

Crosswalk and Track Change Document

CROSSWALK: The “CMS Beneficiary Satisfaction Survey” and “Pre-notification Letter” below, in standard black font, were previously approved by OMB and we seek their reinstatement. Following the survey are the new proposed questions, in red-line format, that we are requesting OMB approve as an addition to the current list of OMB-approved customer satisfaction survey questions. The Centers for Medicare and Medicaid Services (CMS), Office of External Affairs and Beneficiary Services(OEABS), Call Center Operations Group (CCOG) has oversight over the contractor responsible for handling Medicare inquiries from over 40 million beneficiaries through the Beneficiary Contact Center (BCC), formerly the 800 Medicare Helpline. The inquiry channels handled by the BCC are telephone, written correspondence, e-mail and web chat. Additionally, CMS has contracted with a small business to provide training, independent quality assurance and content support for the BCC. This contract also includes managing and performing customer satisfaction assessments of the service provided by the BCC.

CMS is seeking approval for additional questions to be added to the original collection entitled 800-Medicare Beneficiary Satisfaction survey. The original set of questions was used when placing outbound calls to callers regarding the service they received when they called the 800 Medicare Helpline with a Medicare question. The new expanded collection will include multiple survey methods to measure customer satisfaction not only with the BCC’s handling of issues via telephone, but also the service provided to beneficiaries when they write a letter regarding their Medicare issue or use the e-mail and/or web chat services provided by the BCC

CSS The use of Customer Satisfaction Surveys is critical to the CMS mission to provide service to beneficiaries that is convenient, accessible, accurate, courteous, professional and responsive to the needs of diverse groups.

CMS-10098 Pre-notification Letter

Dear Medicare Beneficiary,

In a few days, you may receive a call from a Customer Service Representative at the 1-800-MEDICARE, as part of a survey that we are conducting to assess the level of quality customer service that beneficiaries receive. There will be no personal information collected during the survey. When you receive the call, we would greatly appreciate it if you would take the time, about 3-5 minutes, to participate in this survey over the phone.

As a Medicare beneficiary, you deserve the highest level of quality service. The 1-800-MEDICARE Helpline assists with answering general Medicare questions and provides helpful referrals to the various Medicare partners with the best possible service. One of the ways we can fulfill that responsibility is to find out directly from you how efficient is the customer service you are receiving now.

You will not be obligated to participate in this phone survey. Your help is voluntary, and your decision to participate or not to participate will have no effect on your Medicare benefits. However, your knowledge and experiences could help us improve our efforts to deliver the best customer service to the entire Medicare population.

Thanks you in advance for your assistance.

Sincerely,

Ernest Muldrow
Deputy Director, Division of Call Center Operations

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0919. The time required to complete this information collection is estimated to average 2.25 minutes per response, including the time the review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, Attn: Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850

CMS Beneficiary Satisfaction Survey

Q.1 Good _____ (morning/afternoon/evening), my name is _____ and I am calling on behalf of Medicare about a call that was made from this number on {READ (day/date) FROM SAMPLE}. I would like to take a few minutes to ask you some questions on the level of customer service received when calling 1-800-MEDICARE..

Are you the person in your household who called Medicare?

[IF YES:] SKIP TO QUESTION Q2.

[IF NO:] "Could you please put that person on the phone to answer our questions?" SKIP TO QUESTION Q2.

[IF PERSON NOT AVAILABLE:] ASK WHEN THEY CAN BE REACHED, SCHEDULE CALLBACK.

[IF MEDICAL PROVIDER ANSWERS OR NO ONE IN HOUSEHOLD CALLED MEDICARE:]
"We were calling to speak with Medicare beneficiaries and did not realize that this was a provider phone number. Thank you for your time."

[IF NO ONE IN HOUSEHOLD CALLED MEDICARE:] "This is all the information that I need today. Thank you for your time."

q 1 Yes [SKIP TO QUESTION Q2]

q 2 No [SCHEDULE CALL BACK]

- q 3 Medical provider answers [READ RESPONSE ABOVE]
- q 4 Person not available [SCHEDULE CALLBACK]
- q 5 No one in household called Medicare [READ RESPONSE ABOVE]

Q.2 I would appreciate a few minutes of your time to answer some questions that will help improve Medicare services. Your participation is voluntary and your answers will be treated as confidential. This call may be monitored for quality purposes.

Were you calling for yourself, or on behalf of someone else?

- q 1 Myself (yourself)
- q 2 Someone else
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0919. The time required to complete this information collection is estimated to average 2.25 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, Attn: Reports Clearance Officer, 7500 Security Boulevard, Baltimore, Maryland 21244-1850

Q3 What is your relationship to the Medicare beneficiary?

