**Supporting Statement for the**

**Paperwork Reduction Act of 1995**

**Attachment B: Key Informant Interview Instrument and Recruitment Materials**

**QIC Demonstration Evaluation Contractor (QDEC): Analyze Medicare Appeals to Conduct Formal Discussions and Reopenings with Suppliers**

**December 8, 2016**

Centers for Medicare & Medicaid Services

The Medicare Enrollment and Appeals Group (MEAG)

The Division of Appeals Operations (DAO)

7500 Security Boulevard

Baltimore, MD 21244

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## Invitation Letter



[CONTACTNAME]

[SUPPLIERNAME]

[SUPPLIER ADDRESS]

[SUPPLIER CITY], [SUPPLIER STATE] [SUPPLIER ZIP]

[Date]

Dear [CONTACTNAME]

Our records show that you participated in a formal telephone discussion related to a Medicare durable medical equipment (DME) claim on [DISCUSSIONDATE].

The Centers for Medicare &Medicaid Services (CMS) has contracted with IMPAQ International to evaluate the Formal Telephone Discussion Demonstration and Reopenings Process Demonstration (the Telephone Demonstration). As part of the evaluation, IMPAQ International is conducting follow-up interviews with a group of suppliers to better understand your experiences with formal discussions and your opinions about the Demonstration overall.

We would like to schedule a telephone conference with a representative of your firm who is most knowledgeable about the formal discussion in which you participated. The call will take less than 30 minutes, and your responses will be shared only in summary, general form. Your identity will remain confidential to IMPAQ, and will not be shared with CMS.

Your participation will help us provide CMS valuable information to help assess how well the Demonstration is working and how it can be improved.

A member of our team will be in touch with you soon to identify a convenient time for a short interview.

In the interim, if you have any questions please contact the Evaluation Team at DME-Discussions@impaqint.com. If you wish to confirm that our efforts are CMS-sponsored, please contact the CMS Contracting Officer’s Representative, Lynnsie Kelley, by email at Lynnsie.Kelley@cms.hhs.gov.

Sincerely,

Guido Cataife, Ph.D.

Project Director

IMPAQ International

## Key Informant Interview Protocol

*This interview guide is for use with suppliers who are selected at random from those that have completed a formal discussion.*

Hello, my name is **[interviewer name]** from IMPAQ International. We are a research firm, located in Columbia, MD, that conducts evaluations of policies and programs. Thank you again for agreeing to be interviewed today. I am joined today by **[note-taker name]** from IMPAQ, who will be taking notes for the interview.

We are part of a team evaluating CMS’s Demonstration that involves formal telephone discussions and reopenings related to DME claims.

Our evaluation of the Formal Telephone Demonstration is focusing on helping CMS understand what is working well with the Demonstration and what could be working better.

As part of this evaluation, we are interested in hearing about your experiences with the formal telephone discussion in which you participated.

***Review informed consent:***

Let me take a minute to review the informed consent for the interview and how we will handle the information you provide:

* We will use the information you share with us for research purposes only.
* All of your responses will be kept private to the extent permitted by law. All findings in any published reports or briefings will be presented at the aggregate level, so that it is not possible to link comments to particular individuals.
* No one, except the research team, will have access to the specific information you provide, and we will only report summary information from our full set of interviews.
* You can stop the interview at any time for any reason, and you should feel free to decline to discuss any topic that we raise.
* This interview will last approximately 30 minutes.

Now that we have gone through the informed consent information, **do you agree to be interviewed?**

* Yes
* No

With your permission, we would like to audio-record the interview to ensure that we record and analyze your remarks accurately. Only the research team will have access to the recording, which will be stored on a CMS-compliant server. **Would it be okay to audio-record the interview?**

Do you have any questions about the interview before we begin?

*[****If YES, answer any questions****]*

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| **PRE-FORMAL DISCUSSION** |

1. What are the challenges you face as a supplier in navigating the CMS claims process for DME claims?
2. What aspect or aspects of CMS’s formal telephone discussion demonstration motivated you/your company to participate in a formal discussion?

*Probe:*

* *Was it the opportunity to learn more about Medicare policies?*
* *Was it the opportunity to present verbal testimony about your case?*
* *Was it the ability to have your case resolved more rapidly than through the traditional on-the-record process?*
1. Did the QIC provide enough information before the discussion so that you could adequately prepare? If no: What would have been useful to know before participating in the formal discussion?

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| **FORMAL DISCUSSION**  |

1. What were you expecting from the formal discussion process? How did it meet your expectations or differ from what you expected?
2. What parts of the formal discussion process worked well for you?

 *Probes: Was it the …*

* *Opportunity to present verbal testimony*
* *Opportunity to learn more about Medicare policies and requirements applicable to the case*
* *Identification of required documentation, and/or the opportunity to provide additional documentation*
* *Speed of resolving the case compared to going through OMHA?*
* *Electronic submission of records?*

 *[If this is an interview driven by satisfaction survey results, ask Q5, otherwise skip to Q6]*

We noted that your survey responses indicated you were dissatisfied with [fill item or items from survey where the survey responses indicated dissatisfaction]? Is this right?

* Can you tell us why you were dissatisfied?
* How could this aspect of the formal discussion be improved?
1. What could have gone better with your formal discussion?

*Probes: Was it the …*

* *Opportunity to present verbal testimony*
* *Opportunity to learn more about Medicare policies and requirements applicable to the case*
* *Opportunity to provide additional documentation*
* *Speed of resolving the case compared to going through OMHA?*
1. What changes have you made AFTER your participation in the discussion, if any, to your billing and documentation practices related do future DME claims?
2. Did the QIC offer to reopen any pending cases at OMHA as part of your formal discussion?
If yes, ask 8 and 9:
3. Did the reopenings part of the formal discussion work well for you? What aspects in particular?

*Probes:*

* *Were the right cases included in the reopening? Too many, too few?*
* *How was the speed of resolving the case(s) through the reopenings process compared to going through OMHA?*
1. What could have gone better with the reopenings?

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| --- |
| **WRAP UP** |

1. Is there anything that we haven’t asked you about that you would like to tell us?