult to understand, or have difficulty using the computer, must be identified and retrained or replaced, if necessary

Supplemental Questions

- Maximum of 12 supplemental questions
  - Supplemental questions for proposed use in 2027 survey administration must be submitted to CMS for review and consideration of approval using the Excel template found in Appendix P of the QAP&TS V17.0 by November 20, 2026
  - Supplemental questions that contain multiple part response items (e.g., questions a through e) will count as multiple questions toward the maximum cap of 12 supplemental questions
  - Suggestions for supplemental items can be found on AHRQ website
- Supplemental questions must be:
  - Added to all survey modes (web, mail, CATI) for the corresponding contract and must be fully programmed and operational by the start of inbound CATI protocol
  - Translated by survey vendor or plan to be included in all languages being administered for that contract
  - Formatted consistently with the survey questions to match the CMS template
- Supplemental questions must follow the Core questions
- Please refer to the guidance on supplemental questions in the Data Collection chapter and Appendix P of the QAP&TS V17.0 for more information on placement, transitioning to supplemental questions, and types of questions to avoid

Administering the Survey in Other Languages *(1 of 5)*

- CMS provides the translations of MA & PDP CAHPS Surveys and supporting materials in Spanish, Chinese, Korean, Tagalog, and Vietnamese
- Spanish language questionnaires must be made available to all Spanish-speaking members (in web, mail, and telephone administration)
- The Chinese language survey is appropriate for members who speak Cantonese or Mandarin
  - Vendors must maintain an interviewer pool that meets the needs of their Chinese-speaking enrollees (may require interviewers that speak both Cantonese and Mandarin)
- Use of the Chinese, Korean, Tagalog, and Vietnamese language questionnaires is optional, and shall be done at the request of the contract
  - When the optional language questionnaires are used, they must be available for web, mail, and telephone administration
  - Survey vendors will need to document and report the protocol used to administer Asian language surveys

Administering the Survey in Other Languages *(2 of 5)*

- At the request of the contract, vendors may conduct any of the following for **non-Puerto Rico** members:
  1. Include instructions with pre-notification letter, web survey invitations, and all survey mailings to request Spanish, Chinese, Korean, Tagalog, or Vietnamese language survey
  2. Dual language survey mailings (double stuffing)
  3. Web surveys or survey mailings in preferred language
     - Members identified using language preference data for all enrollees provided by contract or SPANISH PREFERENCE INDICATOR field or PREDICTED SPANISH PREFERENCE in sample file

Administering the Survey in Other Languages *(3 of 5)*

- Survey vendors must provide a table in their QAP which indicates how the Spanish, Chinese, Korean, Tagalog, and/or Vietnamese surveys are distributed for each contract
  - Survey vendors will be asked to provide updates to this table after the start of survey administration
  - The table will be used as the formal documentation of each vendor's use of and procedures for Spanish, Chinese, Korean, Tagalog, and Vietnamese survey translations

Administering the Survey in Other Languages *(4 of 5)*

- Mailing the pre-notification letter to **non-Puerto Rico** members:
  - If contract is not using optional language surveys
    - Pre-notification letter is printed in English on 1 side and Spanish on reverse
    - Letter provides toll-free number to request a Spanish language survey
  - If contract is using optional language surveys
    - Pre-notification letter is printed in English on 1 side and in the optional language on reverse
    - Letter provides toll-free number to request Spanish language survey AND toll-free number to request the optional language survey

Administering the Survey in Other Languages *(5 of 5)*

- Additional guidance:
  - If a contract provides a vendor with language preference data, the data must include all contract members for whom data are available or applicable
    - Vendors cannot provide any contract with names or other identifying information of sampled members
    - Vendors should use name, address, city, and state to confirm a match with the contract's language preference data
    - Vendors should perform reviews of the language preference files received from contracts to ensure data quality, such as checking that the data in the language field are consistent with other fields provided by the contract
  - Vendors need to track if an enrollee starts the telephone survey in 1 language and completes it in another language. The survey vendor will need to identify the point at which the interviewer switched languages.

Administering the Survey in Puerto Rico

- The survey must be administered in Spanish for members residing in Puerto Rico
- Options for members in Puerto Rico:
  - Include English instructions for requesting an English survey with the pre-notification letter and all survey mailings
  - Send web survey invitations in English only to enrollees known to prefer English
    - Those members would be identified using language preference data received from the contract
  - Include an English language survey in all mailings of the Spanish language questionnaire (double stuff)
  - Send an English survey only in all survey mailings to members known to prefer English
    - Those members would be identified using language preference data received from the contract

Data Collection Protocol Summary

- Data collection procedures represent:
  - Standardized administration of the survey instruments to promote data validity
  - Survey protocols designed to achieve high response rates
  - Consistency of data collection across participating contracts

CMS
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Data Analysis and Reporting



Overview

- Response Rate
- Data Cleaning
- Public Reporting of Medicare CAHPS Data
- Additional Reporting of Medicare CAHPS Data to Contracts
- CMS Analysis of MA & PDP CAHPS Survey Data
- Survey Vendor Analysis of Data

Response Rate

- The reports provided to contracts include a response rate for the contract, and the average response rate for contracts in the state (MA or PDP)
- CMS recommends the following calculation to best approximate the response rate included in reports:

$$\frac{\textbf{Completed (code 10) + Partially Completed Surveys (code 31)}}{\textbf{Total Sample Size – All Ineligible Enrollees}}$$

- The response rate reported to contracts includes all surveys used in analysis divided by the total eligible sample size
- Current and previous response rate information is available on the MA & PDP CAHPS website: https://www.MA-PDPCAHPS.org/en/comparative-data/

Ineligible Enrollees

- Ineligible enrollees are those with any of the 4 following codes:
  - Institutionalized (code 11)
  - Deceased (code 20)
  - Mentally/physically unable (code 24)
  - Excluded from survey (code 40)
- Ineligible enrollees do not include those with an Incomplete or blank survey returned (code 34)

Data Cleaning *(1 of 2)*

- Forward-cleaning is used to edit and clean survey data
- Responses to the “screener” (or gate) items control how subsequent items within the questionnaire are treated
- Embedded screener questions (a skip pattern within a skip pattern) are treated in the same way as a primary screener question
  - The embedded skip pattern is evaluated first, followed by the primary skip pattern

Data Cleaning *(2 of 2)*

- Screener items that are not answered are not updated or back-filled based on responses to subsequent items
- If a screener question has a valid response, but the respondent violates the skip instruction by answering dependent questions that should have been skipped:
  - The response to the screener question is retained
  - The responses for the dependent questions are set to *M-Missing* (with the exception of Customer Service, item 3)
- If a screener question is not answered, but there is data in a dependent question:
  - Screener is recorded as *M-Missing*
  - The response for the dependent question is retained and used in analysis

Public Reporting of 2027 MA & PDP CAHPS Survey Data

- CMS publicly reports 2027 Medicare CAHPS Survey data by contract (MA and PDP)
  - Medicare & You Handbook (limited information)
  - Medicare Plan Finder (additional measures) www.medicare.gov
  - Part C and D Star Ratings page on https://go.cms.gov/partcanddstarratings
- Goals of public reporting
  - Help enrollees choose coverage
  - Inform contracts' quality improvement efforts
  - Incentivize contracts to improve performance
  - Promote accountability and transparency
  - Inform CMS and policymakers

Additional Reporting of 2027 Medicare CAHPS Data to Contracts *(1 of 2)*

- CMS provides preview reports to contracts before data are posted on www.medicare.gov
  - Official CAHPS preview reports emailed to Medicare Compliance Officers in late August
  - CMS provides additional data to assist health and drug plans in their review of CAHPS during the Star Ratings preview periods

Additional Reporting of 2027 Medicare CAHPS Data to Contracts *(2 of 2)*

- CMS provides more detailed reports to MA and PDP contracts
  - Official CAHPS contract reports provided via email to Medicare Compliance Officers in late fall
- Reports summarize contracts' survey results and compare contract scores at state and national levels
  - Global ratings
  - Individual items
  - Composite measures
  - Other measures
  - Response rate

CMS Analysis of 2027 MA & PDP CAHPS Survey Data: Overview

- CMS employs linear mean scoring, not "top-box" scoring
- Use of composite measures
- Weighting
- Case-mix adjustment
- Significance testing, reliability, and star assignment

Official MA & PDP CAHPS Scoring Is Linear Mean Scoring, Not Top-Box Scoring

- Top-box scoring, which is employed in some other surveys, only reports the proportion of responses in the most positive category
- In contrast, linear mean scoring, the official MA & PDP CAHPS scoring, reports an average based on all survey responses

Transformation to a 0-100 Scale

- Linear mean scores for CAHPS measures are transformed to a 0-100 scale for public reporting
  - Both single items and composites
- 0-100 transformation occurs after calculating the mean score
  - 0 represents lowest possible mean score
  - 100 represents highest possible mean score
- In contract reports, linear mean scores are also reported without transformation (using the original response scale)

Use of Composite Measures

- Scores on questions about the same topic are combined to form composite scores
- Items in a composite usually receive equal weight
  - Exceptions: Getting Needed Prescription Drugs and Care Coordination

Formula for Transformation to a 0-100 Scale

- Let X = the CAHPS score on its original scale, ranging from a minimum value of "*a*" to a maximum value of "*b*"
- A 0-100 score Y can be calculated as

$$Y = \frac{(X - a) * 100}{(b - a)}$$

- For item or composite using response options of *Always, Usually, Sometimes, Never, a* = 1 (Never), *b* = 4 (Always)
  - *Always, Usually, Sometimes, Never,* convert to 100, 66 2/3, 33 1/3, 0
- For a 0-10 response scale, *a* = 0, *b* = 10
  - Ratings of *10*, *4, 1*, convert to 100, 40, 10