- q 1 Daughter
- q 2 Son
- q 3 Sibling (Brother or Sister)
- q 4 Spouse (Husband or Wife)
- q 5 Niece or Nephew
- q 6 Caregiver
- q 7 Friend
- q 8 Some other relationship
- q 9 [VOL] Don't Know/Refused

Q.4 Is this the first time you have ever called Medicare?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.5 When you called the Customer Service Center, did you use the automated telephone system?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.6 Did you choose any of the following particular menu options?

[READ LIST]

[SELECT ALL THAT APPLY ALLOW FOR UP TO THREE RESPONSES]

- q 1 Speak with CSR
- q 2 Sign up for Medicare/Replace Medicare card/Change address
- q 3 Medicaid
- q 4 Claims information – Issues w/billing- hospital, doctor, equip
- q 5 Medicare publication/HMO information
- q 6 Frequently asked questions
- q 7 Did not choose an option
- q 8 Chose an option but cannot remember which
- q 98 [VOL] Don't know
- q 99 [VOL] Refused

Q.7 Were you able to reach a Customer Service Representative?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.8 Was the first person that you spoke with able to answer all of your questions?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

[IF THE ANSWER IS 1, THEN SKIP TO QUESTION 10]

Q.9 Were you told to call a different telephone number?

- q 1 Yes
- q 2 No

- q 7 [VOL] Don't know
- q 8 [VOL] Refused

Q.10 Using a scale of 1 to 5 where 1 is poor and 5 is excellent, please tell me how you would rate the time it took you to get through to a Customer Service Representative that helped you?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3
- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.11 Again on a scale of 1 to 5 where 1 is poor and 5 is excellent; please tell me how you would rate the person's knowledge of the Medicare system?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3

- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.12 Again on a scale of 1 to 5 where 1 is poor and 5 is excellent, how would you rate the politeness of the person on the phone?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3
- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.13 How would you rate the person's ability to understand your question or concern?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3
- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.14 How would you rate the person's ability to give you a clear answer to your questions?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3
- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.15 When you used the automated telephone system, did you receive all the information you needed from it?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.16 Would you use the automated system again to get information about Medicare?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.17 Thinking now about your general experience with using the automated telephone system, how would you rate the following on a scale of 1 to 5 where 1 is poor and 5 is excellent?

How would you rate the clarity of the instructions on the automated telephone system?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3
- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.18 How would you rate the ease of getting information from the automated telephone system?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

- q 1 Poor
- q 2 2
- q 3 3
- q 4 4
- q 5 Excellent
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q.19 How would you rate the time it took for the automated telephone system to give you information?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

q 1 Poor
q 2 2
q 3 3
q 4 4
q 5 Excellent
q 7 [VOL] Don't Know
q 8 [VOL] Refused

Q. 20 How would you rate the voice quality of the automated telephone system?

[PROMPT: USE A SCALE WHERE 1 IS POOR AND 5 IS EXCELLENT]

q 1 Poor
q 2 2
q 3 3
q 4 4
q 5 Excellent
q 7 [VOL] Don't Know
q 8 [VOL] Refused

Q.21 Did you order a publication from the automated system or a Customer Service Representative?

g1 Yes
g2 No

Q22. Did you receive the publication within 3 weeks?

g1 Yes
g2 No

Q23. Did you receive the correction publication?

g1 Yes
g2 No

Q24. Did the publication arrive in good physical condition?

g1 Yes
g2 No

Q.25 From the time your call began to the time you hung up, how would you rate the time you spent on the call, where 1 is poor and 5 is excellent?

q 1 Poor

q 2 2
q 3 3
q 4 4
q 5 Excellent
q 7 [VOL] Don't Know
q 8 [VOL] Refused

Q.26 How would you rate your overall experience with Medicare Customer Service? Again, please use the scale where 1 is poor and 5 is excellent?

q 1 Poor
q 2 2
q 3 3
q 4 4
q 5 Excellent
q 7 [VOL] Don't Know
q 8 [VOL] Refused

Q.27 Would you call the 1-800-MEDICARE Helpline number again?

g1 Yes
g2 No
g7 [VOL] Don't Know
g8 [VOL] Refused

Q.28 Would you give the MEDICARE Helpline number to a friend?

g1 Yes
g2 No
g7 [VOL] Don't Know
g8 [VOL] Refused

Q.29 Have you seen any television ads for 1-800-MEDICARE in the past two weeks?

g1 Yes
g2 No
g7 [VOL] Don't Know
g8 [VOL] Refused

Q.30 Did you call 1-800-MEDICARE as a result of seeing a television ad?

g1 Yes
g2 No
g7 [VOL] Don't Know
g8 [VOL] Refused

Q.31 What was your impression of the ad(s) (favorable or unfavorable)?

