

APPENDIX C:
Nonstatistical Data Collection Instruments

Focus Group Guide: Referral Agents (Wave 1)

Introduction (5 minutes)

Welcome. Thank you for joining us today. I am _____ [Insert your name] from Abt Associates Inc. We do research on health care. I will be moderating our discussion and _____ [Insert co-moderator] will be assisting and taking notes.

The topic we'll be discussing today is the changes in Medicare with regard to durable medical equipment and the fee schedule they use to pay suppliers of these products. This "competitive bidding program" has recently been implemented in your area. Each of you has been asked to participate because you are a referral agent that works with Medicare beneficiaries. We are particularly interested in your perspective on the current durable medical equipment market and suppliers available to Medicare beneficiaries. Over the next year and a half, two more focus groups will be held in your area as a part of this study. Focus groups are also being held in other areas and these will help the Centers for Medicare & Medicaid Services (CMS) understand the impact of the program.

Informed Consent (5 minutes)

- Before we begin, I need to read aloud some of the key points of the consent form you just signed. Did everyone sign the form?
- Today we will ask you to discuss your experiences with Medicare beneficiaries and durable medical equipment
- Your participation is voluntary
- The focus groups will last approximately 1.5 hours
- The discussion will be confidential
- You can refuse to take part in this focus group if you wish without affecting your professional relationship with CMS
- You do not have to answer any questions you do not wish to answer
- You can quit the study at any time
- We do not foresee any possible risks from participating in this focus group, other than the minimal risk that confidentiality might not be preserved
- There are no costs to you for participating in the focus group
- You will receive \$75 today for participating and dinner is provided
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- Your comments, and those of others in the focus group, will be used in reports to the government, in summary form and your name will not be included in the report
- Does anyone have any questions?

How the focus group will work (3 minutes)

- Want to keep the discussion informal and relaxed
- Eat and use the restrooms as you like
- During the discussion, please feel free to ask me or each other if something is unclear
- There are no right or wrong answers
- If you disagree with what someone else says, or have a different experience, please say so or I'll think that you all agree
- Some of you may have strong opinions, so please be respectful of other's
- Be careful not to talk all at once; I don't want to miss anything that is said
- My job is to make sure we hear from everyone. Some people talk more than others, and I'll be encouraging everyone to speak up.

Participant Introductions (7 minutes)

Let's go around the room and quickly introduce ourselves. [Write on the flip chart the following items]

- First name
- Title (for example social worker, discharge planner, etc)
- Organization you represent
- Clients you serve
- Role with durable medical equipment

BASELINE ENVIRONMENT

1. Could you describe the referral process as it happens in your role? Let's go around the room.

- *From beginning to end*

- *What do you do for your patients? (e.g. file the certificate of medical necessity – CMN)*

- *How is it different as a discharge planner, Physical Therapist, social worker, home health worker, etc?*

2. How do you determine which supplier you refer your clients to?

- a. Do you have a list of suppliers? Where does it come from?
- b. Do you have a preferred supplier?
- c. Are you satisfied with your interactions with suppliers? Why or why not?
- d. Do you find any significant problems related to accessing suppliers at present?

3. **How is the DMEPOS market in this area?**
 - a. Are there enough suppliers?
 - b. Is there a dominant supplier?
 - i. For oxygen?
 - ii. Product X, Y, Z?
 - c. How do suppliers compete for referrals?
 - d. Do suppliers market their services?
 - i. How do they market? (pamphlets, visits, etc.)
 - ii. To whom do they market? (you, patients, etc.)
4. **What do you think of the current level of access and quality of DMEPOS products and services that suppliers provide your clients?**

COMPETITIVE BIDDING PROGRAM

5. **How many of you have heard about Medicare’s change in the durable medical equipment fee schedule for suppliers, also known as “competitive bidding”?**

COUNT NUMBER OF RAISED HANDS _____

PROGRAM DESCRIPTION: The competitive bidding program for durable medical equipment, prosthetic, orthotic supplies (DMEPOS) is a program administered by the Center for Medicare and Medicaid Services (CMS), part of the Department of Health and Human Services (DHS), to control the costs of DMEPOS by requiring suppliers to bid for a contract to provide DMEPOS products and services to Medicare beneficiaries. This will result in a new fee schedule for specific DMEPOS items, which could reduce the number of suppliers available to beneficiaries and potentially change the suppliers with whom you work. Currently the suppliers are submitting their bids and CMS is beginning to provide information to referral agents and beneficiaries.

6. **How did you hear about the program?**
7. **What are your initial thoughts about it?**
8. **How do you think the program will affect your role?**
 - *The referral process? (e.g. if suppliers you previously used are not winning bidders)*

9. How do you think the program will affect suppliers in your area?

- *Reduce the numbers?*
- *More marketing?*
- *Change in level of service provided?*

10. How do you think the program will affect Medicare beneficiaries?

QUALITY STANDARDS

11. How many of you have heard about the “quality standards” required of DMEPOS suppliers for items & services provided Medicare beneficiaries?

COUNT NUMBER OF RAISED HANDS _____

QUALITY STANDARDS DESCRIPTION: As a part of the Medicare Modernization Act 2003, the Center for Medicare and Medicaid Services (CMS) requires Durable Medical Equipment, Prosthetic, Orthotic Supplies (DMEPOS) Suppliers to comply with newly established quality standards in order to receive payment for items or services provided to Medicare beneficiaries.

12. What do you think of the quality standards?

- a. Are they needed?
- b. Is there a problem with them?
- c. Will they change your role?
- d. How will they affect beneficiaries?

ENDING QUESTION

13. Do you have any final thoughts about the current state of DMEPOS in this area or the competitive bidding program?

Those are all the questions that I have today. I want to thank you for participating in this discussion.

Focus Group Guide: Referral Agents (Wave 3)

Introduction (5 minutes)

Welcome. Thank you for joining us today. I am _____ [Insert your name] from Abt Associates Inc. We do research on health care. I will be moderating our discussion and _____ [Insert co-moderator] will be assisting and taking notes.

The topic we'll be discussing today is the changes in Medicare with regard to durable medical equipment and the fee schedule they use to pay suppliers of these products. This "competitive bidding program" has recently been implemented in your area. Each of you has been asked to participate because you are a referral agent that works with Medicare beneficiaries. We are particularly interested in your perspective on the current durable medical equipment market and suppliers available to Medicare beneficiaries. Over the next year and a half, two more focus groups will be held in your area as a part of this study. Focus groups are also being held in other areas and these will help the Centers for Medicare & Medicaid Services (CMS) understand the impact of the program.

Informed Consent (5 minutes)

Before we begin, I need to read aloud some of the key points of the consent form you just signed. Did everyone sign the form?

- Today we will ask you to discuss your experiences with Medicare beneficiaries and durable medical equipment
- Your participation is voluntary
- The focus groups will last approximately 1.5 hours
- The discussion will be confidential
- You can refuse to take part in this focus group if you wish without affecting your professional relationship with CMS
- You do not have to answer any questions you do not wish to answer
- You can quit the study at any time
- We do not foresee any possible risks from participating in this focus group, other than the minimal risk that confidentiality might not be preserved
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- Your comments, and those of others in the focus group, will be used in reports to the government, in summary form and your name will not be included in the report
- Does anyone have any questions?

How the focus group will work (3 minutes)

- Want to keep the discussion informal and relaxed
- Eat and use the restrooms as you like
- During the discussion, please feel free to ask me or each other if something is unclear
- There are no right or wrong answers
- If you disagree with what someone else says, or have a different experience, please say so or I'll think that you all agree
- Some of you may have strong opinions, so please be respectful of other's
- Be careful not to talk all at once; I don't want to miss anything that is said
- My job is to make sure we hear from everyone. Some people talk more than others, and I'll be encouraging everyone to speak up.

Participant Introductions (7 minutes)

Let's go around the room and quickly introduce ourselves. [Write on the flip chart the following items]

- First name
- Title (for example social worker, discharge planner, etc)
- Organization you represent
- Clients you serve
- Role with durable medical equipment

QUESTIONS

1. We spoke with some of you a few months after the program began, in the midst of transition. Now a year later does it seem that the transition is complete (for you, suppliers, beneficiaries)?

- *Transitioning to new suppliers?*
- *Other aspects?*

2. What changes have you noticed since the program began a year ago?

- a. Changes in the referral process
- b. Suppliers
 - i. Quantity of suppliers?
 - ii. Quality of suppliers?
 - iii. How and to whom they market?
 - iv. Product changes?

