

Medicare Current Beneficiary Survey (MCBS)

Request for Approval of a Non-Substantive Change

OMB No. 0938-0568
(Expires 06/30/2019)

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October 27, 2017

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A1. Circumstances making the collection of information necessary

This request is for a non-substantive change to an approved data collection (OMB No. 0938-0568, expires 06/30/2019). The current clearance encompasses the MCBS Community questionnaire, Facility screener, Facility questionnaire, and topical sections (supplements) that are rotated in and out of MCBS data collection.

Non-substantive Changes

This change request seeks approval to implement non-substantive changes in the MCBS questionnaire for Fall 2018 Round 82; data collection for this round is scheduled to begin July 23, 2018. The changes add six preventive services screening items on depression, weight loss and obesity management, tobacco cessation, and HIV testing. Approval of these new items is needed in sufficient time to accomplish programming and testing of the questions for use with Computer Assisted Personal Interviewing (CAPI) administration.

The revised questionnaire sections are contained in **Attachments A, B, and C**.

A2. Purpose and use of information collection

The Affordable Care Act waived copays for Medicare beneficiaries for a series of preventive services deemed to be high value. The MCBS currently asks respondents about some of these preventive services, such as screenings for colorectal and breast cancer. However there are no questions regarding screenings for depression, obesity, smoking cessation, and HIV. Claims-based analyses have suggested very low uptake by beneficiaries on obtaining these important screening services. Many national health surveys include screenings for depression, obesity, smoking cessation, and HIV; as CMS continues to modernize the MCBS, these data gaps should be addressed.

Given the potential benefits of these preventive services to Medicare beneficiaries, CMS recommends adding these screening items to generate survey-based estimates of the frequency with which they are administered. The Center for Medicare & Medicaid Innovation (CMMI) has both current models and new models in development involving primary care providers offering preventive care and chronic care management that could benefit from understanding responses to these survey items.

CMS requests approval to add six items currently in use on other federal surveys. No cognitive testing or pilot testing is needed to add these items since they are well-established. In addition, the questions fit within sections of the survey that either ask related questions or similar content; therefore, they are non-substantive additions to the survey. They include the following items:

- One item on tobacco cessation from the National Health Interview Survey (NHIS). For respondents who report smoking every day or some days, the question will ask them whether a doctor or other health professional has ever

- talked to them about their smoking. The item will be added to the Nicotine and Alcohol (NAQ) section, which includes other tobacco items.
- One item on depression screening from the Consumer Assessment of Healthcare Providers and Systems (CAHPS) for Accountable Care Organizations (ACOs). The question asks the respondent whether a doctor or other health professional has ever asked them if there was a period of time when they felt sad, empty, or depressed. The item will be added to the Health Functioning and Status (HFQ) section.
 - One item on weight loss and obesity management from the National Health and Nutrition Examination Survey (NHANES). The question asks the respondent whether they have ever been told by their doctor or other health professional to control their weight or lose weight to lower their risk for certain diseases. It will be added to the HFQ section.
 - Three items on HIV testing, including two from the NHIS and one from the National HIV Behavioral Surveillance System (NHBS). These items ask whether the respondent has ever been tested for HIV. For those who respond yes, they will be asked for the date of their most recent HIV test. For those who respond no, they will be asked for the main reason they have not been tested. These items will be added to the Preventive Care (PVQ) section.

The six additional items will be integrated into the MCBS questionnaire in Fall 2018 Round 82. The additions to PVQ, NAQ, and HFQ are highlighted in green text in **Attachments A, B and C**.

A12. Estimates of Annualized Burden Hours and Costs

The revisions will not result in an increase in burden. The total burden is based on the average amount of time estimated across all respondents.

Attachments:

- A – Revised Preventive Care (PVQ) section
- B – Revised Nicotine and Alcohol (NAQ) section
- C – Revised Health Status and Functioning (HFQ) section