

Part C and D Complaints Resolution Performance Measure

CMS-10308

OMB Supporting Statement – Part B

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Contents

Collection of Information Involving Statistical Methods.....	3
1. Respondent Universe.....	3
2. Procedures for the Collection of Information.....	8
3. Methods to Maximize Response Rates and Data Reliability.....	9
4. Tests of Procedures or Methods.....	10
5. Individuals Consulted on Statistical Methods.....	10

Collection of Information Involving Statistical Methods

1. Respondent Universe

CMS is interested in gathering information to determine beneficiaries' satisfaction with the complaints resolution process and developing internal monitoring measures and tools. This data collection effort emphasizes that the monitoring measures are developed separately for each contract. The survey population is made up of beneficiaries with complaints that were filed against their respective contracts at any time during a calendar year. This data collection period was chosen because CMS is interested in surveying a census (as opposed to a sample) of beneficiaries in order to achieve the most statistically valid information at the contract level and for certain subpopulations, as well as for monitoring performance along the calendar year. Beneficiaries who filed a complaint from all Medicare Advantage and Prescription Drug contracts will be surveyed regardless of the contract's enrollment size. However, members of 800 series contracts will be excluded from selection. 800 series contracts are MA Organizations, PDP sponsors, and Section 1876 Cost Plan Sponsors that offer, sponsor, or administer certain types of employer sponsored group contracts (employer/union-only group waiver contracts also referred to as EGWPs). In this case, but also in other situations, CMS excludes EGWPs as they are overseen differently than other MA and PDP contracts. Complaints that are not relevant to the eligible contracts will not be included in the universe. Complaints filed by providers and those that fall under the CTM exclusion criteria established by CMS will also be excluded.

This survey will collect data about beneficiaries' experience with the contract sponsor complaint resolution processes and the effectiveness of the resolution (a discussion of the survey questions and monitoring measures is included in Supporting Statement A, section B.16.a. Tabulations). The survey census will be pulled from all the complaints as they are closed in CMS Complaints Tracking Module (CTM) database every two weeks on a flowing basis. The data collection period will allow for a waiting period of 7 days for CMS and contract records to be updated before attempting communicating with the beneficiary.

We propose to survey all complaints in the universe instead of a sample from the universe for two major reasons. First, CMS aims to develop statistical sound monitoring measures with the survey response for all contracts. Given the relatively low response rate for a Web survey, for most contracts (those with small and medium complaint count), all complaints will need to be included to reach the required responses necessary for developing statistical valid measures. Based on 2012 complaints data from CTM, out of 587 eligible contracts with at least one complaint, 580 contracts need to include all complaints for reaching a precision of 5% error margin and 95% confidence level assuming 30% response rate and 1.2 DEEF. The total initial sample size would be 83% of the total universe size. Second, for a few contracts with large numbers of complaints, we could survey a sample instead of the whole population. However, it is challenging to determine which contract we

should sample since the number of complaint at a specific point in time is uncertain until close to the midway the calendar year and the number of complaint for each contract changes over year.

Table B.1 summarizes the total number of complaints in the universe, total responses needed based on error margin of 5% and 10% (and 4 different confidence levels), and total initial sample estimated assuming 30% response rate and a design effect of 1.2. The total number of complaints resolved in 2012 was 59,032 and the complaints are from a total 587 eligible contracts. The distribution of complaints among contracts is uneven, ranging from 1 to 500 or more. As we can follow from the Total rows in Table B.1, there are several options for the initial sample size under a DEEF=1.2, 30% response rate and several confidence intervals. For example, the initial sample would be 41,611 complaints for reaching a precision level of 80% confidence level or an initial sample of 49,059 beneficiaries for a sample with 95% confidence level. Please note that These numbers are closer to the total complaint count.

In our current approved OMB survey and sampling methodology, we are using an error margin of 10% to estimate the required number of respondents. As seen below, we could achieve a confidence interval higher than 95% (number of respondents required for a 10% error margin at a 95% confidence interval is 16,753) if, as expected, we obtain a 30% response rate of the universe (59,032), that is, 17,710 complaints.

