CMS - NAS - JF MODEL QUESTION LIST
Model questions utilize the ACSI methodology to determine scores and impacts

ELEMENTS (drivers of satisfaction)	CUSTOMER SATISFACTION	FUTURE BEHAVIORS
*NOTE: **All** questions under each element are **required.** Element questions are partitioned among surveys.*	*Satisfaction questions are required. Satisfaction questions appear on all surveys.*	*Future behaviors may be modified based on your site's objectives.*

Content
(1=Poor, 10=Excellent, Don't Know)

1 Please rate the **accuracy of information** on this site.
2 Please rate the **quality of information** on this site.
3 Please rate the **freshness of content** on this site.

Functionality
(1=Poor, 10=Excellent, Don't Know)

4 Please rate the **usefulness of the services provided** on this site.
5 Please rate the **convenience of the services** on this site.
6 Please rate the **ability to accomplish what you wanted to** on this site.

Look and Feel
(1=Poor, 10=Excellent, Don't Know)

7 Please rate the **ease of reading** this site.
8 Please rate the **clarity of site organization**.
9 Please rate the **clean layout** of this site.

Navigation
(1=Poor, 10=Excellent, Don't Know)

10 Please rate the degree to which **the number of steps it took to get where you want** is acceptable.
11 Please rate the **ability to find information you want** on this site.
12 Please rate the **clarity of the site map/directory.**
13 Please rate the **ease of navigation** on this site.

Site Performance
(1=Poor, 10=Excellent, Don't Know)

14 Please rate the **speed of loading the page** on this site.
15 Please rate the **consistency of speed** on this site.
16 Please rate the **reliability of site performance** on this site.

Search
(1=Poor, 10=Excellent, Don't Know)

17 Please rate the **usefulness of search results** on this site.
18 Please rate how this site **provides comprehensive search results.**
19 Please rate the **organization of search results** on this site.
20 Please rate how the **search feature helps you to narrow the results** to find the

Satisfaction
(1=Poor, 10=Excellent)

21 What is your **overall satisfaction** with this site?
22 How well does this site **meet your expectations**?
23 How does this site **compare to your idea of an ideal website**?

Likelihood to Return
(1=Not Very Likely, 10=Very Likely)

24 How likely are you to **return to this site**?

Recommend
(1=Not Very Likely, 10=Very Likely)

25 How likely are you to **recommend this site to someone else**?

Primary Resource
(1=Not Very Likely, 10=Very Likely)

26 How likely are you to **use this site as your primary resource** for getting information on Medicare?

Model Instance Name:			red & strike-through: DELETE			
CMS - NAS - JF			*underlined & italicized*: RE-ORDER			
MID: NF4scAwcRwRlh55YUJ4cEw==			pink: ADDITION			
Date: 2/24/2010			blue + -->: REWORDING			

CMS - NAS - JF CUSTOM QUESTION LIST

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	Question Label
51958		Which best describes you?	Provider of medical services		Radio button, one-up vertical	Single	Y	OPS Group	Best describes you
			Supplier of medical equipment or supplies						
			Staff of provider/supplier working primarily with billing/insurance					**CMS Required**	
			Administrative staff of a provider/supplier						
			Other staff of a provider/supplier						
			Consultant or attorney						
			Billing service						
			Other (please specify)	A					
7000003	A	Other - which best describes you?			Text field, <100 char		No	OPS Group	Other-Best Describes You
CWS03909		What is your **primary reason** for visiting this site today?	Access claim status and/or beneficiary eligibility		Radio button, one-up vertical	Single	Y	OPS Group	Visit Reason
			Download forms						
			Learn of, or register for, workshops, seminars or other training events						
			Find contact information					**CMS Required**	
			Find general Medicare program information						
			Research a specific question on Medicare policy or billing						
			Find information on fees or fee schedules						
			Find out about a Local Coverage Determination (LCD)						
			Read Medicare publications such as newsletters, articles,etc.						
			Find enrollment information						
			Take an on-line training course						
			Other (please specify)	A					
CWS03910	A	Other - primary reason?			Text field, <100 char		No	OPS Group	Other Visit Reason
MMM00313		What led you to visit this site?	New provider to Noridian		Radio button, one-up vertical	Single	Y	OPS Group	
			Electronic Mailing list						
			Prior experience with Noridian						
			Recommendation						
			Remittance Advice/Noridian Letter						
			Peer or Association Referral						
			Search Engine						
			Other (please specify)	C					
MMM00314	C	Other - led you to visit			Text field, <100 char		N	OPS Group	
51957		**In the last 30 days,** how many times have you visited this website?	This is my first time		Radio button, one-up vertical	Single	Y		Visit Frequency
			Once or twice					**CMS Required**	
			Three or four times						
			More than once per week but not every day						
			Every day						
MMM00318		Please select the contract that bests describes what you are looking for.	Medicare Part A		Drop down, select one	Single	Y		Medicare Contract
			Medicare Part B						
			Other						
EDO08161		How did you primarily look for information on this site today?	Browsed pages by clicking links		Drop down, select one	Single	Y	Skip Group	Look for Info
			Searched using the site search feature	D					
			Used the site map						
EDO08162	D	What keywords did you use?			Text area, no char limit		N	Skip Group	Keywords

CMS - NAS - JF CUSTOM QUESTION LIST

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	Question Label
JKR00175		Did you find what you were looking for?	Yes		Radio button, one-up vertical	Single	Y	Skip Group	Did You Find
			No	E,F					
			I'm still searching						
KFB04014	E	Please tell us what you were trying to do or find on the website.			Text area, no char limit		No	Skip Group	Trying to Find
KFB04015	F	What will you do next?	Call the Noridian Medicare call center		Radio button, one-up vertical	Single	No	Skip Group	Do Next
			Nothing, although I did not find what I wanted						
			Return to the Noridian Medicare Web site later and try again						
			Send an email						
			Try another website						
			Try the CMS Website						
			Write a letter						
			Other	C					
KFB04016	C	Please explain what you will do next.			Text area, no char limit		No	Skip Group	Other-Looking For
51965		If you could identify one improvement to the Web site, what would that improvement be?			Text area, no char limit		N		Open-Improvement
JKR00076		Are you part of the Noridian Medicare electronic mailing list?	Yes - I am a member of the Noridian Medicare electronic mailing list		Radio button, one-up vertical	Single	Y		Mailing List
			Yes - Someone in my office is a member						
			No - I choose not to be part of Noridian Medicare's electronic mailing list						
			No - please supply me with the link to the subscription page upon survey completion						
CWS02766		If you are over the age of 18 and would like Noridian Administrative Services (NAS) to respond to your feedback regarding this website, please provide your email address here.			Text field, <100 char		N		Feedback email