

1. We received a comment requesting that language in the survey to be provider neutral and replace the word “doctor” with “health care provider” and to also include nurse practitioners in the definition of health care providers. The commenter also recommended that certain questions be evaluated for clarity for patients.

Response:

Thank you for your feedback. CMS Office of Minority Health (OMH) has replaced the word “doctor” with “health care provider” in Statements A and B of the OMB submission. We will also make this edit and include nurse practitioners in the definition of health care provider that will be added to the beginning of the core survey. Thank you for your support to CMS OMH goals and for helping improve MBECS efficiency as an instrument.

2. We received a comment commending CMS OMH on its efforts to understand the experience of various minorities in the Medicare and Medicaid plans through the development of MBECS. The commenter requested a language change in MBECS to at minimum be consistent with the Medicare Advantage Prescription Drug (MA-PD) Consumer Assessment of Healthcare Providers and Systems (CAHPS®) as this could be especially valuable for surveying specific subgroups within different race or ethnicity groups. The commenter also recommended that the MBECS adhere to the Office of Management and Budget (OMB) categories for race and ethnicity. The commenter provided that internal analysis of MA-PD CAHPS responses indicates that beneficiaries who self-identify as Asian as compared to Native Hawaiian or Other Pacific Islander have different response tendencies. The commenter also asked that prior to implementing the MBECS that CMS considers how MBECS interacts with the MA-PD CAHPS to minimize beneficiary receiving two surveys for the same year. The commenter also asked that prior to implementing the MBECS that CMS considers how MBECS interacts with the MA-PD CAHPS to minimize beneficiary receiving two surveys for the same year.

Response:

Thank you for your feedback and suggestions in your comments. Ensuring an efficient methodology is a priority for CMS OMH. One of CMS OMH’s goals is to help improve any CMS efforts to better assess our beneficiaries. CMS OMH will review the MBECS specific module questionnaire to ensure the population-specific modules is developed with a consistent language when surveying population related to the MA-PD to better address subgroups within race and ethnicity groups.

The MBECS system will use an expanded and standardized CAHPS methodology for Medicare beneficiaries in minority populations. The survey will include a “core” set of existing CAHPS questionnaire items. Outreach method, modes of administration, and

data collection protocols will be similar across populations, while the specific wording of respondent materials will be adjusted slightly for each population.

The data collected by MBECS will be compared to benchmarks of fee-for-service CAHPS survey, Medicare Advantage CAHPS survey, and National Adult Medicaid CAHPS survey.

MBECS's survey questions on race and ethnicity will be consistent with the Department of Health and Human Services' standards for race and ethnicity data collection and consistent with OMB categories for race and ethnicity. In the MBECS population-specific modules, we will include a question for beneficiary-identified race and ethnicity. Upon completion of each MBECS, CMS OMH will present the results of the collected data in a form that protect the identity and privacy of our beneficiaries. We will include the response rates for each survey mode when we release the result of MBECS.

Reducing the burden on beneficiaries is always a priority for the CMS OMH. We will evaluate the MBECS instrument to consider how it may interact with the MA-PD CAHPS survey data collection.

We thank you for your support of CMS OMH goals and the development of the MBECS survey.