

## Attachment C: Recruitment Communications

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### Communication #1: Advance email to state staff implementing the MAPCP Demonstration

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Email subject: MAPCP Demonstration provider survey to be fielded 3/11/14 – 4/22/14

[First name of state staff member(s) leading state's MAPCP Demonstration] –

**We wanted to let you know that RTI International, the CMS contractor conducting the MAPCP evaluation, will be emailing all providers in the MAPCP Demonstration in the coming weeks to ask them to complete an online survey. We are hoping you can help us get the word out to providers about this survey, assure them that this is an official part of the demonstration, and encourage them to take the survey.**

We will be asking each provider in a practice (i.e., all MDs, DOs, NPs, and PAs) to complete this online survey, which will ask them about the extent to which they engage in various care processes related to the medical home model of care. The survey will be available to be completed online for 6 weeks (from March 11, 2014 to April 22, 2014). We estimate that the survey will take 18 minutes to complete.

Could you please let your providers know that we will be in touch with them in the coming weeks to invite them to take this survey? Just a brief mention during already-scheduled webinars, conference calls, and/or meetings would be really helpful – and/or if you'd like to send out an email about this, that would also be great.

Thanks,

[Email signature block of CMS project officer for Evaluation of MAPCP Demonstration, Suzanne Wensky]

**Communication #2: Advance letter to practice managers before start of survey administration period**

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[RTI letterhead]

[Date]

[Name of practice manager]

[Mailing Address]

**Re: Provider survey for evaluation of [state abbreviation]'s [state-specific name of MAPCP Demonstation initiative] / CMS's MAPCP Demonstration**

Dear [Dr./Mr./Ms.] [LastName] –

We are writing to request your assistance in making the health care providers in your practice aware of an important online survey that will be fielded in the coming weeks by researchers evaluating [state]'s [state-specific name of MAPCP Demonstration], which is part of the Multi-payer Advanced Primary Care Practice (MAPCP) Demonstration sponsored by the Centers for Medicare & Medicaid Services (CMS).

The survey will ask whether providers engage in various activities and care processes associated with the medical home model of care. It should take about 18 minutes for each of them to complete.

When we email you with a link to this voluntary survey in the next few weeks, please forward it to all of the medical doctors, doctors of osteopathy, nurse practitioners, and physician's assistants in your practice. The deadline for completing the survey will be April 22, 2014.

Responses to this survey will be analyzed by an independent research team (from RTI International, the Urban Institute, and the National Academy for State Health Policy) to produce de-identified, aggregated results for CMS. Individual responses to survey questions will not be shared with CMS, your state's Medicaid agency, private insurance companies, nor any other parties.

Enclosed is a \$50 [gift card / check] to thank you for your assistance in conveying this information to the providers in your practice. In addition, we are hoping you can help us by forwarding reminder emails that we will occasionally send about completing this survey.

If you have any questions, please feel free to contact us.

Thank you,

Nancy McCall, Sc.D., R.N., Principal Investigator

Stephen Zuckerman, Ph.D.

### Communication #3: Email to practice managers at start of survey administration period

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Email Subject: Provider survey for evaluation of [state abbreviation]'s [state-specific name of MAPCP Demonstation initiative] / MAPCP Demonstration

Dear [Dr./Mr./Ms.] [LastName] –

I am emailing you to request your help in conveying the following information to the physicians, nurse practitioners, and physician assistants that treat patients in your practice. This is in reference to a study they are participating in. Could you please forward this email to them?

Thanks,

[Email signature block with full contact info for a RTI/Urban/NASHP research assistant]

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Dear [Dr./Mr./Ms.] [LastName], [Dr./Mr./Ms.] [LastName], [etc.] –

A team of researchers working with the Centers for Medicare & Medicaid Services (CMS) is evaluating its Multi-payer Advanced Primary Care Practice (MAPCP) Demonstration, which includes [state]'s [state-specific name of MAPCP Demonstration].

**All providers (MDs, DOs, NPs, and PAs) participating in [state]'s [state-specific name of MAPCP Demonstration] are asked to complete the following online survey** *[if applicable: regardless of whether they are receiving payments through this initiative or not].*

This voluntary survey asks providers whether they engage in various activities and care processes associated with the patient-centered medical home model of care. It should take about **18 minutes** to complete.

