## Model Instance Name:

MID:

Date: 8/9/2012

#### CMS - Novitas JH MAC

cwZRoAAYhptYdlcRBklYZw==



#### Welcome and Thank You Text

Directions:

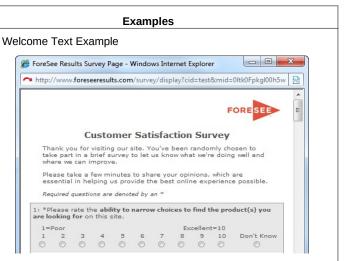
This welcome text is shown at the top of the questionnaire window and the thank you text at the bottom. This is a good place to mention the site/company/agency name so the visitor knows whom they are taking the survey for. Feel free to modify the standard Welcome text shown in the box below.

#### Welcome Text

Thank you for visiting the Novitas Solutions, Inc. Web site. You have been randomly selected to take part in this brief Web site satisfaction survey. Please take a few minutes to share your opinions regarding our Web site elements, such as navigation, search, content, etc., which are essential in helping us provide the best online experience possible. Your comments and scores on this survey will be directed to the Medicare Internet Team. Therefore, please limit your comments and scores on this survey to your experiences and opinions on the Web site only.

#### **Thank You Text**

Thank you for your time in completing this survey. Your input is very valuable and will be taken into consideration.



#### Thank You Text Example

Football Please Select -Hockey Please Select • 16: What size and style of jean were you shopping for today? What size of jean were you shopping for today? What style of jean were you shopping for today? 0 1 Boot cut 03 Contraction Low rise 5 Flare 0 7 Relaxed fit 0 9 Slim cut 0 11 0 13 Thank you for taking our survey - and for helping us serve you better. Please note you will not receive a response from us based on your survey comments. If you would like us to contact you about your feedback, please visit the Contact Us section of our web site. Cancel Submit Copyright 2010 - all rights reserved ForeSee Results Privacy Policy Survey Support Internet | Protected Mode: On 🖓 🔻 🔍 100% 🔻

# Model Instance Name: CMS - Novitas JH MAC

MID: Partitioned (Y)



Date: 8/9/2012

| CMS - Novitas JH MAC                 |   |        |                                |   |    |             |  |
|--------------------------------------|---|--------|--------------------------------|---|----|-------------|--|
|                                      | Model questions ut  | tilize | the ACSI m                     | ethodology to determine scores and impact   | ts |             |  |
|                                      | ELEMENTS (drivers of satisfaction)  |        |                                | CUSTOMER SATISFACTION   |    |             | FUTURE BEHAVIORS   |
| MQ Label                             | Comband (1-Door 10 Fuzzllant Doolk ((now)   |        | MQ Label                       | Satisfaction  |    | MQ Label    |  |
| 1Content - Accuracy                  | Content (1=Poor, 10=Excellent, Don't Know)<br>Please rate the accuracy of information on this site.         | 21     | Satisfaction -                 | Satisfaction<br>What is your overall satisfaction with this site?   | 2  | 4 Primary   | Primary Resource (1=Very Unlikely, 10=Very Likely)<br>How likely are you to use this site as your primary resource |
|                                      | ·····   |        | Overall                        | (1=Very Dissatisfied, 10=Very Satisfied)  |    | Resource    | for getting information on Medicare?   |
| 2Content - Quality                   | Please rate the <b>quality of information</b> on this site.   | 22     | Satisfaction -<br>Expectations | How well does this site <b>meet your expectations</b> ?<br>(1=Falls Short, 10=Exceeds)                      |    |             | Recommend (1=Very Unlikely, 10=Very Likely)  |
| 3Content - Freshness                 | Please rate the <b>freshness of content</b> on this site.   | 23     | Satisfaction -<br>Ideal        | How does this site <b>compare to your idea of an ideal</b><br>website?<br>(1=Not Very Close, 10=Very Close) | 2  | 5 Recommend | How likely are you to recommend this site to someone else?   |
|                                      | Functionality (1=Poor, 10=Excellent, Don't Know)  |        |                                |   |    |             | Return (1=Very Unlikely, 10=Very Likely)   |
| 4 Functionality -<br>Usefulness      | Please rate the <b>usefulness of the services</b> provided on this site.                                    |        |                                |   | 2  | 6 Return    | How likely are you to return to this site?   |
|                                      | Please rate the <b>convenience of the services</b> on this site.  |        |                                |   |    |             |  |
| 6 Functionality -<br>Accomplish Goal | Please rate the <b>ability to accomplish what you wanted</b> to on this site.                               |        |                                |   |    |             |  |
|                                      | Look and Feel (1=Poor, 10=Excellent, Don't Know)  |        |                                |   |    |             |  |
| 7 Look and Feel -<br>Readability     | Please rate the <b>ease of reading</b> this site.   |        |                                |   |    |             |  |
| 8Look and Feel -<br>Organization     | Please rate the <b>clarity of site organization</b> .   |        |                                |   |    |             |  |
| 9Look and Feel -<br>Layout           | Please rate the <b>clean layout</b> of this site.   |        |                                |   |    |             |  |
|                                      | Navigation (1=Poor, 10=Excellent, Don't Know)   |        |                                |   |    |             |  |
| 10 Navigation - Steps                | Please rate the degree to which the <b>number of steps it took to get where</b><br>you want is acceptable.  |        |                                |   |    |             |  |
|                                      | Please rate the ability to find information you want on this site.  |        |                                |   |    |             |  |
|                                      | Please rate the clarity of the site map/directory.  |        |                                |   |    |             |  |
| 13Navigation - Ease                  | Please rate the <b>ease of navigation</b> on this site.   |        |                                |   |    |             |  |
| 14Cooreb Hoofulnooo                  | Search (1=Poor, 10=Excellent, Don't Know) Please rate the usefulness of search results on this site.        |        |                                |   |    |             |  |
|                                      |   |        |                                |   |    |             |  |
| 15 Search -<br>Comprehensive         | Please rate how this site <b>provides comprehensive search results</b> .                                    |        |                                |   |    |             |  |
| 16 Search -<br>Organization          | Please rate the organization of search results on this site.  |        |                                |   |    |             |  |
| 17 Search - Narrow                   | Please rate how the <b>search feature helps you to narrow the results</b> to find the information you want. |        |                                |   |    |             |  |
| 10 Site Derformer                    | Site Performance (1=Poor, 10=Excellent, Don't Know)   |        |                                |   |    |             |  |
| 18 Site Performance -<br>Loading     | Please rate the <b>speed of loading the page</b> on this site.  |        |                                |   |    |             |  |
| 19 Site Performance -<br>Consistency | Please rate the <b>consistency of speed</b> on this site.   |        |                                |   |    |             |  |
| 20 Site Performance -<br>Reliability | Please rate the <b>reliability of site performance</b> on this site.  |        |                                |   |    |             |  |
|                                      |   |        |                                |   |    |             |  |
|                                      |   |        |                                |   |    |             |  |
|                                      |   |        |                                |   |    |             |  |
|                                      |   |        |                                |   |    |             |  |
|                                      |   |        |                                |   |    |             |  |

