CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

16 Please rate the reliability of site performance on this site.

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

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

Search

Date: 11/7/2006

CMS - Noridian DME MAC MODEL QUESTION LIST Model questions utilize the ACSI methodology to determine scores and impacts CUSTOMER SATISFACTION **ELEMENTS (drivers of satisfaction) FUTURE BEHAVIORS** NOTE: All guestions under each element are required. Satisfaction questions are required. Future behaviors may be modified based on your site's Element questions are partitioned among surveys. Satisfaction questions appear on all surveys. objectives. Content atisfaction Likelihood to Return (1=Poor, 10=Excellent, Don't Know) (1=Not Very Likely, 10=Very Likely) 21 What is your **overall satisfaction** with this site? 24 How likely are you to return to this site? 1 Please rate the accuracy of information on this site. 22 How well does this site meet your expectations? 2 Please rate the quality of information on this site. 3 Please rate the freshness of content on this site. 23 How does this site compare to your idea of an ideal Recommend website? (1=Not Very Likely, 10=Very Likely) Functionality 25 How likely are you to recommend this site to someone else? (1=Poor, 10=Excellent, Don't Know) Please rate the usefulness of the services provided on this site. 5 Please rate the convenience of the services on this site. Primary Resource (1=Not Very Likely, 10=Very Likely) Please rate the ability to accomplish what you wanted to on this site. How likely are you to use this site as your primary resource for getting information on Medicare? 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 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.

Model Instance Name: CMS - Noridian DME MAC
MID: wYBJlxo11
Date: 2/24/2010

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2/24/2010

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			CMS - Noridian DME MAC 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		X	Provider of medical services Supplier of medical equipment or supplies Staff of provider/supplier working primarily with billing/insurance Administrative staff of a provider/supplier Other staff of a provider/supplier Consultant or attorney Billing service Other (please specify)	A	Radio button, one-up vertical	Single	Y	OPS Group CMS Required	Best describes you
7000003	Α	Other - which best describes you?			Text field, <100 char		N	OPS Group	Other-Best Describes You
CWS03909		What is your primary reason for visiting this site today?	Access claim status and/or beneficiary eligibility Download forms Learn of, or register for, workshops, seminars or other training events Find contact information 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	Radio button, one-up vertical	Single	Y	OPS Group CMS Required	Visit Reason
CWS03910	А	Other - primary reason?			Text field, <100 char		N	OPS Group	Other Visit Reason
EDO08161		How did you primarily look for information on this site today?	Browsed pages by clicking links Searched using the site search feature Used the site map Used the Endeavor portal	A B C	Drop down, select one	Single	Y	Skip Group	Look for info
ACQhar0015423	А	If you used the left side navigation, please tell us about your experience.			Text area, no char limit		N	Skip Group	Left Nav Experience
EDO08162	В	What keywords did you use?			Text area, no char limit		N	Skip Group	Keywords
ACQhar0015424	С	Please tell us about your experience using the site map.			Text area, no char limit		N	Skip Group	Site Map Experience

Model Instance Name: CMS - Noridian DME MAC MID: Date:

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			CMS - Noridian DME MAC CUSTOM QUESTION LI	ST					
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 No I'm still searching	E,F	Radio button, one-up vertical	Single	Y	Skip Group	Did you find
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 Nothing, although I did not find what I wanted Return to the Noridian Medicare website later and try again Send an email Try another website Try the CMS website Write a letter Other	c	Radio button, one-up vertical	Single	No	Skip Group	Do Next
KFB04016	С	Please explain what you were looking for.			Text area, no char limit		No	Skip Group	Other-Looking For
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC Other		Drop down, select one	Single	Y		Medicare Contract
51957		In the last 30 days, how many times have you visited this website?	Once or twice Three or four times More than once per week but not every day Every day		Radio button, one-up vertical	Single	Y	CMS Required	Visit Frequency
JKR00236		What led you to visit this site?	New Supplier to Noridian Email from CMS / Noridian Prior experience with CMS / Noridian Remittance Advice/Noridian Letter Peer or Association Referral Search engine Noridian customer service representative Other (please specify)	D	Radio button, one-up vertical	Single	Y	OPS Group	Visit Driver
MMM00419	D	Other - led you to visit this site			Text field, <100 char		N	OPS Group	Other-Visit Driver
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 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		Radio button, one-up vertical	Single	Y		Mailing List
CWS02767		If you are over the age of 18 and would like Noridian to respond to your feedback regarding this website, please provide your email address here.			Text field, <100 char		N		Feedback Emai

