Primary Care First

Foster Independence. Reward Outcomes.

Patient Experience of Care (PEC) Survey Vendor Update Training

March 6, 2024

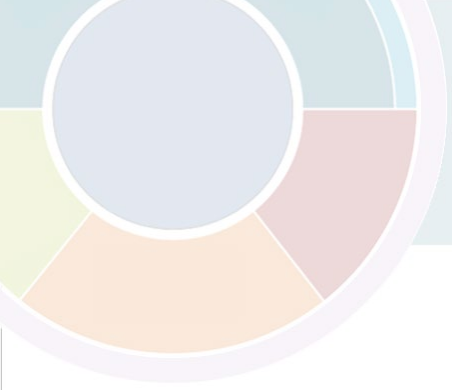*Center for Medicare & Medicaid Innovation*

Welcome and Overview
Training Session Logistics and Reminders

- Attendees must remain connected via web and telephone/VoIP
- If you get disconnected or have technical problems, send a message via the "Q&A" web panel or call:

<div style="text-align:center; border:2px solid orange; background:#fde9d9; padding:10px;">

1-833-997-2715

</div>

- Participants will be muted during the presentation
- We will conduct a Q&A session at the end of the training
- Before the Q&A session, we will explain what you need to do to ask a question
- You can submit questions via the Q&A web feature
- Throughout training, please note key dates and details pertinent to the PY 2024 Performance Year

Welcome and Overview

PCF PEC Survey Vendor Update Training for Performance Year (PY) 2024

Welcome and Overview
Reminder: Introduction to PCF PEC Survey Self-Paced Training

> **PCF PEC Survey Vendor Intro Training is a self-paced webinar recording**

Who is required to take the Introduction Training?

New vendor applicants (and any subcontractors) are required to complete the self-paced Introduction to PCF PEC Survey training and complete a certification

New staff from approved survey vendors are strongly encouraged to complete the self-paced training. No certification is required for approved vendors

Key staff that should complete the Introduction Training include:

- Survey Administrator
- Project Manager
- Mail Center Supervisor
- Call Center Supervisor

- Project Staff Member(s) responsible for the following functions:
  – Decrypting the sample file and performing sample file quality checks
  – Programming the CATI script
  – Preparing and submitting the survey

Welcome and Overview
Who is required to attend this Update Training?

> **This PCF PEC Survey Vendor Update Training is for returning approved vendor staff only**

Who is required to attend today's training?
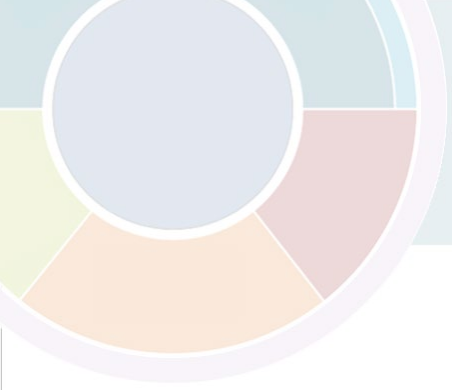
Returning approved vendor key staff, including:

- Survey Administrator
- Project Manager
- Mail Center Supervisor
- Call Center Supervisor

- Project Staff Member(s) responsible for the following functions:
  - Decrypting the sample file and performing sample file quality checks
  - Programming the CATI script
  - Preparing and submitting the survey

Welcome and Overview
Agenda

1) **Improvements made in PY 2023**

2) **PY 2023 Oversight in Review**

3) **PY 2024 Survey Schedule**

4) **What's New or Different for PY 2024?**

   – **Survey Vendor Responsibilities (Quality Assurance Guidelines (QAG) Chapter 3)**

   – **Sampling Protocol (QAG Chapter 4)**

   – **Data Collection Protocol (QAG Chapter 5)**

   – **Data Analysis, Confidentiality, & Security (QAG Chapters 8 & 9)**

   – **Survey Vendor Oversight (QAG Chapter 10)**

   – **Materials**

5) **Results & Response Rate Discussion**

6) **Supporting Target Response Rates**

Section 1

Improvements Made in PY 2023

Improvements Made in PY 2023
Vendor Authorization Reports

- Required weekly vendor authorization report check and email confirmation from survey vendors

- Added pop-up box to the vendor authorization page to remind practices that they must have a contract in place before authorizing a vendor

- Improved communication about contract statuses

- Allowed for better collaboration with PCF Support on outreach to practices that needed assistance

- 13 split practices needed to authorize a vendor in PY 2023

- 202 practices were required to re-authorize the vendor they used in PY 2022 because their vendor changed names

- We achieved a 99.9% authorization rate, with only two practices failing to meet the deadline

Improvements Made in PY 2023
Vendor Authorization Communications

- Significant communication and outreach efforts were made by the PCF PEC Survey Team and PCF Support to achieve 99% authorization rate by the deadline of June 30, 2023

- Communications on Vendor Authorization from the PCF PEC Survey Team and PCF Support in PY 2023:
  - 7 Primary Care 'First Edition' Newsletter articles from Feb – June
  - 3 Targeted Email Blasts to practices who did not have a vendor authorized (in April, May, & June)
  - Direct phone outreach from PCF Support conducted in mid June to reach practices who still needed to authorize a vendor

Improvements Made in PY 2023
Roster Window Extension

- Roster submission window for PCF practices was extended from four weeks to six weeks

- In PY 2023, 99.3% of practices submitted their roster before the deadline, compared to 98% of practices in PY 2022

- The PCF PEC Survey Team made improvements to patient roster materials provided to practices, as well as the QC processes used to check submitted rosters

- The number of rosters that passed validation on their first try also increased
  - By week six of the roster window, 90% of rosters submitted were passing automated checks each time (In PY 2022, it took until week 12 to get to the same average pass rate)
  - This resulted in a reduced burden for practices (due to a decrease in required re-submissions) and reduced the level of effort for the PEC Survey roster team