3. How has the program affected your work and role?

- *Changes in the referral process*
- *New relationships with suppliers*
- *Extra or different responsibilities*
- *Difficulties/Challenges*

4. How has the competitive bidding program affected beneficiary care?

a. In terms of access

i. Are there adequate numbers of suppliers in the area?

- *For oxygen*
- *For products X, Y, Z*

ii. Convenience?

b. In terms of facility

- i. Changes in products provided?
- ii. Diverse array of products?
- iii. Quality of services provided?

c. Have patients been able to get information when they have problems or questions?

5. What changes have you noticed in the DMEPOS market?

a. Are there enough suppliers?

b. Is there a new dominant supplier?

- i. For oxygen?
- ii. Product X, Y, Z?

c. How do suppliers compete for referrals?

d. Do suppliers market their services?

- i. How do they market? (pamphlets, visits, etc.)
- ii. To whom do they market? (you, patients, etc.)

- 6. This program included a requirement that suppliers meet certain quality standards, have you noticed any changes?**

IF PARTICIPANTS AREN'T FAMILIAR WITH THE STANDARDS, READ DESCRIPTION BELOW

QUALITY STANDARDS DESCRIPTION: As a part of the Medicare Modernization Act 2003, the Center for Medicare and Medicaid Services (CMS) requires Durable Medical Equipment, Prosthetic, Orthotic Supplies (DMEPOS) Suppliers to comply with newly established quality standards in order to receive payment for items or services provided to Medicare beneficiaries.

- 7. What do you think of the quality standards?**

- a. Are they needed?
- b. Is there a problem with them?
- c. Will they change your role?
- d. How will they affect beneficiaries?

- 8. What do you see as the successes and failures of the program?**

- *Poorer suppliers have left the market*

- 9. What questions or concerns about the program do you have as it continues forward?**

- 10. Do you have any final thoughts about the Medicare competitive bidding program?**

Those are all the questions that I have today. I want to thank you for participating in this interview.

Focus Group Guide: Suppliers (Wave 1)

Introduction (5 minutes)

Welcome. Thank you for joining us today. I am _____ [Insert your name] from Abt Associates Inc. We do research on health care. I will be moderating our discussion and _____ [Insert co-moderator] will be assisting and taking notes.

The topic we'll be discussing today is the changes in Medicare durable medical equipment, prosthetic, orthotic, supplies (DMEPOS) fee schedule for suppliers. Your area has been chosen as a site for implementation. Each of you has been asked to participate because you are a supplier or supplier group representative that provides DMEPOS products and services to Medicare beneficiaries. We are particularly interested in your experiences and perspectives on this new program. Over the next year and a half, two more focus groups will be held in your area as a part of this study. Focus groups are also being held in other areas and these will help the Centers for Medicare & Medicaid Services (CMS) understand the impact of the program.

Informed Consent (5 minutes)

Before we begin, I need to read aloud some of the key points of the consent form you just signed. Did everyone sign the form?

- Today we will ask you to discuss your experiences with preparing for this new fee schedule and providing DMEPOS to Medicare beneficiaries
- Your participation is voluntary
- The focus groups will last approximately 1.5 hours
- The discussion will be confidential
- You can refuse to take part in this focus group if you wish without affecting your professional relationship with CMS
- You do not have to answer any questions you do not wish to answer
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- We do not foresee any possible risks from participating in this focus group, other than the minimal risk that confidentiality might not be preserved
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- Your comments, and those of others in the focus group, will be used in reports to the government, in summary form and your name will not be included in the report
- Does anyone have any questions?

How the focus group will work (3 minutes)

- Want to keep the discussion informal and relaxed
- Eat and use the restrooms as you like
- During the discussion, please feel free to ask me or each other if something is unclear
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- Be careful not to talk all at once; I don't want to miss anything that is said
- My job is to make sure we hear from everyone. Some people talk more than others, and I'll be encouraging everyone to speak up.

Participant Introductions (7 minutes)

Let's go around the room and quickly introduce ourselves. [Write on the flip chart the following items]

- First name
- Supplier or organization you represent
- Types of DMEPOS you provide

BASELINE ENVIRONMENT

1. How do Medicare beneficiaries get to each of you as a supplier?

- a. Discharged from hospital? Referred from clinics? Walk-ins?
- b. Who refers them to you?
- c. Are you satisfied with your referral patterns?

2. Do you think that there are an adequate number of suppliers in this area? Why or why not?

COUNT # OF RAISED HANDS

3. How many of you think beneficiaries are generally satisfied with their choices of DMEPOS suppliers in this area? Why?

COUNT # OF RAISED HANDS

BIDDING PROGRAM

4. How many of you are aware of the Medicare DMEPOS competitive bidding program?

COUNT # OF RAISED HANDS

- a. When did you first hear about it?
 - b. How did you hear about the program?
 - *Informational meeting by CMS?*
 - *Trade organization?*
- 5. When you first heard about the competitive bidding program, what did you think?**
- 6. Do you think your area (MSA) is a good market for competitive bidding? Why or why not?**
- 7. One goal of competitive bidding is to reduce the prices that Medicare pays for DMEPOS. Medicare has included products Z,Y,Z in the competitive bidding program: X, Y, and Z.**
- a. Which of these product groups has the greatest potential of obtaining lower prices from competitive bidding?
 - *X*
 - *Y*
 - *Z*
 - b. Which has the least potential?
 - c. Are there any excluded product groups that should be in the program?
- 8. What did you hear from CMS about the program and Requests for Bids (RFBs)?**
- a. Were you officially notified?
 - b. What materials did you receive?
 - c. What did you think of the materials?
 - *Were they clear?*
 - *Straightforward?*
 - *Complete?*
 - d. Do you feel that you were adequately informed?
 - e. Was a Medicare representative available for questions? Who was it? Were they helpful?

9. How many of you submitted the bid?

COUNT # OF RAISED HANDS

- a. Why did you decide to bid?
- b. How did you decide which products to bid on? Why?

10. What do you think of the bidding process?

- *Does it seem appropriate?*
- *Is it too much?*
- *Confusing?*
- *How is it compared to private bids you have made?*
- *Did it take long time to complete the bidding process? How long?*
- *CMS (or bidding program manager) available?*

11. Do you have a good sense of how they are going to evaluate the bids and pick the winners?

PROGRAM IMPACT

12. How do you anticipate the program will affect you as a supplier?

- a. If you lose a bid(s), how will it affect you? Why?
- b. If you win a bid(s), how will it affect you? Why?

13. How do you think the program will impact Medicare beneficiaries?

14. How might the program affect the quality of DMEPOS supplies and services you are able to provide? Can you give me an example?

15. What do you think of the DMEPOS quality standards?

16. What challenges/issues do you anticipate arising with this program?

ENDING QUESTION

17. Do you have any final thoughts about the Medicare competitive bidding program as it gets underway?

Those are all the questions that I have today. I want to thank you for participating in this interview.

Focus Group Guide: Suppliers (Wave 3)

Introduction (5 minutes)

Welcome. Thank you for joining us today. I am _____ [Insert your name] from Abt Associates Inc. We do research on health care. I will be moderating our discussion and _____ [Insert co-moderator] will be assisting and taking notes.

The topic we'll be discussing today is the changes in Medicare durable medical equipment, prosthetic, orthotic, supplies (DMEPOS) fee schedule for suppliers. Your area has been chosen as a site for implementation. Each of you has been asked to participate because you are a supplier or supplier group representative that provides DMEPOS products and services to Medicare beneficiaries. We are particularly interested in your experiences and perspectives on this new program. Over the next year and a half, two more focus groups will be held in your area as a part of this study. Focus groups are also being held in other areas and these will help the Centers for Medicare & Medicaid Services (CMS) understand the impact of the program.

Informed Consent (5 minutes)

Before we begin, I need to read aloud some of the key points of the consent form you just signed. Did everyone sign the form?

- Today we will ask you to discuss your experiences with preparing for this new fee schedule and providing DMEPOS to Medicare beneficiaries
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Participant Introductions (7 minutes)

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- First name
- Supplier or organization you represent
- Types of DMEPOS you provide

PROGRAM IMPACT

- 1. It has been a year since the Medicare competitive bidding program began.**
 - a. What has been successful about the program?
 - b. What has been unsuccessful?
- 2. How has the program affected you as a supplier?**
- 3. Can you provide examples of "tough" choices you have had to make as a result of the program?**
 - *Have you had to cut back on staff/employees?*
 - *Have you decreased the frequency of f/u visits?*
- 4. How has the competitive bidding program affected the products and services you are able to provide?**
- 5. How has the program affected beneficiaries?**
- 6. Do you have any final comments about the Medicare competitive bidding program?**

7. Has your relationship with CMS or the DMEPOS changed in anyway because of the competitive bidding? How?

Those are all the questions that I have today. I want to thank you for participating in this interview.

