Supporting Statement B For Emergency New Collection: Medicare Current Beneficiary Survey (MCBS) COVID-19 Rapid Response Supplement

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Table of Contents

В.	3. Collections of Information Employing Statistical Methods		•••
		Universe and Respondent Selection	
		Procedures for Collecting Information	
		Methods for Maximizing Response Rates and Dealing with Issues of Non-Response	
	B4.	Tests of Procedures or Methods	
	B5	Individuals Consulted on Statistical Aspects of Design	,

B. Collections of Information Employing Statistical Methods

As noted in Part A, the Centers for Medicare and Medicaid Services (CMS) requests an emergency approval of a new Information Collection Request (ICR) to conduct by telephone this fall the MCBS COVID-19 Rapid Response Supplement (referred to hereafter as the Fall COVID-19 Supplement). This is a short-term, urgent endeavor designed to minimize response burden and cost while addressing these emergent data needs. Given the rapidly changing dynamics of the COVID-19 pandemic for Medicare beneficiaries, there is an acute need for data that shed light on the situation as it is unfolding.

The methods and instruments proposed in this emergency clearance have been tested under CMS-10549 GenIC#7 MCBS COVID-19 Rapid Response Supplement Testing which was approved by OMB on May 7, 2020 under the MCBS Generic Clearance (0938-1275). While the test is still underway as of this writing (the data collection period is June 10 through July 15, 2020), preliminary results are available and have informed this submission. There are two sets of changes stemming from the test: (1) minor questionnaire updates to better align with other federal surveys measuring the impact of the pandemic or to close data gaps and (2) the addition of a set of questions that will be administered by phone to facility staff.

In addition to providing national estimates for the Medicare population, we will provide complete information about sampling, weighting, and post-survey processing through MCBS data user's guides, methodology reports, and other reports to maximize transparency for the public.

Below we describe the statistical methods that will be used in the Fall COVID-19 Supplement during the MCBS Fall 2020 Round 88 data collection.

B1. Universe and Respondent Selection

As explained in the main MCBS clearance package (0938-0568, expiration 08/31/2022), the MCBS is a continuous, multi-purpose longitudinal survey, representing the population of beneficiaries aged 65 and over and beneficiaries aged 64 and below with disabilities, residing in the United States. The Fall COVID-19 Supplement will be conducted with sampled beneficiaries who participated in the Medicare Current Beneficiary Survey (MCBS) in 2019 and 2020.

For the Fall COVID-19 Supplement, which only focuses on the impact of the pandemic, beneficiaries who are continuing participants on the MCBS will be interviewed in conjunction (or overlapping) with conducting the regular Fall 2020 Round 88 MCBS data collection; this is the same methodology used in the COVID-19 Supplement Test. The sample for the Community-residing portion of the supplement will include the same list of 2016-2019 panel members that was drawn for the COVID-19 Supplement Test with the following updates: (1) exclude cases that did not complete any 2020 interviews thus far and exclude cases that have passed away or lost Medicare entitlement. The Facility-residing portion of the supplement will come from beneficiaries from the 2017-2019 panel members completing the regular Fall 2020 Round 88 MCBS.

The universe for the Community Fall COVID-19 Supplement is approximately 13,928 Medicare beneficiaries. We expect to receive 10,446 responses, reflecting an assumed response rate of 75%. The response rate is based on preliminary results of the COVID-19 Supplement Test that was launched June 10, 2020. Based on previous years' Fall round MCBS, we expect an additional 1,090 Facility interviews from the regular MCBS. The total expected number of completed interviews is equal to or greater than those achieved by existing MCBS supplemental data sets that are derived from questionnaire modules fielded only one round during the year. Therefore, the expected number of completes indicates data from the Fall COVID-19 Supplement will equal the MCBS in precision of estimates and supply sufficient power for tests of differences nationally.

The Fall COVID-19 Supplement data will be weighted using maintained intra-panel nonresponse-adjusted weights that will be further adjusted based on response to the Supplement to account for possibly differential nonresponse bias, as is done in the core MCBS and other MCBS supplements.

B2. Procedures for Collecting Information

The MCBS uses slightly different questionnaires, depending on whether the sampled beneficiary lives in the community or in a facility. In addition to conducting community (e.g., household) interviews with beneficiaries, the MCBS follows beneficiaries into and out of long-term care facilities to maintain a comprehensive profile of their health care utilization and expenditures. Facility interviews are conducted with facility staff instead of the actual beneficiary. Thus, the Fall COVID-19 Supplement has two complementary questionnaires — one administered to respondents living in the community and a second administered to facility staff who answer questions on behalf of the sampled beneficiary.

