

Proposed Phone Script for Interactive Voice Response (IVR) Customer Satisfaction Survey Questions

GREETING

We appreciate your participation in this survey about the customer service you just received. Your answers will be used to improve 1-800 MEDICARE customer service.

Your participation is voluntary and your answers will be treated as confidential. This call may be monitored for quality purposes.

NOTE: The actual IVR survey will consist of 8 of the following questions.

1. Were all of your questions fully answered? (Yes/No/Don't Know/Refused)
2. Do you feel confident about the information you received? (Yes/No/Don't Know/Refused)
3. Are you satisfied with the information you received? (Yes/No/Don't Know/Refused)
4. How would you rate the representative's knowledge of the Medicare system? (Very Knowledgeable/Knowledgeable/Somewhat Knowledgeable/Not Knowledgeable/Don't Know/Refused)
5. Did the representative understand your questions? (Yes/No/Don't Know/Refused)
6. Was any of the information provided in a way that was difficult to understand? (Yes/No/Don't Know/Refused)
7. What made the information difficult to understand? (Open text/Don't Know/Refused)
8. Did the representative take the time to understand your issues? (Yes/No/Don't Know/Refused)
9. Did the representative give you time to explain your questions? (Yes/No/Don't Know/Refused)
10. Do you feel you were treated courteously during the call? (Yes/No/Don't Know/Refused)
11. Was the representative helpful? (Yes/No/Don't Know/Refused)

12. Please rate your satisfaction with the amount of time you waited to talk with a representative. (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
13. Were you told someone from Medicare would call you back? (Yes/No/Don't Know/Refused)
14. Were you disconnected while you were waiting to talk to a representative? (Yes/No/Don't Know/Refused)
15. Were you asked to repeat your Medicare number more than once? (Yes/No/Don't Know/Refused)
16. Were you asked to repeat your question more than once? (Yes/No/Don't Know/Refused)
17. Were you able to easily understand the translator? (Yes/No/Don't Know/Refused)
18. Did you have to call 1-800 MEDICARE back to get your issues resolved? (Yes/No/Don't Know/Refused)
19. Were you instructed to either contact another agency or to call another number to get your questions answered? (Yes/No/Don't Know/Refused)
20. How much effort did you personally have to put forth to get your issue resolved? (Low amount of effort/moderate amount of effort/High amount of effort/ Very High Amount of Effort/Issue Still Not Resolved/Don't Know/Refused)
21. Did you speak with more than one Medicare representative during your call? (Yes/No/Don't Know/Refused)
22. Was this your first call to 1-800 MEDICARE to get these issues resolved? (Yes/No/Don't Know/Refused)
23. Did you call multiple times about the same issue? (Yes/No/Don't Know/Refused)
24. Did the automated phone system provide you with all the information that you needed? (Yes/No/Don't Know/Refused)
25. Please think about your experience with the automated phone system and rate the clearness of the menu options that were provided. (Very Clear /Somewhat Clear/Clear/Not Clear/Don't Know/Refused)
26. Were you given enough time by the automated phone system to make your choices? (Yes/No/Don't Know/Refused)
27. Were the menu options given by the automated phone system easy to understand? (Yes/No/Don't Know/Refused)

28. Were your responses recognized by the automated telephone system?
(Yes/No/Don't Know/Refused)
29. Were you able to have all of your needs met using only the automated telephone system and without talking to a representative? (Yes/No/Don't Know/Refused)
30. Do you have access to the Internet? (Yes/No/Don't Know/Refused)
31. How would you rate your own comfort level in finding information through the Internet? (Not comfortable in using the Internet / Somewhat comfortable in using the Internet/Comfortable in using the Internet/ /Very comfortable in using the Internet/Don't Know/Refused)
32. Have you tried to get information from the MyMedicare.gov Web site?
(Yes/No/Don't Know/Refused)
33. Would you be willing to use the MyMedicare.gov Web site to find the information you need? (Yes/No/Don't Know/Refused)
34. Were you able to find the information you needed? (Yes/No/Don't Know/Refused)
35. Was the MyMedicare.gov Web site easy to use? (Yes/No/Don't Know/Refused)
36. Did the representative remind you about the survey at the end of your call?
(Yes/No/Don't Know/Refused)
37. Was this acceptable to you? (Yes/No/Don't Know/Refused)
38. Has your issue been resolved? (Yes/No/Don't Know/Refused)
39. How satisfied are you with the overall service you received during your call? (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
40. How satisfied are you with information you received on different health care insurance plan available to you?
41. How satisfied are you with the overall service you received in your call to 1-800 MEDICARE? (Very satisfied/Satisfied/Dissatisfied/Very Dissatisfied/Don't Know/Refused)
42. Would you recommend the 1-800 MEDICARE telephone number to a friend?
(Yes/No/Don't Know/Refused)
43. How would you rate the person's ability to understand your question or concern?
44. How would you rate the person's ability to give you a clear answer to your questions?
45. How would you rate the person's knowledge of the Medicare system?

46. Thinking about your general experience with using the automated telephone system, how would you rate the clearness of the instructions?
47. How would you rate the time it took you to get through to a customer service representative who helped you?
48. Were you told to call a different phone number?
49. Were you calling for yourself or on behalf of someone else? (myself/someone else/Don't Know/Refused)
50. What is your relationship to the Medicare beneficiary? (Spouse/Parent/Child/Other Caregiver/Other Relationship/Don't Know/Refused)

Closing

Thank you for contacting 1-800 MEDICARE and for taking the time to answer these questions. Your answers will be used to help improve 1-800 MEDICARE services. Have a nice day. Good-bye”