

April 10, 2023

Centers for Medicare & Medicaid Services
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Attention: OMB Control Number: 0938-0732
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Re: Medicare Advantage, Medicare Part D, and Medicare Fee-For-Service Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey

Submitted Electronically: http://www.regulations.gov

Dear Sir/Madam:

UnitedHealthcare (UHC) is responding to the February 7, 2023 HPMS notice titled, Medicare Advantage, Medicare Part D, and Medicare Fee-For-Service Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey. UHC is dedicated to helping people live healthier lives and making the health system work better for everyone by simplifying the health care experience, meeting consumer health and wellness needs, and sustaining trusted relationships with care providers. UHC offers the full spectrum of health benefit programs for individuals, employers, and Medicare and Medicaid beneficiaries, and contracts directly with more than 1.3 million physicians and care professionals, and 6,500 hospitals and other care facilities nationwide.

Unfair Treatment

UHC agrees that questions related to unfair treatment from providers are important to help prevent discrimination against beneficiaries receiving care in a clinic, emergency room, or doctor's office setting. The CAHPS survey matrix format response options offer too many options and room for error. Therefore, it is more appropriate to remove the multiple response options and simply ask if the respondent has been treated in an unfair or insensitive way. Additionally, UHC recommends that CMS add these questions to the Clinical Group-CAHPS (Provider Survey) rather than the Health Plan survey because the question is asking about unfair treatment from providers rather than unfair treatment from the plan.

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Language Use

UHC agrees that supporting individuals with Limited English Proficiency is a critical need within the health care system. As a result, we recommend replacing the question on the individual's primary spoken language (Question 50) with a question asking whether they needed language support or access – During the past 6 months did you need help getting access to services from a health care provider in a language other than English?

Telehealth

UHC agrees with the changes in wording to clarify the inclusion of telehealth, which is a growing option for many providers and their patients, especially during the COVID-19 pandemic. While phone and video visits are not expected to replace in-person appointments, the availability of telehealth can enhance overall patient care by providing an alternative option to in-person visits. Assessing the patient's experience with telehealth is an important consideration for health plans, providers, and CMS.

Web Mode

UHC supports the use of a web-based survey format to supplement the ability of individuals to complete the survey by mail or phone. We currently provide a web survey option for our members in other lines of business as an alternative to completing a paper survey. While the response rate to the web surveys is currently relatively low (between 10% and 20%), we believe more individuals are likely to respond overall given the additional option. This is an important consideration as paper response rates decline.

UHC recommends that CMS provide additional detail and guidance on how the web-based survey field test will be conducted including protections for the privacy and data security of protected health information included in the responses. In addition, we ask whether MA and PDP sponsors will be expected to provide member e-mail addresses to the survey vendor.

UHC appreciates the opportunity to provide comments and looks forward to CMS's feedback.

Sincerely,

Jennifer Martin

Director, Regulatory Affairs

UnitedHealthcare

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