

**ODJFS CAHPS Survey Administration and
Data Submission Specifications**

Provider Agreement Effective through Contract Period ending June 30, 2013

Contact: Tammy Simon
Issued: December 2012

Introduction

This document describes ODJFS' State Fiscal Year (SFY) 2013 requirements for the *Consumer Assessment of Healthcare Providers and Systems* (CAHPS) survey administration and data submission.

The following key components are addressed:

1. CAHPS Survey Administration Requirements

2. CAHPS Data Submission Requirements

- ◆ National Committee for Quality Assurance (NCQA)
- ◆ National CAHPS Benchmarking Database (NCBD)
- ◆ Ohio Department of Job and Family Services (ODJFS)

3. CAHPS Data Collection and Submission Certification Requirements

Attachment A –

Letter of Certification for MCP CAHPS Survey Administration and Data Submission to NCQA and ODJFS

Attachment B –

Letter of Certification for MCP CAHPS Data Submission to NCBD

Appendix –

County Codes

1. CAHPS Survey Administration Requirements

- ◆ Each MCP must contract with an NCQA-Certified HEDIS Survey Vendor to administer HEDIS CAHPS surveys to the MCP’s Ohio Medicaid members. A listing of survey vendors can be found at <http://www.ncqa.org/tabid/170/Default.aspx>.
- ◆ The HEDIS CAHPS surveys must be administered in accordance with NCQA’s *HEDIS 2013 Volume 3: Specifications for Survey Measures*.
- ◆ The HEDIS CAHPS surveys must be administered for both adult and child members using the NCQA HEDIS CAHPS Adult Medicaid Health Plan Survey and the NCQA HEDIS CAHPS Child Medicaid Health Plan Survey (with the chronic conditions measurement set), respectively.
- ◆ The following supplemental items must be added to the Adult Medicaid Health Plan Survey: (TBD in fall of 2012).
- ◆ The following supplemental items must be added to the Child Medicaid Health Plan Survey (with the chronic conditions measurement set): (TBD in fall of 2012).
- ◆ All HEDIS CAHPS survey materials sent to members (e.g., cover letters, questionnaires) must be submitted to ODJFS for prior review and approval.
- ◆ The HEDIS CAHPS surveys must be administered using a mixed mode of administration (i.e., mail and telephone modes).
- ◆ The data elements in the table below must be included at the end of the HEDIS CAHPS sample frame files in accordance with the length and valid values for each data element provided in the table.

Required Data Element	Length	Value Labels
Member race/ethnicity	1	1 = White 2 = Black 3 = Hispanic 4 = Asian 5 = Native American 6 = Other
CFC or ABD member	1	1 = CFC Member 2 = ABD Member
County Code	2	Two digit county code in which the member resides (See Appendix for crosswalk)

- ◆ A thirty percent oversample must be performed on the adult population.
- ◆ Inappropriately coded data must be cleaned using ‘Option 2: Clean inappropriately answered responses,’ as detailed in NCQA’s *Quality Assurance Plan for HEDIS CAHPS Survey Measures*.

2. CAHPS Data Submission Requirements

A. National Committee for Quality Assurance (NCQA)

- ◆ The MCP (or its designated survey vendor) must submit the MCP's member-level CAHPS data files to NCQA by **May 31, 2013**, in accordance with NCQA's *HEDIS 2013 Volume 3: Specifications for Survey Measures*.
- ◆ The MCP (or its designated survey vendor) must indicate to NCQA that the MCP wants to publicly report its data.

B. National CAHPS Benchmarking Database (NCBD)

- ◆ ODJFS is an NCBD sponsor organization. As such, the MCP (or its designated survey vendor) is required to submit the MCP's 2013 CAHPS survey data to NCBD on behalf of the State.
- ◆ The MCP (or its designated survey vendor) must register for an account with NCBD for the submission of the MCP's 2013 CAHPS survey data to the CAHPS Data Submission System. ODJFS will forward its NCBD sponsor Account ID and Account Password (contained in a Vendor Account Access E-mail) to the MCP, for the MCP's (or its designated survey vendor's) use in accessing and submitting data under ODJFS' NCBD sponsor account.
- ◆ The MCP (or its designated survey vendor) must submit the MCP's 2013 CAHPS survey data to NCBD in accordance with AHRQ's 2013 NCBD Data File Specifications and **by the due date set forth by AHRQ**. Information on submitting health plan survey data to NCBD may be found on AHRQ's CAHPS website.
- ◆ The MCP (or its designated survey vendor) must join NCBD's listserv in order to receive e-mails regarding the CAHPS Health Plan Survey data submission process and requirements. Contact NCBD1@ahrq.gov to join.
- ◆ The MCP (or its designated survey vendor) must participate in the 2013 NCBD data submission training. Information regarding this training is posted online and communicated via the above referenced listserv.