Responses will be analyzed by a research team from RTI International, the Urban Institute, and the National Academy for State Health Policy to produce de-identified, aggregated findings for CMS. Individual responses to questions will be kept **confidential** and not shared with CMS, your state's Medicaid agency, private insurers, nor any other parties.

Providers who are willing to participate in this research are asked to complete the survey **by April 22, 2014**. Custom hyperlinks for each provider in your practice appear below:

[Dr./Mr./Ms.] [Last name of provider #1 in practice]: [[Hyperlink to online survey](#)]

[Dr./Mr./Ms.] [Last name of provider #2 in practice]: [[Hyperlink to online survey](#)]

[Dr./Mr./Ms.] [Last name of provider #3 in practice]: [[Hyperlink to online survey](#)]

We have asked the person who forwarded you this email to remind you and your colleagues about the deadline for completing this survey on a periodic basis, to help us obtain an adequate response rate – so you may receive occasional reminders from them about our survey request.

If anyone has any questions, please feel free to contact Stephen Zuckerman, Ph.D., at 202-261-5679 or [szuckerman@urban.org](mailto:szuckerman@urban.org).

Thank you for considering this request,

[Email signature block with full contact info for a RTI/Urban/NASHP research assistant]

**Communication #4: Follow-up email to practice managers to be sent weekly by CMS's evaluation contractors**

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Email Subject: Survey for evaluation of [state abbreviation]'s [state-specific name of MAPCP Demonstation initiative] / MAPCP Demonstration

Dear [Dr./Mr./Ms.] [LastName] –

As a follow-up to our previous email(s) (below), we wanted to remind the physicians, nurse practitioners, and physician assistants in your practice about the survey we are conducting as part of our evaluation of [state]'s [state-specific name of MAPCP Demonstration], which is part of CMS's Multi-payer Advanced Primary Care Practice (MAPCP) Demonstration.

Providers who are willing to participate in our research are asked to **complete our confidential online survey by April 22, 2014**. Our records indicate that the following providers in your practice have not yet completed this survey. If they are willing to participate in our research, these providers should click on the custom hyperlink next to their name below:

[Dr./Mr./Ms.] [Last name of provider #1 in practice]: [[Hyperlink to online survey](#)]

[Dr./Mr./Ms.] [Last name of provider #2 in practice]: [[Hyperlink to online survey](#)]

[Dr./Mr./Ms.] [Last name of provider #3 in practice]: [[Hyperlink to online survey](#)]

Thank you,

[Email signature block with full contact info for a RTI/Urban/NASHP research assistant]

[Include full text of previously-sent Communication #3 email here]

**Communication #5: Follow-up email to state staff, asking them to remind providers about survey, to be sent 2 weeks into the survey administration period by CMS's evaluation contractors**

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Email subject: MAPCP Demonstration provider survey (3/11/14 – 4/22/14)

[First name of state staff member(s) leading state's MAPCP Demonstration] –

As a follow-up to our email from [xx/xx/xx] (below), we wanted to ask if you would be willing to remind providers participating in [state]'s [state-specific name of MAPCP Demonstration] about our confidential online survey, which we are currently in the middle of fielding.

Could you please urge them to **complete our survey by April 22, 2014** on any upcoming conference calls or in-person meetings you have scheduled with providers?

We have sent emails to each practice with custom hyperlinks for each provider to use to take our survey. If anyone has not received such an email request, could you please have them email [Name of an RTI/Urban/NASHP research assistant assigned to this state] at [their email address]?

Thanks,

[Signature block of staff member employed by CMS's evaluation contractor who has been the primary point of contact with that state]

[Include full text of previously-sent Communication #1 email here]

**Communication #6: Follow-up emails to be sent to state staff by CMS 4 weeks and 5 weeks into survey administration period if 80% response rate not yet reached**

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Email Subject: Provider survey for evaluation of [state abbreviation]'s [state-specific name of MAPCP Demonstation initiative] / MAPCP Demonstration

[First name of state staff member(s) leading state's MAPCP Demonstration] –

[I'm pleased to report that [##]% of providers participating in [state]'s [state-specific name of MAPCP Demonstation] have already completed the online survey being fielded by RTI as part of its evaluation of the MAPCP Demonstration. Thanks for your efforts to get the word out about this survey!

