MAC Satisfaction Indicator (MSI) Questionnaire

The MAC Satisfaction Indicator (MSI) is designed to measure your satisfaction as a Medicare provider with the performance of your Medicare Administrative Contractor (MAC).

The MSI will <u>not</u> measure your satisfaction with other Medicare contractor types such as the Railroad Retirement Board (RRB), Recovery Audit Contractors (RACs), Comprehensive Error Rate Testing (CERT) contractors, Zone Program Integrity Contractors (ZPICs), Supplemental Medical Review Contractors (SMRCs) or Qualified Independent Contractors (QICs). This a random survey and will take about 10 - 15 minutes to complete. This survey is authorized by the U.S. Office of Management and Budget Control No. 1090-0007 which expires on 05-31-2018.

Throughout this document, the term provider is used inclusive of provider types, specialties and suppliers. The questionnaire is to be completed by you, the Medicare provider or supplier. If any of the work described in the sections below are handled by other personnel, you may want to ask them for the answers to the questions in the applicable section(s).

Programming Notes:
- *CFI Group will provide 16 secure URLs to be distributed to each MAC. As well, each completed survey will be identified by MAC jurisdiction.*
- *DME MACs (4) will not receive questions regarding EDI, Provider Enrollment and Cost Report Audit and Reimbursement. CFI will customize surveys for DME MACs, accordingly. Because of this, the DMEPOS answer option was removed from provider profile question #2.*
- *Automatic skip functionality will be programmed for Cost Report Audit and Reimbursement section for Part B providers*

PROVIDER PROFILE QUESTIONS

1. What part of Medicare are you, your practice or facility enrolled? (select one)

    a. Part A (Institutional)

    b. Part B (Professional)

    Profile question #1 is excluded from DME MAC surveys

2. What is your Medicare enrollment type or the enrollment type of your practice or facility? (Select one)

    a. Institutional Provider

    b. Clinic/Group Practice

    c. Physician

    d. Non-Physician Practitioner

    e. Other (please specify) _____

CLAIMS PROCESSING

Your MAC performs standard editing on Medicare claims from providers to determine whether the claims are complete and should be paid. This section contains questions regarding your experience working with your MAC in these areas.

3. In the past 6 months, has your practice or facility submitted claims?

    a. Yes

    b. No **(skip to Q10)**

(PROGRAMMING NOTE: A "NO" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR CLAIMS & EDI SECTIONS)

Think about the performance of your MAC with respect to Claims Processing. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

4. Communication with you regarding claims processing issues

5. Please provide any additional feedback you have about claims processing.

ELECTRONIC DATA INTERCHANGE (EDI) HELPDESK

(PROGRAMMING NOTE: PROGRAM AUTOMATIC SKIP FUNCTIONALITY FOR DME MACs)

Your MAC provides EDI helpdesk staff who have experience with the Accredited Standards Committee (ASC) X12 837, 276/277, 270/271, and 835 version 5010 transactions. This section contains questions regarding your experience working with your MAC in these areas.

6. In the last 6 months, have you interacted with your MAC EDI helpdesk staff?
    a. No

Think about general performance of your MAC with respect to handling electronic data interchange. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following**…

7. EDI support on electronic claims related transactions.

8. Timeliness of completing the EDI enrollment processing (Includes turnaround for additions, corrections, deletes or new installations)

9. Please provide us any additional feedback you have about EDI.

PROVIDER TELEPHONE INQUIRIES

Your MAC is responsible for handling all Medicare-related inquiries from providers. This section contains questions about telephone inquiries that you have made to your MAC's provider contact center.

10. In the **last 6 months,** how many times have you called your MAC's provider contact center?

       a. None **(skip to Q15)**
       b. 1 - 25
       c. 26 – 50
       d. 51 – 100
       e. More than 100

(PROGRAMMING NOTE: A "NONE" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR THIS SECTION)

Think about the overall performance of your MAC's Customer Service Representatives (CSRs) with respect to handling provider telephone inquiries. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

11. Consistency of the information you received from multiple CSRs on the same question (If you have not spoken with multiple CSRs on the same question, please select N/A.)

