



June 15, 2018

Center for Medicare & Medicaid Services
Office of Strategic Operations & Regulatory Affairs
Division of Regulations Development
Attention: CMS-10500/OMB Control No. 0938-1240
Room C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

RE: Comment Request - CMS-10500 Consumer Assessment of Healthcare Providers & Systems Outpatient and Ambulatory Surgery (OAS CAHPS) Survey

Submitted electronically via <http://www.regulations.gov>

To Whom It May Concern:

Optum is pleased to respond to the above-referenced request for comments, which seeks feedback regarding the Consumer Assessment of Healthcare Providers and Systems Outpatient and Ambulatory Surgery (OAS CAHPS) Survey.

OptumHealth is a division of UnitedHealth Group ("UHG"). UHG is dedicated to helping people live healthier lives and making the health care system work better for everyone through two distinct business platforms—UnitedHealthcare, our health benefits business, and Optum, our health services business. Our combined workforce of 285,000 people serves the health care needs of nearly 140 million people worldwide, funding and arranging health care on behalf of individuals, employers, and the government.

Comments on Enhancing the Quality, Utility, and Clarity of the Information to be Collected:

We believe that overall the survey is well-designed, clear and elicits information that has utility. Specifically, there are quality questions to gather useful feedback on the front desk staff, surgeon, nursing staff and the facility overall. Where we feel the survey is lacking is with regard to posing questions and gathering feedback specifically pertaining to the person administering the anesthesia in a procedure. In addition, the utility of the survey could be enhanced further by including questions on the family, or care givers who are waiting for a patient during the recovery portion of the procedure prior to discharge. For example, questions such as; Did the facility keep your family informed? What was family member/care giver experience waiting for patient to come out of anesthesia and surgery? These questions or similarly focused questions would be very helpful and enhance the survey to by capturing a component of the procedure and patient experience not currently reflected in the survey.

Comments on the Use of Automated Collection Techniques or Information Technology to Minimize the Information Collection Burden:



The positive value of phone collection is that CMS is also able to capture additional narrative that may not be provided on a written survey. We would suggest an additional email or SMS option for ease of completing survey given the large number of individuals who use these methods of communication as preferred methods of communication/interaction. If deployed, the use of various electronic methods could capture responses from a broader population.

Comments on the Burden Estimate:

The estimate is that there is no cost to respondents other than spending approximately eight(8) minutes of their time to complete the survey. We believe that eight(8) minutes to complete the survey as currently constructed is consistent with feedback received and is accurate, and the associated cost estimates derived in the attachments to the Request for Comments are not burdensome. However, we would note that alterations and additions to the survey and/or the methodology for taking the survey would require review and recalculation of these estimates. Additionally, the question of burden is directly mitigated by the fact that the survey is voluntary and not mandatory – if that fact were to change the burden estimate would also need to be reviewed and updated accordingly.

Comments on other aspects of this Collection of Information:

We support the use of this survey, but we suggest that CMS consider adoption of a Net Promoter Score (NPS) methodology rather than the more crude measure generated under Question 24 of the current survey. NPS rating systems have been widely adopted across many industries in recent years and are familiar to consumers and enable a more precise measuring of patient satisfaction. CMS is asking a very similar question, but people are very accustomed to the NPS, so would help to fall in line with other service industries.

In addition, it would also be helpful to have a free form narrative section for respondents to have space to indicate their full experience by adding additional commentary that may illuminate their responses to the existing survey questions. The gathering of such information will inform the responses to other questions in terms of why the respondent selected the response they did. For example, we think the survey would have more utility if in follow-up to Question 3 if the respondent indicated "No." it would be useful to allow them the opportunity to explain why they believe the check-in process did not run smoothly.

Optum appreciates the opportunity to comment on the Consumer Assessment of Healthcare Providers and Systems Outpatient and Ambulatory Surgery (OAS CAHPS) Survey and welcomes the opportunity for on-going constructive discussion and collaboration. Thank you for your thoughtful consideration of our comments. Please do not hesitate to contact us if you have any questions.

Sincerely,

A handwritten signature in blue ink, appearing to read "Adam R. Easterday", written over a light blue horizontal line.

Adam R. Easterday,
Deputy General Counsel
Regulatory Affairs