C. Ohio Department of Job and Family Services (ODJFS)

- ◆ MCPs are required to submit the following items to ODJFS’ designee (Health Services Advisory Group [HSAG]) **by June 15, 2013**, in accordance with the specifications outlined in 2.C.i. to 2.C.v. below.
 - NCQA Summary-Level Reports
 - CAHPS Survey Data Files:
 - NCQA Member-Level Data Files
 - State-Specific Member-Level Data Files
 - MCP-Specific Survey Instruments
 - Survey Vendor Contact Information

MCPs should upload the required files to their MCP-specific folder on HSAG’s FTP site. HSAG will create a ‘2013 CAHPS’ folder within each MCP-specific folder specifically for these file submissions. The path to use for uploading the required files is as follows: HEALTH PLAN NAME\2012-2013 Contract Year\ K_CAHPS\2013 CAHPS

i. NCQA Summary-Level Reports

Description: NCQA produces reports containing summary-level survey results for each organization that submits data to NCQA. Individual reports are provided for each data submission (e.g., child Medicaid data, adult Medicaid data). These reports contain information on survey attributes (e.g., sample size, response rate) in addition to summary-level results (e.g., three-point means, top box scores) for the global ratings and composite measures.

Data Source: These files are downloaded from NCQA’s Interactive Data Submission System (IDSS), following submission of the MCP’s CAHPS survey data to NCQA via the IDSS.

Requirement: The files listed in Table 1. below must be submitted to ODJFS’ designee (HSAG) in the prescribed formats and using the naming conventions specified in the table.

Table 1. NCQA Summary Level Report Files

File Description	Sub. File Format	Naming Convention for Data File Submission
MCP’s Adult Medicaid NCQA HEDIS 2013 CAHPS Survey Results Report	PDF	DAM[MCP Sub ID]_sr.pdf
MCP’s Medicaid Child with CCC – CCC Population – NCQA HEDIS 2013 CAHPS	PDF	DCC[MCP Sub ID]_ccc_sr.pdf

Survey Results Report		
MCP's Medicaid Child with CCC – General Population – NCQA HEDIS 2013 CAHPS Survey Results Report	PDF	DCC[MCP Sub ID]_gp_sr.pdf

ii. NCQA Member-Level Data Files

Description: NCQA Member-Level Data Files are prepared by the MCP (or its designated survey vendor) in accordance with the *HEDIS 2013 CAHPS Survey Validated Member-Level Data File Layouts*. Each NCQA member-level data file contains information about the health plan, the survey submission, the blinded sample, and the response data for each sampled member.

Data Source: These data files are downloaded from NCQA's IDSS, following submission of the MCP's CAHPS survey data to NCQA via the IDSS.

Requirement: The files listed in Table 2. below must be submitted to ODJFS' designee (HSAG) in the prescribed formats and using the naming conventions specified in the table.

Table 2. NCQA Member-Level Data Files

File Description	Sub. File Format	Naming Convention for Data File Submission
MCP's Adult Medicaid NCQA HEDIS 2013 CAHPS member-level data file	TXT	DAM[MCP Sub ID].txt
MCP's Child Medicaid NCQA HEDIS 2013 CAHPS member-level data file	TXT	DCCM[MCP Sub ID].txt

iii. State-Specific Member-Level Data Files

Description: State-specific member-level data files are prepared by the MCP (or its designated survey vendor) in accordance with the requirements established below as well as a file layout document that will be provided to the MCPs by ODJFS in approximately January of 2013. (Note – the file layout document will be produced following NCQA survey vendor training in October of 2012).

