

3711 S. Mo Pac Expy. Bldg. 2, Ste. 300 Austin, TX 78746

May 19, 2016

Centers for Medicare & Medicaid Services

U.S. Department of Health and Human Services

Paperwork@cms.hhs.gov

Attention: CMS-2016-0048-0001

Document Identifier: CMS-10316

Re: Request for Comments: CMS MAPD Disenrollment Reasons Survey

Centers for Medicare & Medicaid Services (CMS):

On behalf of Fresenius Health Partners (FHP), we would first like to thank you for the opportunity to provide comments on CMS-10316 Implementation of the Medicare Prescription Drug Plan (PDP) and Medicare Advantage (MA) Plan Disenrollment Reasons Survey. FHP, a subsidiary of Fresenius Medical Care North America, currently operates ESRD Chronic Special Needs Plans (C-SNPs) in North Carolina, Arizona, and California. We appreciate your consideration of the industry's thoughts and feedback on this important annual survey.

As we provide both Part C and D benefits to our beneficiaries, our comments focus on the Medicare Advantage Prescription Drug (MAPD) survey in particular. While we support CMS' efforts in improving and streamlining the MAPD disenrollment survey with recent proposals, we do have a few overarching suggestions to make, as well as a couple of more question-specific recommendations to make. We identify the particulars of our feedback and input below:

Overarching Suggestions

We urge CMS to consider shortening the MAPD disenrollment survey, as in current format the survey may come across as overwhelming and burdensome to the individual. Many of these questions could be combined and/or condensed, while still gathering the same amount of information needed.

In addition, we noticed numerous inconsistencies relating to the numbering of the questions, phrasing, and the answer options. For instance, with regard to the numbering, there are a different number of questions proposed for

English-speaking survey takers, versus Spanish-speaking ones. Also, the ordering of the numbers seems to be off in several instances. Respecting the inconsistencies with phrasing, for instance in some cases the survey uses "former health plan" and in others it uses "[plan marketing name]." We recommend that CMS consider substituting all "former health plan" references with "[plan marketing name]" in order to avoid confusion of the definition of "former health plan." Finally, pertaining to the answer options, we noticed that some questions do not give the option of selecting "N/A," while others do.

Question-Specific Recommendations

Concerning Question 2, we recommend adding a generic pre-question stating "Did you voluntary choose to leave the plan or were you required to leave the plan by Medicare?" We believe adding this precursor will lessen beneficiary confusion with regard to what CMS is asking and will further CMS' efforts in streamlining the survey process.

Per Question 48, we suggest CMS add language asking the individual whether he or she left the plan because a provider or provider staff told them they should. In conducting our own disenrollment surveys, we have encountered instances where individuals have chosen to leave the plan due to provider influence, so adding this as an option to your survey would provide more clarity to your team with regard to how often providers and/or provider staff have a direct effect on beneficiaries choosing to leave a health plan.

Finally, concerning Question 73, it appears that questions 68-72, which have now been removed, may have led to this question to explain the definition of "person." If these were removed, we recommend this question be reworded with a preamble so that beneficiary confusion is eliminated.

We would like to thank you again for the opportunity to provide comments on the CMS Disenrollment Reasons Survey for MAPD plans. We appreciate the chance to work with you to better beneficiary experience in answering this survey, as at its core, this survey promotes the best interest and protection of our beneficiaries, enabling us to identify how to better serve our members, as well as areas that our plan may need improvement.

Should you have any questions about our feedback, please do not hesitate to reach out.

Sincerely,

William McKinney

President