Key Informant Discussion Guide: Beneficiary Groups/Advocates (WAVE 1)

- 1. What is the name of your organization?**
- 2. What type of organization are you? What role do you serve?**
 - a. Are you a local/national organization?
 - b. Does your local organization use resources, activities, etc. designed or distributed by a parent organization?
 - c. Is your organization part of a community level coalition? Working with other organizations? Please describe.
 - d. Who are your clients/constituents?
 - e. Are any of your clients Medicare beneficiaries? What percent?
- 3. Do you work with Medicare beneficiaries? With DMEPOS?**
 - a. What do you do for Medicare beneficiaries regarding DMEPOS? Please provide examples?
 - i. Educational services?
 - ii. Outreach?
 - iii. Advocacy?
 - iv. Lobbying?
 - v. Referral?
 - vi. Financial Assistance?
- 4. How is the DMEPOS supplier market in this area currently structured?**
 - a. Are the available suppliers spread out or are they concentrated in a particular geographic area?
 - b. Is there a dominant supplier?
 - c. Are there both large and small suppliers?
 - d. Do you perceive that there are an adequate number of suppliers in this area? IF NOT, for what products is supply inadequate?
 - e. Do suppliers have to compete? Based on what?

- *Quality?*
- *Price?*
- *Service?*
- *Referral agents?*

- f. How do suppliers market their products and services?
- g. Do the suppliers compete with mail-order suppliers?

5. Do you refer beneficiaries to suppliers?

- a. Which ones?
- b. How do you decide which suppliers to refer people to? Do you have a list?
- c. How did you develop the referral list?

6. What do you think of the current level of DMEPOS products and services provided Medicare beneficiaries? Please provide examples.

- a. Access?
- b. Quality?
- c. Diversity of products? Choice?
- d. Ancillary services – education, maintenance, et

7. Have you heard of the Medicare plan to use Competitive Bidding to modify the DMEPOS fee schedule for reimbursing suppliers?

INTERVIEWER: If they have not heard of the program, read the description below.

PROGRAM DESCRIPTION: The competitive bidding program for durable medical equipment, prosthetic, orthotic supplies (DMEPOS) is a program administered by the Center for Medicare and Medicaid Services (CMS), part of the Department of Health and Human Services (DHS), to control the costs of DMEPOS by requiring suppliers to bid for a contract to provide DMEPOS products and services to Medicare beneficiaries. This will result in a new fee schedule for specific DMEPOS items and could reduce the number of suppliers available to beneficiaries. Currently the suppliers are submitting their bids and CMS is beginning to provide information to referral agents and beneficiaries.

- a. What do you think about it?
- b. How do you think it might affect (positively and negatively) your clients?

- 8. Does your organization have a policy or position statement on Medicare's competitive bidding program?**
- 9. Do you have any final comments about the current environment of DMEPOS for Medicare beneficiaries in your area (and the competitive bidding program)?**

Key Informant Discussion Guide: Beneficiary Groups/Advocates (WAVE 2)

- 1. What information has your organization received regarding the DMEPOS Competitive Bidding Program?**
 - a. What did you receive?
 - b. When?
 - c. From whom?
 - d. Did you find the information helpful?
 - e. What questions are remaining for you?
 - f. What additional information would have been helpful?

- 2. What, if anything, has your organization been doing with regard to Medicare beneficiaries, DMEPOS and this relatively new program?**
 - *Educational activities*
 - *Outreach*

- 3. Have members/clients asked about the program?**
 - a. What types of questions or comments are you getting?
 - b. What are the primary concerns or issues being raised?

- 4. Have any suppliers contacted you regarding the program?**
 - a. What was the purpose of the contact?
 - b. What was your response?

- 5. Did CMS conduct any outreach efforts to educate beneficiaries about the program through your organization? Describe.**

- 6. How do you think DMEPOS suppliers have changed over the past few months (under the competitive bidding program)?**
 - a. Number of suppliers? Is it adequate?
 - b. Has there been a change in suppliers? (Those not part of the program)
 - c. Has there been a change in how suppliers compete? Based on what?

- *Quality?*
- *Price?*
- *Service?*
- *Referral agents?*

d. Suppliers marketing their products and services?

7. Have you noticed any impact of the program on beneficiaries?

- a. Access to DMEPOS?
- b. Quality of DMEPOS?
- c. Diversity of products? Choice?
- d. Ancillary services – education, maintenance, et

8. Do you think the program will ultimately be successful? Why or why not?"

9. Do you have any final comments about the relatively new competitive bidding program for Medicare beneficiaries and DMEPOS?

Key Informant Discussion Guide: Beneficiary Groups/Advocates (WAVE 3)

- 1. It has been a year since the inception of the competitive bidding program. What do think of the program at this point?**
 - a. Successes of the program
 - b. Failures or limitations
 - c. Significant changes
- 2. What has your organization done with or for beneficiaries with regard to DMEPOS over the past year related to the program? (e.g. education)**
 - a. How does that differ from your activities prior to the program?
- 3. How has the program affected you as an organization in any way, or your role?**
- 4. How do you think the DMEPOS suppliers available to beneficiaries have changed over the past year (under the competitive bidding program)?**
 - a. Number of suppliers? Is it adequate?
 - b. Competition among suppliers?
 - *Quality?*
 - *Price?*
 - *Service?*
 - *Referral agents' preferences?*
 - c. The way that suppliers market?
- 5. From what you have seen and heard, how has the program affected beneficiaries?**
 - a. Access to DMEPOS?
 - b. Quality of DMEPOS?
 - c. Diversity of products? Choice?
 - d. Ancillary services – training, maintenance, et
 - e. Assistance with insurance?

6. **Do you have any final comments about the competitive bidding program for Medicare beneficiaries and their DMEPOS? Suggestions to make the program better?**

Key Informant Discussion Guide: CMS Officials or CMS' Bidding Program Managers (Wave 1)

Researcher Note: Some questions may be more appropriate for the CMS official than for the bidding program manager and vice versa. Inform the participant at the beginning that they can defer if he/she is not the appropriate individual to answer that question.

1. Responsibility for Program Administration

- a. What are the responsibilities of CMS officials versus the bidding program managers?
- b. How will the competitive bidding program be administered in this MSA?
- c. Who is responsible for administration?
- d. What responsibilities reside at the local level?
- e. How is oversight of local program administration to be carried out?
- f. When will (was) the program be initiated at this site?

2. Process for Selecting Suppliers (*Ask questions only if it is unknown from available materials*)?

- a. How were suppliers and the potential bidders informed about the program?
 - i. bidders conferences/meetings?
 - ii. written materials?
 - iii. other means of education
- b. How was the RFB distributed?
- c. What information was required of bidders in the RFB?
 - *quality (customer service, facilities, inventory, etc)*
 - *service capacity*
 - *finances*
 - *geographic coverage*
- d. What support was provided to suppliers in constructing their bids?
- e. How are suppliers being selected?

3. How do you anticipate this program will affect the referral process?

- a. For referral agents?
- b. Suppliers?
- c. Beneficiaries?
- d. Beneficiary advocates

4. Program Outreach and Dissemination

- a. How and when will referral agents be notified that the program has begun?
- b. How and when will beneficiaries be notified?
- c. What vehicles of communication will be used for outreach?
- d. When were (will) materials sent out? What was sent? (can we get copies)

5. Assessment of the Market

- a. What process will be used to assess overall supplier capacity in the market?
- b. How will the ability of suppliers to increase capacity be assessed?
- c. How will geographic coverage in the market be assessed?
- d. Are any changes projected in the physician authorization process expected as part of the program? If so, what are they?
- e. Is an exemption process for small suppliers anticipated? If so, what are the key features of this process likely to be?

6. Plans for Program Monitoring

- a. What type of complaint reporting system is envisioned for the program? How will it differ from the system now in place?
- b. What ombudsman services will be available for consumers?
- c. What data will the ombudsman collect? Are the data available?
- d. How will the program be monitored locally?
- e. What rules are likely to be implemented or steps taken to create a level playing field for small suppliers?
- f. What

7. General Observations

- a. What do you see as the biggest obstacles to program implementation in this MSA?
Why?
- b. What are your biggest concerns about your ability to monitor supplier performance?
- c. How long do you think it will be before some form of steady state under the program will be achieved?
- d. Overall, in your opinion. What is the biggest threat to the success of the program in this MSA?