# Model Instance Name: ଲାଏହ cฟଥଝାଡିନ ଐଖାର୍କ୍ ନିର୍ଦ୍ଧାର RBkiyzw==

#### Date: 8/9/2012

### CMS - Novitas JH MAC CUSTOM QUESTION LIST

| QID     | Skip<br>Logic<br>Label | Question Text  |            | Answer Choices<br>(limited to 50 characters)                        | Skip to | Type (select from list)       | Single or<br>Multi | Required<br>Y/N |
|---------|------------------------|--|------------|---|---------|-------------------------------|--------------------|-----------------|
| LNH0240 |                        | In the last 30 days, how many times have you visited this website? | LNH0240A01 | This is my first time   |         | Radio button, one-up vertical | Single             | Y               |
|         |                        |  | LNH0240A02 | Once or twice   |         |                               |                    |                 |
|         |                        |  | LNH0240A03 | Three or four times   |         |                               |                    |                 |
|         |                        |  | LNH0240A04 | More than once per week but not every day                           |         |                               |                    |                 |
|         |                        |  | LNH0240A05 | Every day   |         |                               |                    |                 |
| LNH0241 |                        | Which best describes you?  | LNH0241A01 | Provider of medical services  |         | Radio button, one-up vertical | Single             | Y               |
|         |                        |  | LNH0241A02 | Supplier of medical equipment or supplies                           |         |                               |                    |                 |
|         |                        |  | LNH0241A03 | Staff of provider/supplier working primarily with billing/insurance |         |                               |                    |                 |
|         |                        |  | LNH0241A04 | Administrative staff of a provider/supplier                         |         |                               |                    |                 |
|         |                        |  | LNH0241A05 | Other staff of a provider/supplier                                  |         |                               |                    |                 |
|         |                        |  | LNH0241A06 | Consultant or attorney  |         |                               |                    |                 |

| Special Instructions | CQ Label           |
|----------------------|--------------------|
|                      | Visit Frequency    |
|                      |                    |
|                      |                    |
|                      |                    |
|                      |                    |
| Skip Logic Group*    | Best describes you |
|                      |                    |
|                      |                    |
|                      |                    |
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|                      |                    |