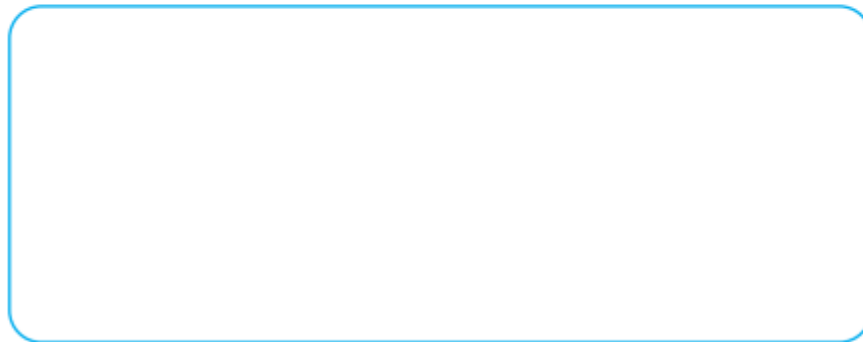- During site visits, vendors reported that the quality of the patient sample files was very good

DHHS Logo Here

Patient Experience of Care Survey

[VENDOR NAME]
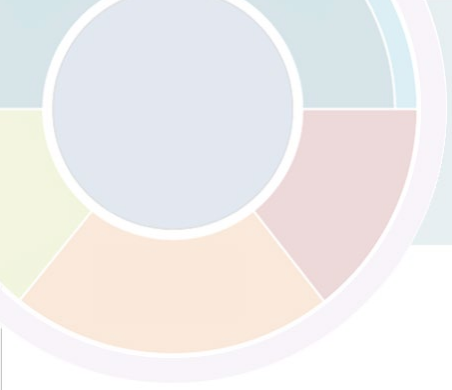[VENDOR ADDRESS]
[VENDOR CITY, STATE ZIP]

For more information, call toll-free: [VENDOR PHONE]

Improvements Made in PY 2023
Communication with Practices

- June 2023
  - Updated the **Understanding and Using Your PEC Survey Results On-Demand Webinar** with an overview of every section of the PCF PEC Survey report and describing how practices can implement changes based on their results
  - Released the **PEC Survey Reports and Scoring Fact Sheet** to address practice questions about how to interpret and utilize their survey results
- August 2023
  - Sent PEC Survey Resources email blast to practices (55% open rate, 36% click rate)
  - Released the updated **Introduction to the PCF PEC Survey on-demand webinar** with added information to address practice concerns and knowledge gaps about the PEC Survey
  - Sent First Edition newsletter articles with a shortened version of the email blast and link to a PDF of the full text of the email (8/3, 8/17, and 8/31)
  - Encouraged practices to send the patient portal message via the medium of their choosing
- September 2023
  - Primary Care 'First Edition' Newsletter Article: How to Use Your PEC Survey Results to Improve Patient Experience

Section 2

PY 2023 Oversight in Review

Review of PY 2023 Vendor Oversight Activities
Virtual Site Visits

- Total of 6 site visits conducted with each PY 2023 survey vendor
- Site visits focused on oversight of:
  - Overview of PCF PEC Survey Systems
  - Safeguarding Patient Confidentiality and Data Security Procedures
  - PCF Practice Engagement and Communication
  - PCF PEC Survey File Receipt and Data Processing Procedures
  - Mail Survey Administration Process, Scanning, and Quality Control
  - Telephone Survey Administration Process, Survey Management, and Quality Oversight
  - Interim and Final File Preparation and Data Submission
- Each vendor received a Site Visit Summary Report following their visit

Overall, site visits showed that vendors were implementing the PCF PEC Survey correctly and successfully for PY 2023

CMS and RTI thank you for successful PY 2023 site visits!

Review of PY 2023 Vendor Oversight Activities *Common Issues Identified During Site Visits*

Mailing QC

Vendors should take steps to improve manual quality control checks ensuring a 10 percent minimum of all printed mail pieces are inspected

Interviewer Training

Vendors should conduct telephone interviewer training and a formal certification process as close to the start of telephone follow-up as possible. Bilingual interviewers should be trained and certified in both English AND Spanish

Common Issues

QC Best Practices

Vendors should follow best practices during all quality control activities by having a different staff member who has been trained on the project perform the quality assurance task and verify the work (e.g., the person who performs the task should not also perform the QC)

Help Desk

Vendors should make efforts to complete help desk calls on the initial call, rather than scheduling a call back. Scheduling a call back introduces the risk of not being able to reach the respondent again. Vendors must be able to handle telephone interview requests before the start of telephone follow-up
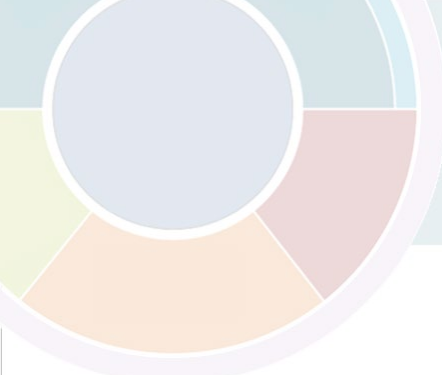
Review of PY 2023 Vendor Oversight Activities
Interviewer Monitoring

- Total of 10 interviewer monitoring sessions conducted during the telephone follow-up period across all 6 PY 2023 vendors
- Interviewer monitoring focused on evaluating interviewers based on:
  - Politeness to the respondent
  - Voice clarity
  - Proper use of FAQs to answer questions
  - Accuracy in reading questions on the interview
  - Appropriate speed
  - Proper interviewing procedures
- Each vendor received an email summary with high-level feedback following their monitoring session(s)
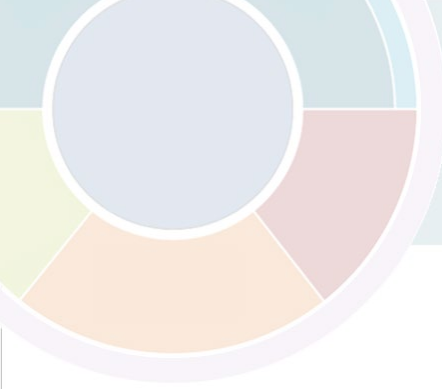
Overall, interviewer monitoring showed that vendors were implementing the CATI follow-up portion of the PCF PEC Survey correctly and successfully for PY 2023.

See the Telephone Interviewing Guidelines for guidance

- Gatekeeper Refusals
  - If the refusal is hostile, please code the case as a hostile refusal
  - If the gatekeeper clearly states that they are refusing the survey on behalf of the patient, please code the case as a refusal
  - Otherwise, for typical gatekeeper/household member refusals, interviewers should attempt a callback (perhaps at a different time) to try to speak with the patient or proxy before coding the case as a refusal

- Immediate hang-ups
  - Respondent or household member immediately hangs up before the introduction or the interviewer asking for the respondent
  - Interviewers should schedule a callback for these types of calls at a different time of day

- Q59 of the PCF PEC Survey asks, "[Are you/Is the patient] male or female?"