Key Informant Discussion Guide: CMS Officials or CMS' Bidding Program Managers (Wave 2)

Researcher Note: Some questions may be more appropriate for the CMS official than for the bidding program manager and vice versa. Inform the participant at the beginning that they can defer if he/she is not the appropriate individual to answer that question.

1. Program Administration

- a. How has the administration of the program gone?
- b. What has been successful? Unsuccessful?
- c. After the program was begun, what were the most important issues that arose requiring decisions or policy refinement? How were they resolved?

2. Selecting Suppliers

- a. How and when were the RFBs distributed?
- b. What support was provided to suppliers in constructing their bids?
- c. How did the selection process go? What problems arose?
- d. How were winners selected?
- e. How were winners informed about the program?

3. Supplier market

- a. Are there enough suppliers?
- b. Have the suppliers been able to maintain the capacity they proposed?
- c. Are suppliers meeting the needs of beneficiaries?

4. How has the program affected the referral process?

- a. For referral agents?
- b. Suppliers?
- c. Beneficiaries?

5. Program Outreach and Dissemination

- a. Was the program outreach successful? Unsuccessful?
- b. How and when were referral agents and beneficiaries notified about the program?

- c. What vehicles of communication were used for outreach?
- d. When were materials sent out? What was sent?

6. Program Monitoring

- a. How is the program monitored?
- b. Is there a complaint reporting system?
 - i. What types of complaints have you received?
- c. How is quality being monitored or assessed as the program rolls out?

7. What have been the reactions to the program from each of these stakeholders?

- a. Suppliers
- b. Referral agents
- c. Beneficiaries
- d. Beneficiary advocacy organizations
- e. Congress

8. General Observations

- a. What do you think were the biggest obstacles? Why? Can they be corrected?
- b. What are your biggest concerns as the program moves forward?
- c. What areas do you see as needing improvement and can they be addressed within the coming ½ year?
- d. What changes, if any, do you anticipate for the remainder of this initial year of the program?

Key Informant Discussion Guide: CMS Officials or CMS' Bidding Program Managers (Wave 3)

Researcher Note: Some questions may be more appropriate for the CMS official than for the bidding program manager and vice versa. Inform the participant at the beginning that they can defer if he/she is not the appropriate individual to answer that question.

1. Program Administration

- a. How has the administration of the program gone?
- b. What has been successful? Unsuccessful?
- c. After the program was begun, what were the most important issues that arose requiring decisions or policy refinement? How were they resolved?

2. Supplier market

- a. Are there enough suppliers?
- b. Have the suppliers been able to maintain the capacity they proposed?
- c. Are suppliers meeting the needs of beneficiaries? How is that being determined?

3. How has the program affected the referral process?

- a. For referral agents?
- b. Suppliers?
- c. Beneficiaries?

4. Program Outreach and Dissemination

- a. Was the program outreach successful? Unsuccessful?
- b. How and when were referral agents and beneficiaries notified?
- c. What vehicles of communication were used for outreach?
- d. Were they effective?
- e. When were materials sent out? What was sent?
- f. How has the ongoing communication gone compared to the initial communication?

5. Program Monitoring

- a. How is the program monitored?

- b. Is there a complaint reporting system?
 - i. What types of complaints have you received?
 - ii. What are the most common complaints?
 - iii. What is the process for resolving – for example?
- c. How is quality being monitored or assessed as the program is being implemented?

6. What has been the impact of the program on each of these stakeholders?

- a. Suppliers
- b. Referral agents
- c. Beneficiaries
- d. Beneficiary advocacy organizations

7. General Observations

- a. Did the problems or concerns with the program in the first months improve over the subsequent 9 months?
- b. What do you think were the biggest obstacles? Why? Can they be corrected?
- c. What have been the big problems with the program?
- d. What areas do you see as needing improvement?
- e. What changes do you think would better meet the goals of this competitive bidding program?

Key Informant Discussion Guide: Referral Agents (Wave 1)

Background Information

- 1. What is your title and training?**
- 2. What organization are you affiliated with and what type of an organization is it?**
- 3. What is your role in working with clients generally and Medicare beneficiaries specifically?**
- 4. Which DMEPOS products do your clients most frequently use?**

Referral Process

- 5. Could you describe your referral process from beginning to end?**
 - a. How or when do you get involved with patients/clients?
 - *Discharged from hospital?*
 - *Referral from doctor's office?*
 - b. What do you do for patients?
 - *File the certificate of medical necessity (CMN)?*
 - c. Do you feel satisfied with the outcomes you can achieve? Why or why not?
- 6. How do you determine which supplier you refer your clients to?**
 - a. Do you have a list of suppliers? Where does it come from?
 - b. Do you have a preferred supplier?
 - c. Are you satisfied with your interactions with suppliers? Why or why not?
 - d. Do you find any significant problems related to accessing suppliers at present?
- 7. How is the DMEPOS market in this area?**
 - a. Are there enough suppliers?
 - b. Is there a dominant supplier?
 - i. For oxygen?
 - ii. Product X, Y, Z?

- c. How do suppliers compete for referrals?
 - d. Do suppliers market their services?
 - i. How do they market? (pamphlets, visits, etc.)
 - ii. To whom do they market? (you, patients, etc.)
- 8. What do you think of the current level of access and quality of DMEPOS products and services that suppliers provide your clients?**

BIDDING PROGRAM

PROGRAM DESCRIPTION: The competitive bidding program for durable medical equipment, prosthetic, orthotic supplies (DMEPOS) is a program administered by the Center for Medicare and Medicaid Services (CMS), part of the Department of Health and Human Services (DHS), to control the costs of DMEPOS by requiring suppliers to bid for a contract to provide DMEPOS products and services to Medicare beneficiaries. This will result in a new fee schedule for specific DMEPOS items, which could reduce the number of suppliers available to beneficiaries and potentially change the suppliers with whom you work. Currently the suppliers are submitting their bids and CMS is beginning to provide information to referral agents and beneficiaries.

- 9. Have you heard about Medicare’s change in the durable medical equipment fee schedule for suppliers, also known as “competitive bidding”?**
- 10. How did you hear about it?**
- 11. What are your initial thoughts about it?**
- 12. How do you think competitive bidding will affect your role?**
- *Referral process*
 - *To whom you refer patients*
 - *Suppliers you prefer or do not prefer*
- 13. How do you think the program will affect suppliers in your area?**
- 14. How do you think competitive bidding could affect Medicare beneficiaries?**
- *Access to products*
 - *Quality of services*

QUALITY STANDARDS

- 15. Have you heard about the “quality standards” required of DMEPOS suppliers for items & services provided Medicare beneficiaries?**

QUALITY STANDARDS DESCRIPTION: As a part of the Medicare Modernization Act 2003, the Center for Medicare and Medicaid Services (CMS) requires Durable Medical Equipment, Prosthetic, Orthotic Supplies (DMEPOS) Suppliers to comply with newly established quality standards in order to receive payment for items or services provided to Medicare beneficiaries.

16. What do you think of the quality standards?

- a. Are they needed?
- b. Is there a problem with them?
- c. Will they change your role?
- d. How will they affect beneficiaries?

Closing Question

17. Do you have any final thoughts about the current state of DMEPOS and the new Medicare competitive bidding program?

Key Informant Discussion Guide: Referral Agents (Wave 2)

Skip questions 1 to 4 if the referral agent was a participant in Wave 1.

- 1. Background Information**
- 2. What is your title and training?**
- 3. What organization are you affiliated with and what type of an organization is it?**
- 4. What is your role in working with clients generally and Medicare beneficiaries specifically?**
- 5. Which DMEPOS products do your clients most frequently use?**
- 6. The DMEPOS competitive bidding program began a few months ago. How was the information you were provided regarding the program?**
 - a. General information about the program
 - i. From whom?
 - ii. What form?
 - b. List (directory) of “winning” suppliers?
 - i. Received in a timely manner?
 - ii. From whom?
 - iii. In what form? (email, paper, etc.)
 - c. Information regarding what (which supplies) is covered
 - d. Information received
 - i. Did you find it helpful? Why or why not?
 - ii. Has CMS or its representatives been available to respond to concerns?”
 - iii. From whom else did you receive information?
 - iv. What other information would you like?
- 7. The Medicare competitive bidding program has been underway the past few months. How has the transition been?**
 - a. Have you had to transition to new suppliers? For what services?