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			CMS - Noridian DME MAC CUSTOM QUESTION	I 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 Supplier of medical equipment or supplies		Radio button, one-up vertical	Single	Y	OPS Group	Best describes you
		V	Staff of provider/supplier working primarily with billing/insurance Administrative staff of a provider/supplier Other staff of a provider/supplier					CMS Required	
		X	Other staff of a provider/sur ther Consultant or attorney Billing service						
7000003		Other which heat describes usu2	Other (please specify)	А	Text field, <100 char		N	OPS Group	Other-Best
7000003	A	Other - which best describes you?			Text lield, <100 char		IN .	OPS Group	Describes You
CWS03909		What is your primary reason for visiting this site today?	Access claim status and/or beneficiary eligibility Download forms Learn of, or register for, workshops, seminars or other training events		Radio button, one-up vertical	Single	Y	OPS Group	Visit Reason
			Find contact information Find general Medicare program information					CMS Required	
			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)						
CWS03910	A	Other - primary reason?	Other (please specify)		Text field, <100 char		N	OPS Group	Other Visit Reason
EDO08161		How did you primarily look for information on this site today?	Browsed pages by clicking links	А	Drop down, select one	Single	Y	Skip Group	Look for info
			Searched using the site search feature Used the site map	B C					
ACQhar0015423	A	If you used the left side navigation, please tell us about your experience.	Used the Endeavor portal		Text area, no char limit		N	Skip Group	Left Nav Experience
EDO08162	В	What keywords did you use?			Text area, no char limit		N	Skip Group	Keywords
ACQhar0015424	С	Please tell us about your experience using the site map.			Text area, no char limit		N	Skip Group	Site Map Experience

Model Instance Name: CMS - Noridian DME MAC
MID: wYBJlxo1|
Date: 2/24/2010

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2/24/2010

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			CMS - Noridian DME MAC CUSTOM QUESTION L	IST					
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 No I'm still searching	E,F	Radio button, one-up vertical	Single	Y	Skip Group	Did you find
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 Nothing, although I did not find what I wanted Return to the Noridian Medicare website Web site later and try again Send an email Try another website Try the CMS wWebsite Write a letter Other	C	Radio button, one-up vertical	Single	No	Skip Group	Do Next
KFB04016	С	Please explain what you were looking for.	Gille		Text area, no char limit		No	Skip Group	Other-Looking For
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC Other		Drop down, select one	Single	Y		Medicare Contract
51957		In the last 30 days, how many times have you visited this website?	Once or twice Three or four times More than once per week but not every day Every day		Radio button, one-up vertical	Single	Y	CMS Required	Visit Frequency
JKR00236		What led you to visit this site?	Every day New Supplier to Noridian Email from CMS / Noridian Prior experience with CMS / Noridian Remittance Advice/Noridian Letter Peer or Association Referral Search engine Noridian customer service representative Other (please specify)	D	Radio button, one-up vertical	Single	Y	OPS Group	Visit Driver
MMM00419	D	Other - led you to visit this site	Other (pieuse specify)		Text field, <100 char		N	OPS Group	Other-Visit Driver
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 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		Radio button, one-up vertical	Single	Y		Mailing List
CWS02767		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