Interviewers Should:	Interviewers Should **Not**:
• Read the question verbatim and pause to let the respondent answer • If the respondent provides an answer other than male or female, please choose "Don't know/Other"	• Assume the respondents gender based on information such as name, voice, or a previous response

- Proxy Interviews
  - Vendors should thoroughly train interviewers on selecting a proxy respondent and conducting proxy interviews
    - Including smooth navigation of all proxy CATI screens
  - Interviewers should practice or "role play" conducting a proxy interview as part of the training/certification process
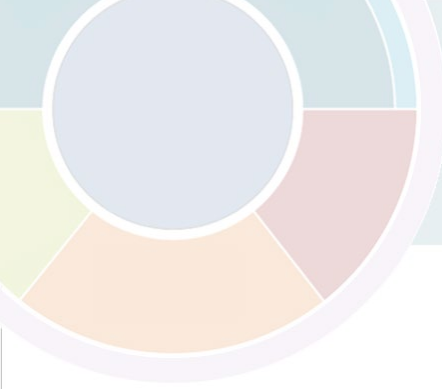
Review of PY 2023 Vendor Oversight Activities
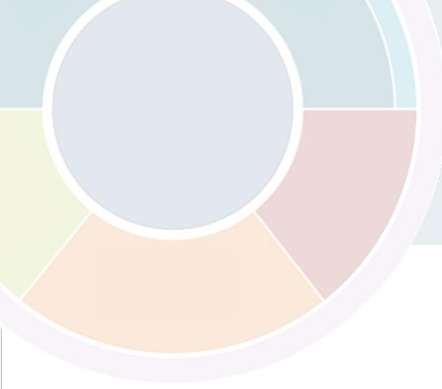## *Interviewer Monitoring Documentation*

> **Interviewer Monitoring Documentation was due January 31, 2024**

- Vendors submit interviewer monitoring documentation by January 31 following each year's data collection

- Interviewer monitoring documentation may be submitted as monitoring logs, individual monitoring sheets, or system-generated reports showing the number of calls monitored by the vendor during the field period

- Monitoring documentation must include the following:
  - Date of the monitoring session
  - Monitor's name or ID number
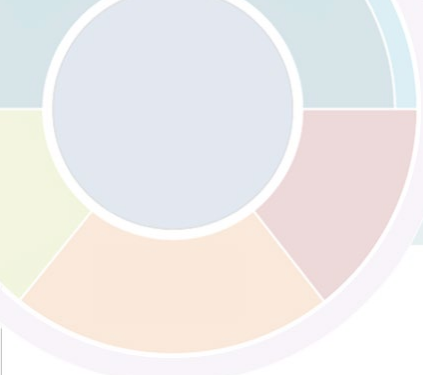 - Number of calls monitored per session

Review of PY 2023 Vendor Oversight Activities *Common Issues Identified in Monitoring Documentation*

- Following submission instructions
  - Vendors must follow all directions provided by the PCF PEC Survey team regarding how to submit the interviewer monitoring documentation
  - Vendors must submit the documentation via the website
- Alignment of interviewer training numbers with monitoring documentation
  - The number of interviewers monitored should not exceed the number that was reported in the Interviewer Training and Certification documentation in December
  - If additional trainings were held (for example, attrition trainings), vendors must resubmit the interviewer training documentation
- Providing accurate count of interviewer-conducted calls
  - Vendors using automatic call dispositioning may have some calls that are assigned a call outcome by the dialer and as such cannot be monitored
  - Vendors should specify the number of interviewer-conducted calls

- Cases with a completion date but no patient data
  - Surveys that have not been completed should be given a completion date of "88888888"
- Completeness criteria: when to code as a complete
  - Refer to section 6.3.1 in the QAG for definitions of complete and partial complete surveys
- Use of 270 – Pending until all contact attempts are made
  - Use 210 – Incomplete only in final data submission
- Survey language when no patient data is present
  - Should be marked as "X"
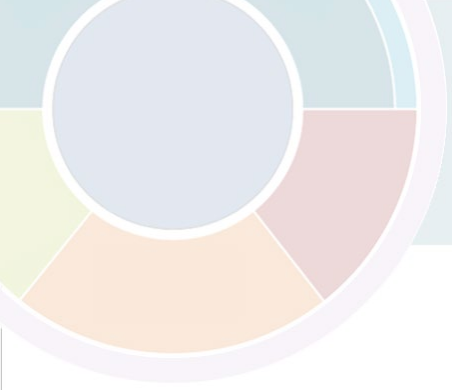- Not coding RTI/CMS seeds as 200 – Excluded from Survey

- Do not code cases as 240 (Wrong/Disconnected Phone) without first attempting to get a good phone number and placing calls to that number

- If Q63 (the CATI proxy) is coded as an '86' (CATI, no proxy), this counts as an Applies to All (ATA) question. Some vendors forgot to count this as an ATA question, and it did affect the completeness criteria of some cases. **See *Exhibit 6-1* in the Quality Assurance Guidelines for a full list of questions with completeness criteria**

- Vendors should retain internal documentation on all cases coded as 190 - Ineligible for future reference if necessary

Review of PY 2023 Vendor Oversight Activities *Final Data Review*

Final Data Submission Period	Total # cases submitted	# of cases that met completeness criteria BUT NOT coded as complete	# of cases that did not meet completeness criteria BUT coded as complete	Total # of cases coded incorrectly	Error Rate
PY 2021	342,194	6	4	10	0.003%
PY 2022	1,309,530	2	0	2	0.0008%
PY 2023	1,182,933	3	0	3	0.0003%

Section 3
PY 2024 PEC Survey Schedule

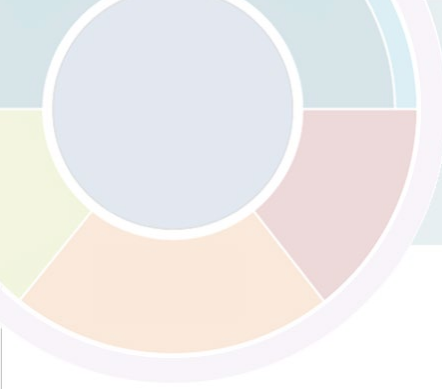# PY 2024 PEC Survey Schedule
Key Dates and Highlights