- b. Have there been any significant issues relating to suppliers that did not exist prior to this program?
 - i. How did they arise?
 - ii. Why do you believe they are related to the new program?
- 8. What changes have you noticed in your role/work since the program began?**
 - a. Referral process?
 - b. Your professional relationships? (e.g. with suppliers)
 - c. Difficulties?
- 9. What changes have you noticed in the quality and access of DMEPOS products provided Medicare beneficiaries?**
 - a. Are there an adequate number of suppliers?
 - i. For oxygen?
 - ii. For product X, Y, Z?
 - b. Have the specific products provided changed? (e.g. brand of a product)
 - c. How has the quality of services provided changed? (e.g. instruction provided, follow-up visits, timeliness, etc.)
- 10. What changes have you noticed in the DMEPOS supplier market, with regard to the following?**
 - a. Number of suppliers available?
 - b. Dominance of certain suppliers?
 - i. For oxygen?
 - ii. Product X, Y, Z?
 - c. How suppliers compete for referrals?
 - d. How suppliers market their services?
 - i. How they market? (pamphlets, visits, etc.)
 - ii. To whom they market? (you, patients, etc.)
- 11. What do beneficiaries know about this program?**

- *Are they aware of the program?*
- *Have they noticed changes? What?*
- *What questions, if any, have your clients/patients been asking with regard to this program?*
- *Have they been able to get help when they have problems or questions?*
- *What could be done to better inform beneficiaries?*

12. The change in Medicare DMEPOS included a requirement that suppliers meet certain quality standards. Are you familiar with these standards?

IF THE INFORMANT ISN'T FAMILIAR WITH THE STANDARDS, READ DESCRIPTION BELOW, THEN ASK QUESTION 8.

QUALITY STANDARDS DESCRIPTION: As a part of the Medicare Modernization Act 2003, the Center for Medicare and Medicaid Services (CMS) requires Durable Medical Equipment, Prosthetic, Orthotic Supplies (DMEPOS) Suppliers to comply with newly established quality standards in order to receive payment for items or services provided to Medicare beneficiaries.

13. What do you think of the quality standards?

- a. Are they needed?
- b. Is there a problem with them?
- c. Have they changed your role at all?
- d. Have they affected the products and services provided beneficiaries?

14. What questions or concerns about the program do you have as it continues forward?

15. Do you have any final thoughts about the Medicare competitive bidding program?

Key Informant Discussion Guide: Referral Agents (Wave 3)

Skip questions 1 to 4 if the referral agent was a participant in Wave 1.

Background Information

- 1. What is your title and training?**
- 2. What organization are you affiliated with and what type of an organization is it?**
- 3. What is your role in working with clients generally and Medicare beneficiaries specifically?**
- 4. Which DMEPOS products do your clients most frequently use?**
- 5. We spoke a few months after the program began, still in the midst of transition. Now a year later, what changes have you noticed since the program began?**
- 6. Has your work or role changed since the program was implemented?**
 - *New challenges?*
 - *Extra or different responsibilities?*
 - *Relationships*
- 7. What changes have you noticed in the DMEPOS supplier market?**
 - a. Changes in the referral process?
 - b. Suppliers
 - i. Adequate number of suppliers?
 - ii. Quality of suppliers available to beneficiaries?
 - iii. Product changes?
- 8. How has the competitive bidding program affected beneficiary care?**
 - a. Access to DMEPOS products and services?
 - b. Diverse array of products?
 - c. Quality or level of products and services provided?
 - d. Have patients been able to get information when they have problems or questions?
 - e. How and to whom suppliers market?

- f. Timeliness of DMEPOS product provision and services?
 - g. Communication with suppliers?
- 9. What do you see as the successes and failures of the program?**
- *Poorer suppliers have left the market*
 - *Supplier response to service requests is not as quick*
- 10. What questions or concerns about the program do you have as it continues forward?**
- 11. Do you have any suggestions for how it could be improved?**
- 12. Do you have any final thoughts about the Medicare competitive bidding program?**

Key Informant Discussion Guide: Suppliers (Wave 1)

1. What DMEPOS do you provide?

- *Oxygen*
- *Wheelchairs*
- *Hospital beds*
- *Orthotics*
- *Prosthetics*

2. Are you accredited? By whom?

3. How would you describe yourself as a supplier?

a. How long have you been supplying DMEPOS?

- *Large vs. small*
- *Niche vs. full service*
- *Geographic limitations*

4. How do Medicare beneficiaries get to you as a supplier?

a. Discharged from hospital? Referred from clinic? Walk-in? Most common? Variation by service type?

b. Who refers them to you?

5. Are you satisfied with your referral network at present?

a. How do referral agents know about your services?

b. How do you market your products and services?

c. What types of referrals do you get?

d. How are your relationships with referral agents?

6. What services are beneficiaries typically provided as a part of the DMEPOS? (If you provide a lot of DMEPOS, describe the services provided with one of your highest volume products?)

a. Delivery and set-up

- i. Who does it? What is their background or training?
- b. Equipment maintenance
- c. Level of training or instruction provided
- d. Type and frequency of follow-up

DMEPOS Market

7. How would you describe the DMEPOS supplier market in this area?

- *Are suppliers spread out or concentrated in a particular geographic here?*
- *Is there a dominant company? If so, How does this vary, if at all, by product type?*
- *Do you perceive that there are an adequate number of suppliers? If so, How does this vary by product type?*

8. Where do you fit as a supplier in this market?

- a. How do you compete with other suppliers?
 - *Price*
 - *Service / Quality*
 - *Referral agents' preferences*
- b. To what extent do you compete with mail-order suppliers?

Competitive Bidding

9. What have you heard from CMS (or CMS' bidding program managers) about the competitive bidding program and Request for Bids (RFBs)?

- a. Were you officially notified?
- b. What materials did you receive?
- c. What did you think of the materials?
 - *Were they clear?*
 - *Straightforward?*
 - *Complete?*

- d. Do you feel that you were adequately informed?
- e. Was a Medicare representative available for questions? Who was it? Were they helpful?

10. Did you submit a bid(s)?

- a. Why did you decide to bid?
- b. How did you choose products you bid on?

11. What did you think of the bidding process?

- a. Do you have a good understanding of how bids will be evaluated and chosen?
- b. Do you feel that adequate consideration has been given to ensuring that small suppliers can participate in the program (are you a small/large supplier)?

Program Impact

12. If you win, how will it affect your company?

- a. What will you gain?
- b. Will you supply fewer (more) brands of products?
- c. How you market your products and services?

13. If you lose, how will it affect your company?

- a. What will you gain/lose?
- b. Will you supply fewer (more) brands of products?
- c. How you market your products and services?

14. How do you anticipate the program will affect Medicare beneficiaries?

- a. Will beneficiaries be able to get the same products and services they had before this program?
- b. Will suppliers experience any pressure to shift to lower-quality products? If so, how will that happen (e.g. lower profit margins)?
- c. What other influences will affect the products and services used by patients you work with?

15. What do you think will be the changes both positive and negative on quality?

- *Consulting with prescribers*
- *Assessing appropriateness of the equipment*
- *Develop service plan*
- *Equipment management? Repairs? Adjustments?*
- *Replacing equipment*
- *Procedure for equipment delivery and set-up? Who sets up? Their Background?*
- *Provide training or instruction? Who does this?*
- *What information or training is provided? Operation? Safety? Repair? Written or oral?*
- *Follow-up*

16. Any other thoughts about the program or its likely impact?

Key Informant Discussion Guide: Suppliers (Wave 2)

Skip questions 1 to 6 if supplier participated in wave 1.

1. What DMEPOS do you provide?

- *Oxygen*
- *Wheelchairs*
- *Hospital beds*
- *Orthotics*
- *Prosthetics*

2. Are you accredited? By whom?

3. How would you describe yourself as a supplier?

a. How long have you been supplying DMEPOS?

- *Large vs. small*
- *Niche vs. full service*
- *Geographic limitations*

4. How do Medicare beneficiaries get to you as a supplier?

a. Discharged from hospital? Referred from clinic? Walk-in? Most common? Variation by service type?

b. Who refers them to you?

5. Are you satisfied with your referral network at present?

a. How do referral agents know about your services?

b. How do you market your products and services?

c. What types of referrals do you get?

d. How are your relationships with referral agents?