The state-specific member-level data files contain the same data as the NCQA member-level data files (see 2.C.ii. above) but also contain additional data not submitted to NCQA. The state-specific member-level data files contain member-level response data for any supplemental items added to the surveys by ODJFS per the Survey

Administration Requirements on page 2 of this document (note, the files do not contain data for any MCP-specific supplemental items). These files also contain member-level data for specific demographic variables requested by ODJFS and derived from administrative data included on the sample frame files (per the Survey Administration Requirements on page 2 of this document).

Data Source: These data files are prepared by the MCP (or its designated survey vendor) using the MCP’s CAHPS survey data and sample frame file information.

Requirement: The files listed in Table 3. below must be submitted to ODJFS’ designee (HSAG) in the prescribed formats and using the naming conventions specified in the table.

Table 3. State-Specific Member-Level Data Files

File Description	Sub. File Format	Naming Convention for Data File Submission
MCP’s Adult Medicaid 2013 CAHPS state-specific member-level data file	TXT	DAM[MCP Sub ID]_OH Specific.txt
MCP’s Child Medicaid 2013 CAHPS state-specific member-level data file	TXT	DCCM[MCP Sub ID]_OH Specific.txt

iv. MCP-Specific Survey Instruments

Description: The final, vendor formatted surveys approved by NCQA and used to administer the 2013 HEDIS CAHPS survey to the MCP’s Ohio Medicaid members.

Requirement: The files listed in Table 4. below must be submitted to ODJFS’ designee (HSAG) in the prescribed formats and using the naming conventions specified in the table.

Table 4. MCP-Specific Survey Instrument Files

File Description	Sub. File Format	Naming Convention for Data File Submission
MCP’s 2013 CAHPS Adult Medicaid Health Plan Survey Instrument	PDF	Adult_CAHPS_Survey.2013.[MCP Sub ID].pdf
MCP’s 2013 CAHPS Child Medicaid Health Plan Survey Instrument (with the chronic	PDF	Child_CAHPS_Survey.2013.[MCP Sub ID].pdf

conditions measurement set)		
-----------------------------	--	--

v. Survey Vendor Contact Information

Description: This file contains the following information for the NCQA-Certified HEDIS Survey Vendor that administered the MCP’s 2013 CAHPS survey: vendor name, vendor address, name of vendor contact (for technical questions regarding data submissions), telephone number for vendor contact, and e-mail address for vendor contact.

Requirement: The survey vendor contact information described above must be submitted to ODJFS’ designee (HSAG) in PDF format using the following naming convention: Survey_Vendor_Contact_Info.2013.[MCP Sub ID].pdf

3. CAHPS Data Collection and Submission Certification Requirements

Per appendix L of the ODJFS Provider Agreement, each MCP is required to annually submit the following CAHPS data certification letters to ODJFS:

- ◆ One signed CAHPS data certification letter that attests to the MCP’s adherence to ODJFS’ requirements, as outlined above, for the CAHPS survey administration and data submissions to NCQA and ODJFS’ designee (HSAG).
- ◆ One signed CAHPS data certification letter that attests to the MCP’s adherence to ODJFS’ requirements, as outlined above, for the CAHPS data submission to NCBD.

The MCP must use the CAHPS data certification letter templates provided by ODJFS (see Attachments A and B) to submit this information. Please note that Attachment A requires the MCP to enter the file name for each data file submitted to ODJFS’ designee (HSAG).

MCPs should upload their completed CAHPS data certification letters in PDF format to their MCP-specific folder on HSAG’s FTP site. HSAG will create a ‘2013 CAHPS’ folder within each MCP-specific folder specifically for the submission of CAHPS files, including these documents. The path to use for uploading these documents is as follows: HEALTH PLAN NAME\2012-2013 Contract Year\ K_CAHPS\2013 CAHPS

The 2013 *Letter of Certification for MCP CAHPS Survey Administration and Data Submission to NCQA and ODJFS* must be submitted per the above instructions by **June 15, 2013**.

The 2013 *Letter of Certification for MCP CAHPS Data Submission to NCBD* must be submitted per the above instructions **no later than fifteen calendar days following the due date set forth by AHRQ for the submission of 2013 CAHPS data to NCBD**.

