

PHASE 2 Medicare Parts C & D Cognitive Interview Study Updated Interview Guide

STEP 2: INTERVIEW

Earlier this year you completed a Medicare Part C or D Enrollment Form for your [health plan or prescription drug plan – **INSERT NAME**]. The form asked you to provide information on the plan you wanted to join, like your name, birthdate, gender, phone number, and address and it also asked some optional questions on your ethnicity and race. **I would like to talk to you today about the questions on that form.**

Since you did not complete the optional questions on your ethnicity or race, we are interested in learning about any concerns you had about those questions when you completed the form.

1. My first question is do you remember seeing or completing the part of the enrollment form with the questions that asked you to report your ethnicity and race? Yes No
 - a. If yes, what did you think?
 - b. If no, **skip to Question #9**

2. What concerns did you have when you were asked questions about your ethnicity or your race on a Medicare enrollment form?

Probes:

 - a. Confidentiality, privacy
 - b. How the government uses that information
 - c. No concerns, really

3. The enrollment form says, “Answering these questions is your choice. You can’t be denied coverage because you don’t fill them out.” Did the question raise any concerns about your Medicare coverage? What did you think about/do you think about when I read the instructions?

Now, I am going to ask you some questions about the available response options that were provided for you to report on your ethnicity and race. If you are not sure whether you remember what the response options were, I can read them to you. Would you like me to read the response options for those questions to you?

4. The first question was: **Are you Hispanic, Latino/a, or Spanish origin? Select all that apply.** And the response options were:
 - £No, not of Hispanic, Latino/a, or Spanish origin
 - £ Yes, Mexican, Mexican American, Chicano/a
 - £Yes, Puerto Rican

Yes, Cuban

Yes, another Hispanic, Latino/a, or Spanish origin

I choose not to answer.

- a. What concerns, if any, did you have about the available response options for this question?

Probe: Did you think there are enough options? Was your preferred response to these questions missing? Do you understand the differences between the different options?

5. The second question was: **What's your race? Select all that apply.** And the response options were:

American Indian or Alaska Native

Asian

Asian Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

Other Asian

Black or African American

Native Hawaiian and Pacific Islander

Guamanian or Chamorro

Native Hawaiian

Samoan

Other Pacific Islander

White

I choose not to answer.

- a. What concerns, if any, did you have about the available response options for this question?

Probe: Did you think there are enough options? Was your preferred response to these questions missing? Do you understand the differences between the different options?

6. Have you ever seen these questions about race and ethnicity on other forms, Do you have the same concerns about providing your race or ethnicity?

7. How do you think CMS could change these types of questions so people with Medicare would be more likely to answer them?

Probes: Is it the wording? Is it the location on the form? Is it that you would prefer to be asked about your ethnicity and/or race in some other way, not on an enrollment form?

8. Do you think it is important for Medicare to have information on race and ethnicity?
 - a. Why?

Skip to Question 15 to continue interview

BEGIN HERE for participants who don't recall seeing the Part C or D enrollment form, ask Q9-Q14.

You told me that you don't think you saw the questions about your ethnicity or your race. I would like to read the questions to you now and then I have a few questions for you about each of the questions.

9. **The first question was: Are you Hispanic, Latino/a, or Spanish origin? Select all that apply.**

- a. **Do you remember seeing the question about your ethnicity?**
- b. **Now I would like to read the response options to you and see what you think about them?**

The response options to the ethnicity question were as follows and you could select all that apply:

£ No, not of Hispanic, Latino/a, or Spanish origin (*pause*)

£ Yes, Mexican, Mexican American, Chicano/a

£ Yes, Puerto Rican

£ Yes, Cuban

£ Yes, another Hispanic, Latino/a, or Spanish origin

£ I choose not to answer.

- c. If you had seen the question, do you think you would have answered it? Why?

10. **The second question was: What's your race? Select all that apply.**

- a. **Do you remember seeing the question about your race?**
- b. **Now I would like to read the response options to you and see what you think about them?**

The response options to the race question were as follows and you could select all that apply:

American Indian or Alaska Native

Asian *and the choices for the category were:*

Asian Indian

Chinese

Filipino

Japanese

Korean

Vietnamese

Other Asian

Black or African American

Native Hawaiian and Pacific Islander *and the choices for the category were:*

Guamanian or Chamorro

Native Hawaiian

Samoan

Other Pacific Islander

White

I choose not to answer.

d. If you had seen the question, do you think you would have answered it? Why?

11. Have you ever seen these questions about race and ethnicity on other forms? Do you have the same concerns about providing your race or ethnicity?

12. How do you think CMS could change these types of questions so people with Medicare would be more likely to answer them?

Probes: Is it the wording? Is it the location on the form? Is it that you would prefer to be asked about your ethnicity and/or race in some other way, not on an enrollment form?

13. Do you think it is important for Medicare to have information on race and ethnicity? Why?

Conclusion

For all participants

14. This year when enrolling in a Medicare plan, where did you get information on the health plan you were choosing?

Probes:

- a. Medicare.gov or the internet
- b. Insurance brokers
- c. Family or friends
- d. Called the health plan
- e. State Health Insurance Assistance Program (SHIP Program)
- f. Other organizations that help seniors

15. Did you ask anyone to help you complete the form and if so, can you describe how they helped you or what you did together?

Probes:

- a. Completed it with a family member
- b. Completed it with an insurance broker
- c. Completed it with a SHIP volunteer
- d. Other

16. Is there anything else about your experience completing the enrollment form that we have not discussed that you would like to share with me?

Thank you for your participation. As a token of our appreciation, we would like to send you a \$40 gift card. We can provide your gift card to you electronically or we can mail it to you. Can you please provide the cell phone number, email address or mailing address you would like us to use?

Email address:

Mailing address:

DO NOT READ

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