



February 10, 2015

Centers for Medicare & Medicaid Services,
Office of Strategic Operations and Regulatory Affairs
Division of Regulations Development
Attention: CMS-R-246/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**

To Whom It May Concern:

Blue Cross Blue Shield of Michigan (BCBSM) appreciates the opportunity to review and provide comments to the Centers for Medicare & Medicaid Services (CMS) on the **Information Collection: Medicare Advantage, Medicare Part D, and Medicare Fee-For-Service Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey (CMS-R-246/0938-0732)**.

BCBSM has more than 375,000 members enrolled in our Medicare Advantage and Part D plans and has an overall rating of 4 stars. Our HMO, Blue Care Network (BCN), has approximately 67,000 members and an overall rating of 4.5 stars. With many years of combined individual and group Medicare experience, we look forward to continuing to partner with CMS to improve member satisfaction and quality outcomes in the Medicare program.

BCBSM appreciates the opportunity to provide feedback regarding proposed changes to the Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey. CAHPS is a valuable tool that helps health plans monitor performance and identify areas to improve the quality of care and services provided to members, and we are supportive of many changes being proposed.

Our specific feedback is outlined in the table below. The suggestions are intended to improve the usability of survey results and clarity of questions asked. Our feedback also takes into account the length of the survey with an attempt to keep it to a manageable level by suggesting the removal of certain questions.

Please note that the feedback provided in the table below is specific to the MA-PD Questionnaire, but also applies to comparable questions included in the MA-Only and PDP Questionnaires.

MA-PD Questionnaires		Plan Feedback
Proposed Question	Existing Question	
No comparable question	13. In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, oxygen equipment, or diabetic supplies and equipment?	We support the proposed removal in order to keep the survey a reasonable length.
No comparable question	14. In the last 6 months, how often was it easy to get the medical equipment you needed through your health plan?	We support the proposed removal in order to keep the survey a reasonable length.
26. During your visits in the last 6 months, was your personal doctor's use of a computer or handheld device helpful to you?	No comparable question.	We suggest removing this question for two reasons: 1) The question is somewhat leading by implying "helpful", and could result in biased survey responses. 2) We believe the intent of the question is to more fully understand the impact of technology on the doctor/patient relationship and patient care and is therefore addressed in the new Question #28.
No comparable question.	31. How satisfied are you with the help you got from your personal doctor's office to manage your care among these different providers and services in the last 6 months?	We support the proposed removal in order to keep the survey a reasonable length.
44. In the last 6 months, did your health plan give you any forms to fill out?	43. In the last 6 months, did your health plan give you any forms to fill out?	Although CMS is not proposing any changes, we recommend the removal of this survey question in order to shorten the length of the survey. As new questions are being added, we believe it is important to re-evaluate questions that do not add significant value.
45. In the last 6 months, how often were the forms from	46. In the last 6 months, how often were the forms from	We also recommend the removal of this existing survey

MA-PD Questionnaires		Plan Feedback
Proposed Question	Existing Question	
your health plan easy to fill out?	your health plan easy to fill out?	question for the same reasons identified above, and because the results are not actionable for health plans without further detail.
<p>47. In the last 6 months, did anyone from a doctor's office or your health plan contact you:</p> <p>47a. To remind you to make appointments for tests or treatment?</p> <p>47b. To remind you to get a flu shot or other immunization?</p> <p>47c. To remind you about screening tests such as breast cancer or colorectal cancer screening?</p>	No comparable question	We recommend a revision to the newly proposed question. In order to achieve more actionable results, we recommend deleting "your health plan" so survey responses will be focused on reminders from doctor's offices. Health plans already maintain information about the reminders they provide to members, but would benefit from having the same information about providers. Otherwise, when both health plans and providers are included in the question, health plans are unable to identify whether the results applied to the health plan or a provider (or both).
48. In the last 6 months, did you spend one or more nights in a hospital?	No comparable question.	In the interest of keeping the survey a reasonable length, we recommend deleting the proposed question. Given the small sample size of the survey, survey results are unlikely to yield value.
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?	No comparable question.	In the interest of keeping the survey a reasonable length, we recommend deleting the proposed question. Given the small sample size of the survey, survey results are unlikely to yield value.
64. In the last 6 months, how many different prescription medicines did you fill or have refilled?	60. In the last 6 months, how many different prescription medicines did you fill or have refilled?	Although CMS is not proposing any changes, we recommend deleting the question. We do not believe the question yields valuable responses, and that the survey should maintain a reasonable length.
80. Do you now need or take	75. Do you now need or take	While we do not object to the

MA-PD Questionnaires		Plan Feedback
Proposed Question	Existing Question	
any medicine prescribed by a doctor for any condition?	medicine prescribed by a doctor?	changes proposed, we suggest moving Questions #80-83 so that they proceed Question #57, regarding Part D drugs and the Part D plan's customer service. We believe the more logical flow groups these two sets of questions together.
81. Is this to treat a condition that has lasted for at least 3 months?	76. Is this to treat a condition that has lasted for at least 3 months?	
82. In the last 6 months, did you delay or not fill a prescription because you felt you could not afford it?	77. In the last 6 months, did you delay or not fill a prescription because you felt you could not afford it?	
83. In the last 6 months, did you receive any mail order medicines that you did not request?	No comparable question.	
85. Have you had a flu shot since July 1, 2015?	79. Have you had a flu shot since September 1, 2011?	We support the proposed revisions.

If you have any questions or would like further information about the feedback provided above, please contact Elizabeth Geis at 248-799-6374 or egeis@bcbsm.com. BCBSM and BCN look forward to a continuing partnership with CMS in the Part C and D programs. Thank you again for the opportunity to provide feedback.

Sincerely,



Elizabeth Geis
Director II
BCN Medicare Government Programs