This informational bulletin describes a new nationwide survey of access to care and experiences of care among adult Medicaid enrollees. The survey will be conducted in the fall of 2014 using a modified version of the Adult Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Medicaid 5.0H questionnaire. This bulletin is intended to call your attention to the next steps for states, as described below.

The CAHPS survey will provide states, other stakeholders, as well as CMCS, with uniform national and state-specific data on the health care experiences of the non-institutionalized adult Medicaid population, thus helping to inform quality improvement efforts. The survey will produce measures of access, barriers to care, satisfaction with providers, and customer service ratings, as well as indicators of the experiences of adult Medicaid enrollees who obtain care from managed care or fee-for-service providers.

CMCS recognizes that some state Medicaid agencies and their contracted health plans currently administer the CAHPS survey to adults covered by Medicaid. This effort is not intended to interfere with any ongoing survey efforts by states. For states that pursue their own CAHPS surveys in 2014, CMCS has developed standard procedures and will coordinate closely with states to use sampling procedures that will avoid duplication with existing Medicaid CAHPS survey efforts and prevent sampling any enrollee more than once.

Survey Sample and Administration

CMCS and its contractor, NORC at the University of Chicago (NORC), in collaboration with its partner, Thoroughbred Research Group (a CAHPS certified vendor), will manage a sample selection process intended to draw approximately 1.5 million adult Medicaid enrollees nationwide for the CAHPS survey. To draw the nationwide sample, NORC will work with states to obtain a sample of roughly 29,000 adult Medicaid enrollees from each state.

The CAHPS sample will be stratified into four subgroups of interest: 1) adults who are dually eligible for Medicare and Medicaid; 2) adults who are not dually eligible but who are disabled;
3) adults who are neither dually eligible nor disabled, and who are enrolled in a comprehensive managed care organization; and 4) adults who are neither dually eligible nor disabled, and who obtain care from a fee-for-service provider or are enrolled in a primary care case management plan.

Recognizing that states’ sampling preferences will differ according to the unique characteristics and circumstances facing each state, CMCS and NORC, in consultation with states, researchers, and other experts, have developed several sampling options for states to consider. CMCS and NORC will work with each state to determine the least burdensome method for obtaining the sample. If a state believes that there are other feasible options, CMCS and NORC will work with the state to explore these alternatives.

**Pilot Test of Sampling Options**

Starting in December 2013, CMCS and NORC began working with five states (Alabama, Oregon, Rhode Island, Tennessee, and West Virginia) to pilot test the proposed sampling options and to develop plans to mitigate any future survey challenges with regard to sample selection. CMCS and NORC collaborated with staff and contractors from these states who are knowledgeable about beneficiary surveys and state databases to assess methods and processes for obtaining a sample of adult Medicaid enrollees in each state. In particular, the sampling pilot test examined the feasibility of different sampling options, the secure transfer of information between states, CMCS, and NORC, the ability of states to supply data to identify the four sub-groups of interest, and the process to remove enrollees from the sample who were previously selected for a state CAHPS survey.

**Working with States: Next Steps**

CMCS and NORC will begin holding a series of webinars with states during the summer months to walk through the sampling options in-depth and to answer questions. NORC will also provide technical assistance to states leading up to and during the sampling process.

If you have not already done so, please designate your state point of contact for this project by emailing MedicaidCAHPS@norc.org. This will help CMCS and NORC know who to contact about participation in the webinars and for other information sharing purposes. If you have any questions or need additional information, please also do not hesitate to contact the Medicaid CAHPS mailbox.

CMCS appreciates the interest states have demonstrated in ensuring the success of this survey effort, as well as the broadly shared commitment to providing timely and accurate data to meet the information needs of states, the federal government, and the general public.