

1. Describe (including a numerical estimate) the potential respondent universe and any sampling or other respondent selection methods to be used. Data on the number of entities (e.g., establishments, State and local government units, households, or persons) in the universe covered by the collection and in the corresponding sample are to be provided in tabular form for the universe as a whole and for each of the strata in the proposed sample. Indicate expected response rates for the collection as a whole. If the collection had been conducted previously, include the actual response rate achieved during the last collection.

The 2014 Consumer Assessment of Healthcare Providers and Systems Program Requirements (CAHPS) that is overseen by the U.S. Office of Personnel Management (OPM) is a program where OPM does not field any surveys itself but instead takes advantage of the data collected from surveys that are, for the most, part already being conducted industry-wide to meet National Committee of Quality Assurance (NCQA), state, and employer requirements.

Following NCQA specifications, all plan members that are commercially enrolled, that have been continuously enrolled for the prior 12 months, and that are 18 years of age or older as of the beginning of the measurement year, are eligible to be in the sample. (For FEHB Fee for Service Plans, OPM asks plans to include plans' Medicare beneficiaries as well as commercially enrolled members).

In 2008, OPM collected data submissions from 158 different plans. The 158 plans have a combined 21.6 million members eligible for the sample. A total of 205,444 plan members were selected by the plans to be in the survey sample. 75,092 or 36.6 percent of the survey sample members responded.

2. Describe the procedures for the collection of information including:

- Statistical methodology for stratification and sample selection,

Health plans are required to follow NCQA specifications for drawing a random sample. A random sample of all eligible sample members is drawn by each plan's survey vendor ensuring that no more than one person per household is drawn for the sample.

- Estimation procedure,

NCQA has set a sample size of 1,100 for each plan. Plans are allowed to oversample if they desire to do so. NCQA's goal is to get 411 completed survey responses per plan.

- Degree of accuracy needed for the purpose described in the justification,

The NCQA required sample size was determined by NCQA as appropriate to identify the desired level of statically significant difference.

- Unusual problems requiring specialized sampling procedures, and

Unless exceptions are allowed by NCQA, plans must follow standard sampling procedures.

- Any use of periodic (less frequent than annual) data collection cycles to reduce burden.

Some of the survey measures, namely Plan Information on Cost, Flu Shot, and Smoking Cessation have a low incidence among respondents. As a result there is not sufficient data to report on these measures with one year of data collection results. Instead of raising the sample size to address the low incidence, a rolling average of two years worth of data is used to report results for each plan for these measures.

3. Describe methods to maximize response rates and to deal with issues of non-response. The accuracy and reliability of information collected must be shown to be adequate for intended uses. For collections based on sampling, a special justification must be provided for any collection that will not yield "reliable" data that can be generalized to the universe studied.

Plans are required to follow the NCQA specified protocol to field the survey. Plans have the option of following a mail only protocol (survey package sent in the mail, reminder postcard, 2nd survey package to non-respondents, 2nd reminder postcard, 3rd survey package) or a mixed methodology protocol (survey package sent in the mail, reminder postcard, 2nd survey package to non-respondents, 2nd reminder postcard, three or more attempts to contact the sample member by phone)

The data collected provides a reliable measure of health plans in several areas.

4. Describe any tests of procedures or methods to be undertaken. Testing is encouraged as an effective means of refining collections of information to minimize burden and improve utility. Tests must be approved if they call for answers to identical questions from 10 or more respondents. A proposed test or set of test may be submitted for approval separately or in combination with the main collection of information.

Since OPM is using data collected by the industry, OPM does not participate in any testing for this survey.

5. Provide the name and telephone number of individuals consulted on statistical aspects of the design and the name of the agency unit, contractor(s), grantee(s), or other person(s) who will actually collect and/or analyze the information for the agency.

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