

**Request for Approval under the “Fast Track Generic Clearance for the
Collection of Qualitative Feedback on Agency Service Delivery” (OMB Control
Number: 0704-0553)**

TITLE OF INFORMATION COLLECTION: Nurse Advice Line Patient Experience Survey

PURPOSE: The TRICARE Nurse Advice Line (NAL) offers professional health care guidance and advice to TRICARE beneficiaries in the continental United States, Alaska, and Hawaii and is staffed by a team of registered nurses who are available 24 hours a day, seven days a week. Each nurse is prepared to answer questions and provide information about various health concerns and can schedule appointments for beneficiaries through the NAL.

The TRICARE NAL Patient Experience Survey measures the quality of services provided by the NAL from a beneficiary perspective. Specifically, data from this survey will be used to assess the satisfaction and overall experience of TRICARE beneficiaries who have used NAL services via the phone and chat modes.

DESCRIPTION OF RESPONDENTS: The survey population includes all eligible TRICARE beneficiaries in the continental United States (CONUS) who have called and sought assistance from the TRICARE NAL in the past 30 days and possesses a valid telephone number known to the Military Health System (MHS).

TYPE OF COLLECTION: (Check one)

- | | |
|--|--|
| <input type="checkbox"/> Customer Comment Card/Complaint Form | <input checked="" type="checkbox"/> Customer Satisfaction Survey |
| <input type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group |
| <input type="checkbox"/> Focus Group | <input type="checkbox"/> Other: _____ |

CERTIFICATION:

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Dr. Kimberley Marshall-Aiyelawo, Chief, Patient Experience Measure, Analytics and Evaluation Division (AED), DHA

To assist review, please provide answers to the following question:

Personally Identifiable Information:

1. Is personally identifiable information (PII) collected? [] Yes [X] No
2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [] Yes [X] No
3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [] Yes [X] No

Gifts or Payments:

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants? [] Yes [X] No

BURDEN HOURS

Category of Respondent	No. of Respondents	Participation Time	Burden
Survey respondents	4,860	5 min	405 hours
Totals	4,860	5 min	405 hours

PUBLIC COST: The estimated annual cost to the public is \$12,749.

If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:

The selection of your targeted respondents

1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?
[X] Yes [] No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them?

Monthly, the government will provide the survey vendor with a list of 3,000 eligible TRICARE beneficiaries who have used the NAL in the past 30 days (2,000 from the East region and 1,000 from the West region). The roster of beneficiaries will be de-duped before fieldwork begins so that beneficiaries meeting the inclusion criteria will appear on the contact list only once, even if they used the NAL more than once in the past 30 days. The survey vendor will randomly select respondents to dial until they have reached 270 completes from the East region and 135 completes from the West region, for a total for 405 per month. This sample size was developed with an interest to achieve an estimate of “percent favorable” to five percentage points on a 100-point scale with 95 percent confidence. Two-thirds of respondents (270) from the East region will complete the survey and one-third (135) of respondents from the West region will

complete the survey to ensure that TRICARE beneficiaries are represented across regions. Overall, this sampling design will yield a random sample of 4,860 per year CONUS wide.

Administration of the Instrument

1. How will you collect the information? (Check all that apply)
 - ☐ Web-based or other forms of Social Media
 - ☒ Telephone
 - ☐ In-person
 - ☐ Mail
 - ☐ Other, Explain
2. Will interviewers or facilitators be used? ☒ Yes ☐ No