

**Centers for Medicare & Medicaid Services (CMS)  
Provider Compliance Group  
Provider Customer Satisfaction Survey 2015  
Draft 3 9-28-15**

**(Items in BOLD are interviewer instructions, and are not intended to be read to the client)  
(Items marked *for example* should only be read if respondent needs clarification)**

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Introduction (Do not read)

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INTRO1. Hello, my name is \_\_\_\_\_. I am calling from ASVA on behalf of the Center for Medicare & Medicaid Services Provider Compliance Group. May I please speak with \_\_\_\_\_?

- |    |                      |   |                                  |
|----|----------------------|---|----------------------------------|
| 1  | Yes                  | > | <b>(Continue to INTRO2)</b>      |
| 2  | Person not available | > | <b>(Schedule a callback)</b>     |
| 3  | No such person       | > | "Thank you and have a nice day!" |
| 99 | Refusal/Hung Up      | > | "Thank you and have a nice day!" |

**(Programmer instructions: Read when the person named in INTRO1 comes to the phone)**

INTRO2. Hello, my name is \_\_\_\_\_ from ASVA calling on behalf of the CMS Provider Compliance Group (PCG). We are conducting a survey as part of the American Customer Satisfaction Index to determine how well our medical review contractors are servicing providers. The PCG will use this feedback to improve its services to you and others like you. Your answers are voluntary, but your opinions are very important. We will not ask any questions about confidential information. If at any time you do not feel comfortable answering a question, please say so. Your responses will be anonymous, and you will never be identified by name. This interview is authorized by Office of Management and Budget Control No. 1090-0007 which expires on March 31, 2018. This interview will take approximately 10 minutes. Is this a good time?

- 1 Yes **(Continue)**
- 2 No "Can we schedule a time that is more convenient for you?"

**(If respondent inquires about the purpose or validity of the survey, please refer to the following contact at CMS Ashley Ford (410-786-0828) or Alex Ambridge (410-786-8411))**

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Screening Question (Do not read)

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SQ1. Are you the person who typically responds to Recovery Auditor correspondence and documentation requests?

- a. Yes **(CONTINUE)**
- b. No ("Are you able to provide the contact information for the individual who does typically interact with your facility's Recovery Auditor?")
- c. Don't Know **(Don't read) (TERMINATE)**
- d. Refusal/Hung up **(TERMINATE)**

Q2.

SQ2. Which Recovery Audit Contractor do you interact with? **(Terminate if unable to identify one of the following.)**

- a. Region A – Performant
- b. Region B – CGI
- c. Region C – Connolly
- d. Region D – HDI

SQ3. What role do you play in this interaction?

- a. Mailroom person
- b. Medical record clerk
- c. Other (please specify)

SQ5. Who is your Medicare Administrative Contractor?

- a. J6 NGS
- b. JK NGS
- c. JH Novitas
- d. JL Novitas
- e. JN FCSO
- f. J10 Cahaba
- g. J11 Palmetto
- h. JE Noridian
- i. JF Noridian
- j. J5 WPS
- k. J8 WPS
- l. J15 CGS

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Documentation (Do not read)

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D1. How much money does your organization spend per month on responding to documentation requests from your Medicare FFS Recovery Auditors?

- a. (Record and bucket to the nearest \$500)**

D2. How does this level of monthly spending compare to requests from other CMS medical review contractors?

- a. Much lower
- b. Somewhat lower
- c. About the same
- d. Somewhat higher
- e. Much higher
- f. NA/DK

D3. How many hours per month does your organization spend responding to documentation requests from your Medicare FFS Recovery Auditors?

- b. (Record and categorize to the nearest 5)**

D4. How does this amount of time spent compare to other CMS medical review contractors?

- a. Much lower
- b. Somewhat lower
- c. About the same
- d. Somewhat higher
- e. Much higher
- f. NA/DK

Using a 10-point scale, in which “1” means “poor” and “10” means “excellent,” how would you rate ...

- D5. The directions provided to respond to additional documentation requests
- D6. The ease of locating the requested documentation
- D8. The explanation provided by the Recovery Auditor as to why your claims were selected for review

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Recovery Auditor Process (Do not read)

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Consider your most recent experience with the Recovery Auditor's medical review process. Using a 10-point scale, in which "1" means "poor" and "10" means "excellent," how would you rate ...