- Vendor Authorization Window (Mar 11, 2024 – June 14, 2024)
  - Closes two weeks earlier this year, on June 14, 2024
  - Staggered with the Roster Submission Deadline (June 28, 2024) to ease the burden on PCF Support helping practices with rosters
- CATI Telephone Follow-up Period (Nov 18 – Dec 17, 2024)
  - In PY 2023, CATI began the week of the Thanksgiving holiday and vendors were given the opportunity to extend calling by two days
  - In PY 2024, CATI will begin on Nov 18, 2024, and first contact attempts on all samples must be made in the first week
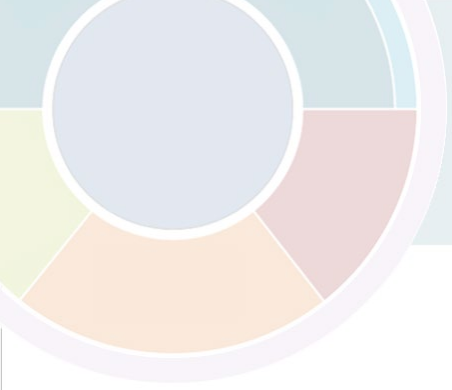 - Survey vendors may suspend calling for two days over the Thanksgiving holiday

PY 2024 PEC Survey Schedule

Activity	Date(s)
Vendor Application, Approval and Authorization	
Survey vendor application period	01/03/24 – 02/02/24
Introduction to PCF PECS Training for Vendors self-paced webinar (for conditionally approved vendors)	03/04/24 – 03/08/24
PCF PEC Survey Vendor Update Training webinar (for fully approved vendors)	03/06/24
Deadline for conditionally approved vendors to complete training certification exam	03/08/24
Updated vendor list with conditionally approved vendors is available on PCF PECS website and PCF Connect	03/14/24
Vendors submit Quality Assurance Plans (QAPs)	03/4/24 – 04/12/24
Practices authorize a vendor for the PY 2024 PEC Survey	03/11/24 – 06/14/24
Final vendor list is available on PCF PECS website and PCF Connect with list of fully approved vendors	05/10/24

PY 2024 PEC Survey Schedule (cont'd, 2 of 2)

Activity	Date(s)
Patient Roster Submission and Sampling	
Patient roster submission open for practices	05/13/24 – 06/28/24
Sample files are posted to PCF PEC Survey website for vendors	09/10/24 – 09/13/24
Survey vendors conduct batch tracing and print survey materials	09/10/24 – 09/23/24
Patient Data Collection by Survey Vendors	
Teaser postcard mailing	09/23/24
Help Desk opens	09/24/24
1st Questionnaire mailing	09/30/24
Reminder/Thank you postcard mailing	10/07/24
2nd Questionnaire mailing	10/28/24
CATI non-response follow up	11/18/24
Data Collection ends/Help Desk closes	12/17/24
Data Submission	
1st interim data submission due from vendors	10/21/24
2nd interim data submission due from vendors	11/27/24
Final data submission due from vendors	01/17/25

Section 4

What's New or Different for PY 2024?

What's New or Different for PY 2024? (1 of 3)

- Roles and Responsibilities (Chapter 3)
  - Survey vendors required to check authorization report weekly
  - Subcontractor management expectations

- Sampling Protocol (Chapter 4)
  - Patient rosters should exclude patients in long-term facility such as jail/prison
  - Language field in sample file updated to match XML
  - Added provider name variables
  - Quality control best practices
  - Clarification about coding cases as ineligible based on address standardization information

See "Updates in This Release" table in the QAG for a full list of updates

What's New or Different for PY 2024? (cont'd, 2 of 3)

- Data Collection Protocol (Chapter 5)
  - Note that vendors may suspend CATI for Thanksgiving holiday
  - Requirement to complete first attempt on all sample in first week of CATI follow up
  - Updated requirements for interviewer training and certification
- Data Analysis, Confidentiality, & Security (Chapters 8 & 9)
  - Update to requirements for vendor client reporting
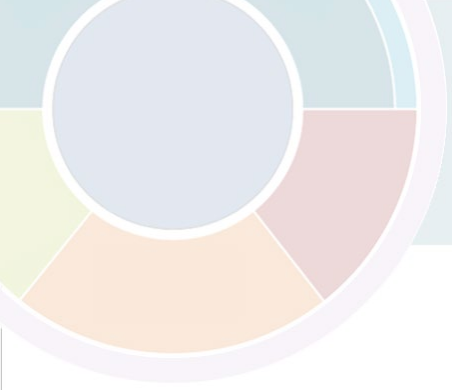 - Offsite data storage includes cloud-based storage

See "Updates in This Release" in the QAG for a full list of updates

What's New or Different for PY 2024? (cont'd, 3 of 3)

- Survey Vendor Oversight (Chapter 10)
  - Repeated missed deadlines may result in a Corrective Action Plan
  - Survey vendors must include subcontractor oversight steps in Quality Assurance Plan
  - PEC Survey Team may request that a vendor submit live proofs in advance of the teaser postcard mailing
  - Strongly recommended to prepare a presentation for virtual site visits
  - Model QAP
- Updated Materials
  - Proxy statement added to outgoing envelopes
  - Number of PCF participants in mailing 1 cover letter
  - FAQs for use by inbound help desk staff
  - Telephone interviewer guidelines
  - Waiting room FAQs
  - PCF PEC Survey Message to Patients

See "Updates in This Release" in the QAG for a full list of updates

Section 4a

Roles & Responsibilities (QAG Chapter 3)

Roles & Responsibilities
Survey Vendor Authorization Report

- Weekly updates from survey vendors in PY 2023 improved communication between Survey Vendors, the PEC Survey Team, and PCF Support

- Vendors are required to confirm weekly review of the Survey Vendor Authorization Report, and note any discrepancies in writing, during the vendor authorization window

- This review must be confirmed via email to the PEC Survey Team
  - This requirement is now listed in QAG section 3.3.3

- **Vendors are responsible for outreach to practice clients about contract status**