6. What services are beneficiaries typically provided as a part of the DMEPOS?

- *If you provide a lot of DMEPOS, describe the services provided with one of your highest volume products?*

- a. Delivery and set-up
 - i. Who does it? What is their background or training?
- b. Equipment maintenance
- c. Level of training or instruction provided
- d. Type and frequency of follow-up

The Bidding Process

7. Overall, how was the bidding process?

- *Did you have the resources you needed to submit a bid?*
- *Was the receipt of the information timely?*
- *Was the process described in the information you received?*

8. Did you have outside assistance formulating your bid(s)?

9. Have you had experience formulating bids for the private sector and was the process similar? In what respect was it different?

10. How was the notification process?

- *Timeliness*
- *Fairness*

11. Did you win any of the bid(s) you submitted? Lose any of the bid(s)?

INTERVIEWER: If the supplier lost a bid asks questions 6-8,17,then stop. If they won a bid skip to question 9. If they won & lost a bid ask all questions.

Losing Bids

12. Were you informed in a timely manner that you lost the bid(s)?

13. Do you think the decision was fair, in light of what you know about other suppliers' bids?

- *What do you believe were the most important factors in losing the bid?*

14. What effect will losing have on your business?

- *Relationships with referral agents?*

- *Relationships with equipment distributors/suppliers?*
- *Changes in personnel or staffing?*
- *Effect on other aspects of your work?*
- *Convert part of the store?*
- *Merge? Sell?*
- *Write your congressman?*

Winning Bids

- 15. Were you informed in a timely manner that you won the bid(s)?**
- 16. Do you feel that the bid decisions were fair? Why or why not?**
- 17. What effect do you think winning is having and will continue to have on your business?**
 - *Relationships with referral agents?*
 - *Personnel or staffing?*
 - *Finances*
 - *Billing system*
 - *Number of clients*
 - *Products and services provided*
 - *Transition*
- 18. Do you think enough suppliers won contracts in this area to provide for the Medicare beneficiaries? Why or why not?**
- 19. How has the transition to this new contractual relationship with CMS gone?**
- 20. Has CMS or its representatives been available to respond to concerns or issues?"**
- 21. What effect, if any, has the provision in place for beneficiaries to transition to different suppliers had?**

The Program Impact

- 22. With changes in reimbursement have you had to make tough choices about the provision of DMEPOS product and services? If yes, what were they?**

- a. What factors were important in reaching these decisions?
- 23. How have beneficiaries been affected by this program?**
- *Access to products*
 - *Level of services provided*
- 24. What do you think of the quality standards required with the program?**
- *Burdensome / Helpful?*
 - *Applicable / Appropriate?*
 - *Suggestion for how they could be improved?*
- 25. What concerns do you anticipate will arise as the program rolls out over the next year?**
- 26. Is there anything else that you would like to tell us about the program?**

Key Informant Discussion Guide: Suppliers (Wave 3)

Skip questions 1 to 6 if supplier participated in wave 1.

BACKGROUND INFORMATION:

1. What DMEPOS do you provide?

- *Oxygen*
- *Wheelchairs*
- *Hospital beds*
- *Orthotics*
- *Prosthetics*

2. Are you accredited? By whom?

3. How would you describe yourself as a supplier?

a. How long have you been supplying DMEPOS?

- *Large vs. small*
- *Niche vs. full service*
- *Geographic limitations*

4. How do Medicare beneficiaries get to you as a supplier?

a. Discharged from hospital? Referred from clinic? Walk-in? Most common? Variation by service type?

b. Who refers them to you?

5. Are you satisfied with your referral network at present?

a. How do referral agents know about your services?

b. How do you market your products and services?

c. What types of referrals do you get?

d. How are your relationships with referral agents?

6. What services are beneficiaries typically provided as a part of the DMEPOS?

- *If you provide a lot of DMEPOS, describe the services provided with one of your highest volume products?*
 - a. Delivery and set-up
 - i. Who does it? What is their background or training?
 - b. Equipment maintenance
 - c. Level of training or instruction provided
 - d. Type and frequency of follow-up

PROGRAM IMPACT

7. How has the competitive bidding program changed your business?

- a. Number of clients
- b. Products and services provided
- c. Personnel / staffing
- d. Financially / Billing system
 - i. Prices for non-Medicare clients
 - ii. Private pay clients
- e. Marketing

8. Since the institution of the competitive bidding program (~12 months ago) what have you had to change (and why) in terms of the following:

- a. Products provided
- b. Delivery and set-up
 - i. Who does it? Their background or training?
- c. Equipment maintenance
- d. Level of training or instruction provided
- e. Frequency of follow-ups

9. Overall, what have been the consequent changes in your provision of DMEPOS and the associated services under this program?

- 10. How do you think the competitive bidding program has changed the DMEPOS supplier market in this area?**
- *In terms of concentration in a given geographic area?*
 - *Is there a change in the dominant company? If so, Does it vary, if at all, by product type?*
 - *Are there an adequate number of suppliers? If so, Does this vary by product type?*
- 11. Has the competitive bidding program changed your location in the supplier market?**
- a. Where you fit in this market?
 - b. How you compete with other suppliers?
 - *Price*
 - *Service / Quality*
 - *Referral agents' preferences*
 - c. Competition with mail-order suppliers?
- 12. How do you think the program has been successful? Why?**
- 13. What do you think have been the failures or limitations of the program? Why?**
- 14. How has the competitive bidding affected the provision of DMEPOS for Medicare beneficiaries? (From the referral process all the way to the arrival of the product in the beneficiaries home)**
- 15. Lastly, what feedback do you have for CMS to improve the program for your area and the new areas that will begin competitive bidding?**

Key Informant Discussion Guide: COMPARISON AREA: Beneficiary Groups/Advocates (WAVE 1)

- 1. What is the name of your organization?**
- 2. What type of organization are you? What role do you serve?**
 - a. Are you a local/national organization?
 - b. Does your organization use resources, activities etc. from a parent organization?
 - c. Is your organization part of a coalition? Working with other organizations? Please describe.
 - d. Who are your clients/constituents?
- 3. Do you work with Medicare beneficiaries? With DMEPOS?**
 - a. What do you do for Medicare beneficiaries with regard to DMEPOS? Please provide examples?
 - i. Educational services?
 - ii. Outreach?
 - iii. Advocacy?
 - iv. Lobbying?
 - v. Referral?
 - vi. Financial Assistance?
- 4. How is the DMEPOS supplier market in this area currently?**
 - a. Are suppliers spread out or are they concentrated in a geographic area?
 - b. Is there a dominant supplier?
 - c. Are there both large and small suppliers?
 - d. Do you perceive that there are an adequate number of suppliers in this area?
 - e. Do suppliers have to compete? Based on what?
 - *Quality?*
 - *Price?*

- *Service?*
 - *Referral agents' preferences?*
- f. How do suppliers market their products and services?
 - g. Do the suppliers compete with mail-order suppliers?
- 5. Do you refer beneficiaries to suppliers?**
- a. Which ones?
 - b. How do you decide which suppliers to refer clients to? Do you have a list?
 - c. From where do you get your referral list? (or how do you create it)?
- 6. What do you think of the current level of DMEPOS products and services provided Medicare beneficiaries? Please provide examples.**
- a. Access to DMEPOS?
 - b. Quality of DMEPOS?
 - c. Diversity of products? Choice?
 - d. Ancillary services – education, maintenance, et
- 7. Do you have any additional comments or information that might be helpful if I am trying to understand the DMEPOS market in this area?**

Key Informant Discussion Guide: COMPARISON AREA: Beneficiary Groups/Advocates (WAVE 2)

1. **Since we last spoke (X months ago) have there been any changes in the DMEPOS products and services in this area? And why?**
 - *Number of suppliers?*
 - *Quality of products and services?*
2. **Since we last spoke have there been any changes in your role working with Medicare beneficiaries and their DMEPOS ?**
3. **What, if anything, has your organization been doing differently (the past few months) with regard to Medicare beneficiaries and DMEPOS ?**
 - *New education programs*
4. **Have your clients raised any new questions or concerns over the past months? If so, what were they?**
5. **Have you heard of or are you familiar with the new Quality Standards for DMEPOS put out by the Centers for Medicare and Medicaid Services (CMS)?**

QUALITY STANDARDS DESCRIPTION: As a part of the Medicare Modernization Act 2003, the Center for Medicare and Medicaid Services (CMS) requires Durable Medical Equipment, Prosthetic, Orthotic Supplies (DMEPOS) Suppliers to comply with newly established quality standards in order to receive payment for items or services provided to Medicare beneficiaries.