12. Ability to resolve your issue or to answer your question in one call

13. Service provided by Provider Contact Center.

14. Please provide us any additional feedback you have about Provider Telephone Inquiries.

INTERNET SELF-SERVICE PORTAL/IVR

Your MAC has an Internet self-service portal/ Interactive Voice Response (IVR) that allows providers to, at a minimum, access eligibility and claim status information. This section contains questions regarding your experience with using your MACs portal/IVR

15. In the last 6 months, how often have you used your MAC's portal? MAC's portal?

    a. No **(Skip to Q20)**
    b. 1 - 25
    c. 26 – 50
    d. 51 – 100
    e. More than 100

(PROGRAMMING NOTE: A "NO" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR QUESTIONS 16-19)

Think about your MAC's portal. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

    16. Ease of navigating the portal to obtain information

    17. How satisfied are you with the usefulness of your MAC's portal?

    18. What additional functionality would you like to see in your MAC's portal? (open-ended)

    19. In the last 6 months, how often have you used your MACs IVR?

    a. No **(Skip to Q22)**
    b. 1 - 25
    c. 26 – 50
    d. 51 – 100
    e. More than 100

(PROGRAMMING NOTE: A "NO" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR QUESTIONS 20-21)

Think about your MAC's IVR. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

20. Ease of navigating the IVR to obtain information

21. Usefulness of information from your MAC's IVR

MEDICAL REVIEW

Your MAC conducts medical reviews to promote a structured approach in the interpretation and implementation of Medicare policy, most often requiring the evaluation of medical records to determine the medical necessity of items and services reported in Medicare claims. This section contains questions regarding your experience working with your MAC in this area.

22. In the last 6 months, have you received medical review determinations and/or results letters?
    a. Yes
    b. No **(Skip to Q27)**

(PROGRAMMING NOTE: A "NO" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR THIS SECTION)

Think about the performance of your MAC with respect to handling Medical Reviews unrelated to a RAC or ZPIC. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following. If a statement does not apply to your practice or facility, select N/A.**

23. Clarity of medical review determinations involving pre-payments
24. Clarity of medical review determinations involving post-payments
25. Usefulness of information in educational links and resources in medical review results letters
26. Please provide us any additional feedback you have about Medical Review. (Open-ended)

PROVIDER OUTREACH AND EDUCATION

Your MAC educates and trains providers about the fundamentals of the Medicare program, policies, procedures, new Medicare initiatives, significant changes to the Medicare program, and

identified billing issues. These outreach and education activities and resources are aimed at reducing the number of provider inquiries and claims submission errors and include the following: In-person training or education events, teleconferences (including Ask-the-Contractor teleconferences), webinars, self-paced education (computer-based training, interactive tools, podcasts, other), electronic mailing list messages, MACs website (i.e., materials displayed on or downloaded from the website) and one-on-one training from MAC representatives.

This section contains questions regarding your experience with your MAC's provider outreach and education activities and resources

27. In the **last 6 months** how many times have you participated or used an outreach and education activity or resource offered by your MAC?
    a. None **(skip to Q32)**
    b. 1-5
    c. 6-10
    d. More than 10

(PROGRAMMING NOTE: A "NONE" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR THIS SECTION)

28. Which activity or resource offered by your MAC do you find most effective
    a. In-person training or education event
    b. Teleconferences, including Ask-the-Contractor Teleconferences
    c. Webinar(s)
    d. Self-paced education (web-based training, interactive tool, podcast, other)
    e. Electronic mailing list messages
    f. MAC's website (i.e., materials displayed on or downloaded from the website)
    g. One-on-one training by MAC representatives
    h. None
    i. Other, please specify _____

29. Please explain why you feel this activity or resource is most effective. (Open-ended)

30. Using a scale from 1 to 10, where 1 falls short of your expectations and 10 is exceeds your expectations; please rate your MAC's provider outreach and education activities.

31. Please provide us with any additional feedback you have about Provider Outreach and Education. (Open-ended)

REOPENINGS AND REDETERMINATIONS (APPEALS)

Your MAC, when appropriate, has the ability to do a reopening or a redetermination to review a payment or coverage decision. This section contains questions regarding your experience working with your MAC in this area.