Model Instance Name: CMS - Noridian DME MAC

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			•						
	Skip		Answer Choices			0			
COID	Logic Label	Question Text	(limited to 50 characters)	Skin to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	Ougstion Labol
51958	Label	Which best describes you?	(illilited to 50 characters)	Skip to	Radio button, one-up vertical	Single	1/N	OPS Group	Best describes
31930		William best describes you:	Provider of medical services		radio batton, one-up vertical	Sirigic		Or 5 Group	you
			Supplier of medical equipment or supplies	+					,
			Staff of provider/supplier working primarily with billing/insurance	1				CMS Required	
			Administrative staff of a provider/supplier	1					
		l Y	Other staff of a provider/sup lier						
			Consultant or attorney						
			Billing service	1					
			Other (please specify)	Α .					
7000003	Α	Other - which best describes you?	<u> </u>		Text field, <100 char		N	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)	4					
			Read Medicare publications such as newsletters, articles,etc.	4					
			Find enrollment information	4					
			Take an on-line training course	4 .					
0111000010		au :	Other (please specify)	A	5.11 400.1			0000	0.1 1.5 5
CWS03910	A	Other - primary reason?			Text field, <100 char		N	OPS Group	Other Visit Reason
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
ED008101		How did you primarily look for information on this site today?	Browsed pages by clicking links	A	Drop down, selectione	Single	Y	Skip Group	LOOK IOI IIIIO
			Searched using the site search feature	В					
			Used the site map	⊣ Շ					
NEW	Α	If you used the left side navigation, please tell us about your	Osed the site map		Text area, no char limit		N	Skip Group	Left Nav
- V		experience.			Toke area, 110 chai ililiic		I IV	Skip Group	Experience
EDO08162	В	What keywords did you use?			Text area. no char limit		N	Skip Group	Keywords
NEW	C	Please tell us about your experience using the site map.			Text area. no char limit		N	Skip Group	Site Map
					The state of the s			Timp Group	Evporioneo

Model Instance Name: CMS - Noridian DME MAC MID: wYBJIxo1REp.

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blue + -->: REWORDING

Date: 2/24/2010

			CMS - Noridian DME MAC CUSTOM QUESTION I	LIST					
COID	Skip Logic Label	Ouestion Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi	Required Y/N	Special Instructions	Ouestion Label
JKR00175		Did you find what you were looking for?	Yes		Radio button, one-up vertical	Single	Υ	Skip Group	Did you find
			No I'm still searching	E,F					
KFB04014		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 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	Radio button, one-up vertical	Single	No	Skip Group	Do Next
KFB04016	С	Please explain what you were looking for.	Control Contro		Text area, no char limit		No	Skip Group	Other-Looking For
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC Other		Drop down, select one	Single	Y		Medicare Contract
51957		In the last 30 days, how many times have you visited this website?	Once or twice Three or four times More than once per week but not every day Every day		Radio button, one-up vertical	Single	Y	CMS Required	Visit Frequency
JKR00236		What led you to visit this site?	Every Oay New Supplier to Noridian Email from CMS / Noridian Prior experience with CMS / Noridian Remittance Advice/Noridian Letter Peer or Association Referral Search engine Noridian customer service representative Other (please specify)	D	Radio button, one-up vertical	Single	Y	OPS Group	Visit Driver
MMM00419	D	Other - led you to visit this site	The second secon		Text field, <100 char		N	OPS Group	Other-Visit Driver
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 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		Radio button, one-up vertical	Single	Y		Mailing List
CWS02767		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

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CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)		Type (select from list)	Single or Multi
i 1958		Which best describes you? Jyotsna. Bisaro: Required of CMS contractors	Provider of medical services Supplier of medical equipment or supplies Staff of provider/supplier working primarily with billing/insurance Administrative staff of a provider/supplier Other staff of a provider/supplier Consultant or attorney Billing service Other (please specify)	A	Radio buttons	select one
000003	Α	Other - which best describes you?			Text field	
CWS03909		What is your primary reason for visiting this site today? Jyotsna.Bisaro: Required of CMS contractors	Access claim status and/or beneficiary eligibility Download forms Learn of, or register for, workshops, seminars or other training events Find contact information 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)	SKIP B	Radio buttons	select one
CWS03910	SKIP B	Other - primary reason?				
MMM00395		How did you primarily look for information on this site today?	Browsed pages by clicking links Searched using the site search feature Used the site map	E D E	Drop down, select one	Single
EDO08161		How did you primarily look for information on this site today?	Browsed pages by clicking links Searched using the site search feature Used the site map	D	Drop down, select one	Single

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CQID	Skip Logic Label	Question 1	[ext	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
JKR00175		Did you find what you were looking for?		No I'm still searching	E,F	Radio button, one-up vertical	Single
KFB04014	E	Please tell us what you were trying to d	o or find on the website.			Text area, no char limit	Open
KFB04015	F	What will you do next?	Jyotsna.Bisaro: Required of CMS contractors	Call the Noridian Medicare call center 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	С	Radio button, one-up vertical	Single
KFB04016	С	Please explain what you were looking for				Text area, no char limit	Open
CJKR00234		Which best describes your Medicare co	ontract of interest?	DME MAC		Drop down, select one	Single
				Other			