- Practices may elect to switch vendors during the vendor authorization window

> **PY 2024 Vendor Authorization Window:**
> **March 11, 2024 – June 14, 2024**

Roles & Responsibilities
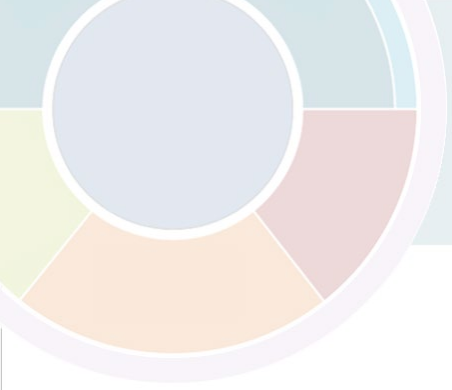## *Subcontractor Management Expectations*

- Approved survey vendors are fully responsible for ensuring adherence to the QAG and successfully implementing the PCF PEC Survey
- This includes tasks like:
  - Performing all required quality control checks on work performed by a subcontractor
    - Checking a minimum of 10% of all printed materials
    - Silently monitoring a minimum of 10% of calls
  - Reviewing all work products provided by a subcontractor prior to submission to the PEC Survey Team, such as interviewer monitoring documentation
- Please review the protocols and requirements in the QAG thoroughly and ensure that all vendor and subcontractor staff are familiar with them and with your QAP before the start of data collection

Roles & Responsibilities
Quality Control Best Practices

- CMS strongly recommends that vendors follow best practices during *all* quality control procedures on the PCF PEC Survey
  - Survey vendors should have a different staff member who has been trained on the project perform the quality assurance task and verify the work (e.g., the person who performs the task should not also perform the quality control)

Section 4b

Sampling Protocol (QAG Chapter 4)

Sampling Protocol
Patient Roster/Sample File Updates

- Patient rosters should exclude patients in long-term facilities such as jail/prison
- Language field in sample file updated to match XML
  - Vendors no longer need to recode
- Added provider name variables
  - For practices that may have up to 92 providers

Exhibit 4-2
Variables Included in PCF PEC Survey Sample Files

Column Name	Field Length	Valid Codes	Field Contents
Language	1	Numeric	1 = English 2 = Spanish. *If blank, patient is presumed to speak a language other than English or Spanish.*

Sampling Protocol
Data Quality

- Please note that survey vendors are only allowed to code cases as ineligible if address standardization shows that the sampled patient resides out of the country or has moved out of the country during data collection

- Any other address standardization information is not permitted to be used to code cases as ineligible (i.e., addresses identified as prisons or nursing homes, or indication that the patient is deceased)
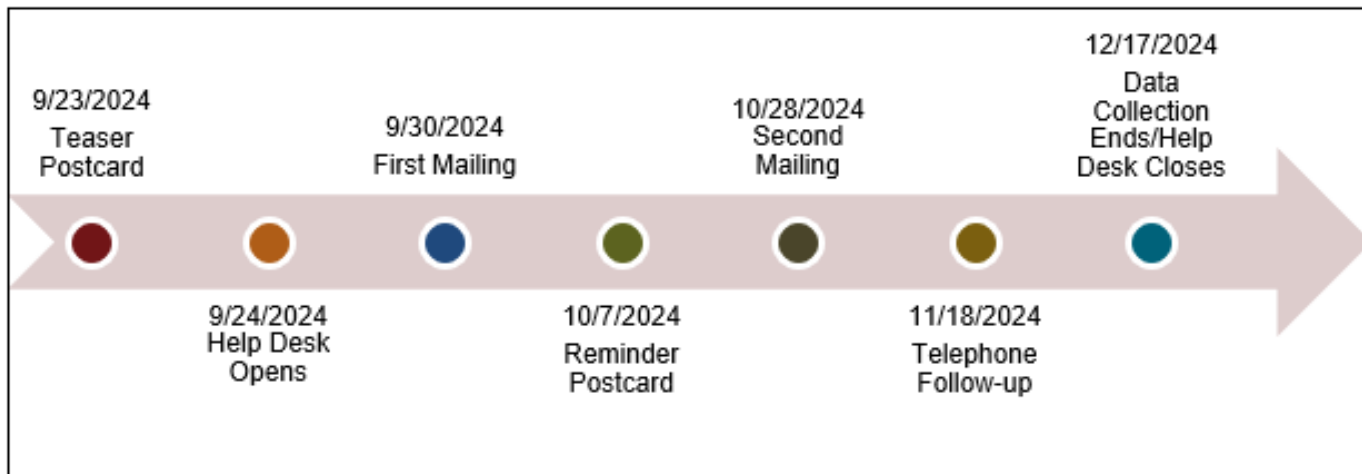
Section 4c

Data Collection Protocol (QAG Chapter 5)

Data Collection Protocol
CATI Telephone Follow Up

Figure 5-7
Telephone Follow-up Timing

- Note that vendors may suspend CATI calling on November 28 and 29, 2024 for the Thanksgiving holiday
- Survey vendors are required to complete a first attempt on all sample in first week of CATI follow-up, Nov 18 – Nov 25, 2024
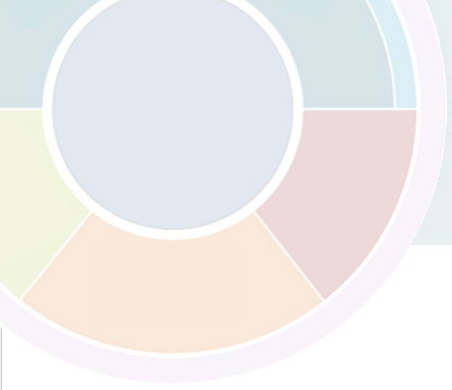
Data Collection Protocol
Interviewer Training & Certification

- Required interviewer certification process for each interviewer AND all help desk personnel
  - Verbal, written, or both
  - At minimum, the certification should include a test (written or verbal)
- Bilingual interviewers must be certified in English AND Spanish
- The telephone interviewer training and certification process should take place as close to the start of the telephone follow-up portion as possible

> **Reminder:** Documentation of training and certification of all telephone interviewers and Help Desk staff and outcomes will be subject to review by CMS

Section 4d

Data Analysis, Confidentiality, & Security (QAG Chapter 8 & 9)

Data Analysis, Confidentiality, & Reporting
Data Analysis and Reporting

- For PY 2024, the PEC Survey benchmark will be 77.00. A practice's PEC Survey Summary Score must meet or exceed this benchmark to be eligible to pass the Quality Gateway

