CAHPS Supporting Statement Part A

A.

1. Explain the circumstances that make the collection of information necessary. Identify any legal or administrative requirements that necessitate the collection.

OPM uses the CAHPS results as part of the FEHB Plan Performance Assessment (PPA). The PPA enables a consistent, objective evaluation of carrier performance and also provides more transparency for enrollees. This assessment uses a discrete set of quantifiable measures to examine key aspects of performance in the areas of clinical quality, customer service and resource use. Eight CAHPS measures are part of this discrete set of quantifiable measures. This reporting is authorized under title 5USC 8910. See: https://www.law.cornell.edu/uscode/text/5/8910

2. <u>Indicate how, by whom, and for what purpose the information is to be used. Except for a new collection, indicate the actual use the agency has made of the information received from the current collection.</u>

Taken together with more traditional assessments of contract administration, these measures help ensure that enrollees receive high quality affordable healthcare and a positive customer experience. The PPA is linked to carrier profit and adjustment factors. FEHB contracts include language to incorporate the PPA as a determinant of the Service Charge or Performance Adjustment.

3. <u>Describe whether, and to what extent, the collection of information involves the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses, and the basis for the decision for adopting this means of collection. Also describe any consideration of using information technology to reduce burden.</u>

Two modes of survey administration are allowed during the national implementation to give facilities options in how they would like to administer the survey, based on their goals and resources. These two modes are described below:

Mail-only Mode

- a. Mailing of the questionnaire and cover letter to all sampled members.
- b. Reminder postcard mailing
- c. Second mailing of the questionnaire and cover letter to sampled members who do not respond to the first questionnaire mailing within 5 weeks
- d. Second reminder postcard mailing
- e. Third mailing of the questionnaire and cover letter to sampled members who do not respond to the first or second questionnaire mailing within 3 weeks of the second questionnaire mailing.

Mixed Mode (Mail with Telephone Follow-up)

- f. Mailing of the questionnaire and cover letter to all sampled members.
- g. Reminder postcard mailing

- h. Second mailing of the questionnaire and cover letter to sampled members who do not respond to the first questionnaire mailing within 5 weeks
- Second reminder postcard mailing

Telephone follow-up with all sampled patients who do not respond to one of the questionnaire mailings. A maximum of six telephone contact attempts per sampled patient will be made to complete the survey.

4. <u>Describe efforts to identify duplication. Show specifically why any similar information already</u> available cannot be used or modified for use for the purposes described in Item 2 above.

The survey does not duplicate any other survey. CAHPS is a widely use customer survey used by many employers.

5. <u>If the collection of information impacts small businesses or other small entities (Item 5 of OMB Form 83-I), describe any methods used to minimize burden.</u>

The survey does not impact small businesses.

6. Describe the consequence to Federal program or policy activities if the collection is not conducted or is conducted less frequently, as well as any technical or legal obstacles to reducing burden.

The Office of Personnel Management (OPM) is requesting emergency clearance for an information collection request used for the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey. In addition to the emergency clearance, we are also completing the normal OMB review process and post the 60-Day and 30-Day Federal Register Notices following the Emergency Federal Register Notice. The first notice was published on July 22nd 2019, at 84 FR 35137. We are concerned that this ICR will not be completed in time to meet our schedule for the survey. To meet our performance assessment regulatory requirement we must provide our carriers with a handbook in October and the carriers must distribute the survey to members in the first quarter of next year. Also, the PPA is linked to carrier profit and premium adjustment factors. FEHB contracts include language to incorporate the PPA as a determinant of the Service Charge or Performance Adjustment. Therefore, any further delay could affect carrier profit and the overall premium rates charged to the government and federal enrollees. The ICR is taking longer than anticipated to obtain the required approvals. We are therefore requesting OMB to take action within 10 calendar days from the close of this Federal Register Notice on the request for emergency review. OPM has taken all practicable steps to consult with interested stakeholders and members of the public in order to minimize the burden of information collection.

7. Explain any special circumstances that would cause an information collection to be conducted in a manner inconsistent with the guidelines in 5 CFR 1320.6.