Required Y/N	Special Instructions OPS Group
Υ	OPS Group
No	OPS Group
Y	OPS Group
No	OPS Group
¥	
Υ	
N	

Required Y/N	Special Instructions
Y	If this, then CJKR00234
	If this, then KFB04015
	If this, then CJKR00234
No	
No	
No	
Υ	

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CQID 51958	Skip Logic Label	Question Text Which best describes you? Which best describes you? Jyotsna. Bisaro: Required of CMS contractors	Answer Choices (limited to 50 characters) Provider of medical services Supplier of medical equipment or supplies Staff of provider/supplier working primarily with billing/insurance Administrative staff of a provider/supplier Other staff of a provider/supplier Consultant or attorney Billing service Other (please specify)	A	Type (select from list) Radio buttons	Single or Multi select one
7000003	Α	Other - which best describes you?			Text field	
CWS03909		Jyotsna. Bisaro: Required of CMS contractors	Access claim status and/or beneficiary eligibility Download forms Learn of, or register for, workshops, seminars or other training events Find contact information 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)	SKIP B	Radio buttons	select one
CWS03910	SKIP B	Other - primary reason?				
MMM00395		How did you primarily look for information on this site today?	Browsed pages by clicking links Searched using the site search feature Used the site map		Drop down, select one	Single

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Skip		Annuar Chainea			Cinalo au
Logic	Question Text	Answer Choices (limited to 50 characters)	Skin to	Type (select from list)	Single or Multi
			Skip to		Single
	bid you find what you were looking for .		F. F	radio battori, one ap vertical	Olligic
			-,·		
Е	Please tell us what you were trying to do or find on the website.	·······································		Text area, no char limit	Open
F	What will you do next?	Call the Noridian Medicare call center		Radio button, one-up vertical	Single
	, , , , , , , ,		=	,	
		Send an email			
		Try another website	1		
		Try the CMS Website			
		Write a letter			
		Other	С		
С	Please explain what you were looking for.			Text area, no char limit	Open
	Which best describes your Medicare contract of interest?	DME MAC		Drop down, select one	Single
		Other			
	Which state do you reside in?	Not applicable		Drop down, select one	Single
		Alabama			
		Alaska			
		Arizona			
		Arkansas			
		Connecticut			
		Delaware			
		*			
			1		
			1		
			1		
			4		
			_		
	E F	Label Question Text Did you find what you were looking for? E Please tell us what you were trying to do or find on the website. F What will you do next?	Label Question Text (limited to 50 characters) Yes No	Label Question Text. (limited to 50 characters) Skip to Old you find what you were looking for? E Please tell us what you were trying to do or find on the website. F What will you do next? Call the Nordian Medicare call center Nothing, athrough 1 dd not find what I wanted Return to the Nordian Medicare Web site later and try again Send an email Try another website Try the CMS Website Write a later Other C Please explain what you were looking for. Which best describes your Medicare contract of interest? Which-state do you-reside in? Which-state do you-reside in what you were looking for. Call the Nordian Medicare call center Nothing and what you were looking for. Call the Nordian Medicare call center Nothing and what you were looking for. Call the Nordian Medicare call center Nothing and what you were looking for what you were looking for what you were looking for what you	Label Question Text Yes No No Passe to life what you were looking for? Yes No No No Passe to life us what you were brying to do or find on the website. Call the Nordian Medicare call center Nothing, although I did not find what I wanted Return to the Nordian Medicare Web site later and try again Send an entire Yes Passe to life which was the water of the Nordian Medicare with site later and try again Yes Passe vegicin what you were tooking for C Text area, no char limit Try in critical Newtone Yes Passe vegicin what you were tooking for C Text area, no char limit Try in critical Newtone Yes Passe vegicin what you were tooking for Pass

Required Y/N	Special Instructions
Y	OPS Group
No	OPS Group
Y	OPS Group
No	OPS Group
Y	

