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### **Comments in Response to Federal Register Notice**

As required by 5 CFR 1320.8(d), on July 22, 2013 the Centers for Medicare & Medicaid Services (CMS) published a Federal Register notice (78 FR 43887) announcing an opportunity for the public to comment within 60 days on its intention to request an OMB review of data collection activities related to a nationwide Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey for adults in Medicaid.

In response, CMS received five sets of comments on its proposal to conduct a nationwide CAHPS survey of adult Medicaid beneficiaries, plus one set of comments intended for another Federal Register notice. Commenters included the California Department of Health Care Services, the Kaiser Commission on Medicaid and the Uninsured (KCMU), the Indian Health Service Tribal Self-Governance Advisory Committee, the National Indian Health Board, and the Tribal Technical Advisory Group. KCMU expressed support for CMS' overall plans to conduct a nationwide survey, and the proposed structure of the sample and sub-samples to include adults in both fee-for-service and managed care, adults with physical and mental disabilities, and dual eligible beneficiaries. KCMU indicated this approach will greatly enhance efforts to analyze and compare access under the Medicaid program's two major delivery and financing systems and help to better understand how Medicaid subgroups fare in absolute terms and, relative to each other. The California Department of Health Care Services and the organizations representing American Indians and Alaska Natives (AI/ANs) were generally supportive of the survey, but asked clarifying questions and expressed concerns, as described in **Attachment A**.

**Addendum:** CMS also received a set of comments, jointly submitted by the Urban Institute and Mathematica Policy Research, that urged approval of CMS' request to conduct a nationwide CAHPS survey of adults covered by Medicaid. The commenters discussed the deficit of information available at the national or state level for measuring and monitoring access and quality of care for subgroups in the Medicaid populations. They noted the benefits of CAHPS as a proven survey to capture this important information, and one that places a low burden on beneficiaries completing the survey.