All interviews will be conducted by phone. Landline or cell phone numbers are available for all eligible sample since the Fall COVID-19 Supplement respondents will have participated in the MCBS in past years. Contact information, including alternative contacts, is regularly confirmed and updated by interviewers and therefore, successful contact with a high proportion of the Fall COVID-19 Supplement sample is expected.

For beneficiaries residing in the community, the sample will be divided into replicates and released periodically over about five weeks, scheduled to begin in October. Due to the pandemic, all interviews will be conducted by phone. The questionnaire for respondents living in the community will be programmed using Voxco, a software platform well-suited for computer assisted web interviewing (CAWI) surveys. The Fall COVID-19 Supplement will be administered by trained field interviewers using the same interview equipment already in their possession for use on the MCBS – laptops, tablets, and telephone. Even though it is programmed for web administration, the questions will be asked by trained interviewers using the telephone and interviewers will enter responses into the web instrument. A key technology benefit of using Voxco is programming that fully utilizes sophisticated logic checks, skip patterns, and text fills to ease question administration and reduce respondent burden by shortening the interview.

For beneficiaries residing in long term care facilities, the Fall COVID-19 Supplement will be administered during the regularly scheduled MCBS facility interview from October through December 2020. Since facility interviews are only conducted with facility staff and not the beneficiary, burden and cost is most efficient by adding the Fall COVID-19 Supplement to the administration of the MCBS interview. For Facility interviews, the current computer assisted personal interviewing (CAPI) instrument programmed in Blaise will be modified to incorporate the Fall COVID-19 Supplement. Field interviewers will administer the questions to facility administrators by phone using their laptop.

B3. Methods for Maximizing Response Rates and Dealing with Issues of Non-Response

We are assuming a 75% response rate. This is based on the response rate observed during recent rounds of MCBS main telephone data collection conducted from March 24, 2020 through June 30, 2020 as well as the preliminary response rate for CMS-10549 GenIC#7 MCBS COVID-19 Rapid Response Supplement Testing which was approved by OMB on May 7, 2020 under the MCBS Generic Clearance (0938-1275).

The sample for the MCBS is a heterogeneous population that presents a unique challenge for maximizing response rates. The survey selects respondents from two Medicare groups—those age 65 and over and those younger than 65 who have disabilities. Both of these groups have characteristics that often lead to refusals on surveys. Increasing age, poor health or poor health of a family member are prevalent reasons for refusal. On the other hand, older persons are the least mobile segment of the population and thus, for a longitudinal survey, less likely to be lost due to failure to locate. Recent data on the MCBS indicate that the population aged under 65 tends to have a slightly higher response rate than the aged population.

To maximize the response rates, data collection staff undertake extensive outreach efforts. An advance letter will be sent to the selected sample that focuses on the importance of participating in a COVID-19 related survey. We found during the COVID-19 Supplement Test that many respondents recalled receiving a similar advance letter and expressed willingness to participate, in part, due to the relevance of the topic. We also will notify government entities about the Fall COVID-19 Supplement including CMS regional offices and the CMS hotline. These efforts are undertaken to answer questions or concerns that respondents may have in order to increase the likelihood that respondents would participate in the Fall COVID-19 Supplement and also participate in the main MCBS Fall 2020 Round 88 data collection.

In addition to outreach, the following efforts remain in place to maintain a sense of validity and relevance among the survey participants.

- a. Interviewer training emphasizes techniques and approaches effective in communicating with the older and disabled population and ways to overcome difficulties respondents may have in participating.
- b. NORC field management staff are specialized to follow up with respondents who express concerns about participating due to privacy or confidentiality questions.
- c. Non-respondents are re-contacted by a refusal conversion specialist.
- d. A dedicated project email address (mcbs@norc.org) and toll-free number (1-877-389- 3429) is available to answer respondent's questions. This information is contained on various materials provided to the respondent.
- e. An MCBS website (mcbs.norc.org) contains information for respondents on the project. Respondents are also informed about the CMS MCBS Project Page www.cms.gov/mcbs
- f. Whenever possible, the respondent is paired with the same interviewer throughout the survey. This maintains rapport and establishes continuity of process in the interview.

B4. Tests of Procedures or Methods

MCBS' generic clearance for Questionnaire Testing and Methodological Research for the MCBS was approved by OMB in May 2015 and received approval for an extension without change on May 18, 2018 (OMB No. 0938-1275, expiration 05/31/2021). The generic clearance provided a mechanism for the COVID-19 Supplement Test which was approved by OMB on May 7, 2020 for fielding beginning June 10, 2020. Cognitive interviews with fewer than 10 respondents were conducted with the proposed Fall COVID-10 Supplement to ensure that the minor changes made since the COVID-19 Supplement Test worked well and did not cause respondent questions or concerns.

B5. Individuals Consulted on Statistical Aspects of Design

The person responsible for statistical aspects of design is:

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The contractor collecting the information is NORC at the University of Chicago.