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CQID 51958	Skip Logic Label	Question Text Which best describes you?	Answer Choices (limited to 50 characters) Provider of medical services Supplier of medical equipment or supplies Staff of provider/supplier working primarily with billing/insurance Administrative staff of a provider/supplier	Skip to	Type (select from list) Radio buttons	Single or Multi select one
7000000		X Show which have described and	Other staff of a provider/supplication of a transport of a transpo	A	Total	
700003 51960	A	Other - which best describes you? What is your primary reason for visiting this site today?	Download forms Learn of, or register for, workshops, seminars or other training events Find contact information 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)	B	Text field Radio-buttons	select one
7000004	В	Other - primary reason?	Carol (process speedily)			
NEW		What is your primary reason for visiting this site today?	Access claim status and/or beneficiary eligibility Download forms Learn of, or register for, workshops, seminars or other training events Find contact information 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)	SKIP B	Radio buttons	select one
NEW	SKIP B	Other - primary reason?				
МММ00395		How did you primarily look for information on this site today?	Browsed pages by clicking links Searched using the site search feature Used the site map		Drop down, select one	Single

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	Skip Logic		Answer Choices			Single or
CQID	Label	Question Text	(limited to 50 characters)	Skip to	Type (select from list)	Multi
JKR00175		Did you find what you were looking for?	Yes		Radio button, one-up vertical	Single
			No	E, F		
KFB04014	E	Please tell us what you were trying to do or find on the website.	I'm still searching		Text area, no char limit	Open
XFB04014	-	Prease tell us what you were trying to do or find on the website.			Text area, no char iimit	Open
KFB04015	F	What will you do next?	Call the Noridian Medicare call center		Radio button, one-up vertical	Single
			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	С		
KFB04016	С	Please explain what you were looking for.			Text area, no char limit	Open
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC		Drop down, select one	Single
			Other			
C5839		Which state do you reside in?	Not applicable		Drop down, select one	Single
			Alabama			
			Alaska			
			Arizona			
			Arkansas			
			California			
			Colorado			
			Connecticut			
			Delaware			
			Florida			
			Georgia			
			Hawaii			
			Idaho			
			Illinois			
			Indiana			
			lowa			
			Kansas			
			Kentucky			
			Louisiana			
			Maine			
			Maryland			
			Massachusetts Mishinga			
			Michigan Minnesota			
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Required Y/N	Special Instructions
Y	OPS Group
	OPS Group
¥	OPS Group
Y	OPS Group OPS Group
	OPS Group

Requi	ired N	Special Instructions
No)	

CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 5/12/2009

red & strike through: DELETE

underlined & italicized: RE-ORDER

blue + -->: REWORDING

pink: ADDITION

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
51958		Which best describes you?	Provider of medical services Supplier of medical equipment or supplies Staff of provider/supplier working primarily with billing/insurance Administrative staff of a provider/supplier Other staff of a provider/supplic Consultant or attorney Billing service Other (please specify)		Radio buttons	select one
7000003	A	Other - which best describes you?	Other (piease specify)	^	Text field	
51960	^	What is your primary reason for visiting this site today?	Download forms Learn of, or register for, workshops, seminars or other training events Find contact information 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)	В	Radio buttons	select one
7000004	В	Other - primary reason?			Text field	
MMM00395		How did you primarily look for information on this site today?	Browsed pages by clicking links Searched using the site search feature Used the site map		Drop down, select one	Single

CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 5/12/2009

red & strike-through: DELETE

underlined & italicized: RE-ORDER

pink: Addition

blue + -->: REWORDING

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
JKR00175		Did you find what you were looking for?	Yes No I'm still searching	E, F	Radio button, one-up vertical	Single
KFB04014	E	Please tell us what you were trying to do or find on the website.	The state of the s		Text area, no char limit	Open
KFB04015	F	What will you do next?	Call the Noridian Medicare call center 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		Radio button, one-up vertical	Single
KFB04016	С	Please explain what you were looking for.	Other	С	Text area, no char limit	Open
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC Other		Drop down, select one	Single
C5839		Which state do you reside in?	Not applicable Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi		Drop down, select one	Single

Required Y/N	Special Instructions
Y/N	Instructions
Y	OPS Group
	OPS Group
Υ	OPS Group
	OPS Group
1	1

Requi	ired N	Special Instructions
No)	