Linear Mean Scoring (1-4): Getting Needed Care

	How often is it easy to get appointments with specialists?	How often is it easy to get needed care, tests, or treatment?
Person 1	Always (4)	Sometimes (2)
Person 2	X	Never (1)
Person 3	Usually (3)	X
Average Score	**3.5**	**1.5**

Composite score = (3.5+1.5)/2 = **2.5**

Conversion to a 0-100 Scale: Getting Needed Care Example

- The 0-100 score Y can be calculated as

$$Y = \frac{(X-a)*100}{(b-a)}$$

$$Y = \frac{(\mathbf{2.5}-1)*100}{(4-1)}$$

$$Y = \frac{(1.5)*100}{3}$$

$$Y = \mathbf{50}$$

Further Examples of Transformation to 0-100

- Mean score on Getting Appointments and Care Quickly = 3.589
  - Transformed score = [(3.589−1)/(4−1)]*100 = 86.30



- Mean score on Rating of Health Plan = 8.859
  - Transformed score = [(8.859−0)/(10−0)]*100 = 88.59

Special Case: Getting Needed Prescription Drugs

- This composite covers 2 topics
  - *How often was it easy to use your plan to get the medicines your doctor prescribed*
  - *Ease of filling prescriptions*
- The first topic is assessed by 1 item. The second topic is assessed by averaging 2 items:
  - *How often was it easy to use your plan to fill a prescription at your local pharmacy*
  - *How often was it easy to use your plan to fill a prescription by mail*

	… local pharmacy	… by mail	Combined item
Person 1	Sometimes (2)	(did not use)	2
Person 2	(did not use)	Always (4)	4
Person 3	Usually (3)	Always (4)	3.5

- The combined pharmacy/mail score is averaged with the first item's score to produce the composite score

Linear Mean Scoring (1-4): Getting Needed Prescription Drugs

	How often was it easy to use your prescription drug plan to get the medicines your doctor prescribed?	Combined pharmacy/mail items
Person 1	Always (4)	2
Person 2	X	4
Person 3	Usually (3)	3.5
Average Score	**3.5**	**3.167**

Composite score = (3.5+3.167)/2 = **3.333**

Conversion to a 0-100 Scale: Getting Needed Prescription Drugs Example

- The 0-100 score Y can be calculated as

$$Y = \frac{(X-a)*100}{(b-a)}$$

$$Y = \frac{(\mathbf{3.333}-1)*100}{(4-1)}$$

$$Y = \frac{(2.333)*100}{3}$$

$$Y = \mathbf{77.77}$$

Special Case: Overview of Scoring of Care Coordination Composite

- 6-item composite is the weighted average of 5 scores:
  - The scores for items 1-4
  - The average of items 5 and 6
- Items 1 – 3, 5, and 6 use *Never; Sometimes; Usually; Always* response options scored 1 – 4
- Item 4 has a different response scale than other items
  - Uses *No*; *Yes, somewhat; Yes, definitely* response options scored 2 – 4
- The possible range of this composite is 1.2 – 4

Initial Scoring of the Care Coordination Composite

	Response Options
Item 1: Personal MD had medical records or other info about care	Never (1) Sometimes (2) Usually (3) Always (4)
Item 2: How often talk about Rx medications	Never (1) Sometimes (2) Usually (3) Always (4)
Item 3: MD informed about care from specialists	Never (1) Sometimes (2) Usually (3) Always (4)
Item 4: Get needed help to manage care	**No (2)** **Yes, somewhat (3)** **Yes, definitely (4)**
Item 5: MD office follow up to give test results	Never (1) Sometimes (2) Usually (3) Always (4)
Item 6: Got test results as soon as needed	Never (1) Sometimes (2) Usually (3) Always (4)

Care Coordination Composite Example: Initial Scoring

	Item 1	Item 2	Item 3	Item 4	Item 5	Item 6	Combined 5&6
Person 1	Usually (3)	Always (4)	Always (4)	No (2)	Never (1)	Never (1)	1
Person 2	Always (4)	Sometimes (2)	X	Yes, definitely (4)	Always (4)	Sometimes (2)	3
Person 3	Sometimes (2)	Usually (3)	Never (1)	X	Sometimes (2)	Never (1)	1.5
Average Score	**3**	**3**	**2.5**	**3**			**1.833**

Care Coordination Composite Example: Creating a Weighted Linear Mean and Rescaling to 0-100

- Composite mean: (3+3+2.5+3+1.833)/5 = 2.667
- This is on a 1.2 to 4 scale, unlike other composites:

  lowest possible = (1+1+1+2+1)/5 = 1.2
- Conversion to a 0-100 scale:

  Y = [(2.667−1.2)/(4−1.2)]*100 = 52.39

Special Case: Scoring the 3-item Customer Service Composite

	Response Options
Item 1: How often customer service gave you information or help as soon as needed	Never (1) Sometimes (2) Usually (3) Always (4)
Item 2: How often customer service staff treated you with courtesy and respect	Never (1) Sometimes (2) Usually (3) Always (4)
Item 3: How often health plan forms easy to fill out	Never (1) Sometimes (2) Usually (3) Always (4)

- Item 3 has a screener: Did your health plan give you any forms to fill out?
- Respondents who answered *No* to the screener are asked to skip item 3 and are assigned *Always* (4) for item 3
- Scoring of the Customer Service composite is otherwise calculated in the standard way, as the average of the 3 items

Customer Service Composite Example: Recoding Item 3

	Item 3 Screener	Item 3 (original)	Item 3 (recoded)
Person 1	No	(skipped)	Always (4)
Person 2	Yes	Always (4)	Always (4)
Person 3	(did not answer)	Usually (3)	Usually (3)

Weighting Part C Measures by Part D Status

- Respondent data for each contract are weighted by the contract's ratio of survey-eligible enrollment to respondents
- Some MA contracts include 1 or more plan benefit packages with a Part D benefit and 1 or more MA-Only plan benefit packages
  - Each such contract has 1 weight for Part D and 1 weight for non-Part D enrollees
  - These weights are the ratio of survey-eligible enrollment to respondents within Part D and non-Part D strata in the contract
  - These weights are necessary to reproduce official scores on Part C measures

Overview of Case-Mix Adjustment

- Some respondent characteristics affect responses but fall outside a contract's control
- CMS adjusts for such respondent characteristics when comparing contracts in preview reports and public reporting
- Case-mix adjustment uses linear regression modeling
- Applied to individual items within composites
  - Not to the composite overall
- Not applied to the immunization item

Case-Mix Adjustors

- Case-mix adjustors include
  - Education level
  - Self-reported general health status
  - Self-reported mental health status
  - Proxy answered the survey for the enrollee
  - Proxy assisted with survey completion but did not answer for the enrollee
  - Dual eligibility*
  - Low-income subsidy but not dual eligibility*
  - Age (calculated as the difference between survey finalization year and year of birth)*
  - Asian (Chinese, Korean, Tagalog, or Vietnamese) language survey completion
- All adjustors are mutually exclusive categories

**CMS administrative data*

3 Components Needed for Contract Case-Mix Adjustment

1. Weighted **contract means** for each case-mix variable
2. Weighted **national means** for each case-mix variable
3. Individual-level model **coefficients** for each case-mix variable

- Vendors have data to calculate the first component
- CMS supplies the second and third components annually on the project website:
  https://www.MA-PDPCAHPS.org/en/scoring-and-star-ratings/

Note: Each of these components is based only on respondents who answered the corresponding CAHPS items

Formula for Case-Mix Adjusted (CMA) Score

- Adjusted Score = Raw Score – Net Adjustment
- Net Adjustment is the sum of a series of products
- Each product is, for a single CMA variable:
  (Contract Mean - National Mean) * Model Coefficient

Reporting of Case-Mix Adjustment

- CMS contractors perform case-mix adjustment
- Case-mix model coefficients are re-estimated each year based on data CMS receives
- Case-mix model coefficients appear each year:
  - In contract reports
  - Medicare Part C & D Star Ratings Technical Notes
  - On the MA & PDP CAHPS project website: https://www.MA-PDPCAHPS.org/en/scoring-and-star-ratings/

Case-Mix Variable Example: Age Range

- Age ranges for Contract A
  - Create indicator (0 or 1) age variables for each of the 5 age range groups (age 70-74 is the reference category):

Survey ID	Age	Age 64 and under	Age 65-69	Age 75-79	Age 80-84	Age 85 and older
1	65	0	1	0	0	0
2	57	1	0	0	0	0
3	82	0	0	0	1	0
4	71	0	0	0	0	0
5	88	0	0	0	0	1
6	36	1	0	0	0	0
7	66	0	1	0	0	0

Calculating the Contract Mean of Age Range

For Contract A, assuming no applicable Part D weights for simplicity, calculate mean of each of the 5 age range variables

$\mathbf{H_{\leq 64}}$ = (0+1+0+0+0+1+0) / 7 = 2/7 = **0.29**

$\mathbf{H_{65\text{-}69}}$ = (1+0+0+0+0+0+1) / 7 = 2/7 = **0.29**

$\mathbf{H_{75\text{-}79}}$ = (0+0+0+0+0+0+0) / 7 = 0/7 = **0.00**

$\mathbf{H_{80\text{-}84}}$ = (0+0+1+0+0+0+0) / 7 = 1/7 = **0.14**

$\mathbf{H_{85+}}$ = (0+0+0+0+1+0+0) / 7 = 1/7 = **0.14**

Significance Testing

- Significance testing is used to compare a contract's mean scores with national mean scores (2-sided t-test)
  - In contract reports
    - Differences from national mean at the $p<0.05$ level are identified with up or down arrows
    - Scores are not reported if an item or composite has fewer than 11 observations
    - Unrounded scores are used in significance testing
- Significance testing and reliability may affect star assignments