Table B.1 Summary of estimated sample size for 2012

category by complaint count	count of contracts	complaint population	Required number of respondents with 5% error margin				Estimated initial sample size with DEEF=1.2 and response rate of 30%			
			Confidence Interval				Confidence Interval			
			95%	90%	85%	80%	95%	90%	85%	80%
1-19	247	2,024	2024	2024	2024	2024	2024	2024	2024	2024
20-49	131	4,418	4108	3979	3855	3724	4418	4418	4418	4418
50-99	99	6,989	5939	5573	5240	4917	6989	6989	6989	6989
100-499	91	17,521	11259	9857	8753	7772	17521	17521	17521	17521
500+	19	28,080	5290	4044	3255	2672	18107	14998	12808	10659
Total	587	59,032	28620	25477	23127	21109	49059	45950	43760	41611
Category by complaint count	Count of contract	Complaint population	Required number of respondents with 10% error margin				Estimated initial sample size with DEEF=1.2 and response rate of 30%			
			Confidence Interval				Confidence Interval			
			95%	90%	85%	80%	95%	90%	85%	80%
1_19	247	2024	2024	2024	2024	2024	2024	2024	2024	2024
20_49	131	4418	3327	3019	2758	2496	4418	4418	4418	4418
50_99	99	6989	4066	3457	3001	2616	6989	6989	6989	6989
100_499	91	17521	5666	4467	3665	3055	16739	15190	13528	11867
500+	19	28080	1669	1208	944	756	6641	4810	3744	2994
Total	587	59032	16753	14176	12393	10948	36812	33432	30704	28293

Table B.2 displays the required number of responses and the estimated sample size for selected contracts with various complaint population sizes in the event that a census survey were not implemented . The last seven contracts at bottom are the contracts that could utilize a sample instead of the whole population for a precision level of 5% margin error with 95% confidence level assuming a 30% response rate and DEEF as 1.2. For example, contract S5803 has a total of 1,581 complaints, 310 responses are needed to develop the measures at a 5% error margin with a 95% confidence level. Assuming the response rate is 30%, the initial sample size needs to be adjusted into 1,033 ($310/0.3$). Since we would sample complaints every two weeks immediately after the complaints are resolved, we need to consider the effect of differential selection probabilities (DEEF) on measure precision. The final initial sample size would be about 1,237 ($1,033 \times 1.2$). As it can be seen this number (1,237) is close to the total universe (1,581) which is only known after the end of the calendar year.

For other contracts, we have to include all complaints in the survey in order to have as many responses as possible. For example, contract S5596 has 646 complaints in total. 242 responses would be needed to develop the measures with a 5% margin of error and a 95% confidence level. Assuming the response rate of 30% and DEEF as 1.2, we would need 968 initial sample, which is larger than the total achieved in 2012. For our purposes, we would have to include all the complaints. In such case, we may only be able to have about 193 ($646 \times 30\%$) responses. The developed measure with these 193 responses could only reach the precision level of error margin of 5% with 90% confidence level.

Table B.2 Estimated sample size for contracts in 2012 (selected contracts for illustration)

Contract ID	complaint population	Required number of respondents with 5% error margin				Estimated initial sample size with DEEF=1.2 and response rate of 30%			
		Confidence Interval				Confidence Interval			
		95%	90%	85%	80%	95%	90%	85%	80%
H0294	1	1	1	1	1	1	1	1	1
H1302	20	20	20	20	20	20	20	20	20
H1418	50	45	43	41	39	50	50	50	50
H4209	100	80	74	68	63	100	100	100	100
H3456	201	133	116	103	91	201	201	201	201
S7694	311	173	145	125	108	311	311	311	311
S5932	409	199	164	138	118	409	409	409	409
R5941	523	222	179	149	125	523	523	523	500
S5596	646	242	191	158	131	646	646	629	524
S5617	710	250	197	161	134	710	710	643	534
H0543	999	278	214	172	141	999	853	688	564
S5810	1020	280	215	173	142	1020	857	690	566
S5660	1056	282	216	174	142	1056	863	694	568
H0524	1070	283	217	174	143	1070	865	696	569
R5826	1355	300	226	180	147	1198	903	720	586
S5967	1441	304	228	182	148	1214	912	726	589
S5803	1581	310	232	184	149	1237	925	734	595
S5601	2199	328	242	190	153	1309	965	759	611
S5768	2207	328	242	190	153	1310	965	759	611
S5884	4897	357	257	199	159	1426	1026	796	635
S5820	5423	359	258	200	160	1436	1032	800	637

Table B.3 displayed the distribution of complaints by major complaint category and by months in 2012. We anticipate that the survey will be conducted on a monthly basis during an entire calendar year.