Attachment A

Letter of Certification for MCP CAHPS Survey Administration and Data Submission to NCQA and ODJFS

I, the undersigned, do hereby attest, based on my best knowledge, information, and belief, to the following with regard to [insert MCP name]_____’s (hereinafter referred to as ‘the MCP’) 2013 *Consumer Assessment of Healthcare Providers and Systems* (CAHPS) Survey administration and data submission (**initial each box, if applicable**):

- The MCP administered HEDIS CAHPS surveys to the MCP’s Ohio Medicaid members in accordance with the requirements set forth in the SFY 2013 *ODJFS CAHPS Survey Administration and Data Submission Specifications* document.
- The MCP submitted final, member-level, adult and child CAHPS Survey data files to the National Committee for Quality Assurance (NCQA) on or before May 31, 2013, and in accordance with NCQA’s *HEDIS 2013 Volume 3: Specifications for Survey Measures*.
- The MCP submitted NCQA Summary-Level Report files, NCQA Member-Level data files, State-Specific Member-Level data files, MCP-specific adult and child survey instruments, and survey vendor contact information to ODJFS’ designee (HSAG) on or before June 15, 2013, and in accordance with the data submission requirements outlined in the SFY 2013 *ODJFS CAHPS Survey Administration and Data Submission Specifications* document and an associated file layouts document provided by ODJFS. The data contained in these files and documents is accurate, truthful, and complete.

Listed below are the names of the files submitted to ODJFS’ designee (HSAG):

Signature of CEO, CFO, or delegated authority	Print Name
---	------------

Name of MCP Submitted for:

Submitter Name	MCP Org and Sub ID
Street Address	Telephone Number (include area code) ()
City and State	Zip Code

Attachment B

Letter of Certification for MCP CAHPS Data Submission to NCBD

I, the undersigned, do hereby attest, based on my best knowledge, information, and belief, that [insert MCP name] _____ (hereinafter referred to as ‘the MCP’) submitted the MCP’s 2013 *Consumer Assessment of Healthcare Providers and Systems* (CAHPS) survey data to the National CAHPS Benchmarking Database (NCBD) on or before the due date established by the Agency for Healthcare Research and Quality (AHRQ), and in accordance with the data file specifications issued by AHRQ for the submission of 2013 CAHPS health plan survey data to NCBD.

Signature of CEO, CFO, or delegated authority	Print Name
---	------------

Name of MCP Submitted for:

Submitter Name	MCP Org and Sub ID
Street Address	Telephone Number (include area code) ()
City and State	Zip Code

Appendix: County Codes

01=ADAMS	30=GUERNSEY	60=MUSKINGUM
02=ALLEN	31=HAMILTON	61=NOBLE
03=ASHLAND	32=HANCOCK	62=OTTAWA
04=ASHTABULA	33=HARDIN	63=PAULDING
05=ATHENS	34=HARRISON	64=PERRY
06=AUGLAIZE	35=HENRY	65=PICKAWAY
07=BELMONT	36=HIGHLAND	66=PIKE
08=BROWN	37=HOCKING	67=PORTAGE
09=BUTLER	38=HOLMES	68=PREBLE
10=CARROLL	39=HURON	69=PUTNAM
11=CHAMPAIGN	40=JACKSON	70=RICHLAND
12=CLARK	41=JEFFERSON	71=ROSS
13=CLERMONT	42=KNOX	72=SANDUSKY
14=CLINTON	43=LAKE	73=SCIOTO
15=COLUMBIANA	44=LAWRENCE	74=SENECA
16=COSHOCTON	45=LICKING	75=SHELBY
17=CRAWFORD	46=LOGAN	76=STARK
18=CUYAHOGA	47=LORAIN	77=SUMMIT
19=DARKE	48=LUCAS	78=TRUMBULL
20=DEFIANCE	49=MADISON	79=TUSCARAWAS
21=DELAWARE	50=MAHONING	80=UNION
22=ERIE	51=MARION	81=VANWERT
23=FAIRFIELD	52=MEDINA	82=VINTON
24=FAYETTE	53=MEIGS	83=WARREN
25=FRANKLIN	54=MERCER	84=WASHINGTON
26=FULTON	55=MIAMI	85=WAYNE
27=GALLIA	56=MONROE	86=WILLIAMS
28=GEAUGA	57=MONTGOMERY	87=WOOD
29=GREENE	58=MORGAN	88=WYANDOT
	59=MORROW	00 = OTHER