Calculation of Interunit Reliability

- Interunit reliability (related to Spearman-Brown reliability) is calculated for each contract's score for each measure and is used in star assignment
  - This 0-to-1 measure indicates how well the score for a single contract is measured and how well it distinguishes its performance from that of other contracts
  - $R = 1 - V/(V+t^2)$
    - V is the estimated sampling variance of the contract mean score
    - t^2 is the between-contract variance of the mean for that measure
    - V and t^2 are estimated from a linear random-effects model
  - Users obtain V by applying the CAHPS Macro to their own data
  - t^2 is available on the project website at https://MA-PDPCAHPS.org/globalassets/ma-pdp/scoring-and-star-ratings/2026/2026_variances_reported_measures.pdf

Note: Hereafter "reliability" refers to interunit or contract reliability, not other forms of reliability

Factors Affecting Reliability

- Reliability is affected by a number of factors, including:
  - The number of a contract's respondents who answer an item
  - The variability of responses within the contract
  - The amount by which contracts differ from each other nationally on that measure
- Larger sample sizes are likely to increase reliability but may not increase Star Ratings
  - Larger sample sizes may result in CAHPS scores that are higher or lower
  - Higher reliability may or may not change star assignments

Item-Level Reliability Differs From Composite-Level Reliability

- The reliabilities of individual items within composites are reported to contracts for **quality improvement purposes only**
  - Low reliability items, by themselves, may be less useful for quality improvement
  - Low reliability items do not necessarily result in a low reliability composite
- The reliability of a composite measure cannot be obtained by averaging the reliability of its constituent items
  - Measurement error decreases with multiple measurements (here multiple items from the same respondent in each composite), so that the measurement error for a composite averaging multiple items tends to be less than the average measurement error for individual items
  - The total number of respondents providing information toward the composite might be greater than the number responding to any 1 item
  - A composite often has higher reliability than most or even all of its constituent items

Non-reportable, Very-low Reliability Scores, and Low Reliability Scores

- Non-reportable scores
  - Are based on fewer than 11 respondents
  - Are not reported to contracts
  - Do not affect Star Ratings
- Very-low reliability scores
  - Are based on at least 11 respondents
  - Have reliability <0.60
  - Do not affect Star Ratings
- Low reliability scores
  - Are based on at least 11 respondents
  - Have reliability ≥0.60 but <0.75 and also fall in the lowest 12% of contracts ordered by reliability
  - Are publicly reported and may affect Star Ratings

When scores have either fewer than 11 respondents or very-low reliability, the label "very-low reliability" is used in contract reports

CAHPS Star Assignment Rules

	Criteria for Assigning Star Ratings
1	A contract is assigned 1 star if both criteria (a) and (b) are met plus at least 1 of criteria (c) and (d): (a) its average CAHPS measure score is lower than the 15th percentile; AND (b) its average CAHPS measure score is statistically significantly lower than the national average CAHPS measure score; (c) the reliability is not low; OR (d) its average CAHPS measure score is more than 1 standard error (SE) below the 15th percentile.
2	A contract is assigned 2 stars if it does not meet the 1-star criteria and meets at least 1 of these 3 criteria: (a) its average CAHPS measure score is lower than the 30th percentile and the measure does not have low reliability; OR (b) its average CAHPS measure score is lower than the 15th percentile and the measure has low reliability; OR (c) its average CAHPS measure score is statistically significantly lower than the national average CAHPS measure score and below the 60th percentile.
3	A contract is assigned 3 stars if it meets at least 1 of these 3 criteria: (a) its average CAHPS measure score is at or above the 30th percentile and lower than the 60th percentile, AND it is not statistically significantly different from the national average CAHPS measure score; OR (b) its average CAHPS measure score is at or above the 15th percentile and lower than the 30th percentile, AND the reliability is low, AND the score is not statistically significantly lower than the national average CAHPS measure score; OR (c) its average CAHPS measure score is at or above the 60th percentile and lower than the 80th percentile, AND the reliability is low, AND the score is not statistically significantly higher than the national average CAHPS measure score.
4	A contract is assigned 4 stars if it does not meet the 5-star criteria and meets at least 1 of these 3 criteria: (a) its average CAHPS measure score is at or above the 60th percentile and the measure does not have low reliability; OR (b) its average CAHPS measure score is at or above the 80th percentile and the measure has low reliability; OR (c) its average CAHPS measure score is statistically significantly higher than the national average CAHPS measure score and above the 30th percentile.
5	A contract is assigned 5 stars if both criteria (a) and (b) are met plus at least 1 of criteria (c) and (d): (a) its average CAHPS measure score is at or above the 80th percentile; AND (b) its average CAHPS measure score is statistically significantly higher than the national average CAHPS measure score; (c) the reliability is not low; OR (d) its average CAHPS measure score is more than 1 standard error (SE) above the 80th percentile.

CAHPS Star Assignment Rules: Illustration*

Mean Score	Base Group	Signif. below avg., low reliability	Signif. below avg., not low reliability	Not signif. diff. from avg., low reliability	Not signif. diff. from avg., not low reliability	Signif. above avg., low reliability	Signif. above avg., not low reliability
< 15th percentile by > 1 SE	1	1	1	2	2	2	2
< 15th percentile by ≤ 1 SE		2	1	2	2	2	2
≥ 15th to < 30th percentile	2	2	2	3	2	3	2
≥ 30th to < 60th percentile	3	2	2	3	3	4	4
≥ 60th to < 80th percentile	4	3	4	3	4	4	4
≥ 80th percentile by ≤ 1 SE	5	4	4	4	4	4	5
≥ 80th percentile by > 1 SE		4	4	4	4	5	5

*If reliability is very low (<0.60), the contract does not receive a Star Rating. Low reliability scores are defined as those with at least 11 respondents and reliability ≥0.60 but <0.75 and also in the lowest 12% of contracts ordered by reliability. The SE is considered when the measure score is below the 15th percentile (in base group 1), significantly below average, and has low reliability: in this case, 1 star is assigned if and only if the measure score is at least 1 SE below the unrounded base group 1/2 cut point. Similarly, the SE is considered when the measure score is at or above the 80th percentile (in base group 5), significantly above average, and has low reliability: in this case, 5 stars are assigned if and only if the measure score is at least 1 SE above the unrounded base group 4/5 cut point.

Percentile Cut Points for Base Groups

- Defined by current-year distribution of contract means
- Percentile cut points are rounded to nearest integer on the 0-100 reporting scale
  - These cut points appear on the MA & PDP CAHPS website: https://www.ma-pdpcahps.org/en/scoring-and-star-ratings/
- Each base group includes those contracts whose rounded mean score is at or above the lower percentile limit and below the upper percentile limit
- In contrast, unrounded scores are used in statistical testing

Overview of Survey Vendor Analysis of MA & PDP CAHPS Survey Data

- CMS-calculated results are official results
- Survey vendors may conduct their own analyses of items for quality improvement purposes
- Small-cell data restrictions
- Other issues related to DUAs
- Resources to support data analysis and scoring

CMS-Calculated Results are Official Results

- CMS will continue to provide reports to MA and PDP contracts
- CMS-calculated results include data from completed and partially completed surveys

Survey Vendors May Conduct Their Own Analyses of Items for Quality Improvement Purposes *(1 of 2)*

- Cell sizes must not be less than 11
- Intervention or follow-up with individuals based on their responses is not permitted
- Survey vendors must not provide individual-level data to contracts or any data that permit the identification of individual respondents, for example:
  - May not provide contracts with names of enrollees selected for the survey
  - May not provide contracts their full enrollees file with names of sampled enrollees removed
- Survey vendors must not use any MA & PDP CAHPS survey data, whether preliminary or final results, for any purpose beyond client reports for quality improvement
  - Survey results may not be published on public facing websites or in marketing materials
  - References to the MA & PDP CAHPS Survey in vendor marketing materials should be limited to the vendor's role in data collection services and may not state or imply that an organization's CAHPS survey scores or Star Ratings will improve by contracting for such services

Survey Vendors May Conduct Their Own Analyses of Items for Quality Improvement Purposes *(2 of 2)*

- To prevent discrepancies, vendors should be certain to verify their:
  - Correct application of forward cleaning rules
  - Correct determination of eligible surveys
  - Correct application of case-mix adjustment
  - Correct scoring of all measures, including those with special handling
- All reports provided to contracts must include a statement on each page that vendor results are unofficial and for internal/QI purposes
  - The statement must be printed in a minimum 14-point font size
  - Vendors should communicate that top-box scoring will not match official linear-mean scoring

Small-Cell Data Restrictions

- No data involving cells, including cross-tabulated cells, with sample sizes less than 11 may be shared with contracts under any circumstances
  - This requirement is detailed in the DUA your organization executed with CMS
- Failure to adhere to the CMS DUA violates requirements of the Privacy Act, the Privacy Rule, and CMS data release policies, and may be considered a breach or violation of data safeguarding (visit cms.gov/privacy to learn more about CMS privacy policies and data safeguarding)
- One may not display counts of 1-10 or display any numbers that allow the exact inference of a count of 1-10

Other Issues Related to DUAs

- The DUA signed by each survey vendor restricts the use of CMS data and any additional data items that a survey vendor may append to the sample file or enrollee survey data
- No data may be appended to the sample files or enrollee survey data without advance written permission of CMS
  - See Appendix Q of the QAP&TS V17.0 for guidance on appending data
- Survey vendors are responsible for keeping their DUAs up to date

Resources to Support Data Analysis and Scoring

- The MA & PDP CAHPS website contains resources to support data analysis and scoring
  - Detailed instructions for case-mix adjustment, including a list of case-mix variables, case-mix coefficients, and means of case-mix variables
  - Between-contract variances, which are used for calculating reliability
  - Rounded cut points, which are used in determining base groups for Star Ratings
  - Information on scoring of composite measures
  - Information on weighting of measures
  - CAHPS scores by state
- Additional resources are available in the Star Ratings Technical Notes: https://www.cms.gov/medicare/health-drug-plans/part-c-d-performance-data

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Break

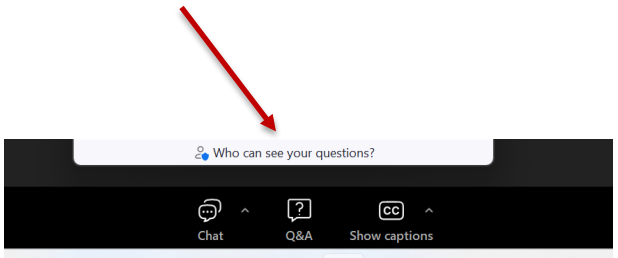


Questions?