32. In the last 6 months, have you submitted any reopenings or redeterminations?
    a. Yes
    b. No **(skip to Q35)**

(PROGRAMMING NOTE: A "NO" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR THIS SECTION)

Think about the performance of your MAC with respect to Appeals. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

33. The clarity of explanations of first level appeals (redeterminations) decisions

34. Please provide us any additional feedback you have about Reopenings and Redeterminations. (Open-ended)

PROVIDER ENROLLMENT

(PROGRAMMING NOTE: AUTOMATIC SKIP FUNCTIONALITY FOR DME MACs)

Your MAC works to ensure that only qualified individuals and organizations are enrolled or maintain their enrollment in the Medicare program. This section contains questions regarding your experience working with your MAC in this area.

35. In the **last 6 months**, have you gone through the Medicare enrollment process (i.e., initially enrolling, revalidating or providing updates to your current enrollment information)?
    a. Yes
    b. <mark>No</mark>

36. For applications your MAC most recently submitted, how many times did you call or write your MAC regarding the status of your application? Choose from one of the following responses:
    a. None (**skip to 38**)
    b. Once
    c. Twice
    d. Three or more times

(PROGRAMMING NOTE: A "NONE" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR THE NEXT QUESTION)

37. Approximately how many days passed between submission of your application and your first follow up status request?
    a. Less than 15 days
    b. 16-30 days
    c. 31-60 days
    d. Greater than 60 days

Think about the performance of your MAC with respect to Provider Enrollment. **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

38. Process used to provide the status of your enrollment application

39. The guidance your MAC provided you about the Medicare enrollment application, CMS Form 855 or Internet-based PECOS.

40. Please provide us with any additional feedback you have about Provider Enrollment:

(Open-ended)

COST REPORT AUDIT AND REIMBURSEMENT

(PROGRAMMING NOTE: TO BE COMPLETED BY PART A INSTITUTIONAL PROVIDERS ONLY; AUTOMATIC SKIP FUNCTIONALITY FOR PART B & DME MACS)

Your MAC is responsible for performing cost report acceptance, desk reviews, rate reviews, audits, settlements, reopenings, and cost report appeals, and interim rate activities for institutional providers and related home offices to provide assurance that all payments are based on Medicare reimbursement principles. This section contains questions regarding your experience working with your MAC in this area.

41. In the last 12 months, have you submitted a Medicare cost report to your current MAC?
> a. Yes
> b. No **(Skip to Q44)**
> c. A cost report is not required to be submitted for my provider/supplier type **(Skip to Q44)**

(PROGRAMMING NOTE: A "NO" OR "NOT REQUIRED" RESPONSE TO THIS QUESTION WILL GENERATE AUTOMATIC SKIP FOR THIS SECTION)

Think about the performance of your MAC with respect to Provider Audit and Reimbursement (cost report acceptance, desk reviews, rate reviews, audits, settlements, reopenings, and cost report appeals, and interim rate activities for institutional providers and related home offices). **Please use a 10-point scale, where 1 is poor and 10 is excellent to rate your MAC on the following** …

42. Effectiveness of your MAC's provider audit activities.

43. Please provide us any additional feedback about Cost Audit and reimbursement services. (Open-ended)

SATISFACTION QUESTIONS

Now think about the overall performance of your MAC to rate the following…

44. Using a scale from 1 to 10, where 1 is very dissatisfied and 10 is very satisfied; please rate your overall satisfaction with this MAC.

45. Using a scale from 1 to 10, where 1 is falls short of your expectations and 10 is exceeds your expectations; please rate the extent to which the service provided by this MAC falls short of or exceeds your expectations.

46. Now, forget about the MAC that you deal with and think about what the ideal would be like. Using a scale from 1 to 10, where 1 is **not** very close to the ideal and 10 is very close to the ideal; how does your MAC compare to your idea of an ideal MAC?

General Questions

47. We are interested in any specific comments you have about your MAC's performance and any rationale for your ratings in this questionnaire. If you have suggestions about the positive experiences you have had with your MAC or how your MAC's performance can be improved for a particular function or overall, please include your comments here.