### PRE-SITE KEY INFORMANT IDENTIFICATION INTERVIEW PROTOCOL

[The following calls will be placed only after the research team has a strong knowledge base about the HRR and has the initial HRR interviewee list ready for final vetting.]

### Introduction

We would like to take approximately 20 minutes of your time reviewing our initial interviewee list for your HRR to verify that it includes the most relevant and helpful individuals to our project aims.

1. Would you be willing to speak with me today? Or, if it is not possible to discuss this today, could you let me know of an alternative time in the next week that would be feasible to do so? Thank you.

[If/when the discussion continues, researcher thanks the interviewee in advance for his/her time, reviews the following disclosure statement, asks if there are any questions before getting started.

We appreciate your taking the time to speak with us today and help us better understand the landscape of the health care delivery systems in your hospital referral region (HRR). Before we begin, please be advised that according to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless they are provided with a valid OMB control number. The valid OMB control number for this information collection is 0938-XXXX. The time required to complete this information collection (interview) is estimated to average twenty minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of this time estimate or suggestions for improving the discussion guide we are using for this interview, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. Do you have any questions about this disclosure statement for me? If not, let's proceed.

- 2. What would you consider to be the five most important characteristics distinguishing the environment and health care market or community in your region influencing local care patterns and affecting both quality and cost of health care delivery?
- 3. Given your knowledge of local and regional provider systems and environmental influences, could you first please tell us whom you would consider to be the most important health care leaders and organizations to include on an HRR interviewee list for your region?

## PROBES:

- Rationale for selection
- Likely/willingness of suggested individual/organization to speak with team
- Specific names, titles and contact information for individuals within an organization if only organization is mentioned
- Specific programs focused on populations of interest we should be sure to learn about
- 4. Please tell me what you think of the following individuals and/or organizations and whether or not you believe speaking with them will assist us in achieving our research aims? [At this point, the researcher will name the individuals on the initial interviewee list that have not been brought up during this call and probe to understand why certain individuals previously selected on the list may not be best to include in the top 10.]
- 5. If you had to choose between these names and those you already mentioned, which would you choose and why?

Thank you for sharing your insights. If you have additional time to speak with us, we would also appreciate your reviewing the fact sheet provided to you before this call and let us know if we have mischaracterized your region or are missing any important elements that affect the quality and cost of health care being delivered.

The researcher will ask the interviewee to refer to the relevant HRR fact sheet and take a minute to read through it.

6. What, if any important environmental or market conditions and/or programs or initiatives are not listed in our fact sheet and should be taken into consideration as we conduct interviews in your region?

## PROBES:

- Particular provider groups/types with extra power within your community compared to other parts of your state or around the country (if so describe how and why)
- Important or unique cultural practices of providers or patients
- Working conditions, such as pay scales, union activity, etc., to take into consideration for this HRR or certain locations within it
- Recent changes in state /local laws/regulations affecting providers/community that might impact nature/style of health care delivery in the HRR
- Pilot programs/initiatives to learn more about before site visit

- Key initiatives recently completed, cancelled due to budget cuts, or ended for other reasons
- History of collaboration among the key stakeholders in the region (e.g., Department of Health, Health Plans, Providers, CBOs, etc.) and the quality of their relationship
- Prioritization of care for dual eligibles in the HRR

# Other Experience/Reflection

- 7. Before completing this interview, do you have any other thoughts about the potential causes for variations in the cost and quality of care in this region compared to others that you would like to share with us?
- 8. Finally, do you have any questions for us?

Thank you for taking the time to speak with us about this region as we begin this important study. Your input is much appreciated.