- To submit a question, please select the Q&A icon.
- This opens the Q&A panel and allows you to type your question into the space provided.

Q&A Button



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Data Coding and Data Preparation



Objectives

- File Encryption
- File Specifications
- Decision Rules and Coding Guidelines
- Interim Data File Submissions
- Survey Disposition Codes
- Survey Completion Guidelines

File Encryption

- Data files must be encrypted prior to data submission
- Survey vendors are required to use PGP Public Key Encryption
  - Data Coordination Team provides survey vendors with a PGP Public Key to encrypt survey data files prior to submission by placing a copy of the Public Key in each vendor's folder
  - Survey vendors must create a Public Key to receive sample files and place a copy of the Public Key in their folder
  - Data Coordination Team encrypts each survey vendor's sample file using the PGP Public Key provided by the vendor
  - Data files submitted by survey vendors that are not encrypted will be rejected and must be resubmitted

File Specifications *(1 of 5)*

- Survey vendors may use 1 of 2 file formats to submit survey data files: 8-bit Unicode Transformation Format (UTF-8) or 16-bit Unicode Transformation Format (UTF-16)
- Survey vendors will submit all contracts' sampled member records in 1 file
- Survey vendors are required to submit a record for all sampled members included in the original sample file received by the survey vendor for a contract
- No substitutions for valid data element values are acceptable

File Specifications *(2 of 5)*

- Survey data will contain 1 record for each sample member
- Each record will consist of 2 parts:
  - Survey Status Section (Tracking) – Must be submitted for all enrollees selected, including enrollees found to be ineligible
  - Survey Data Section

File Specifications *(3 of 5)*

- Survey Status Section (Tracking) contains:
  - Unique Respondent Finder Number for each sampled member
  - Survey Type
  - Contract Number
  - Final Disposition Code
  - Survey Completion Mode (web, mail, or CATI)
  - Survey Language
  - Survey Mailing field
    - See Appendix H of the QAP&TS V17.0 for all the fields contained in the Survey Status Section
- Each field of the Survey Status Section requires an entry for a valid data submission. Use *8 – Not Applicable* if appropriate (e.g., survey mode for a mail survey that was not returned, the web survey was not initiated, AND no telephone number was obtained).

File Specifications *(4 of 5)*

- Survey Data Section
  - Contains survey responses from every respondent who initiates a web survey, returns a mail survey or initiates a CATI session
  - All response fields must have a valid value
  - Valid values can include *M – Missing* or *88 – Not Applicable*
  - Include only survey data where the Final Survey Disposition code is *10 – Completed survey, 31 – Partially completed survey*, or *34 – Incomplete or blank survey returned*
    - Leave blank for all others
    - If an enrollee returns 1 web and 1 mail survey, or 2 mail surveys with responses, and both surveys meet the criteria for a complete (code 10) or both meet the criteria for a partial complete (code 31), submit the survey with the greatest number of completed questions
  - Survey vendors should submit only data from MA & PDP CAHPS Survey questions (data from supplemental items should not be submitted)
  - Format of the records in this section of the file will vary depending on the type of questionnaire administered
    - Survey results with fewer data fields should be left blank beyond the last valid response

File Specifications *(5 of 5)*

- Survey Data Section: Coding multi-mark questions (e.g., race) "Please choose one or more"
  - For the web and mail surveys, enter all response categories selected
    - When 1 or more categories are marked and some categories are left blank, code the categories left blank as *2* for *No*
    - If no categories are selected, enter *M – Missing* for all categories
  - For CATI administration, when the respondent answers *Yes* to 1 category, e.g., *white*, and refuses to answer the remaining response options, code this question 99, 99, 99, 99, 99, 99, 1
  - For CATI administration, when the respondent answers *Yes* to 1 category, e.g., *white*, and answers *No* to all remaining response options, code this question 2, 2, 2, 2, 2, 2, 1

Decision Rules and Coding Guidelines *(1 of 10)*

Decision rules for mail survey data capture

- If a mark falls between 2 response options but is obviously closer to 1 than the other, select the response option to which the mark is closest
- In this example the response should be coded as *2 – Sometimes*

Example 1 (Mail)

☐ **Never**

X ☐ **Sometimes**

☐ **Usually**

☐ **Always**

Code as:
2 - Sometimes

Decision Rules and Coding Guidelines *(2 of 10)*

Decision rules for mail survey data capture (cont'd)

- If a mark falls equidistant between 2 response options, code the value of the item as *M – Missing*
  - Do not impute

Example 2 (Mail)

☐ **Never**

x

☐ **Sometimes**

☐ **Usually**

☐ **Always**

Code as:
M - Missing

Decision Rules and Coding Guidelines *(3 of 10)*

Decision rules for mail survey data capture (cont'd)

- If a value is missing, code it as *M – Missing*
  - Do not impute

Note: dependent questions appropriately skipped should be coded as 88 – Not Applicable

Example 3 (Mail)

☐ **Never**

☐ **Sometimes**

☐ **Usually**

☐ **Always**

Code as:
M - Missing

Decision Rules and Coding Guidelines *(4 of 10)*

Decision rules for mail survey data capture (cont'd)

- When more than 1 response option is marked, code the value as *M – Missing*
  - Do not impute
- **Exception:** Questions, such as race, that have instructions to "mark one or more" may have multiple responses

Example 4 (Mail)

☒ **Never**

☒ **Sometimes**

☐ **Usually**

☐ **Always**

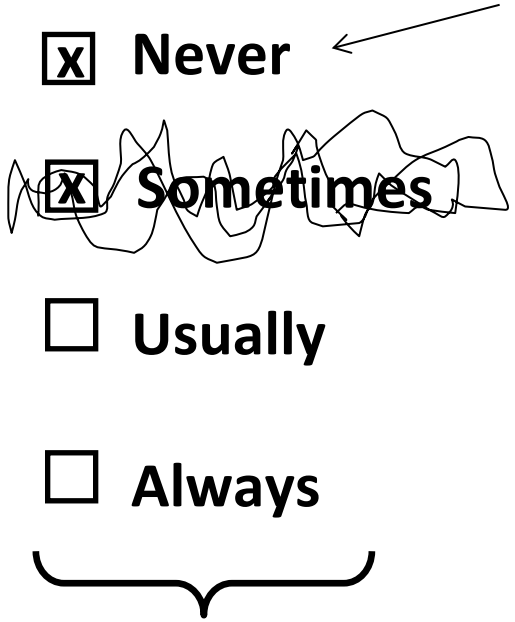
Code as:
M - Missing

Decision Rules and Coding Guidelines *(5 of 10)*

Decision rules for mail survey data capture (cont'd)

- When more than 1 response option is marked and the enrollee's intent is obvious, select the obvious response option
- In this example the response should be coded as *1 – Never*

Example 5 (Mail)

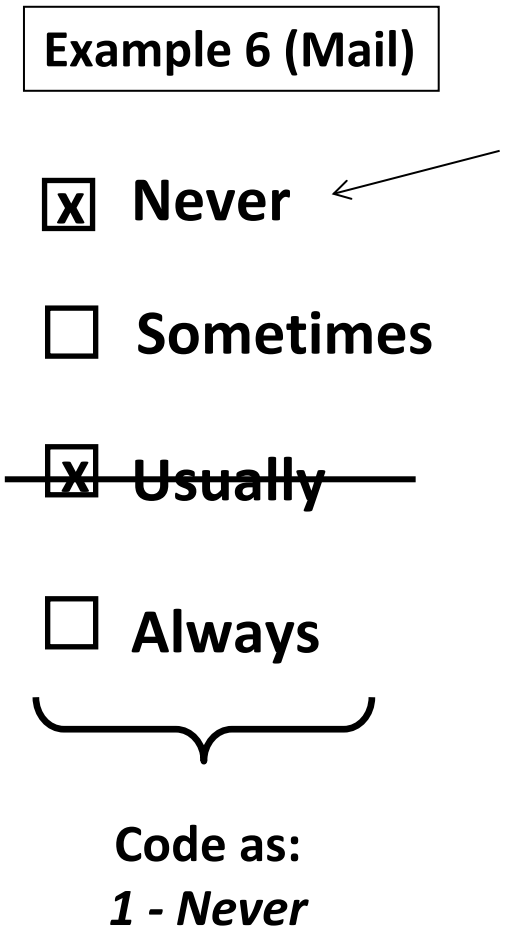


Code as:
1 - Never

Decision Rules and Coding Guidelines *(6 of 10)*

Decision rules for mail survey data capture (cont'd)

- When more than 1 response option is marked and the enrollee's intent is obvious, select the obvious response option
- In this example the response should be coded as *1 – Never*



Decision Rules and Coding Guidelines *(7 of 10)*

Decision rules for mail survey data capture (cont'd)

- For MA-Only Q40, MA-PD Q47, PDP Q12: If a response is written into the other language field but the response option *Some other language* is not marked, the survey vendor's data capture system or data validation process should mark or select *Some other language*
- In this example the response should be coded as *7 – Some other language*

Example 7 (Mail)

What language do you mainly speak at home?