- CMS set this benchmark—which is informed by historical PCF practice performance (PY 2021 and 2022)—to be both motivational and attainable

- CMS will announce the PY 2023 benchmark in Spring 2024

- Practices were notified of this update via the November 9, 2023, Primary Care 'First Edition' Newsletter

- Direct practices with questions to contact PCF Support or consult the PY 2024 PCF Payment and Attribution Methodologies Paper

Refer to the [PY 2024 PCF Payment and Attribution Methodologies Paper](#)

All reports provided to PCF PEC Survey practice sites must include a disclaimer printed in a minimum 14-point font size on the first page:

> "[VENDOR] results are not official CMS results and are for [PRACTICE]'s internal quality improvement purposes only. Official PCF PEC Survey Supplemental reports will be released from CMS in Q2. There is no required minimum response rate for scoring. The PEC Survey benchmark is calculated concurrently with annual PCF practice performance and based on overall PCF practice performance."

See Quality Assurance Guidelines Section 8.4 for details

Data Analysis, Confidentiality, & Security
Client Reports (cont'd, 2 of 3)

- Reports must include a clear explanation and context for the numbers presented in the report
- If the vendor calculates a domain composite score, they must describe how it is calculated and how it differs from the CMS-calculated score

> Refer to Section 4.1.1.3 of the [Payment Attribution and Methodologies document (PMP)](#) for a thorough explanation of CMS domain scoring

Data Analysis, Confidentiality, & Security
Client Reports (cont'd, 3 of 3)

The following CMS definitions must be used:

Top-box scoring: The raw, unadjusted percentage of respondents who submitted the highest possible response (e.g., always, yes, a lot, or 10 out of 10) for each question on a scale from 0-100 percent. For questions with only 2 possible responses, the Top-box score is the same as the Raw score

Risk-adjusted scoring: A risk-adjusted score is calculated by adjusting the raw score for patient age, sex, level of education, self-reported physical health status, proxy response, and survey mode, then rescaling to a 100-point scale

Raw scoring: The unadjusted average of scores from all returned surveys for a given question

Response Rates vs. PEC Survey Summary Scores

Practice response rate does not affect the PEC Survey Summary Score. However, a high response rate means that your survey vendor has heard from a wide variety of patients served by your practice.

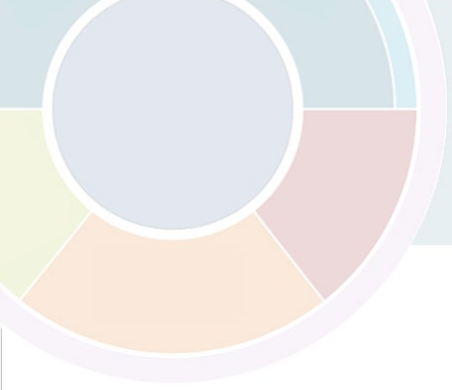The PEC Survey Summary Score reflects how the responding patients reported their experience of care on the survey.

Data Analysis, Confidentiality, & Security
Offsite Data Storage

- Offsite data storage includes cloud-based storage

Vendors must have an approved Exception Request Form (ERF) for any offsite data storage

Section 4e

Survey Vendor Oversight (QAG Chapter 10)

Survey Vendor Oversight
General Updates

Repeated missed deadlines may result in a Corrective Action Plan

PEC Survey Team may request that a vendor submit live proofs in advance of the teaser postcard mailing

Strongly recommended to prepare a presentation for virtual site visits

Survey Vendor Oversight
Quality Assurance Plan

- Updates to Model QAP Outline
  - Section A: Organizational Background & Staff Experience
    - Updated subcontractor management requirements
  - Section B: PCF PEC Survey Work Plan
    - Updated requirements for required quality control steps throughout
  - Section C: PCF PEC Survey Implementation Plan
    - Updated requirements for required quality control steps throughout
    - Updated to require more detailed descriptions of survey vendor's processes for implementing each step of the survey
    - Must include a copy of survey vendor's interviewer monitoring form
  - Section D: Data Security, Confidentiality, Privacy Plan and Disaster Recovery Plan
    - No updates to Model QAP Outline
  - Section E: Questionnaire and Materials Attachments
    - No updates to Model QAP outline

See "Updates in This Release" in the Model QAP outline for a full list of updates

PY 2024 PEC Survey Schedule
QAP Updates

Quality Assurance Plan updates for returning vendors are due on **March 15, 2024**

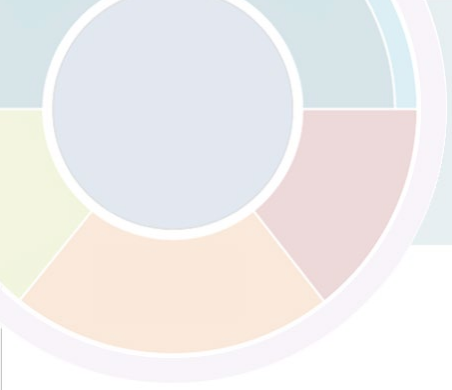All updates should be made in **tracked changes**

The PCF PEC Survey Team will review QAPs and provide feedback to returning vendors no later than **March 29, 2024**

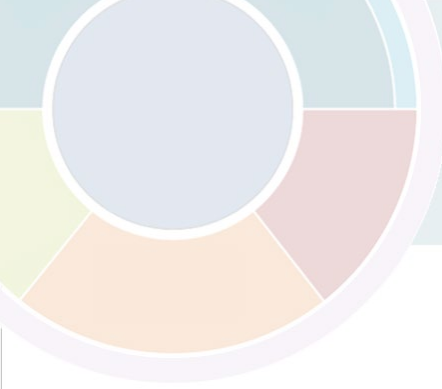Returning vendors will resubmit QAPs with revisions by **April 5, 2024**

Returning vendors resubmit their approved QAP with completed templates of all mail and telephone survey materials by **June 21, 2024**

Section 4f

Materials Updates

Materials Updates
Outgoing Survey Envelope

- Added proxy statement to standard outgoing envelope:

> *If needed, someone like a friend or family member can assist you with this survey.*

- Geriatric practices, home health care practices, and practices with large populations of non-English speakers tend to have lower than average response rates, and they may not always be aware of the proxy option

Materials Updates
Cover Letter

- Updated number of PCF participants in the Mailing 1 cover letter:

Dear <<FIRST>> <<LAST>>,

I am writing to ask you to complete the attached Patient Experience of Care Survey. Across the nation, approximately 2,500 primary care providers' offices including your primary care provider's office are working with 18 health insurance partners including your local plans to make health care better and more affordable.

