PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is **0938-1300**. The time required to complete this information collection is estimated to average **60 minutes** per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. **Please do not send applications, claims, payments, medical records or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact Teresa DeCaro, teresa.decaro@cms.hhs.gov.**

Healthy Indiana Plan (HIP) 2.0 Enrollee Survey Testing Debriefing Script

Survey Background

Part of the federal evaluation of the Healthy Indiana Plan (HIP) 2.0 Demonstration will be based on information collected using three beneficiary survey instruments. The three target populations for the instruments include: (1) current HIP 2.0 beneficiaries; (2) newly enrolled HIP 2.0 beneficiaries; and (3) HIP 2.0 disenrollees and beneficiaries who have been "locked out." All instruments contain survey questions from existing beneficiary questionnaires, survey questions adapted from existing beneficiary questionnaires, and newly developed survey questions. The newly developed survey questions are especially important for testing, and focus on specific policies of interest to CMS. The beneficiary feedback captured by these instruments will help inform CMS decision making on health care policies.

The current HIP 2.0 includes the HIP Basic and HIP Plus beneficiary benefits packages.

This survey testing script serves as a guide for the interviewer debriefing on the HIP 2.0 Enrollee Beneficiary Survey.

Pretest Introduction [Interviewer reads]

On behalf of the Centers for Medicare & Medicaid Services and Social and Scientific Systems, Inc., thank you for agreeing to participate in this study of the Healthy Indiana Plan 2.0 (HIP 2.0). Your comments and opinions are very important to us.

<u>The purpose of this interview is not to collect data, but to test a questionnaire.</u> The questionnaire we are testing will be provided to Hoosiers as a paper questionnaire and an online (Web) questionnaire. Some of the questions we will review today may be difficult to understand, hard to answer, or can be understood in different ways. I am more interested in what you were thinking when you answered these questions than your actual answers. I would like to know your experience with deciding how to answer certain questions. We expect that some of questions will not be perfect, and that is what you will be helping us identify today. Do you have any questions about what I just told you?

After you complete the questionnaire, I will go through it with you and sometimes ask what you think about a question or what a particular word means to you. We will not go through every question. Please feel free to give me any other comments you might have at the end of the interview.

<u>Your comments will be kept private</u>. Please answer the questions as freely as you can. You may refuse to answer any question that you do not wish to answer. This interview should take no more than 45 minutes of your time.

Do you have any questions?

OK, let's begin. Please feel free to use your questionnaire to help you answer my questions.

DEBRIEFING SCRIPT – ENROLLEES

General Interviewer Probes

[Interviewer Instructions: The following questions are general probes that interviewers may use during the debriefing.]

- Could you please tell me more about that?
- Was that easy or hard to answer?
- How did you decide on that answer?
- How confident are you in your answer?
- Were any of the answer choices not clear, or confusing?
- I noticed that you hesitated please tell me what you were thinking.
- Were there any questions that were asked that did not seem to belong in this questionnaire?

Overarching/General Beneficiary Survey Interview Questions

INTERVIEWER: How easy or difficult was it to for you to understand the purpose of the survey?

INTERVIEWER: Based on your experience with the survey, how likely would you be to complete the actual paper mail in survey if you were selected to participate? Why/Why not?

Survey Section: Healthy Indiana Plan (HIP) 2.0

Question #: 3

INTERVIEWER: What does "benefits package" mean to you?

INTERVIEWER: Did the answer choices make sense? Are there any missing ones?

Survey Section: Transportation/NEMT

INTERVIEWER: Please think about the questions in the Transportation/NEMT section overall and how you answered them.

INTERVIEWER: How would you describe "transportation?"

Question #: 5

INTERVIEWER: Tell me in your own words what you think this question is asking.

Question #: 7

INTERVIEWER: When you were answering question 7, were you thinking about paying for transportation, getting transportation, or both?

Question #: 8 and 9

DEBRIEFING SCRIPT – ENROLLEES

INTERVIEWER: When you read question 8, did you think of not paying for transportation and not getting transportation as the same idea or two different ideas?

INTERVIEWER: Was this question easy or hard to answer?

INTERVIEWER: How confident are you with your answer?

Survey Section: Emergency Room

Question #: 10

INTERVIEWER: Now please look back at the definition we gave you in the emergency room section. Could you give me example of an <u>emergency</u> health condition? Of a <u>non-emergency</u> health condition?

Question #: 14

INTERVIEWER: In your own words, can you please tell me what question 14 is asking?

Question #: 17

INTERVIEWER: Do you think there are any answer choices missing in question 18?

Survey Section: POWER accounts and monthly or annual contributions

INTERVIEWER: Please think about the questions in the POWER account section and how you answered them.

INTERVIEWER: In the POWER account section in the questionnaire, what did the word "contribution" mean to you?

INTERVIEWER: Did the words "monthly or annually" make the question clearer or more confusing? Why?

INTERVIEWER: Before you read the POWER account definition provided in the questionnaire, did you know what a POWER account was? Did you know that you had one?

Question #: 22 and 23

INTERVIEWER: In questions 22 and 23, did the answer choices make sense? Are there any missing ones?

INTERVIEWER: In question 22, choice C, did the word "part" make the question clearer or more confusing? Why?

Question #: 24

INTERVIEWER: Please tell me in your own words what you think this question is asking.

PROBE: What were you thinking about when you answered this question? **DEBRIEFING SCRIPT – ENROLLEES**

Question #: 26

INTERVIEWER: In question 26, please tell me in your own words what answer "B" means. What does answer "C" mean?

Question #: 27

INTERVIEWER: In question 27, were any of the answer choices not clear?

INTERVIEWER: Do you think there are any answer choices that should be in this table but are missing?

Question #: 28

INTERVIEWER: What did the words "use your POWER account" mean to you?

PROBE: What actions were you thinking about for using your POWER account?

Question #: 29

INTERVIEWER: What did you think about when you were answering this question?

PROBE: How did you come up with your answer?

Question #: 30

INTERVIEWER: Could you say in your own words what "comfortable about paying for my health care services" means to you?

Question #: 32, 33, and 34

INTERVIEWER: Did you agree with the definition of "preventive services" or not? Were those examples what you usually think of as preventive care?

If "Not", what did "preventive services" mean to you?

INTERVIEWER: When you answered question #34, did you think about *all* of your preventive services, or only *some*?

If "Some "→ INTERVIEWER: Which preventive services were you thinking about?

Survey Section: Access

Question #: 36 and 38

INTERVIEWER: What length of time or time period did you think about when answering these questions?

Question #: 39

DEBRIEFING SCRIPT – ENROLLEES

INTERVIEWER: What did the word "cost" mean to you?

Question #: 40

INTERVIEWER: Did the examples for preventive care make sense to you or not?

INTERVIEWER: Are there any other preventive care examples you think we should include?

INTERVIEWER: What do you usually think of as preventive care? Could you give us some examples?

INTERVIEWER: Did you think about health care from only your doctor, or did you include other types of health care providers?

INTERVIEWER: Is there any other answer choice you think should be included?

Question #: 40

INTERVIEWER: Please look at answer "J," "dental care and vision (eye) care." Do you usually think of costs for these services as separate costs, or do you think of them as combined costs?

PROBE: Would you be able to split out your costs for dental and eye care, or not?

Survey Section: Demographics/About You

Question #: 50

INTERVIEWER: Was this question easy or hard to answer? Why?