- ☐ **English**
- ☐ **Spanish**
- ☐ **Chinese**
- ☐ **Korean**
- ☐ **Tagalog**
- ☐ **Vietnamese**
- ☐ **Some other language**

↓

Please print: Russian

Code as:
7 – Some other language

Decision Rules and Coding Guidelines *(8 of 10)*

- For web survey skip patterns
  - In instances where the enrollee does not answer a screener question and the resulting associated dependent questions, the screener question that was skipped should be coded in the data file as *99 – Refused* and the resulting associated dependent questions should be coded as *88 – Not Applicable*
  - Dependent questions appropriately skipped in accordance with the web survey specification in Appendix M should be coded as *88 – Not Applicable* in the data file

Decision Rules and Coding Guidelines *(9 of 10)*

- For mail questionnaire skip patterns
  - If the screener is blank, code as *M – Missing* and code any unanswered dependent questions as *M – Missing*
  - Survey vendors must not "clean" or correct skip pattern errors if the enrollee made an error in the skip pattern, but dependent questions are coded with the response provided by the enrollee in the data submission files
  - Dependent questions appropriately skipped are coded *88 – Not Applicable*

Decision Rules and Coding Guidelines *(10 of 10)*

- For CATI questionnaire skip patterns
  - If the enrollee answers *I don't know* or refuses to answer the screener question, code response options of *98 – Don't Know* or *99 – Refused* respectively
  - When answer options of *98 – Don't Know* or *99 – Refused* are used for coding screener questions, the skip pattern should be programmed into the CATI system. The resulting dependent questions are coded as *88 – Not Applicable*.
  - Appropriately skipped dependent questions are coded *88 – Not Applicable*
  - When a respondent breaks off the interview and subsequent questions are not asked, then *M – Missing* would be used to code all unanswered questions

Interim Data File Submission

- For enrollee records where no mail survey was returned, the web survey was not initiated, and no telephone number was obtained, MODE for data submission is coded as *8 – Not Applicable*
- When the survey vendor has completed a survey or exhausted all attempts to do so, use 1 of the Final Survey Disposition codes in the file that is submitted
- When submitting the first and second interim data submission files, if any attempt to contact an enrollee is planned (i.e., the survey vendor has not completed work on the enrollee case), use code *33 – No Response Collected*
- When all attempts to contact the enrollee have been exhausted and the result is a non-deliverable mail piece and no valid (working) telephone number was found, use code *35 – Bad Address and Telephone Number*

Survey Disposition Codes *(1 of 4)*

- Survey disposition codes are used to track and report whether an enrollee has completed a questionnaire or requires further follow-up
  - Interim codes indicate the status during the data collection period
  - Final codes indicate the final outcome at the end of data collection
- Survey vendors are required to assign and maintain up-to-date survey disposition codes for each enrollee in the sample
- Interim disposition codes with a crosswalk to final disposition codes must be included in the survey vendor's Quality Assurance Plan (QAP)
- After data collection is completed, assign each sampled enrollee a final survey disposition code

Survey Disposition Codes *(2 of 4)*

- Interim Disposition Codes are for internal purposes only and should not be reported
- Only Final Survey Disposition Codes are provided to CMS
- Data files submitted to CMS must contain a Final Survey Disposition Code for each enrollee in the file
- In cases when 2 final disposition codes may be equally applicable, use the disposition code with the lowest number
  - Example 1: Blank survey returned (code 34) and enrollee subsequently identified as physically unable to respond (code 24): final reported disposition should be 24
  - Example 2: Partial complete survey (code 31) returned after record went to CATI, and CATI attempt resulted in language barrier (code 22): final reported disposition should be 22
  - *Exception: Enrollees known to be institutionalized are not eligible for sample selection and therefore, a disposition of 11-institutionalized is always the final disposition code when 2 disposition codes may be equally applicable.*

Survey Disposition Codes *(3 of 4)*

Final Disposition	Code	Description	Criteria
Completed survey	10	A complete includes response items answered for at least 1 reportable measure and ≥50% of the ATA items	A complete includes response items answered for at least 1 reportable measure and greater than or equal to 50% of the ATA items. Appropriately skipped questions do not count against the required 50 percent. There must be no evidence that the enrollee is ineligible.
Partially completed survey	31	A partial complete includes response items answered for at least 1 reportable measure and <50% of the ATA items	A partial complete includes response items answered for at least 1 reportable measure and less than 50% of the ATA items. There must be no evidence that the enrollee is ineligible.
Institutionalized	11	Institutionalized	Institutionalized or residing in a group home or institution (hospice, nursing home, etc.)
Deceased	20	Deceased	Deceased at the time of survey administration
Language barrier	22	Unable to complete the survey in the available languages	Unable to complete the survey in English, Spanish, Chinese, Korean, Tagalog, or Vietnamese
Mentally or physically unable to respond	24	Mentally or physically unable to respond to the survey via web, mail, or telephone	Mentally or physically unable to respond to the survey via web, mail, or telephone

Survey Disposition Codes *(4 of 4)*

Final Disposition	Code	Description	Criteria
Refusal	32	Refused to complete the survey	Refused to complete the survey
Non-response	33	No response collected	No response collected by web, mail, or telephone when there is no indication of bad mailing address and telephone number
Incomplete or blank survey returned	**34**	Responded by mail or initiated web or CATI, no reportable items answered	Responded by mail or initiated web or CATI, with no reportable items answered. There must be no evidence that the enrollee is ineligible.
Bad address and Bad telephone number	35	Unable to obtain a valid mailing address and telephone number for the enrollee	Unable to obtain a valid mailing address and telephone number
Excluded from survey	40	Was excluded from the survey process or enrollee appears on either the vendor's or contract's "Do Not Survey" list and data collection has not been initiated	Enrollee is ineligible (see Sampling Section in this manual) or enrollee appears on either the vendor's or contract's "Do Not Survey" list and data collection has not been initiated

Survey Completion Guidelines *(1 of 2)*

- A completed questionnaire includes response items answered for at least 1 reportable measure and *greater than or equal to 50 percent* (≥50%) of the applicable to all (ATA) items
- A partially completed questionnaire includes response items answered for at least 1 reportable measure and *less than 50 percent* (<50%) of the ATA items
- An incomplete questionnaire includes no responses for any reportable measure
  - Follow-up telephone attempts unsuccessful, assign *34 – Incomplete or blank survey returned*

Survey Completion Guidelines *(2 of 2)*

- Calculating percent complete
  - Each multi-answer question contributes only 1 item to the total number of questions for ATA items no matter how many responses are chosen. Examples include:
    - The "race" question (MA-Only, MA-PD, and PDP)
    - The "Dr. told you that you had" question (MA-Only, MA-PD, and PDP)
- When counting reportable measures, responses to dependent questions that should have been skipped are not counted toward the count of reportable items or ATA
  - When a question response option is *98 – Don't Know* or *99 – Refused*, the response is treated as though it is a missing answer and not counted toward the "Reportable Measure" or "Survey Item Applicable to All Respondents"
  - A screener question left blank does not trigger a skip so subsequent responses to dependent questions should be included in count of reportable items

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Data Submission



Objectives

- Data Submission Process
- Data File Submission Dates
- Survey Vendor Authorization Process
- Preparation for Data Submission
- File Encryption
- Overview of the MA & PDP CAHPS Survey Data Warehouse
- Guide to Data Submission Process
- Data Auditing and Validation Checks
- Importance of Interim Data Submissions
- Data Submission Notification
- Technical Support

Data Submission Process

- MA & PDP CAHPS Data Coordination Team developed a secure Data Warehouse hosted by RAND
- The Data Warehouse will operate as a secure file transfer system that survey vendors will use to both retrieve sample files and submit survey data files to CMS
- The Data Coordination Team will conduct a test of the Data Warehouse with each vendor prior to delivery of sample
- Use of the Data Warehouse does not require installation of special software or a licensing fee for survey vendors
- Encrypt files submitted to the Data Warehouse using PGP Public Key encryption

Data File Submission Dates

- Fully corrected interim survey data file with returned web, mail, and inbound survey data must be submitted by survey vendors by 8:59 PM Eastern Time on April 22, 2027
- Fully corrected interim survey data file with web, mail, and phone survey data must be submitted by survey vendors by 8:59 PM Eastern Time on May 6, 2027
  - Survey vendors are encouraged to submit interim files early (begin April 20 for first interim data submission and May 4 for second interim data submission) to allow enough time to resubmit if necessary to correct any data file errors/problems and still meet the deadline
  - If survey vendors submit more than once, files must include all records in the re-submission
- Final survey data file must be submitted by survey vendors by 8:59 PM Eastern Time on June 10, 2027
- It is the responsibility of the survey vendor to ensure that data are submitted on time and fully corrected

Survey Vendor Authorization Process

- MA & PDP contracts must complete the survey vendor authorization process to authorize survey vendors to collect and submit data on their behalf by December 3, 2026
- MA & PDP Data Coordination Team will confirm authenticity of the contract entity verifying contact information at both the health plan and survey vendor level
- Survey vendor will be contacted by the MA & PDP Data Coordination Team and provided an account for the MA & PDP CAHPS Survey Data Warehouse
- After completion of the survey vendor authorization process, no further action is required by the contract to notify CMS of their survey vendor selection
- RAND communicates to CMS which vendor each contract has authorized to administer the MA & PDP CAHPS Survey on their behalf

Preparation for Data Submission

- Survey vendors must:
  - Designate a Primary Data Administrator, Back-up Data Administrator, and Project Manager
  - Submit a Vendor Access to MA & PDP CAHPS Data Warehouse Form with the MA & PDP CAHPS Data Coordination Team for Primary Data Administrator, Back-up Data Administrator, and Project Manager
  - Notify MA & PDP CAHPS Data Coordination Team of any personnel changes to the survey vendor's Primary or Back-up Data Administrator or Project Manager role

File Encryption

- Sample files for survey vendors will be encrypted using PGP Public Key encryption (www.broadcom.com/products/cyber-security/information-protection/encryption) prior to submitting files to the MA & PDP CAHPS Survey Data Warehouse
- Survey vendor's Data Administrator must create a Public Key that the MA & PDP CAHPS Data Coordination Team will use to encrypt vendor sample files
  - All vendors must communicate the Public Key by placing a copy of the Public Key in their folder
- MA & PDP CAHPS Data Coordination Team will provide the survey vendors with a Public Key to encrypt the data files submitted to the Data Warehouse and the Data Warehouse to receive survey data files
  - The Public Key will be communicated to all survey vendors by placing a copy of the Public Key in their folder

