# **FEHB Program Carrier Letter** All Carriers

U.S. Office of Personnel Management Insurance Services Programs

#### Letter No. 2003-35

Date: December 17, 2003

Fee-for-service [ 34 ] Experience-rated HMO [ 34 ] Community-rated HMO [ 32 ]

#### SUBJECT: 2004 Consumer Assessment of Health Plans Survey Requirements

The purpose of this document is to detail the Office of Personnel Management's (OPM) policies and instructions for conducting the annual Consumers Assessment of Health Plans Survey (CAHPS). We require Federal Employees Health Benefits (FEHB) plans with at least 500 FEHB subscribers (contracts) as of March 31, 2003, to conduct CAHPS. There are no changes to the survey and the sample size remains at 1100 members for 2004. A copy of the CAHPS<sup>®</sup> 3.0H Adult Commercial Questionnaire is included as Appendix A.

Again this year, plans offering multiple option plans (i.e., High, Standard or Hybrid Option plans) may conduct separate CAHPS<sup>®</sup> surveys for each plan option offered under the FEHB Program. Also, to facilitate our members' ability to compare survey results at the local level, we are offering our Fee-for-Service (FFS) plans the option to conduct separate regional, State or local area CAHPS<sup>®</sup> surveys.

*New requirement for 2004* - To enable us to compare Medicare eligible member ratings against non-Medicare eligible members, we require our FFS plans to insert the following supplemental question into the survey. (We will provide detailed instructions on how to report results for this question separately.):

- 58a. Medicare is made up of Parts A (hospitals) and B (doctors). Are you currently enrolled in Medicare?
  - □ No, I am not enrolled in Medicare
  - □ Yes, I am enrolled in Medicare Part A only
  - □ Yes, I am enrolled in Medicare Part B only
  - □ Yes, I am enrolled in Medicare Parts A and B

Additional Instructions and Information:

 All surveys must be administered by an National Committee for Quality Assurance (NCQA)-Certified HEDIS vendor and must be conducted according to NCQA protocols contained in HEDIS<sup>®</sup> 2004, Volume 3: Specifications for Survey Measures. You may order a copy of Volume 3 through the following link: <u>http://www.ncqa.org/communications/publications/hedispub.htm</u>

- We do not require FEHB plans to administer the CAHPS<sup>®</sup> 3.0H Child Survey (with or without the Children with Chronic Conditions measurement set).
- Regardless of the size of your FEHB enrollment, if you conduct any 2004 CAHPS<sup>®</sup> Commercial Survey (Adult or Child), you must send us a copy of your survey results and you must meet all other requirements contained in this letter.
- You may use an alternative or enhanced protocol or add supplemental questions to the survey with prior NCQA approval.
- Over-sampling (above the required 1100 members) is allowed according to the protocols in Volume 3.
- All Plans must submit their member level data files to NCQA for calculation of survey results and generation of validated member level and summary level data files. Before submitting your results to NCQA, you will need to complete NCQA's Healthcare Organization Questionnaire (HOQ) through NCQA's secured Website. Please check with your Vendor or contact NCQA's Data Collection department directly at <u>HOQ@ncqa.org</u> if you need help or have questions regarding the HOQ.
- We require you to provide a Crosswalk file along with your survey results that maps your NCQA submission ID(s) to your FEHB plan name and Sub-Code. The Crosswalk file is due two weeks after NCQA issues submission ID's. (See additional information regarding the Crosswalk below.)
- The reporting deadline for you to provide your final member-level data files, summary-level data files in NCQA format and crosswalks to our contractor, Office Remedies, Inc. (ORI), is **June 18, 2004**.
- The OPM data processing fee is \$474 per carrier code. Plans that submit data to OPM will be charged the data processing fee regardless of the plans FEHB Program status for 2005.

#### Public Burden Statement

You must include the following statement on questionnaires you mail to respondents: "This information collection has been approved by the U.S. Office of Management and Budget (Control Number 3206-0236) and is in compliance with the Paperwork Reduction Act of 1995. We estimate that it will take an average of 20 minutes to complete, including the time to read instructions and to gather necessary information. You may send comments about our estimate or any suggestions for minimizing respondent burden, reducing completion time or any other aspect of this information collection to the U.S. Office of Personnel Management (OPM), Reports and Forms Officer (OMB Number 3206-0236), Washington, DC 20415-7900. Your participation in this information collection is voluntary. The OMB Number,

3206-0236, is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed." Also, include the following statement in the upper right corner of each questionnaire: "Form approved: OMB No. 3206-0236."

#### Data Collection Vendor

As mentioned above, you must use an NCQA-Certified HEDIS Survey Vendor to administer your surveys. You may contract with any NCQA Certified vendor. A list of approved vendors is available at <u>http://www.ncqa.org/Programs/HEDIS/index.htm</u>. Please check the list to verify that your vendor is NCQA Certified to administer HEDIS® 2004 CAHPS<sup>®</sup> 3.0H Surveys.