- G1 favorable
- G2 unfavorable
- G7 [VOL] Don't Know
- G8 [VOL] Refused

Q. 32 Thinking about the Medicare telephone service that is provided to you, do you have any suggestions to make the service better?

- q 1 Yes
- q 2 No
- q 7 [VOL] Don't Know
- q 8 [VOL] Refused

Q. 33 In your own words, what are those suggestions? [PROBE FOR RESPONSE; RECORD RESPONSE VERBATIM]

Q. 34 Thank you very much for calling Medicare and for taking the time to answer these questions. Your answers will help to continually improve Medicare service.

Proposed Survey Questions

- 1) How would you rate the representative's knowledge of the Medicare system? (Very Knowledgeable/Knowledgeable/Somewhat Knowledgeable/Not Knowledgeable/Don't Know/Refused)
- 2) Did the representative understand your questions? (Yes/No/Don't Know/Refused)
- 3) Was any of the information provided in a way that was difficult to understand? (Yes/No/Don't Know/Refused)
- 4) Did the representative take the time to understand your issues? (Yes/No/Don't Know/Refused)
- 5) Do you feel you were treated courteously during the call? (Yes/No/Don't Know/Refused)
- 6) Was the representative helpful? (Yes/No/Don't Know/Refused)

- 7) Please rate your satisfaction with the amount of time you waited to talk with a representative. (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
- 8) Was your wait time shorter, longer, or about what you expected? (shorter/longer/about what I expected/Don't Know/Refused)
- 9) Were you told someone from Medicare would call you back? (Yes/No/Don't Know/Refused)
- 10) Has anyone called you back yet? (Yes/No/Don't Know/Refused)
- 11) How satisfied are you with your call back experience? (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
- 12) Were you disconnected while you were waiting to talk to a representative? (Yes/No/Don't Know/Refused)
- 13) Were you asked to repeat your Medicare number more than once? (Yes/No/Don't Know/Refused)
- 14) How much effort did you personally have to put forth to get your issue resolved? (Low amount of effort/moderate amount of effort/High amount of effort/ Very High Amount of Effort/Issue Still Not Resolved/Don't Know/Refused)
- 15) Did you have to call 1-800 MEDICARE back to get your issues resolved? (Yes/No/Don't Know/Refused)
- 16) Did you get the answers to your questions during your first call to 1-800 MEDICARE? (Yes/No/Don't Know/Refused)
- 17) Were you instructed to either contact another agency or to call another number to get your questions answered? (Yes/No/Don't Know/Refused)
- 18) What other agency or phone number were you told to call? (Open text/Don't Know/Refused)
- 19) Did the other agency instruct you to call 1-800 MEDICARE back? (Yes/No/Don't Know/Refused)
- 20) How satisfied were you with the referral process? (Very Satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
- 21) Did you call multiple times about the same issue? (Yes/No/Don't Know/Refused)
- 22) In your own words, please explain why you needed to call back? (Open text/Don't Know/Refused)

- 23) Recently, you (wrote a letter/sent an e-mail) to Medicare. Medicare sent you a response on (date of letter/e-mail from Medicare). Did you receive the response? (Yes/No/Don't Know/Refused)
- 24) Was the response courteous? (Yes/No/Don't Know/Refused)
- 25) Did the response answer all of your questions? (Yes/No/Don't Know/Refused)
- 26) Was the response easy to understand? (Yes/No/Don't Know/Refused)
- 27) Did you receive a response in a timely manner? (Yes/No/Don't Know/Refused)
- 28) How many times did you write before you received a response that answered your question? (one time/two times/three times/four times or more/Don't Know/Refused)
- 29) Did your response arrive in time to assist you with your issues? (Yes/No/Don't Know/Refused)
- 30) Medicare sent you printed materials on (date materials sent). Did you receive the materials? (Yes/No/Don't Know/Refused)
- 31) Please tell us which materials you requested. (Open text/Don't Know/Refused)
- 32) Did you receive the correct materials? (Yes/No/Don't Know/Refused)
- 33) Did you receive the materials in an acceptable amount of time? (Yes/No/Don't Know/Refused)
- 34) Were the materials in good physical condition when you received them? (Yes/No/Don't Know/Refused)
- 35) Did the materials meet your needs? (Yes/No/Don't Know/Refused)
- 36) Were the materials you received easy to understand? (Yes/No/Don't Know/Refused)
- 37) Was there any information you wanted that was not in the materials you received? (Yes/No/Don't Know/Refused)
- 38) What is that information? (Open text/Don't Know/Refused)
- 39) Did the automated phone system provide you with all the information that you needed? (Yes/No/Don't Know/Refused)
- 40) Please think about your experience with the automated phone system and rate the clearness of the menu options that were provided. (Very Clear /Somewhat Clear/Clear/Not Clear/Don't Know/Refused)
- 41) Were you given enough time by the automated phone system to make your choices? (Yes/No/Don't Know/Refused)