Table B.3 Distribution of Complaints by Month(resolved) and Category (2012)

Complaint Category	Total	% Total Volume	% Month 1	% Month 2	% Month 3	% Month 4	% Month 5	% Month 6	% Month 7	% Month 8	% Month 9	% Month 10	% Month 11	% Month 12
Enrollment/Disenrollment	19621	33.2%	40.5%	34.9%	32.2%	32.5%	30.5%	29.4%	30.2%	29.6%	30.9%	28.1%	32.5%	38.7%
Benefits/Access	14943	25.3%	23.7%	24.5%	27.4%	26.7%	28.2%	27.4%	25.0%	23.9%	23.4%	25.9%	23.8%	21.8%
Pricing/Co-Insurance	6506	11.0%	9.7%	10.1%	9.8%	11.1%	10.8%	12.4%	12.0%	13.1%	13.4%	13.5%	11.4%	9.8%
Formulary	5794	9.8%	10.6%	12.7%	12.1%	10.0%	9.3%	8.7%	10.0%	8.5%	7.4%	6.8%	5.2%	8.5%
Plan Administration	4361	7.4%	6.6%	7.2%	6.4%	7.2%	7.3%	6.1%	6.8%	7.9%	7.6%	8.7%	10.4%	9.1%
Customer Service	2559	4.3%	2.9%	3.9%	4.2%	4.9%	5.0%	4.9%	4.9%	5.5%	5.1%	4.6%	4.8%	3.3%
Exceptions/Appeals	2479	4.2%	3.6%	3.6%	4.3%	3.7%	4.0%	4.8%	4.4%	4.7%	4.6%	5.1%	4.8%	4.5%
Marketing	2149	3.6%	1.4%	2.4%	2.7%	3.2%	3.8%	5.2%	5.5%	5.1%	6.1%	5.8%	5.3%	3.4%
other	620	1.1%	1.0%	0.6%	0.8%	0.7%	1.1%	1.2%	1.2%	1.7%	1.5%	1.6%	1.8%	0.9%
Total	59032		7237	8014	7769	5936	5254	4245	3704	3421	2554	3168	3107	4623

Note: the first 8 major categories are listed and the rest are represented by –other. Percentages are based on column totals.

2. Procedures for the Collection of Information

a) Statistical Methodology, Estimation, and Degree of Accuracy

We recommend not pursuing a sample of complaints for the survey as the primary means of data collection. We propose to survey the universe of CTM complaints. There are two arguments for this approach. First, CMS aims to develop statistical sound monitoring measures with the survey response for all contracts. Given the relatively low response rate for a Web survey, the large majority of contracts would need all complaints selected for sampling to reach the required responses necessary for developing statistical valid measures. Second, it is challenging to determine which contracts we should sample on an going activity (filling CTM complaints) since the level of total complaints at a specific point in time is uncertain until halfway the calendar year for any contract, and contract's complaints volume changes over year.

If the complaint volume has a similar count in CY2013 as in CY2012, we estimate a census of about 59,032 beneficiaries that will result in 17,710 completed web surveys (30% response rate) for CY2013. These will allow us to reach a precision level that is slightly higher than 10% error of margin at 95%.

b) Unusual Problems Requiring Specialized Sampling Procedures

This survey will collect data about immediate-need complaints, which must be closed within 48 hours, and urgent complaints, which must be closed within 7 to 10 days. To account for the delays needed by health contracts to close the complaints filed during a week, the bi-weekly data pull will include complaints filed during the 7-day period that ended 10 days prior to the beginning of the sample selection. This delay in data collection would allow for allow time for beneficiaries to receive notification of their complaint resolution or for data to be updated in the electronic systems.

c) Periodic Cycles to Reduce Burden

We will implement the survey over a period of 3 months in 2013. The analysis of the survey data and the construction of the monitoring measures will be completed in August 2013. The data collection will continue and run concurrently with the analysis and continue into 2014 and 12 months in each calendar year thereafter in order to collect data regarding beneficiaries' recent experience with their health contract's complaint resolution process. The need for each collected survey to target one specific complaint makes a cyclical collection of data unfeasible.