OR

I wanted to let you know that the MAPCP Evaluation Team are seeing a relatively low response rate among [state] providers to the online survey they are currently fielding as part of their evaluation of the MAPCP Demo. So far, only [##]% of providers participating in [state]'s [state-specific name of MAPCP Demonstation] have completed the survey. This low response rate is troubling because it has the potential to really curtail what the federal evaluators are able to say about the changes practices in [state] have made as a part of this demonstration. Is there anything you could do to increase provider awareness of this survey, and to convey to them the importance of completing this survey? The MAPCP Demonstration is the largest medical home pilot of its kind, and it would be a shame to not learn as much as we can about its impact, given how much money has been spent on this.]

To make sure the evaluators of the MAPCP Demonstration hit their goal of an 80% response rate to this survey, **could you please convey some additional reminders to your providers about this survey?** Although it is voluntary, it is very important to CMS that this survey be completed, to allow us to have a complete understanding of the impact of the MAPCP Demonstration on providers' adoption of the medical home model of care.

**The survey should be completed by all health care providers (physicians, nurse practitioners, and physician assistants) in all practices participating in the MAPCP Demonstration** [if applicable: regardless of whether they are receiving payments through this initiative or not].

It should take about **18 minutes** to complete.

Responses will be analyzed by our evaluators (RTI, the Urban Institute, and NASHP) to produce de-identified, aggregated findings. Individual responses to questions will be kept **confidential** and not shared with CMS, any [name of state] agencies, private insurers, nor any other parties.

Practices have been emailed customized hyperlinks for each of their providers to use to take this survey. If they did not receive these hyperlinks or need them to be re-sent, please have them contact [Name of an RTI/Urban/NASHP research assistant assigned to this state] at [their email

address]. Any questions about the survey can be directed to Stephen Zuckerman, Ph.D., at 202-261-5679 or [szuckerman@urban.org](mailto:szuckerman@urban.org).

Thanks for your help with this,

[Email signature block of CMS project officer for Evaluation of MAPCP Demonstration, Suzanne Goodwin]

[Email signature block of CMS project officer for MAPCP Demonstration, Jody Blatt]



**Communication #7: Final email to practices with non-responders, offering a PDF-and-fax option, to be sent by CMS’s evaluation contractors at the end of the 6-week survey administration period**

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Email Subject: Provider survey for evaluation of [state abbreviation]’s [state-specific name of MAPCP Demonstation initiative] / MAPCP Demonstration

Dear [Dr./Mr./Ms.] [LastName] –

Since some of the health care providers in your practice have not yet completed our online survey (being conducted as part of our evaluation of [state]’s [state-specific name of MAPCP Demonstration]), we would like to offer them the option of completing a hard copy version of this survey (attached) and faxing or mailing it back to us at [xxx-xxx-xxxx], or completing it online (which is still an option).

This survey is being administered as part of a federally-funded evaluation of CMS’s Multi-payer Advanced Primary Care Practice (MAPCP) Demonstration, which [state] is participating in through its [state-specific name of MAPCP Demonstration].

**We are asking all physicians, nurse practitioners, and physician assistants in your practice to complete this confidential survey.** Our records indicate that the following providers have not yet completed this survey:

- [Dr./Mr./Ms.] [Last name of provider #1 in practice]:** [\[Hyperlink to online survey\]](#)
- [Dr./Mr./Ms.] [Last name of provider #2 in practice]:** [\[Hyperlink to online survey\]](#)
- [Dr./Mr./Ms.] [Last name of provider #3 in practice]:** [\[Hyperlink to online survey\]](#)

We estimate that it will take **18 minutes** to complete this survey.

If any of these providers are willing to complete this survey, we would be happy to accept it by mail (at the address below) or by fax at [xxx-xxx-xxxx].

Thank you,

[Email signature block with full contact info for a RTI/Urban/NASHP research assistant]

[Include full text of previously-sent Communion #3 and #4 emails here]