Overview of the MA & PDP CAHPS Survey Data Warehouse *(1 of 2)*

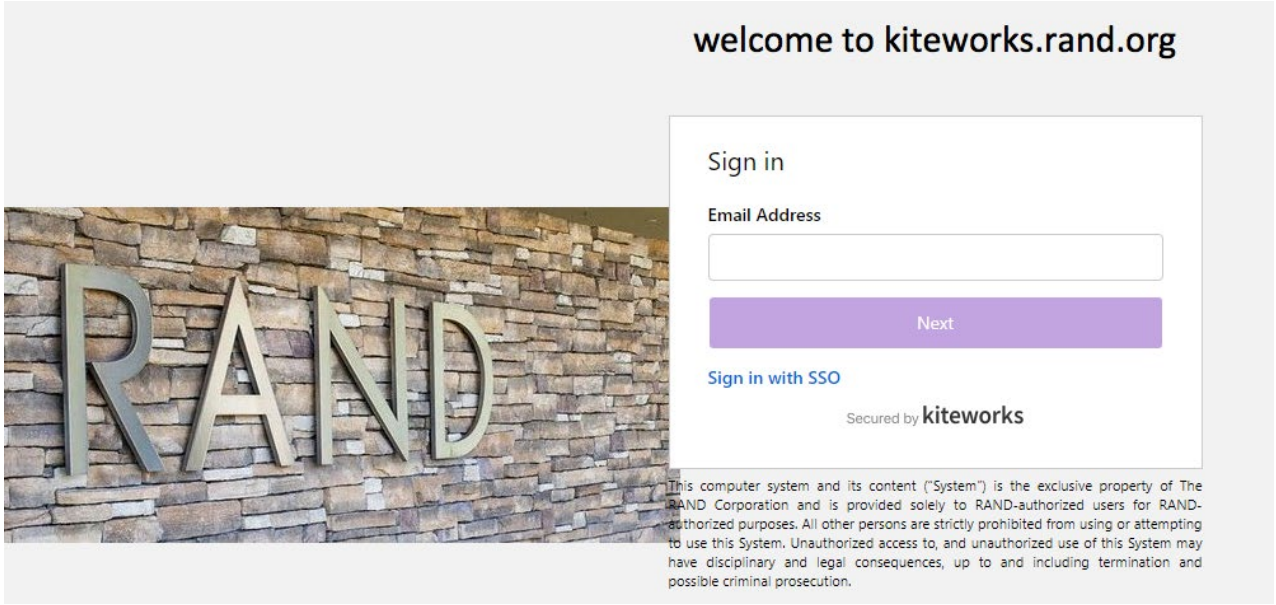
- Available via an Internet browser
- Hosted on RAND's website
- Survey vendor's folder will contain controls for submitting survey data files and for downloading sample file and/or other project documentation
- Survey vendors should submit all records for all contracts in a single file

Overview of the MA & PDP CAHPS Survey Data Warehouse *(2 of 2)*

- All submitted data files that are not encrypted (do not have .pgp extension) or do not otherwise comply with the established naming standards are deleted without further processing
  - This applies to files that do not follow naming conventions as well as those that are not encrypted
- After each data submission, survey vendor receives email letting them know that the file was/was not successfully submitted
  - If file is not successfully submitted, it will not be processed and will need to be resubmitted correctly

Guide to Data Submission Process *(1 of 6)*

- Location for MA & PDP CAHPS Data Warehouse
  - The MA & PDP CAHPS Data Warehouse URL: https://kiteworks.rand.org
- Accessing the Data Warehouse
  - Enter or click on the URL above and you will be directed to the login page:



  - Appearance may differ depending on the browser

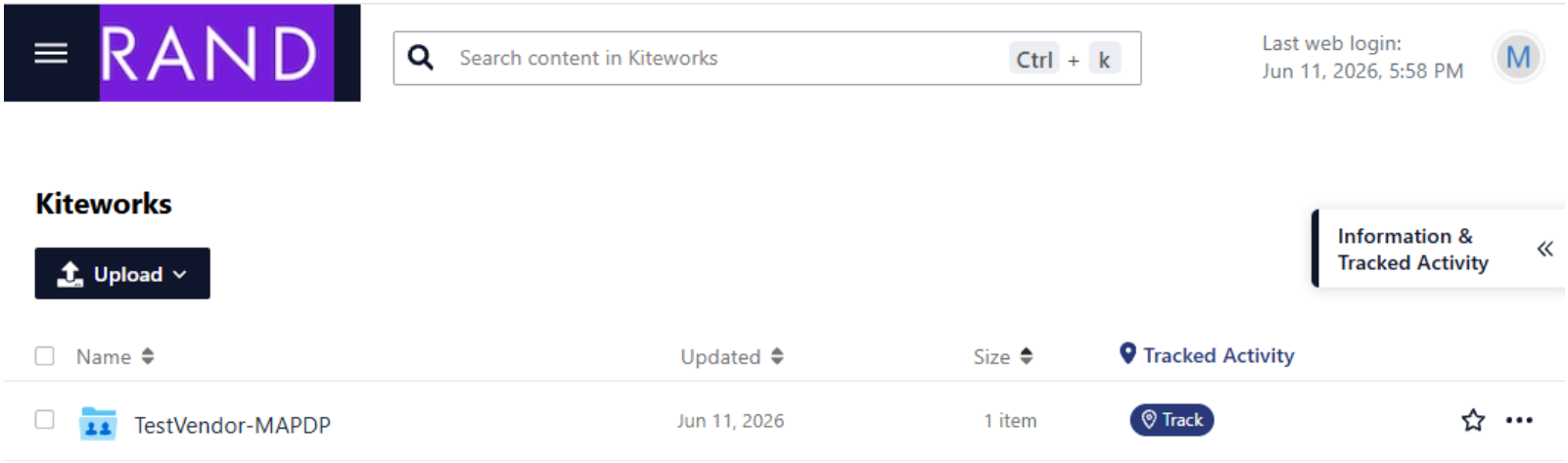
Guide to Data Submission Process *(2 of 6)*

- Enter your email address, click the Next button, then enter your password
  - If you are using the MA & PDP CAHPS Data Warehouse for the first time, you will be prompted to create a password
  - If you have logged into the warehouse previously, use your existing password. Security policy required periodic password resets. You may be prompted to reset your password.

  Note: If you've forgotten your password, click on "Forgot password?" to generate an email containing a link to reset your password
- If you need to create or reset your password, it must contain:
  - At least 8 character(s)
  - At least 1 number(s)
  - At least 1 lower-case letter(s)
  - At least 1 upper-case letter(s)
  - At least 1 special character(s)
- Logins and passwords are person-specific. You may not share your login and password with others within your organization and you should not access the MA & PDP CAHPS Data Warehouse using someone else's login and password.

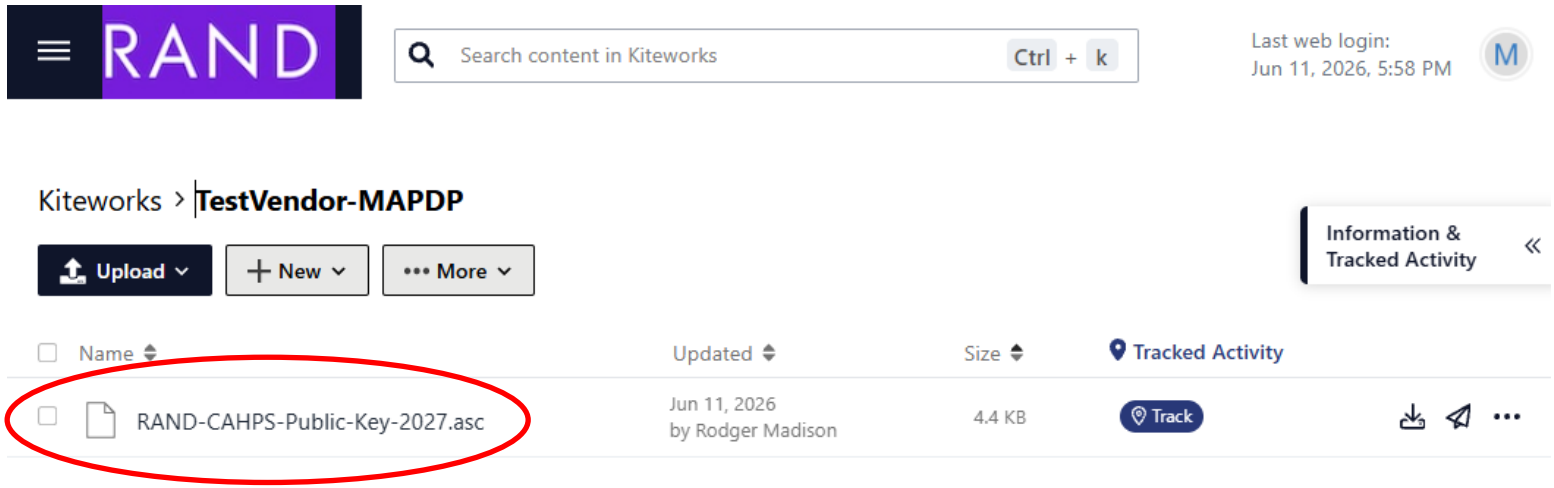
Guide to Data Submission Process *(3 of 6)*

- Using the Site
  - Once you log in, you will be transferred to the kiteworks Files page. From kiteworks Files, you can access your secure folder within the MA & PDP CAHPS Data Warehouse.