## Survey Participation Form

All FEHB plans must complete the enclosed Survey Participation Form (Appendix B) and email it to us by December 19, 2003. If you plan to conduct multiple surveys, please list the name and FEHB Sub-Code (See Appendix C – Sub-Code List) for each plan or option that you plan to survey. Please email the completed form to <u>rpierce@opm.gov</u>. You may submit the form by facsimile at (202) 606-0036.

## Pre-Administration Audit Requirement

Plans seeking NCQA Accreditation and those that intend to include their survey results in NCQA's information products (i.e., Quality Compass®<sup>1</sup>) must have their sample frame audited. If your plan is not seeking NCQA Accreditation and you do not intend to publish your survey results in NCQA information products we do not require an audited sample frame. Please contact NCQA's Policy Clarification Support system at <a href="http://www.ncqa.org/programs/faq/PCS.asp">http://www.ncqa.org/programs/faq/PCS.asp</a> if you have questions about this requirement.

#### Survey Instruments & Protocols

Your vendor must use the CAHPS<sup>®</sup> 3.0H questionnaire (see Appendix A). Vendors must administer the survey and report survey results according to the protocols in NCQA's HEDIS<sup>®</sup> 2004, Volume 3, Specifications for Survey Measures and subsequent updates. All NCQA-Certified vendors have access to HEDIS<sup>®</sup> - Volume 3, which includes the survey instruments and protocols.

#### Membership Data & Sample Frame

<sup>1</sup> Quality Compass is a registered trademark of the National Committee for Quality Assurance (NCQA).

Please work closely with your vendor to ensure that member addresses and telephone numbers are current before you draw the appropriate sample frame for your survey. HMO and POS plans must draw the sample according to NCQA protocols. FFS plans must also follow the NCQA protocols for drawing the sample frame with one exception. FFS plans must draw the sample frame from all currently enrolled FEHB members, regardless of their Medicare status.

#### Crosswalk

When your vendor submits member level and summary level data to OPM, they will need to provide a "Crosswalk" file to identify plan data submissions. The Crosswalk will allow us to match up NCQA submission ID's with your plan's unique FEHB SubCode. Also, the Crosswalk will identify plans that are sharing survey data. Appendix C contains a list of FEHB plans and their unique SubCodes.

The Crosswalk file must include the names of the plan(s) that you will survey, the State(s) in which the plan provide services and the plan's FEHB Sub-Code. (See Appendix D for an example of what the Crosswalk should look like.) The file includes: member level file name, summary level file name and the plan's NCQA Sub-ID. A Crosswalk must accompany each data submission to OPM. Please direct questions regarding the Crosswalk to: Paul Kallaur or Pauline Kim with the Center for the Study of Service at (202) 454-3030 or (202) 454-3059, or by email at: <u>pkallaur@cssresearch.org</u> or <u>pkim@cssresearch.org</u>.

## Reporting Survey Data to OPM

Your vendor must submit CAHPS<sup>®</sup> 3.0H member level data files to NCQA according to NCQA's Adult Survey File Specifications and Layouts. *Again, we will provide FFS plans separate instructions for reporting results for Q.58a (Medicare supplemental question).* 

To ensure consistency and comparability of survey results we require all plans to submit their member level data files to NCQA for calculation of survey results through their vendor. NCQA will calculate survey results and create validated member level data files and summary level data files on behalf of vendors. To comply with HIPAA's privacy rules use appropriate encryption technology to transmit survey data.

#### Reporting Format

We will accept your member level data files and summary level data files after they have been processed by NCQA. Your vendor may submit data via email, diskette or compact disc (CD). You may include results for multiple plans on a single diskette or CD. All submission must include a content label/sheet and a Crosswalk. Please direct questions regarding data files to Sue Lynd or Carla Trexler with ORI at (703) 478-0910. Please send all data files to ORI via email at <u>oridata@aol.com</u> or by overnight mail to:

#### ORI Attention: Sue Lynd 171 Elden Street, Suite 160 Herndon, VA 20170

#### Processing Fee

Each plan participating in the survey will be responsible for a pro rata share of the total cost of compiling, processing and reporting survey data to OPM. The fee remains at \$474 per carrier code for 2004. ORI will send you an invoice for the data processing fee. Fees are payable directly to ORI and are due June 18, 2004. Any plan that withdraws from the FEHB Program after submitting CAHPS® data to OPM is liable for the processing fee.

#### Reporting Deadlines

All materials must be received by the following deadlines:

- December 19, 2003 Survey Participation Form (all FEHB Plans must complete this form)
- □ April 15, 2004 (tentative) Crosswalk file (due two weeks after NCQA issues your submission ID(s))
- □ June 18, 2004 Member level data file and final summary level data files (must be NCQA validated)

We look forward to working together to achieve another successful year in making CAHPS® survey results available to FEHB members. Please contact Ralph Pierce at rpierce@opm.gov or by telephone at (202) 606-2758, if you have any questions.

Sincerely,

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Frank D. Titus Assistant Director For Insurance Programs

Enclosures

- A Adult Questionnaire
- B Survey Participation Form
- C FEHB Plan and Subcode
- D Sample Crosswalk