RAP1. The timeliness of the Review Results Letter.

RAP2. How often does your facility utilize the discussion period process?

- a. Sometimes
- b. Never (skip to next section)**
- c. Always

RAP2. How helpful did your facility find the discussion period process?

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Recovery Auditor Customer Service (Do not read)

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CC1. Have you called the Recovery Auditor's call center in the last year?

- a. Yes
- b. No (Skip to next section)**

Consider your most recent experience with the Recovery Auditor's call center. Using a 10-point scale, in which "1" means "poor" and "10" means "excellent," how would you rate ...

CC2. The ease of reaching the appropriate person

CC3. The time it took to reach the appropriate person

CC4. The respect shown by the staff

CC5. Staff's knowledge of the issue you called about

CC6. Did you require a follow up interaction?

- a. Yes
- b. No (skip to next section)**

CC7. Please rate the timeliness of this follow up

CC8. Have you contacted your Recovery Auditor via email in the last year?

- a. Yes
- b. No (Skip to next section)**

Consider your most recent experience with the Recovery Auditor's call center. Using a 10-point scale, in which "1" means "poor" and "10" means "excellent," how would you rate ...

CC9. The time it took to receive a response via email

CC10. Was your issue resolved via email?

- a. Yes
- b. No

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Recovery Auditor Website (Do not read)

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W1. How frequently do you use the Recovery Auditor website?

- a. Every day
- b. Once a week
- c. Once a month
- d. Every six months
- e. Once a year
- f. Never (**Skip to next section**)

Consider your most recent experience with the Recovery Auditor website. Using a 10-point scale, in which “1” means “poor” and “10” means “excellent,” how would you rate ...

W2. The ease of navigating the site to find the information you need (i.e., number of clicks)

W3. The ease of understanding the necessary information

W4. The degree to which the information available is current and up to date

W5. What, if anything, could be done to improve the provider website? [**RECORD OPEN END**]

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Recovery Auditor Provider Portals & Claims Status (Do not read)

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PP1. How frequently do you use the Recovery Auditor provider portals?

- a. Every day
- b. Once a week
- c. Once a month
- d. Every six months
- e. Once a year
- f. Never (**Skip to next section**)

Consider your most recent experience with the provider portals. Using a 10-point scale, in which “1” means “poor” and “10” means “excellent,” how would you rate ...

PP2. The ease of navigating the portal to find the information you need (i.e., number of clicks)

PP3. The ease of understanding the necessary information

PP4. The degree to which the information available is current and up to date

PP5. What, if anything, could be done to improve the provider portals? [**RECORD OPEN END**]

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ACSI Benchmark Questions (Do not read)

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- ACSI1. Using a 10-point scale on which "1" means "Very Dissatisfied" and "10" means "Very Satisfied," how satisfied are you with your interaction with the Recovery Audit Contractors?
- ACSI2. Forget for a moment your experience with your current Recovery Auditor. Now, imagine what an ideal Recovery Auditor would be like. **(Interviewer: Pause momentarily.)** How well does your current Recovery Auditor compare to the ideal? Please use a 10-point scale on which "1" means "Not very close to the ideal," and "10" means "Very close to the ideal."
- ACSI3. Forget for a moment your experience with your current Medicare Administrative Contractor. Now, imagine what an ideal medical review contractor would be like. (Interviewer: Pause momentarily.) How well does your current Medicare Administrative Contractor compare to the ideal? Please use a 10-point scale on which "1" means "Not very close to the ideal," and "10" means "Very close to the ideal."

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Outcome Measures (Do not read)

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- OM1. Using a 10-point scale, on which "1" means "not very confident" and "10" means "very confident," how confident are you that your Recovery Audit contractor will do a good job the next time you interact with him or her?

**[RECORD RATING 1-10]**

- OM2. Have you contacted your Recovery Auditor contractor with a complaint within the past 3 months?
- a. Yes
  - b. No **(skip to next section)**

- OM3. How was your most recent complaint handled? Please use a 10-point scale on which "1" means "handled very poorly" and "10" means "handled very well".

**[RECORD RATING 1-10]**

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Close (Do not read)

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- C1. Is there any additional information you would like to provide to help improve future interaction with you facility?

Thank you for your time. The CMS Provider Compliance Group appreciates your input and will use this feedback to better serve its customers. Have a nice day!