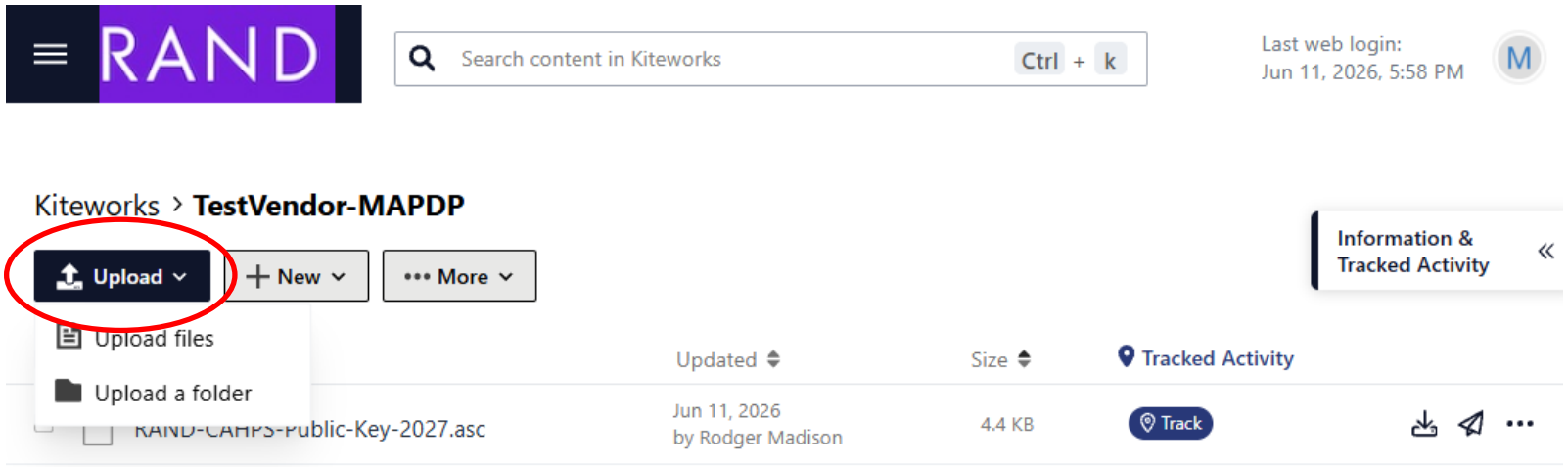
Guide to Data Submission Process *(4 of 6)*

- Click on the MAPDP folder to open the warehouse and enable the Actions button in the top left hand corner. Note that the MAPDP folder will contain RAND's public encryption key.



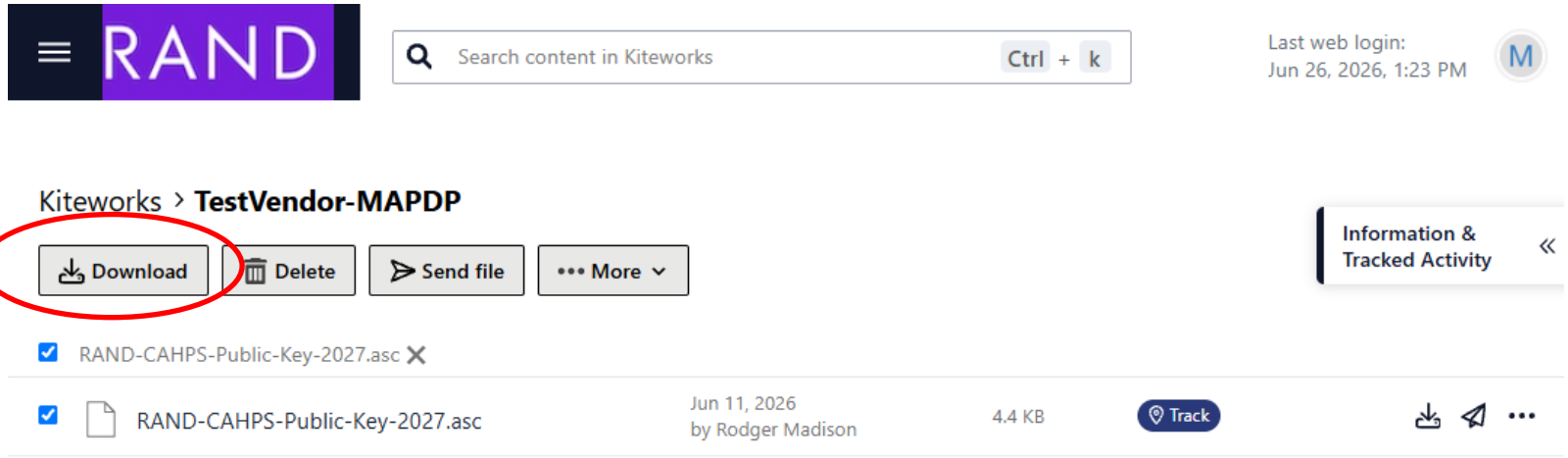
Guide to Data Submission Process *(5 of 6)*

- Uploading Files
  - Click on the Actions button to bring up the Actions menu and select “Upload” to submit your 2027 public key to the data warehouse
  - Use the Choose files button to start the file submission process



Guide to Data Submission Process *(6 of 6)*

- Downloading Files
  - Select on the file you want to retrieve from the data warehouse (in this example, RAND's public key), and select "Download" from the Actions menu



Data Auditing and Validation Checks

- MA & PDP CAHPS Data Coordination Team will audit interim and final data files as they are submitted for compliance with file layout specifications
- Data audit includes:
  - Checking for .pgp file extension
  - Appropriate character set, plain UTF-8 or UTF-16
  - Logical record lengths and naming conventions
  - Presence of required data fields
  - Range checks
  - Verification of coding of Survey Disposition Code

Importance of Interim Data Submissions

- Survey vendors are expected to submit a corrected copy of the interim and final data files
  - CMS analysis begins with the first interim data submission
  - The first interim data submission must include all returned web, mail, and inbound CATI surveys received up to 3 days prior to the opening of the data submission window
  - The second interim data submission must include all returned web, mail, inbound, and outbound CATI surveys received up to 3 days prior to the opening of the data submission window
  - Interim data are carefully analyzed by CMS to ensure data quality and to allow early identification of issues that may affect contract Star Ratings

Data Submission Notification *(1 of 3)*

- Survey vendor (Data Administrator, Back-up Data Administrator, and Project Manager) will receive 2 email notifications for each data submission
- First (automated) email contains notification that file was received
- Second email is sent after audit checks
  - Indicates if file successfully passed checks
  - Will go out no later than 8:00 PM Eastern Time on the next business day after submission

Data Submission Notification *(2 of 3)*

- If file fails any audit checks, email will:
  - Instruct survey vendors that they must submit data files again
  - Contain full detail of the audit check report including a list of involved records
- If file passes checks, email will:
  - Say that no further action is necessary
  - Provide a summary of file contents for verification by the vendor

Data Submission Notification *(3 of 3)*

- Survey vendors are responsible for submitting corrected data file by deadline for submission
  - First interim submission due date: 8:59 PM Eastern Time on April 22, 2027
  - Second interim submission due date: 8:59 PM Eastern Time on May 6, 2027
  - Final due date: 8:59 PM Eastern Time on June 10, 2027
- Final data files not received and accepted prior to 8:59 PM Eastern Time on the deadline date will result in the contract receiving 1 star for each of the CAHPS measures used in Star Ratings and for Quality Bonus Payments

Technical Support

- Contact the MA & PDP CAHPS Data Coordination Team for technical support and/or assistance related to data submission at: MA-PDPCAHPSTECHSUPPORT@rand.org

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Vendor Oversight



Objectives

- Oversight Activities
- Event Reports
- Corrective Actions
- Exception Requests for 2027

Purpose of Oversight Activities

- Ensure
  - Compliance with MA & PDP CAHPS Survey protocols
  - Survey data collected and submitted are complete, valid and timely
  - Standardization and transparency of publicly reported MA & PDP CAHPS Survey results
  - Data security

Oversight Activities

- Oversight activities include
  - Review of survey materials
  - Review of MA & PDP CAHPS Survey Quality Assurance Plan (QAP)
  - Conduct site visits and conference calls
  - Analysis of submitted data

Survey Materials Review *(1 of 2)*

- Determine compliance with MA & PDP CAHPS Survey protocols and guidelines
- Submit each year of survey administration
  - Submit via the MA & PDP CAHPS Survey Technical Assistance email: MA-PDPCAHPS@hsag.com
- English pre-notification letters and mail survey materials due: November 16, 2026
- English web survey materials (emails, letter, and minimum of 6 test links to MA-Only, MA-PD, and PDP surveys) due: November 30, 2026
  - Web screenshots are not required to be submitted
- Spanish and optional language (Chinese, Korean, Tagalog, and/or Vietnamese, if applicable) pre-notification letters, web invitation and reminder emails, web invitation letters, web survey links, and mail survey materials due: December 11, 2026

Survey Materials Review *(2 of 2)*

- English CATI materials due: December 18, 2026
  - CATI testing links for all survey versions in English must be submitted (screenshots may be submitted if provision of testing links is not possible)
  - Screenshots submitted for review must include skip logic and reflect the programmed survey that will be used for 2027 telephone administration. Screenshots of the various skip options must be included.
- Spanish and optional language (Chinese, Korean, Tagalog, and/or Vietnamese, if applicable) CATI materials due: January 5, 2027
  - CATI testing links for all survey versions in Spanish and all optional languages being administered should be submitted for review
- CMS expects each survey vendor to conduct a thorough quality review of all survey materials to ensure adherence to CMS templates and specifications before submitting the materials to the project team for review

QAP Review

- Documents understanding, application, and compliance with survey protocols
- Used as a training tool for project staff and subcontractors
- Follows the Model QAP specifications
  - Refer to Model QAP in Appendix C for 2027 updates
  - A few examples of 2027 updates include requesting description of:
    - Risk Identification and Mitigation Table detailing possible errors that might occur and mitigation steps to minimize risk of the error
    - How your organization protects and limits access to identifiable enrollee information
- Provides a guide for the site visit
- Submitted each year of survey administration
- Submit via the MA & PDP CAHPS Survey Technical Assistance email: MA-PDPCAHPS@hsag.com
- Due date of January 11, 2027