- 42) Were the menu options given by the automated phone system easy to understand? (Yes/No/Don't Know/Refused)
- 43) How would you rate the ease of getting information from the automated telephone system? (1Poor-5Excellent)
- 44) Were your responses recognized by the automated telephone system? (Yes/No/Don't Know/Refused)
- 45) Were you able to have all of your needs met using only the automated telephone system and without talking to a representative? (Yes/No/Don't Know/Refused)
- 46) Have you tried to get information from the MyMedicare.gov Web site? (Yes/No/Don't Know/Refused)
- 47) Were you able to find the information you needed? (Yes/No/Don't Know/Refused)
- 48) Was the MyMedicare.gov Web site easy to use? (Yes/No/Don't Know/Refused)
- 49) Do you have any suggestions to improve the service provided by the MyMedicare.gov Web site? (Yes/No/Don't Know/Refused)
- 50) How satisfied are you with the overall service you received in your call to 1-800 MEDICARE? (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
- 51) How satisfied are you with the service you received from MEDICARE? (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
- 52) Were all of your questions fully answered? (Yes/No/Don't Know/Refused)
- 53) Do you feel confident about the information you received? (Yes/No/Don't Know/Refused)
- 54) If Medicare could change one thing to improve its service, what would that be? (Open text/Don't Know/Refused)
- 55) Regarding your (letter/e-mail/Web-chat communication), how satisfied are you with the overall service you received from Medicare? (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
- 56) Can you explain why you selected that rating? (Open text/Don't Know/Refused)
- 57) What is your relationship to the Medicare beneficiary? (Self/Spouse/Parent/Child/Other Caregiver/Other Relationship/Don't Know/Refused)
- 58) Are you the person in your household that called 1-800 MEDICARE? (Yes/No/Don't Know/Refused)

59) Are you the person in your household that wrote the letter to Medicare? (Yes/No/Don't Know/Refused)

60) Is the person in your household that called 1-800 MEDICARE available? (Yes/No/Don't Know/Refused)

61) May I please speak to the person who contacted 1-800 MEDICARE on (date of call to Medicare)? (Yes/No/I don't know/Provider answers/Person Not available)

Narration Needed for Contact (not survey questions)

- We appreciate your participation in this survey about the customer service you just received. Your answers will be used to improve 1-800 MEDICARE customer service.
- Your participation is voluntary and your answers will be treated as confidential. This call may be monitored for quality purposes.
- "Good _____ (morning, afternoon, evening). My name is _____ and I am calling on behalf of Medicare about a call that was made to 1-800 MEDICARE from this number on _____ (date).
- This is a survey about the customer service you received when you contacted 1-800 MEDICARE. Your answers may be used to improve the customer service at 1-800 MEDICARE. Your participation is voluntary and your answers will be treated as confidential. This call may be monitored for quality purposes."
- (NOTE: If the person who called Medicare answered the phone, proceed through the survey. If the person who called is available, say "May I speak with that person?" and if so, proceed through the survey with the customer. If not, say "Thank you, and have a good day. Goodbye." If the person is not available and/or does not wish to complete the survey, say, "Thank you and have a good day. Good-bye".)
- The survey usually takes approximately (Number depending on survey) minutes of your time.
- We are writing to you on behalf of Medicare about the (letter/e-mail/Web response) dated (date of response) that you recently received from Medicare in response to your (letter/e-mail/Web contact).
- Your participation is voluntary and your answers will be treated as confidential. Although you may have also called 1-800 MEDICARE, please think only about the written response you received from Medicare when you answer the following questions.

- Please remember that these questions are asking about (your call to 1-800 MEDICARE/your letter to Medicare/your e-mail to Medicare/your Web chat with Medicare).
- Although you may have also contacted Medicare by calling 1-800 MEDICARE, please think only about the written response you received from Medicare when you answer the following questions.
- Again, the rating scale is from one to five, where one is poor and five is excellent.
- (Note: Use only if the customer questions which CSR the survey is asking about.) You may have spoken with more than one Medicare representative when you called 1-800 MEDICARE. When answering questions about the service that you received, please think of the last representative that you talked with during your call.
- Thank you for contacting Medicare.
- Thank you for taking the time to answer these questions. Your answers will be used to help improve Medicare services.
- “Thank you for contacting 1-800 MEDICARE and for taking the time to answer these questions. Your answers will be used to help improve 1-800 MEDICARE services. Have a nice day. Good-bye”
- The “representative” is the person you spoke with during your call to Medicare.
- The “automated phone system” is what is used when you are asked to make choices by a recorded voice, before you get to the live representative.