# Provider Contact Center – General Call Center

\* means a response is required to proceed

**Note**: this is a list of questions (not a designed survey) we want approved in case we need to offer an online survey for additional contact center information. Survey logic is included for questions that may require a follow-up. If an online survey is needed, we’ll create it using these and other approved MCE questions and share it with management for approval.

**Considering all services provided by [MAC Name], overall, how satisfied or dissatisfied are you with us, with 1 being extremely dissatisfied and 5 being extremely satisfied?**

1. Extremely dissatisfied
2. Somewhat dissatisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Extremely satisfied

**The representative was professional.**

1. Strongly disagree
2. Somewhat disagree
3. Neither agree nor disagree
4. Somewhat agree
5. Strongly agree

**The representative was knowledgeable on this topic.**

1. Strongly disagree
2. Somewhat disagree
3. Neither agree nor disagree
4. Somewhat agree
5. Strongly agree

**Did you get the information you needed?**

1. Yes
2. No

**What information do you still need?**

* [Verbal response]

*Notes:*

* *Show if “No” is selected in prior question*

**How satisfied or dissatisfied are you with this contact center experience, with 1 being extremely dissatisfied and 5 being extremely satisfied?**

1. Extremely dissatisfied
2. Somewhat dissatisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Extremely satisfied

**How can we make your next contact center experience better?**

* [Verbal response]

**How easy or hard was it to use our IVR, with 1 being extremely hard and 5 being extremely easy?**

1. Extremely hard
2. Somewhat hard
3. Neither easy nor hard
4. Somewhat easy
5. Extremely easy

**What did you try right before you called?**

* Called the IVR
* Searched our website
* Searched CMS.gov
* Searched the internet (Google, etc.)
* Used our portal
* Wrote in
* Other [open text box]
* Nothing

**How professional was our representative during your most recent call?**

* Extremely professional
* Somewhat professional
* Neither professional nor unprofessional
* Somewhat unprofessional
* Extremely unprofessional

**How wasn’t our representative professional?**

* [Open text box]

*Notes:*

* *Show if “Somewhat unprofessional” or “Extremely unprofessional” is selected in prior question*

**How knowledgeable was our representative on your topic during your most recent call?**

* Extremely knowledgeable
* Somewhat knowledgeable
* Neither knowledgeable nor unknowledgeable
* Somewhat unknowledgeable
* Extremely unknowledgeable

**What didn’t our representative know?**

* [Open text box]

*Notes:*

* *Show if “Somewhat unknowledgeable” or “Extremely unknowledgeable” is selected in prior question*

**Did our representative clearly explain the answer?**

* **Yes**
* **No**

**What could have been clearer?**

* [Open text box]

*Notes:*

* *Show if “No” is selected in prior question*

**How satisfied or dissatisfied are you with our representative on your most recent call?**

1. Extremely dissatisfied
2. Somewhat dissatisfied
3. Neither satisfied nor dissatisfied
4. Somewhat dissatisfied
5. Extremely satisfied

**If you use the portal, how likely are you to look for information there before contacting a representative?**

* Always
* Usually
* Occasionally
* Sometimes
* Never
* I’m not a portal user

**Did our representative explain your next steps?**

* Yes
* No
* N/A

**Were the next steps clear?**

* Yes
* No

*Notes:*

* *Show if “No” is selected in prior question*

**How could our representative explain the next steps better?**

* [open text box]

*Notes:*

* *Show if “No” is selected in prior question*

**How many times have you called about this exact issue?**

* 1
* 2
* 3+

**Why did you have to call back?**

* [open text box]

*Notes:*

* *Show if “2” or “3+” is selected in prior question*

**What was your call about?**

* Appeal
* Claim Denial
* Claim Status
* Administrative Billing Issue
* Other [open text]

**Was the length of time with the representative acceptable?**

* Yes
* No

**Did our representative suggest self-service tools to answer your questions?**

* Yes
* No

**How often in the past month have you spoken with a representative?**

* 1 to 9 times
* 10 to 24 times
* 25 to 49 times
* 50 or more times

**Generally, what is your preferred method to contact us when you have a question?**

* Phone call
* Portal inquiry or secure message
* Webchat
* Write in

**Were you able to get the information you needed from the IVR?**

* Yes
* No

**What information were you trying to get?**

* [open text box]

*Notes:*

* *Show if “No” is selected in prior question*

**Was it easy to understand the information from the IVR?**

* Yes
* No

**What would make it easier to understand?**

* [open text box]

*Notes:*

* *Show if “No” is selected in prior question*

**Have you used our website’s IVR call guide for help?**

* Yes
* No

**What tools or other information would make our IVR more helpful?**

* [open text box]

***Custom End of Survey Messages***

* **If “Somewhat dissatisfied” or “Extremely dissatisfied” is selected in Question 4 then the following response is provided**:

Thank you for taking our survey. We’re sorry you didn’t have a positive experience when you contacted us, and we appreciate the time you took to share your feedback. We’ll work to address your concerns.

* **If “Neither satisfied nor dissatisfied” is selected in Question 4 then the following response is provided**:

Thank you for taking our survey. We appreciate the time you took to share your experience.

* **If “Somewhat satisfied” or “Extremely satisfied” is selected in Question 4 then the following response is provided**:

Thank you for taking our survey. We're happy you had a positive experience when you contacted us, and we appreciate the time you took to share your feedback.

**PRA Disclosure Statement will be added as a link to the bottom of the survey**

[**https://www.cms.gov/files/document/pra-disclosure-statement**](https://www.cms.gov/files/document/pra-disclosure-statement)