No other circumstances listed in this question apply to this collection

8. If applicable, provide a copy and identify the date and page number of publication in the Federal Register of the agency's notice, required by 5 CFR 1320.8(d), soliciting comments on the information collection prior to submission to OMB. Summarize public comments received in response to that notice and describe actions taken by the agency in response to these comments. Specifically address comments received on cost and hour burden. Describe efforts to consult with persons outside the agency to obtain their views on the availability of data, frequency of collection, the clarity of instructions and recordkeeping, disclosure, or reporting format (if any), and on the data elements to be recorded, disclosed, or reported. Consultation with representatives of those from whom information is to be obtained or those who must compile records should occur at least once every 3 years - even if the collection of information activity is the same as in prior periods. There may be circumstances that may preclude consultation in a specific situation. These circumstances should be explained.

The 30 Day FRN was published on July 22nd 2019, at 84 FR 35137.

9. Explain any decision to provide any payment or gift to respondents, other than remuneration of contractors or grantees.

No payments or gifts will be given to respondents

10. <u>Describe any assurance of confidentiality provided to respondents and the basis for the assurance in statute, regulation, or agency policy.</u>

All information is protected by the Privacy Act and the Health Insurance Portability and Accountability Act.

11. Provide additional justification for any questions of a sensitive nature, such as sexual behavior and attitudes, religious beliefs, and other matters that are commonly considered private. This justification should include the reasons why the agency considers the questions necessary, the specific uses to be made of the information, the explanation to be given to persons from whom the information is requested, and any steps to be taken to obtain their consent.

The survey has no sensitive questions.

12. Provide estimates of the hour burden of the collection of information.

Burden Estimate: Approximately 73,505 CAHPS surveys will be processed annually. The survey requires approximately 15 minutes for the respondents to read the instructions and complete the survey. A burden of 18,376 hours is estimated and is not expected to vary substantially.

Form	Form	No. of	No. of	Average	Total	Average	Total
Name	Number	Respondent	Responses	Burden	Annual	Hourly	Annual
		S	per	per	Burden	Wage	Respondent
			Respondent	Response	(in	Rate	Cost
				(in	hours)		

				hours)			
CAHPS	3206-	73,505	1	.25	18,376	10.75	\$197,542
Survey	XXXX						

13. <u>Provide an estimate for the total annual cost burden to respondents or record keepers resulting from the collection of information.</u>

There is no cost to individual respondents.

14. Provide estimates of annualized cost to the Federal Government. Also provide a description of the method used to estimate cost which should include quantification of hours, operational expenses (such as equipment, overhead, printing, and support staff) and any other expenses that would not have been incurred without the paperwork burden.

This cost is calculated by processing the total forms indicated by (73,000) at a rate of \$10.75 per form (15) minutes of the average hourly rate) for a total of \$196,188) plus 25% overhead (\$49,047) resulting in a total cost of \$245,235 to the government.

15. Explain the reasons for any program changes or adjustments reported in Items 13 or 14 of the OMB Form 83-I.

Not applicable.

16. For collections of information whose results will be published, outline plans for tabulation and publication. Address any complex analytical techniques that will be used. Provide the time schedule for the entire project, including beginning and ending dates of the collection of information, completion of report, publication dates, and other actions.

Basic survey analysis techniques (e.g., comparing to commercial benchmarks produced by NCQA for CAHPS, calculating frequencies, patterns, etc.) will be used to interpret and explain the data provided by respondents. The results will be used in the FEHB Plan Performance Assessment, and ranges for each FEHB Plan posted on the OPM website (https://www.opm.gov/healthcare-insurance/healthcare/plan-information/compare-plans/quality) and included in the results for the FEHB Plan Comparison Tool (https://www.opm.gov/healthcare-insurance/healthcare/plan-information/compare-plans/). As noted above, the survey tool was developed by AHRQ and is the industry standard, used for multiple government healthcare programs including Medicare and Medicaid, by NCQA for accreditation, by states for their healthcare programs, and throughout the industry. PRA approval has been granted on numerous occasions for CAHPS in CMS programs. Aggregated reporting on the CAHPS survey results are provided on two OPM webpages to help inform selection of FEHB health plans. Specific Carrier scores are reported within a range. No PII is reported on the CAHPS results. The results are aggregated and no individual responses are reported.

17. <u>If seeking approval to not display the expiration date for OMB approval of the information collection, explain the reasons that display would be inappropriate.</u>

We are seeking approval to not display the expiration date for OMB approval of the information collection. Too often, users of the form see the expiration date and erroneously assume that the form itself is void after that date. These forms are printed and distributed through various agencies. It is cost prohibitive to print new forms just to change the expiration date.

18. Explain each exception to the certification statement identified in Item 19, "Certification for Paperwork Reduction Act Submissions," of OMB Form 83-I.

Not applicable