CMS - Noridian DME MAC

MID: wYBJlxo1REpAFwEckohs0g==

Date: 5/12/2009

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blue + -->: REWORDING

	Skip					
	Logic		Answer Choices			Single o
CQID	Label	Question Text	(limited to 50 characters)	Skip to	Type (select from list)	Multi
JKR00232		Which best describes you?	Billing or administrative staff for supplier		Radio button, one-up vertical	Single
			Supplier			
			Administrative staff of a supplier			
			Other staff of a supplier			
			Billing service Consultant or attorney			
			Local, state, or federal government employee or contractor			
			Other health care insurer or agency			
			Other (please specify)	A		
KR00233	A	Other Which best describes you	(product (product operator))		Text field, <100 char	Open
1958		Which best describes you?	Provider of medical services		Radio buttons	select on
			Supplier of medical equipment or supplies			
			Staff of provider/supplier working primarily with billing/insurance			
		V	Administrative staff of a provider/supplier			
		X	Other staff of a provider/sylplier			
			Consultant or attorney			
			Billing service			
			Other (please specify)	SKIP A		
7000003	SKIP A	Other - which best describes you?			Text field	
JKR00235		What is your primary reason for visiting this site today?	Download forms		Radio button, one up vertical	Single
			Find contact information			
			Find enrollment information			
			Find general Medicare program information			
			Find information on fees or fee schedules			
			Find out about a Local Coverage Determination			
			Learn of, or register for, workshops, seminars or other training events			
			Read Medicare publications such as newsletters, press releases, etc.			
			Research a specific question on Medicare policy or billing			
			Take an on-line training course	В		
JKR00237	В	-Other Primary reason for visit	Other (please-specify)		Text field, <100 char	Open
1960		What is your primary reason for visiting this site today?	Download forms		Radio buttons	select one
		, - an primary reservoir rolling time size today?	Learn of, or register for, workshops, seminars or other training events			
			Find contact information			
			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			
			Take an on-line training course Other (please specify)	SKIP R		
7000004	SKIP B	Other - primary reason?	Take an on-line training course Other (please specify)	SKIP B	Text field	

Model Instance Name: CMS - Noridian DME MAC

MID:

Date:

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5/12/2009

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Searched using the site search feature

pink: ADDITION

Used the site map

blue + -->: REWORDING

	CMS - Noridian DME MAC CUSTOM QUESTION LIST									
COID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi				

CMS - Noridian DME MAC

MID: wYBJlxo1REpAFwEckohs0g==

Date: 5/12/2009

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underlined & italicized: RE-ORDER

pink: Addition

blue + -->: REWORDING

	Skip Logic		Answer Choices			Single or
CQID	Label	Question Text	(limited to 50 characters)	Skip to	Type (select from list)	Multi
CJKR00175		Did you find what you were looking for?	Yes		Radio button, one-up vertical	Single
			No	E, F		
KFB04014	E	Please tell us what you were trying to do or find on the website.	I'm still searching		Text area, no char limit	Open
NFB04014	-	rease tell us what you were trying to do or find on the website.			Text drea, 110 Char illilli	Open
KFB04015	F	What will you do next?	Call the Noridian Medicare call center		Radio button, one-up vertical	Single
			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	С		
KFB04016	С	Please explain what you were looking for.			Text area, no char limit	Open
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC		Drop down, select one	Single
			Other			
C5839		Which state do you reside in?	Not applicable		Drop down, select one	Single
			Alabama			
			Alaska			
			Arizona			
			Arkansas			
			California			
			Colorado			
			Connecticut			
			Delaware			
			Florida			
			Georgia			
			Hawaii			
			Idaho			
			Illinois			
			Indiana			
			Iowa			
			Kansas			
			Kentucky			
			Louisiana	_		
			Maine	_		
			Maryland	_		
			Massachusetts	_		
			Michigan			
			Minnesota	—		
	1	I .	Mississippi	1		1

Required Y/N	Special Instructions
Υ	OPS Group
	OPS Group
Υ	OPS Group
	OPS Group

Requi	ired N	Special Instructions
No)	

CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 5/12/2009

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underlined & italicized: RE-ORDER