Materials Updates
Patient-Facing FAQs

- Updated FAQs for use by inbound help desk staff

I. General Questions about the Survey

- Who is sponsoring this survey?

  Your provider's office has joined a program run by the U.S. Department of Health and Human Services (HHS) to learn how they can improve the experience and health of their patients. They provided HHS with a list of their active patients. HHS and your provider's office are working with independent survey vendors to conduct the survey. The materials you received in the mail regarding the survey had the HHS logo printed on them.

- Updated patient FAQs

What will it look like? The survey envelope will have the official Department of Health and Human Services (HHS) logo, like the one at the top of this page.

Materials Updates
Telephone Interviewer Guidelines

Be sure to

- Match interviewer pace to the respondent
- Use PCF PEC Survey FAQs to answer respondent question, which can help with respondent cooperation
- Use the Q62 (race question) dos and don'ts
- Understand difference between a refusal and ineligibility, or the need for a proxy
- Code respondents that are institutionalized, incarcerated, living out of the country during data collection, or deceased, as ineligible

Do not

- Explain the meaning or intent behind a question to respondents
- Pre-fill responses to questions in anticipation of answers
- Be too quick to code a sample member as incapable, instead offer to conduct a proxy interview

Section 5

Results & Response Rate Discussion

PEC Survey Results and Reporting
PY 2023 Response Rates Discussion (1 of 3)

- Response rate increased in PY 2023
- Response Rate for PY 2023 is 21.3%
  - Response rate is calculated by:

$$\frac{(Completes + Partial\ Completes)}{(Cases\ fielded - ineligible\ cases)}$$

- Practices with high response rates typically served an older population
- Practices with a low response rate had much higher non-contact rates. The majority of patients in the bottom 200 practices were labeled "No Contact After Max Attempts"

PCF PEC Survey Final Response Rate Comparison By Year

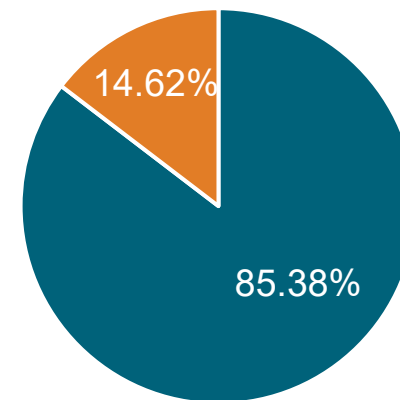### PY 2023 PCF PEC Survey Final Response Rate by Mode

- 11.11%
- 88.89%
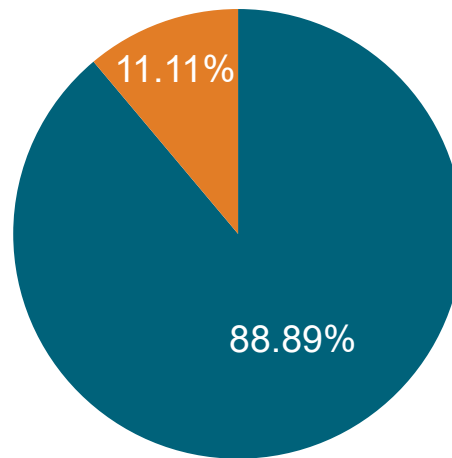
■ Completed Mail*

■ Completed Phone*

*Percent completed includes partial complete surveys

PY 2022 Final Response Rate by Mode

- 13.69%
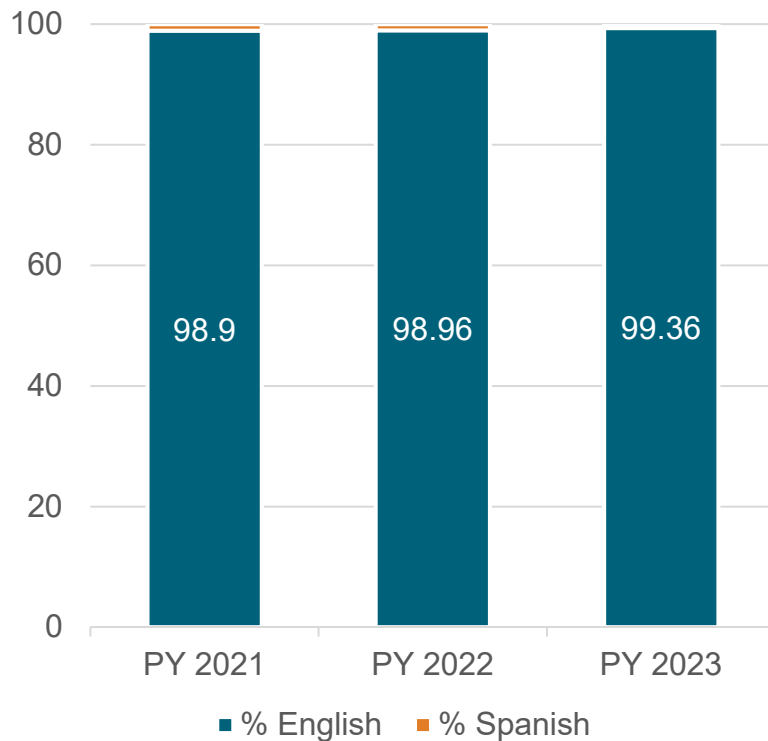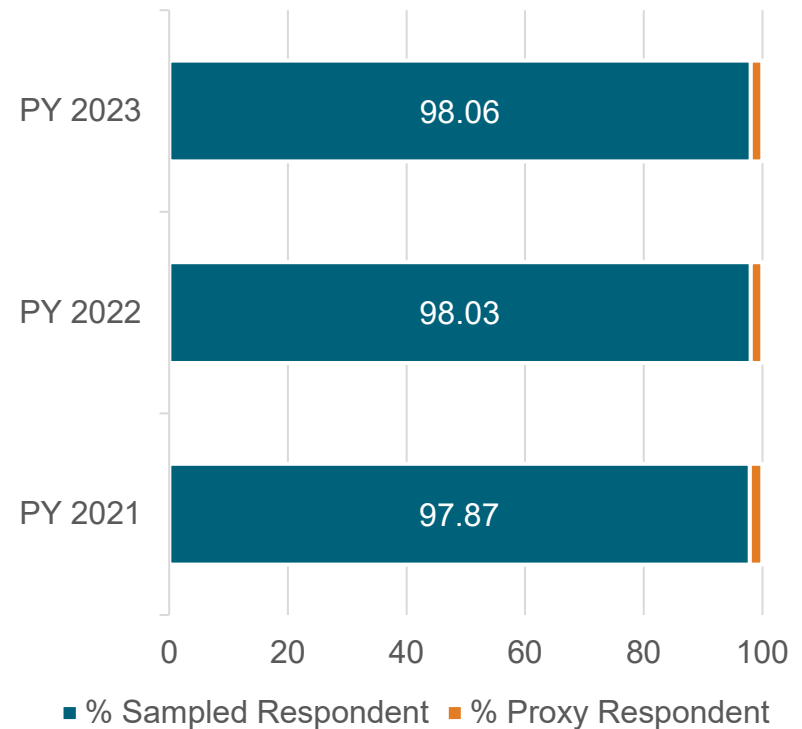- 86.31%
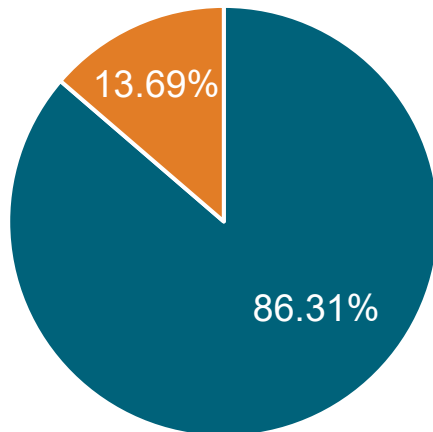
PY 2021 Final Response Rate by Mode