Vendor Site Visits and Conference Calls

- Review and observe systems, procedures, facilities, and resources
- Discussions with project staff
  - Including subcontractors, if applicable
- All materials related to survey administration are subject to review
- Feedback report includes action items for follow-up
- Failure to accommodate the project team to evaluate MA & PDP CAHPS activities may lead to loss of approved vendor status

Data Submission Review

- Analysis of submitted data
  - Intended to detect errors in data submission
  - Includes review of outliers, anomalies, unusual patterns, response rates, etc.
  - Follow up as appropriate

Event Reports

- Report any variation(s) from MA & PDP CAHPS Survey protocols during survey administration. Examples of events include, but are not limited to:
  - Survey vendor misses any of the required dates as outlined in the Data Collection Schedule
  - Survey vendor includes incorrect URL in web invitation email
  - Survey vendor experiences any problems with printing surveys with correct contract names, missing survey questions, wrong contract type, etc.
  - Survey vendor experiences any problems with correct coding of the MA & PDP CAHPS script and/or skip pattern programming logic

Submission of Event Reports

- Timely submission of an initial Event Report is critical, as CMS may need to adjust survey protocols to correct for an error or event
- Complete and submit preliminary web-based report **within 1 business day after discovery of issue** whether or not data collection has ended
  - Vendors must not wait until the event has been resolved to submit an initial Event Report even if internal investigations are ongoing
  - A second updated report may be submitted once root cause, scope of issue and/or corrective action has been identified
- Multiple staff must have authority to submit an Event Report so there is no delay in reporting due to staff availability
- Submit the web-based Event Report Form via the MA & PDP CAHPS Survey website at: www.MA-PDPCAHPS.org

Information to Include in Event Reports

- Required Event Report detail includes
  - Description of event, how and when it was discovered
  - All affected contract names and numbers (Hxxxx, Rxxxx, Sxxxx) impacted by the event
  - For each contract listed:
    - Affected timeframe
    - Count of sampled members affected by the event
  - Description of corrective action to be taken along with proposed timeline
- Provide as much information as possible in initial report
- File updated Event Report with any additional information
- If unsure Event Report is warranted, immediately send an email describing the occurrence to MA-PDPCAHPS@hsag.com for a determination

Review of Event Reports

- CMS review process
  - Acknowledgment of receipt
  - Assessment of actual or potential impact on publicly reported results
  - Additional information may be requested
  - Survey vendor notification of review outcome
- Depending on the nature and extent of the event, CMS may require the vendor to take an immediate and specific action such as:
  - Remailing survey materials
  - Adjusting the survey administration timeline
  - Participating in an on-site visit and/or conference call

Corrective Actions

- If survey vendors fail to adhere to the MA & PDP CAHPS Survey protocols, they will be required to develop and implement corrective actions
- If survey vendors do not fix persistent problems, they may lose “approved” status for conducting the MA & PDP CAHPS Survey
- Other sanctions may also be applied

Exception Requests for 2027 *(1 of 2)*

- CMS may grant remote work exception requests regardless of status of public health emergency
- The 2027 Minimum Business Requirements for the MA & PDP CAHPS Survey posted on www.MA-PDPCAHPS.org detail CMS's on-site operating requirements for survey vendors approved to conduct the survey
- CMS has created an exception request process to provide survey vendors with increased flexibility to conduct business operations off-site or remotely, while still maintaining data integrity for standardized public reporting

Exception Requests for 2027 *(2 of 2)*

- CMS may grant survey vendors exceptions to MA & PDP CAHPS Survey on-site operating requirements during 2027 survey administration on a case-by-case basis following review of a submitted Exception Request Form
  - If the exception request is approved, the vendor's QAP must describe how remote operations will comply with HIPAA, data security, and quality assurance requirements. If an exception is approved after QAP submission, a revised QAP must be submitted within 1 week of the approval.
- CMS has determined that survey vendors may request an extension of Exception Requests that were approved for 2026 survey administration
  - The project team will send email notifications to vendors eligible to request extensions
  - Any changes to the approved exception must be identified and detailed for the project team's review and approval

Exception Request Forms

- To request an exception, survey vendors must submit an online Exception Request Form via the MA & PDP CAHPS Survey website at: www.MA-PDPCAHPS.org
  - Submissions must include:
    - Key personnel, system resources, remote access procedures, data transmittal procedures, measures to ensure security, and confidentiality of data
    - Quality control measures
    - Processes for staff training, oversight, and risk mitigation
- A single Exception Request Form may be submitted to cover multiple components of survey administration operations
  - If needed, vendors may submit additional Exception Request Forms for survey administration operations not included in the original request
  - Exception Requests must be submitted in a timely manner to allow sufficient time for review

Exception Request Review Process

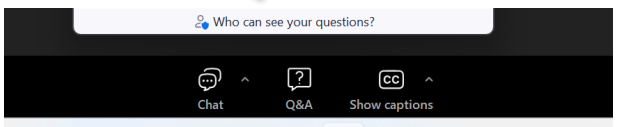
- Exception Requests will be reviewed by the MA & PDP CAHPS Project Team
- An assessment of the proposed alternative(s) and compliance with maintaining all aspects of data integrity, including the potential for introducing bias or violating enrollee confidentiality will be performed
- Additional information or a conference call may be required
- Vendors will be notified whether their exception has been approved
- Vendors must not implement any changes to operations prior to CMS approval

Questions?



- To submit a question, please select the Q&A icon.
- This opens the Q&A panel and allows you to type your question into the space provided.

Q&A Button



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Wrap Up and Next Steps



What's New for 2027: Highlights *(1 of 2)*

- Appending Data
  - TIN and Tax ID (or similar) are treated as PII/PHI and must be handled in a secure manner
  - Requests containing TIN, Tax ID, or similar identifiers must be submitted via SAFE with an email follow-up to the MA & PDP CAHPS Technical Assistance email, or contain only the last 4 digits of the TIN or Tax ID
- Data Collection Schedule
  - A submission date has been added for client requests for cover letter taglines or branding language. See the data collection schedule for specific date.
- Matching to a sampled enrollee record
  - When matching email addresses, languages, and/or telephone numbers, survey vendors should use name, address, city, and state. Date of birth may be used in place of street address.
- Customer Support, Inbound CATI, Outbound CATI
  - Use of an SI agent, conversational SI, voice-based SI, or other SI interviewer is prohibited

What's New for 2027: Highlights *(2 of 2)*

- "Unsubscribe" or "Opt Out" Text
  - Placement of "unsubscribe" or "opt out" text on emails has been clarified to indicate that the text should appear at the bottom of the email and be specific to the survey. The "unsubscribe" or "opt out" web page link must clearly state that the enrollee is unsubscribing from the MA & PDP CAHPS survey, not all surveys in general.
- Enrollee Correspondence
  - Additional examples have been included to clarify guidance for correspondence that indicates an enrollee's health or well-being is at risk to include indications of risk, harm, or vulnerability
- Updates to Model QAP
  - Survey vendors must include a "Risk Identification and Mitigation" table detailing the possible errors that might occur during different stages of survey programming/production and risk mitigation steps to minimize the risk of the errors
  - The Confidentiality, Privacy, and Data Security Procedures section has been updated to include a description of how your organization protects and limits access to identifiable enrollee information, such as sample information provided by CMS

Wrap Up and Next Steps *(1 of 2)*

- Important Dates
  - **November 16, 2026:** English pre-notification letters, pre-notification letter envelope, English cover letters, mail survey envelope, and mail MA-Only, MA-PD, and PDP surveys due to MA & PDP CAHPS Survey Project Team via Technical Assistance MA-PDPCAHPS@hsag.com
  - **November 30, 2026:** English web survey materials (emails, letter, and testing links to the surveys) due to MA & PDP CAHPS Survey Project Team via Technical Assistance MA-PDPCAHPS@hsag.com
  - **New for 2027**: **December 1, 2026**: Survey vendors must submit any client requests for cover letter taglines or branding language
  - **December 3, 2026:** Complete web-based Survey Vendor Authorization process
  - **December 11, 2026:** Spanish and optional language web and mail survey materials due to MA & PDP CAHPS Survey Project Team via Technical Assistance MA-PDPCAHPS@hsag.com
  - **December 18, 2026:** English CATI materials (test links to the CATI surveys or screenshots, if applicable) due to MA & PDP CAHPS Survey Project Team via Technical Assistance MA-PDPCAHPS@hsag.com
  - **January 5, 2027:** Spanish and optional language CATI materials (test links to the surveys or screenshots, if applicable) due to MA & PDP CAHPS Survey Project Team via Technical Assistance MA-PDPCAHPS@hsag.com
  - **January 11, 2027:** QAPs due to MA & PDP CAHPS Survey Project Team via Technical Assistance MA-PDPCAHPS@hsag.com
  - See 2027 Data Collection Schedule for key survey administration dates

Wrap Up and Next Steps *(2 of 2)*

- Feedback on Training
  - Immediately upon conclusion of training
  - Accessible via webinar for 10 minutes
- Post Training Survey Vendor Quiz
  - Follows training feedback
  - Accessible via webinar for 20 minutes
- Vendor Notification
  - CMS follow-up regarding Survey Vendor Quiz by **November 9, 2026**

Contact Us

MA & PDP CAHPS Survey Information and Technical Assistance

- Website: www.MA-PDPCAHPS.org
- Email: MA-PDPCAHPS@hsag.com
- Telephone: 1-877-735-8882

CMS Staff Contact Information

- Email: MP-CAHPS@cms.hhs.gov

Post Training Activities



Training Feedback –
10 minutes

Post Training Quiz –
20 minutes