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pink: Addition

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
CJKR00232		Which best describes you?	Billing or administrative staff for supplier		Radio button, one-up vertical	Single
			Supplier			
			Staff of provider/supplier working primarily with billing/insurance			
			Administrative staff of a supplier			
			Other staff of a supplier			
			Billing service			
			Consultant or attorney			
			Local, state, or federal government employee or contractor			
			Other health care insurer or agency			
			Other (please specify)	A		
CJKR00233	Α	Other Which best describes you			Text field, <100 char	Open
CJKR00235		What is your primary reason for visiting this site today?	Download forms		Radio button, one-up vertical	Single
			Find contact information			
			Find enrollment information			
			Find general Medicare program information			
			Find information on fees or fee schedules			
			Find out about a Local Coverage Determination			
			Learn of, or register for, workshops, seminars or other training events			
			Read Medicare publications such as newsletters, press releases, etc.			
			Research a specific question on Medicare policy or billing			
			Take an on-line training course			
			Other (please specify)	В		
CJKR00237	В	Other Primary reason for visit			Text field, <100 char	Open
CMMM00395		How did you primarily look for information on this site today?	Browsed pages by clicking links		Drop down, select one	Single
			Searched using the site search feature			
			Used the site map			

CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 5/12/2009

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pink: ADDITION

blue + -->: REWORDING

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
CJKR00175		Did you find what you were looking for?	Yes No I'm still searching	E, F	Radio button, one-up vertical	Single
KFB04014	E	Please tell us what you were trying to do or find on the website.	The state of the s		Text area, no char limit	Open
KFB04015	F	What will you do next?	Call the Noridian Medicare call center 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	Radio button, one-up vertical	Single
KFB04016	С	Please explain what you were looking for.	Other		Text area, no char limit	Open
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC Other		Drop down, select one	Single
C5839		Which state do you reside in?	Not applicable Alabama Alaska Arizona Arkansas California Colorado Connecticut Delaware Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi		Drop down, select one	Single

Required Y/N	Special Instructions

Requi	ired N	Special Instructions
No)	

CMS - Noridian DME MAC

MID: wYBJlxo1REpAFwEckohs0g==

Date: 5/11/2009

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underlined & italicized: RE-ORDER

pink: Addition

blue + -->: REWORDING

CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
CJKR00232		Which best describes you?	Billing or administrative staff for supplier		Radio button, one-up vertical	Single
			Supplier			
			Staff of provider/supplier working primarily with billing/insurance			
			Administrative staff of a supplier			
			Other staff of a supplier			
			Billing service			
			Clearinghouse			
			Consultant or attorney			
			Local, state, or federal government employee or contractor			
			EDI software vendor			
			Other health care insurer or agency			
			Other (please specify)	A		
CJKR00233	Α	Other Which best describes you			Text field, <100 char	Open
CJKR00235		What is your primary reason for visiting this site today?	Download forms		Radio button, one-up vertical	Single
			Find contact information			
			Find enrollment information			
			Find general Medicare program information			
			Find information on fees or fee schedules			
			Find out about a Local Coverage Determination			
			Learn of, or register for, workshops, seminars or other training events			
			Read Medicare publications such as newsletters, press releases, etc.			
			Research a specific question on Medicare policy or billing			
			Take an on-line training course			
			Other (please specify)	В		
CJKR00237	В	Other Primary reason for visit			Text field, <100 char	Open
СМММ00395		How did you primarily look for information on this site today?	Browsed pages by clicking links		Drop down, select one	Single
			Searched using the site search feature			
			Used the site map			

CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 5/11/2009

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CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
CJKR00175		Did you find what you were looking for?	Yes		Radio button, one-up vertical	Single
			No	SKIP E, F		
			I'm still searching	· ·		
IEW	SKIP E	Please tell us what you were trying to do or find on the website.			Text area, no char limit	Open
IEW	SKIP F	What will you do next?	Call the Noridian Medicare call center		Radio button, one-up vertical	Single
			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	С		
EW	С	Please explain what you were looking for.	Other		Text field <100 char	Onen
JKR00077	C	If you did not find what you were looking for, what will you do next?	Not applicable; I found/completed what I wanted		Text field, 4200 crital	Opon
JKKUUU77		if you did not find what you were looking for, what will you do next?			Radio button, one up vertical	Single
			Nothing, although I did not find/complete what I wanted			
			Call the Noridian Medicare call center			
			Return to the Noridian Medicare Web site later and try again			
			Send an email			
			Write a letter			
			Try another website			
			Try the CMS Website			
			Other (please specify)	e		
JKR00078	E	Other did you find what you were looking for			Text field, <100 char	Open
JKR00010		If you were not able to accomplish your goal in visiting this site today, please tell us what you were trying to do or find:			Text area, no char limit	Open
JKR00234		Which best describes your Medicare contract of interest?	DME MAC		Drop down, select one	Single
			Other			
5839		Which state do you reside in?	Not applicable		Drop down, select one	Single
			Alabama			
			Alaska			
			Arizona			
			Arkansas			
			California			
			Colorado			
			Conecticut Connecticut			
			Delaware			
			Florida			
			Georgia			1
			Hawaii			1
			Idaho			1
			Illinois			1
						1
			Indiana			1
			lowa			1
			Kansas			1
	1	I .	Kentucky		Í	1
			Louisiana			