- a. What information have you received about them?
 - *From whom?*
 - *When?*
- b. Have they changed your role?
- c. Are beneficiaries aware of them?
- d. How do you think the standards will affect beneficiaries?
- e. What have you heard from suppliers about them?
- f. What do you think about them?
 - i. Positives?
 - ii. Negatives?

6. **Have there been any changes in the DMEPOS supplier market the past few months?**
 - a. Number of suppliers? Is it adequate?
 - b. Competition among suppliers? Based on what?
 - *Quality? Price? Service? Referral agents?*
 - c. Suppliers marketing their products and services?
7. **Are you aware of any occurrences in health care or this area that have impacted DMEPOS products, services, provision, etc.?**
 - *Product recall*
 - *New type of equipment*
 - *Health care crisis – (e.g. higher incidence of pneumonia)*
 - *New regulations or policies (e.g. Deficit Reduction Act cap on rentals)*
8. **Has the level of care beneficiaries are provided for DMEPOS changed over the past few months?**
 - a. Access to DMEPOS?
 - b. Quality of DMEPOS?
 - c. Diversity of products? Choice?
 - d. Ancillary services – education, maintenance, et
9. **Do you have any additional comments about new occurrences in your area with regard to Medicare beneficiaries, DMEPOS and suppliers?**

Key Informant Discussion Guide: COMPARISON AREA: Beneficiary Groups/Advocates (WAVE 3)

1. **Since we last spoke (X months ago) have there been any changes in the DMEPOS products and services in this area? Why?**
 - *Number of suppliers?*
 - *Quality of products and services?*
2. **Since we last spoke have there been any changes in your role working with Medicare beneficiaries and their DMEPOS?**
3. **What, if anything, has your organization been doing differently (the past year) with regard to Medicare beneficiaries and DMEPOS? (e.g. education).**
4. **Have your clients raised any new questions or concerns over the past year? If so, what were they?**
5. **What has changed with regard to the Quality Standards for DMEPOS?**
 - a. Have they changed your role?
 - b. Are beneficiaries aware of them?
 - c. How do you think the standards are impacting beneficiaries' care?
 - d. What have you heard from suppliers about the standards?
 - e. What do you think about them, a year since they were required?
 - i. Positives?
 - ii. Negatives?
6. **How do you think the DMEPOS supplier market has changed over the past year?**
 - a. Number of suppliers? Is it adequate?
 - b. Competition among suppliers? Based on what?
 - *Quality? Price? Service? Referral agents?*
 - c. Suppliers marketing their products and services?
7. **Are you aware of any occurrences in health care or this area that have impacted DMEPOS products, services, provision, etc.?**
 - *Product recall*

- *New type of equipment*
- *Health care crisis – (e.g. higher incidence of pneumonia)*
- *New regulations or policies (e.g. Deficit Reduction Act cap on rentals)*

8. Has the level of care beneficiaries are provided for DMEPOS changed over the past year?

- a. Access to DMEPOS?
- b. Quality of DMEPOS?
- c. Diversity of products? Choice?
- d. Ancillary services – education, maintenance, et

9. Do you have any additional comments about new occurrences in your area with regard to Medicare beneficiaries, DMEPOS and suppliers?

Key Informant Discussion Guide: COMPARISON AREA: Referral Agents (Wave 1)

Role

- 1. What is your title and training?**
- 2. What organization are you affiliated with and what type of an organization is it?**
- 3. What is your role in working with clients generally and Medicare beneficiaries specifically?**
- 4. What DMEPOS products do your clients use?**

Referral Process

- 5. Could you describe the referral process from beginning to end?**
 - a. How or when do you get involved with patients/clients?
 - *Discharged from hospital?*
 - *Referral from doctor's office?*
 - b. What do you do for patients?
 - *CMN – do you fill out?*
- 6. Regarding the suppliers you refer beneficiaries to, how do you decide to whom you refer your patients?**
 - *Do you have a list of suppliers?*
 - *Where did you get the list or how did you create that list?*
- 7. How competitive is the DMEPOS market in this area?**
 - *Enough suppliers? A lot of options?*
 - *A dominant supplier?*
- 8. What do you think of the current level of care provided beneficiaries in this area?**
 - a. Quality of DMEPOS?
 - b. Access to DMEPOS?
 - c. Diversity of products?

- d. Ancillary services?

Quality Standards

9. Have you heard of or received information about the new Quality Standards for DMEPOS put out by the Centers for Medicare and Medicaid Services (CMS)?

QUALITY STANDARDS DESCRIPTION: As a part of the Medicare Modernization Act 2003, the Center for Medicare and Medicaid Services (CMS) requires Durable Medical Equipment, Prosthetic, Orthotic Supplies (DMEPOS) Suppliers to comply with newly established quality standards in order to receive payment for items or services provided to Medicare beneficiaries.

- a. What information have you received about them?
 - i. From whom?
 - ii. When?
 - b. What has CMS done to inform you?
 - c. Has your professional organization informed you about it?
- 10. What do you think of the Quality Standards generally?**
- a. What is good about them?
 - b. What is a problem with them?
 - c. Are they appropriate/fair?
 - d. Will they change your business/role?
 - e. How will they affect beneficiaries?
- 11. What do you think of the specific aspects of the Quality Standards, are they appropriate, inappropriate, excessive, etc.?**
- a. Consulting with prescribers
 - b. Assessing appropriateness of the equipment
 - c. Develop service plan
 - d. Equipment management? Repairs? Adjustments?
 - e. Replacing equipment
 - f. Procedure for equipment delivery and set-up? Who sets up? Their background?

- g. Provide training or instruction? Who does this?
- h. What information or training is provided? Operation? Safety? Repair? Written or oral?
- i. Follow-up

Key Informant Discussion Guide: COMPARISON AREA: Referral Agents (Wave 2)

- 1. Since we last spoke (X months ago), have there been any changes in the referral process for you?**
 - *Which supplier you refer clients to?*
 - *Changes in paperwork needed/requested by suppliers?*
- 2. How do you think the DMEPOS supplier market has changed over the past few months?**
 - a. Number of suppliers? Is it adequate?
 - b. Competition among suppliers? Based on what?
 - *Quality? Price? Service? Referral agents?*
 - c. Suppliers marketing their products and services?
- 3. Have there been any changes in the level of care provided beneficiaries?**
 - a. Access to DMEPOS?
 - b. Quality of DMEPOS?
 - c. Diversity of products? Choice?
 - d. Ancillary services – training, maintenance, et
- 4. Have your clients/patients raised any new questions or concerns over the past months? If so, what were they?**
- 5. Have there been any occurrences in health care or this area that have impacted DMEPOS products, services, provision, etc.?**
 - *Product recall*
 - *New type of equipment*
 - *Health care crisis – (e.g. higher incidence of pneumonia)*
 - *New regulations or policies (e.g. Deficit Reduction Act cap on rentals)*
- 6. How have the DMEPOS Quality Standards affected you?**
 - a. Have they changed your role?

- b. Are beneficiaries aware of the standards?
- c. How are the standards affecting beneficiaries?
- d. What do you think about them now, a few months later?
 - i. Positives?
 - ii. Negatives?

7. Do you have any additional comments about new occurrences in your area with regard to Medicare beneficiaries, DMEPOS and suppliers?

Key Informant Discussion Guide: COMPARISON AREA: Referral Agents (Wave 3)

- 1. Since we last spoke (X months ago), have there been any changes in the referral process for you?**
 - *Which supplier you refer clients to?*
 - *Changes in paperwork needed/requested by suppliers?*
- 2. How do you think the DMEPOS supplier market has changed over the past year?**
 - a. Number of suppliers? Is it adequate?
 - b. Competition among suppliers? Based on what?
 - *Quality? Price? Service? Referral agents?*
 - c. Suppliers marketing their products and services?
- 3. Have there been any changes in the level of care provided beneficiaries?**
 - a. Access to DMEPOS?
 - b. Quality of DMEPOS?
 - c. Diversity of products? Choice?
 - d. Ancillary services – training, maintenance, et
- 4. Have your clients/patients raised any new questions or concerns over the past months? If so, what were they?**
- 5. Have there been any occurrences in health care or this area that have impacted DMEPOS products, services, provision, etc.?**
 - *Product recall*
 - *New type of equipment*
 - *Health care crisis – (e.g. higher incidence of pneumonia)*
 - *New regulations or policies (e.g. Deficit Reduction Act cap on rentals)*
- 6. How have the DMEPOS Quality Standards affected you?**
 - a. Have they changed your role?
 - b. Are beneficiaries aware of the standards?

