

## COMMENTS OF KAISER FOUNDATION HEALTH PLAN, INC.

### On Revisions to the Medicare Advantage, Medicare Part D, and Medicare Fee-For-Service Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey

February 10, 2015

Kaiser Foundation Health Plan, Inc. and its subsidiary Health Plans (“Kaiser” or “Kaiser Permanente”), all of which are either Medicare Advantage organizations or Medicare Cost contractors pursuant to Section 1876 of the Social Security Act, appreciate the opportunity to comment upon the proposed revisions to the Medicare Advantage, Medicare Part D, and Medicare Fee-For-Service Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey (CMS–R-246 (OMB Control Number 0938-0732)) published in the December 12, 2014 Federal Register. Kaiser's comments are set forth below. If readers of these comments have any questions or seek further information, they may contact the following Kaiser contact: Lorilyn M. Rosales-Menzel (Lorilyn.m.rosales-menzel@kp.org, 510-271-6310).

#### ***General Comments related to the MA-PD Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey***

CMS proposes to add 13 new questions and eliminate five questions from the Medicare Advantage Part D (MA-PD) questionnaire. The net gain in 8 questions adds nearly 10% to the overall respondent burden, and substantially lengthens an already long questionnaire. Kaiser recommends that CMS find ways to keep the overall length of the survey comparable to the 2014 version. This can be accomplished by dropping lower value questions (e.g., those not publicly reported) from the existing questionnaire, or by scaling back on the proposed list of new questions.

#### ***Comments to Proposed New Questions***

Survey Section	Proposed Question/Change	Comment
Your Personal Doctor	26. <i>Doctors may use computers or handheld devices during an office visit to do things like look up your information or order prescription medicines. In the last 6 months, did your personal doctor use a computer or handheld device during any of your visits?</i>	Kaiser Permanente supports the adoption of these three new questions to measure the effective use of electronic medical records and computers during office visits. These questions take an important first step to update the CAHPS questionnaire to the new modes of care delivery. We encourage CMS to continue moving in this direction. Health information technology is expanding the modes of care delivery,
	27. <i>During your visits in the last 6 months, was your personal doctor's use of a computer or handheld device helpful to you?</i>	

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	<i>28. During your visits in the last 6 months, did your personal doctor's use of a computer or handheld device make it harder or easier for you to talk to him or her?</i>	monitoring and communications between patients and doctors. The CAHPS questionnaire should be broadened to include care delivery beyond the boundaries of an office visit.
<b>Getting Health Care From Specialists</b>	<i>33. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. Is your personal doctor a specialist?</i>	Kaiser Permanente supports the inclusion of this question, at a minimum as a test of whether this increases understanding of patients' relationships with their primary care doctor.
<b>Your Health Plan</b>	<p><i>47. In the last 6 months, did anyone from a doctor's office or your health plan contact you:</i></p> <p><i>47a. To remind you to make appointments for tests or treatment?</i></p> <p><i>47b. To remind you to get a flu shot or other immunization?</i></p> <p><i>47c. To remind you about screening tests such as breast cancer or colorectal cancer screening?</i></p>	<p>Kaiser Permanente supports the intent of these questions, but we are concerned that the current wording may under report plan performance in this area. In particular, patients may be proactive in seeking their needed tests, treatments, immunizations and screenings, such that a health plan may not need to send them a reminder. Furthermore, during the past six months a patient may be up-to-date with tests, treatments and screenings, such that a health plan does not need to send a reminder. This is especially true given that many, if not most of the tests, treatments and procedures need to be done every year or two years, not every six months. Therefore, Kaiser Permanente recommends that the three questions be modified to account for these problems, perhaps with the inclusion of</p>

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		additional response options—e.g., “I had the needed immunizations and did not need to be reminded” and “I did not need any screenings during the last 6 months.” It may be helpful for CMS to conduct additional cognitive testing to develop a better set of measures.
	<i>48. In the last 6 months, did you spend one or more nights in a hospital?</i>	Given the CAHPS sample sizes and the low frequency of hospitalization there will not be adequate number of respondents to produce a reliable measure of each health plan’s performance. Kaiser Permanente recommends that these two questions not be included in the CAHPS survey.
	<i>49. In the last 6 months, did anyone from a doctor’s office or your health plan contact you to follow up about your hospital stay?</i>	
<b>Your Prescription Drug Plan</b>	<i>68. In the last 6 months, did anyone from a doctor’s office, pharmacy or your prescription drug plan contact you:</i> <i>68a. To make sure you filled or refilled a prescription?</i> <i>68b. To make sure you were taking medications as directed?</i>	<p>The published version of the questionnaire does not have the appropriate skip pattern or response options to account for individuals who do not currently take any prescription medications. The only question that ask about the use of prescription medicines is question 64: “In the last 6 months, how many different prescription medicines did you fill or have refilled?”</p> <p>Individuals who answered “None” will not be able to answer questions 68a and 68b. They will not be clear if they should answer “yes” or “no.” Furthermore, health plans or prescription plans with good electronic medical records may not need to</p>

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		contact patients to make sure that they filled or refilled a prescription. Plans may be able to track whether a patient filled/refilled prescriptions, such that it won't be necessary to contact the patient. This will lead to an under reporting of the health plans and pharmacy plans performance.
<b>About You</b>	<i>83. In the last 6 months, did you receive any mail order medicines that you did not request?</i>	Kaiser Permanente questions the value of this item. CMS may be trying to document whether incorrect mailing of prescriptions is significant problem. If this is the case, then it may be worth including this item on a trial basis, but dropping it next year if unrequested mail order medicines is not a significant problem.
	<i>92. How many people live in your household now, including yourself?</i>	No objection to the inclusion of this question.

### Proposed Question Wording Change

Kaiser Permanente supports the proposed question wording changes.