Model Instance Name: CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 5/11/2009

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underlined & italicized: RE-ORDER

pink: ADDITION

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CQID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
-		•	Maine	·		
			Maryland			
			Massachusetts]		
			Michigan]		
			Minnesota]		
			Mississippi]		

Required Y/N	Special Instructions

Required Y/N	Special Instructions
No	

L	Required Y/N	Special Instructions

CMS - Noridian DME MAC

MID: wYBJlxo1REpAFwEckohs0g==

Date: 10/2/2008

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pink: Addition

blue + -->: REWORDING

QID	Skip Logic Label	Question Text	Answer Choices (limited to 50 characters)	Skip to	Type (select from list)	Single or Multi
CJKR00232		Which best describes you?	Billing or administrative staff for supplier		Radio button, one-up vertical	Single
			Supplier			
			Staff of provider/supplier working primarily with billing/insurance			
			Administrative staff of a supplier			
			Other staff of a supplier			
			Billing service			
			Clearinghouse			
			Consultant or attorney			
			Local, state, or federal government employee or contractor			
			EDI software vendor			
			Other health care insurer or agency			
			Other (please specify)	A		
CJKR00233	Α	Other Which best describes you			Text field, <100 char	Open
CJKR00235		What is your primary reason for visiting this site today?	Download forms		Radio button, one-up vertical	Single
			Find contact information			
			Find enrollment information			
			Find general Medicare program information			
			Find information on fees or fee schedules			
		Find out about a Local Coverage Determination				
			Learn of, or register for, workshops, seminars or other training events			
			Read Medicare publications such as newsletters, press releases, etc.			
			Research a specific question on Medicare policy or billing			
			Take an on-line training course			
			Other (please specify)	В		
CJKR00237	В	Other Primary reason for visit			Text field, <100 char	Open
CMMM00395		How did you primarily look for information on this site today?	Browsed pages by clicking links		Drop down, select one	Single
			Searched using the site search feature			
			Used the site map			

CMS - Noridian DME MAC

MID: wYBJIxo1REpAFwEckohs0g==

Date: 10/2/2008

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underlined & italicized: RE-ORDER

pink: Addition

blue + -->: REWORDING

QID CJKR00175	Skip Logic Label	Question Text Did you find what you were looking for?	Answer Choices (limited to 50 characters) Yes No	Skip to	Type (select from list) Radio button, one-up vertical	Single or Multi Single
CJKR00077		If you did not find what you were looking for, what will you do next?	I'm still searching Not applicable; I found/completed what I wanted Nothing, although I did not find/complete what I wanted Call the Noridian Medicare call center Return to the Noridian Medicare Web site later and try again Send an email Write a letter Try another website Try the CMS Website Other (please specify)	C	Radio button, one-up vertical	Single
CJKR00078	С	Other did you find what you were looking for	Other (piedase specify)	-	Text field, <100 char	Open
CJKR00010		If you were not able to accomplish your goal in visiting this site today, please tell us what you were trying to do or find:			Text area, no char limit	Open
CJKR00234		Which best describes your Medicare contract of interest?	DME MAC Other		Drop down, select one	Single
C5839		Which state do you reside in?	Not applicable Alabama Alaska Arizona Arkansas California Colorado Conecticut Delaware Florida Georgia Hawaii Idaho Illinois Indiana Iowa Kansas Kentucky Louisiana Maine Maryland Massachusetts Michigan Minnesota Mississippi		Drop down, select one	Single

Required Y/N	Special Instructions

Special Instructions