- c. How are the standards affecting beneficiaries?
 - d. What do you think about them now, a few months later?
 - i. Positives?
 - ii. Negatives?
- 7. Do you have any additional comments about new occurrences in your area with regard to Medicare beneficiaries, DMEPOS and suppliers?**

Key Informant Discussion Guide: COMPARISON AREA: Suppliers (Wave 1)

Baseline Environment

1. What DMEPOS do you provide?

- *Oxygen*
- *Wheelchairs*
- *Hospital beds*
- *Orthotics*
- *Prosthetics*

2. Are you accredited? By whom?

3. How would you describe yourself as a supplier?

a. How long have you been supplying DMEPOS?

- *Large vs. small*
- *Niche vs. full service*
- *Geographic limitations*

4. How do beneficiaries get to you as a supplier?

a. Discharged from hospital? Referred from clinic? Walk-in?

b. Who refers them to you?

c. How do referral agents know about your services?

- *Do you market your products and services?*
- *What is your relationship with referral agents?*

5. Are you satisfied with your referral patterns?

a. How do referral agents know about your services?

b. How do you market your products and services?

c. What types of referrals do you get?

d. How are your relationships with referral agents?

6. What services are beneficiaries typically provided as a part of the DMEPOS?

a. Delivery and set-up

i. Who does it? Their background or training?

b. Equipment maintenance

i. Who does it? Their background or training?

c. Frequency of follow-ups

i. Who does it? Their background or training?

Market

7. How would you describe the DMEPOS supplier market in this area?

- *Are suppliers spread out or concentrated in a particular geographic area?*

- *Is there a dominant company?*

- *Do you perceive that there are an adequate number of suppliers?*

8. How do you view yourself as a supplier?

a. Where do you fit in this market?

b. How do you compete with other suppliers?

- *Price*

- *Service / Quality*

- *Referral agents' preferences*

To what extent do you compete with mail-order suppliers?

Quality Standards

9. Have you heard of or received information about the new Quality Standards for DMEPOS put out by the Centers for Medicare and Medicaid Services (CMS)?

a. What information have you received about them?

i. From whom?

- ii. When?
 - b. Has CMS or its representatives been available to respond to concerns?
 - c. Has your professional organization informed you about it?
- 10. What do you think of the Quality Standards generally?**
- a. What is good about them?
 - b. What is a problem with them?
 - c. Are they appropriate/fair?
 - d. Will they change your business/role?
 - e. How will they affect beneficiaries?
- 11. What do you think of the specific aspects of the Quality Standards, are they appropriate, inappropriate, excessive, etc.?**
- a. Consulting with prescribers
 - b. Assessing appropriateness of the equipment
 - c. Develop service plan
 - d. Equipment management? Repairs? Adjustments?
 - e. Replacing equipment
 - f. Procedure for equipment delivery and set-up? Who sets up? Their background?
 - g. Provide training or instruction? Who does this?
 - h. What information or training is provided? Operation? Safety? Repair? Written or oral?
 - i. Follow-up

Key Informant Discussion Guide: COMPARISON AREA: Suppliers (Wave 2)

Skip questions 1 to 6 if supplier participated in wave 1.

1. What DMEPOS do you provide?

- *Oxygen*
- *Wheelchairs*
- *Hospital beds*
- *Orthotics*
- *Prosthetics*

2. Are you accredited? By whom?

3. How would you describe yourself as a supplier?

a. How long have you been supplying DMEPOS?

- *Large vs. small*
- *Niche vs. full service*
- *Geographic limitations*

4. How do beneficiaries get to you as a supplier?

a. Discharged from hospital? Referred from clinic? Walk-in?

b. Who refers them to you?

c. How do referral agents know about your services?

- *Do you market your products and services?*
- *What is your relationship with referral agents?*

5. Are you satisfied with your referral patterns?

a. How do referral agents know about your services?

b. How do you market your products and services?

c. What types of referrals do you get?

- d. How are your relationships with referral agents?
- 6. What services are beneficiaries typically provided as a part of the DMEPOS?**
- a. Delivery and set-up
 - i. Who does it? Their background or training?
 - b. Equipment maintenance
 - c. Level of training or instruction provided
 - d. Frequency of follow-ups
- 7. Since we last spoke a few months ago, have there been any changes in the referral process (how beneficiaries get to you as a supplier)?**
- a. Discharged from hospital? Referred from clinic? Walk-in?
 - b. Who refers them to you?
 - c. How do referral agents know about your services?
 - *Do you market your products and services?*
 - *What is your relationship with referral agents?*
- 8. Are you currently satisfied with your referral patterns?**
- 9. Have you changed any of the DMEPOS products and services you provide beneficiaries? For what reason?**
- *Delivery and set-up. If so, Who does it? Their background or training?*
 - *Equipment maintenance*
 - *Level of education or instruction provided*
 - *Frequency of follow-ups*
 - *Product makes and models offered?*
- 10. Have there been any significant changes in the DMEPOS supplier market in this area over the past few months? What? Why?**
- *Change in the suppliers in the area*
- 11. Have there been any occurrences in health care or this area that have impacted DMEPOS products, services, provision, etc.?**

- *Product recall*
- *New type of equipment*
- *Health care crisis – (e.g. higher incidence of pneumonia)*
- *New regulations or policies (e.g. Deficit Reduction Act cap on rentals)*

12. How have the DMEPOS Quality Standards affected you?

- a. Affected your business?

13. Have they changed your role?

- a. Are beneficiaries aware of the standards?
- b. How are the standards affecting beneficiaries?
- c. What do you think about them now, a few months later?
 - i. Positives?
 - ii. Negatives?

14. Do you have any additional comments about new occurrences in your area with regard to Medicare beneficiaries, DMEPOS and suppliers?

Key Informant Discussion Guide: COMPARISON GROUP: Suppliers (Wave 3)

Skip questions 1 to 6 if supplier participated in wave 1.

1. What DMEPOS do you provide?

- *Oxygen*
- *Wheelchairs*
- *Hospital beds*
- *Orthotics*
- *Prosthetics*

2. Are you accredited? By whom?

3. How would you describe yourself as a supplier?

a. How long have you been supplying DMEPOS?

- *Large vs. small*
- *Niche vs. full service*
- *Geographic limitations*

4. How do beneficiaries get to you as a supplier?

a. Discharged from hospital? Referred from clinic? Walk-in?

b. Who refers them to you?

c. How do referral agents know about your services?

- *Do you market your products and services?*
- *What is your relationship with referral agents?*

5. Are you satisfied with your referral patterns?

a. How do referral agents know about your services?

b. How do you market your products and services?

c. What types of referrals do you get?

- d. How are your relationships with referral agents?
- 6. What services are beneficiaries typically provided as a part of the DMEPOS?**
- a. Delivery and set-up
 - i. Who does it? Their background or training?
 - b. Equipment maintenance
 - c. Level of training or instruction provided
 - d. Frequency of follow-ups
- 7. Since we last spoke, have there been any changes in the referral process (how beneficiaries get to you as a supplier)?**
- a. Discharged from hospital? Referred from clinic? Walk-in?
 - b. Who refers them to you?
 - c. How do referral agents know about your services?
 - *Do you market your products and services?*
 - *What is your relationship with referral agents?*
- 8. Are you currently satisfied with your referral patterns?**
- 9. Have you changed any of the DMEPOS products and services you provide beneficiaries? For what reason?**
- *Delivery and set-up. If so, Who does it? Their background or training?*
 - *Equipment maintenance*
 - *Level of education or instruction provided*
 - *Frequency of follow-ups*
 - *Product makes and models offered?*
- 10. Have there been any significant changes in the DMEPOS supplier market in this area over the past few months? What? Why?**
- *Change in the suppliers in the area*
- 11. Have there been any occurrences in health care or this area that have impacted DMEPOS products, services, provision, etc.?**

- *Product recall*
- *New type of equipment*
- *Health care crisis – (e.g. higher incidence of pneumonia)*
- *New regulations or policies (e.g. Deficit Reduction Act cap on rentals)*

12. Now that the DMEPOS quality standards have been in place a year what do you think?

- a. How have they affected your business?
- b. Have they changed your role?
- c. Are beneficiaries aware of the standards?
- d. How are the standards affecting beneficiaries?
- e. What do you think about them now, a few months later?
 - i. Positives?
 - ii. Negatives?

13. Do you have any additional comments about new occurrences in your area with regard to Medicare beneficiaries, DMEPOS and suppliers?