3. Methods to Maximize Response Rates and Data Reliability

a) Response Rates

We estimate a census of about 59,032 beneficiaries to result in 17,710 completed web surveys (30% response rate) with an additional 500 completed paper surveys. To achieve this target, we will utilize an approach that utilizes a web survey as the primary mode of data collection with a paper and pencil self-administered survey as a secondary mode for beneficiaries who cannot access the web survey.. We believe this response rate is achievable for three reasons: (1) this is a government-sponsored survey related to Medicare; (2) we will be surveying a motivated population of people who have taken a stance and filed a complaint by calling 1-800-Medicare; 3) we have achieved 80% response rate in a telephone-mail survey on the same topic, and (4) we are surveying respondents who filed their complaints through an online portal and asking them to respond to an online survey. Research¹ has shown that providing respondents their mode of choice (in this case a web survey with mail option) they are more likely to respond to a survey.

First, before the web survey begins, an advance letter describing the purpose and sponsorship of the survey will be mailed to potential respondents (the letter is presented in Appendix D). The letter will provide a toll-free call-in number and a link and instructions for how to access the survey. One or two reminder postcard with a URL for the web survey will be sent to all nonrespondents approximately two weeks after the advance letter mailing.

b) Reliability of Data Collection

The beneficiary questionnaire was built on questionnaires developed for other studies, including the CAHPS Hospital Survey and the CAHPS Health Plan Survey (Adult Medicaid Questionnaire), both of which were reviewed and approved by OMB. Although the two CAHPS surveys served as the original framework for the questionnaire, PDP Customer Service measures were reflected in several questions. The J.D. Power and Associates –2009 National Health Insurance Plan Study¹¹ question topics regarding customer satisfaction were also incorporated. The questions were designed to ensure that they would be easily understood by respondents. Revisions were made to the draft questionnaire based on the results of the pretest, feedback from CMS stakeholders, and public comments received from the publication of the 60-day Federal Register Notice during 2010 OMB PRA process.

The use of a programmable survey will help to ensure the consistency of the data. The web-based survey instrument controls question branching (reducing item nonresponse due to interviewer error), modifies wording (providing memory aids and probes and personalizing questions), and constructs complex sequences that are not possible to produce or are less accurate in hard-copy surveys. The probes, verifications, and consistency checks are built into the system and standardize the procedures. These procedures ensure the reliability of the data collection methods and the data

¹ Olson, K., Smyth, J.D. & Wood, H.M. (2012) *Does giving people their preferred survey mode actually increase survey participation rates? An experimental examination.* Public Opinion Quarterly, 76 (4). 611 – 635.

collected through those methods. Issues regarding the uniformity of completed surveys through the web-based mode of data collection are detailed in Supporting Statement A (Section B.3. Use of Information Technology).

4. Tests of Procedures or Methods

Pilot Test: After receipt of OMB approval, we will conduct a pilot test with approximately 500 beneficiaries in April 2013. The sample will be selected randomly following the proposed sampling plan for the actual survey. The purpose of the pilot is to test the usability of the web survey, refine the data collection process, and produce preliminary measure statistics – essentially, it is a dry run of all activities for the full-scale data collection. On issues of the data collection process, some of the testing will include:

- Sending a pre-notification letter to sampled beneficiaries;
- Loading sample information into the survey website
- Reviewing the data collected to make sure the questions are performing as intended under real field conditions; and

Findings from the pilot test will be used to refine the data collection process to ensure seamless implementation of the main survey. Both quantitative and qualitative analyses will be conducted with pilot test data. These analyses will focus one main objective: To note any necessary changes to logistics and operations.

The answers from the pilot will not be added to the survey results from the actual data collection. At the end of the pilot test, we will submit a sample report reflecting the information collected from the pilot test. This sample report will assist CMS in refining the reporting requirements.

5. Individuals Consulted on Statistical Methods

The following persons outside of CMS contributed to, reviewed, and/or approved the design, instrumentation and sampling plan:

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