- 14.62%
- 85.38%

Completes by Language

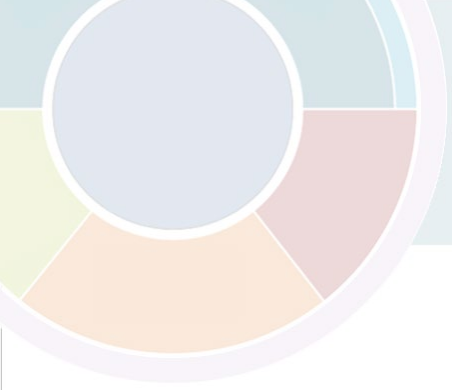Completes by Proxy v. Sampled Patient

PEC Survey Results and Reporting
Factors Impacting Response Rates

- Exception Requests for:
  - Reducing the stated survey administration time
  - Extending the CATI portion of the data collection to accommodate Thanksgiving holiday closures
- Switch to HHS logos and CMS signatory on mailing materials
  - Helping to improve perception of the survey's legitimacy
- CMS and the PCF PEC Survey team increased outreach to practices in PY 2023
  - Practice engagement resources email and First Edition articles
  - PCF PEC Survey Reports & Scoring Fact Sheet
- Natural Disasters
  - Hurricane Idalia in Florida (Aug 2023), and the Maui wildfires (Aug 2023)
  - The average response rate for both groups was slightly higher than the overall response rate for PY 2023

Section 6

Supporting Target Response Rates

Supporting Target Response Rates
Vendor Actions

Communicate with Clients about Patient Needs

- Practices that serve geriatric patients, non-English speakers, or other accessibility limitations may need more proxy respondents

Send Portal Message

- Remind clients to send a portal message in September & provide language
- Option to send as a different form of communication

Encouraging Patient Engagement

Encourage Phone Proxy Option

- Train staff to overcome barriers by promoting proxy option over the phone
- Proxy phone interviews can overcome mental and physical limitations as well as language barriers

Help Patients Identify the Survey

- Send an example of the mailing envelope to practices to show patients
- Point out HHS logo
- Let practices know what the Caller ID will say when patients get a PEC Survey call

Supporting Target Response Rates
Examples of Client Outreach

- Client Newsletter
- Let practices know that all survey materials are available on PCF Connect
- Reminder emails for specific dates and deadlines
  - Display the PEC Survey Posters & FAQs (March)
    - Note these materials have been updated for PY 2024 and should be re-printed
    - Small poster (8.5 x 11) can be printed and used as handout
  - Send list of Residential Care Facilities (August)
  - Send name and address of facility that patients will recognize (August)
  - Sending the PEC Survey message to their patients through the patient portal or another venue (September)
  - Start of data collection (September)
  - End of data collection (December)

Supporting Target Response Rates
Tracking Practice Client RRs

- Vendors should monitor response rates by practice and troubleshoot any practices with low response rates
- Potential issues affecting response rates:

High rates of undeliverable mail surveys

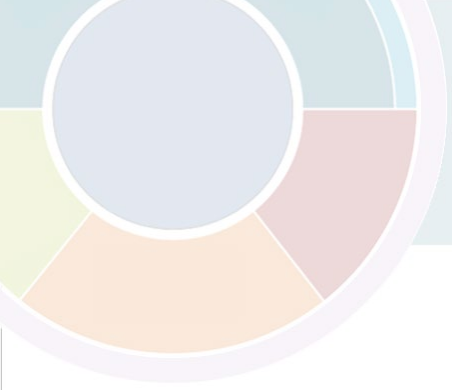Could indicate an issue with the practice's sample file

High rates of 170: Language Barrier

Patient population may need more emphasis on proxy option

High rates of Ineligible: Did not receive care at practice

Confirm name of practice that patients will recognize with client
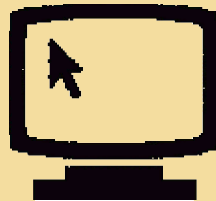
?

Q&A

Please **submit questions via the Q&A pod** on the bottom of your screen

For questions **specific to your organization**, please **email PCF PEC Survey Team at pcfpecs@rti.org**.
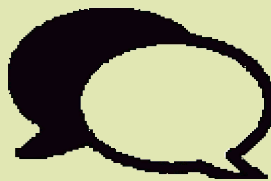
Questions

pcfpecs.org

Toll-Free Number
833-997-2715

pcfpecs@rti.org

Quality Assurance Guidelines