



Via Electronic Mail: DMEPOS@cms.hhs.gov

December 16, 2019

Seema Verma, Administrator
Centers for Medicare and Medicaid Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Re: Public Comments on Competitive Bidding Program Survey

Dear Administrator Verma,

The American Association for Homecare (AAHomecare) is pleased to submit comments to the Centers for Medicare and Medicaid Services (CMS) in response to CMS' request for comments on surveys to key stakeholders to improve the monitoring, outreach, and enforcement functions of the durable medical equipment, prosthetics, orthotics and supplies (DMEPOS) competitive bidding program (CBP).

AAHomecare members include a cross section of suppliers, manufacturers, and other industry stakeholders that assist, make or furnish DMEPOS that beneficiaries use in their homes. Our members are proud to be part of the continuum of care that assures Medicare beneficiaries receive cost effective, safe and reliable home care products and services.

Recommended Survey Questions

Attached to this letter are five recommended sets of survey questions: beneficiaries and their caregivers, referral agents (including case managers, hospital discharge planners, physicians and other practitioners), contract suppliers, and two for non-invasive ventilator (NIV) patients which includes a baseline survey. NIV is commonly used by patients with ALS or severe COPD and is serviced by respiratory therapists/qualified personnel. Due to these patient's fragile state, it is important for CMS to monitor beneficiary access for this specific product category by completing a baseline survey prior to the rollout of CB2021.

Survey Logistics

We recommend that CMS issue the survey through as many channels as possible, including emails directly to stakeholders, making the surveys available on CMS' website, publications, and websites of affected stakeholders. We are providing a list of organizations that CMS should

contact when the surveys are launched. The list includes health care organizations that are impacted by the DMEPOS CBP, such as, nurse practitioners, case managers, and physician assistants. These organizations would be able to assist CMS in reaching out to the various stakeholders, to ensure as much participation as possible. We are also including a separate list of DMEPOS state association contacts that can assist with decimating the survey to contracted suppliers.

Beneficiary and caregivers' outreach of the survey should be conducted both by postal mail and online. A statistically valid percentage of beneficiaries should be contacted through mail. The outreach list can be developed based on claims submitted to the DME MACs. When identifying beneficiaries, CMS should consider the product categories that may require a different frequency to survey. Below are some product type specific recommendations:

- Capped Rental Items: new set-ups only
- CPAP supplies: beneficiaries receiving supplies six months into the program
- Capped Rental Items: first rental month only
- Ventilators: Every 6 months
- Inexpensive and Routinely Purchased: new setups only

In addition to postal mail outreach, AAHomecare believes it would be appropriate for CMS to disseminate the surveys through social media. Recruiting for health services research has traditionally relied on newspaper advertisements, flyers, emails, website listings, and simple word of mouth. These methods are not particularly effective and can be very expensive. With increasing access to the Internet and social media, survey respondents are being recruited using email, postings to organizations' websites or portals, and postings to Facebook. Social media has grown, increasing from 6 million to 1 billion daily users between 2005 and 2015.¹ Open-access links provided by the social media accounts of consumer and professional organizations can facilitate surveys of hard-to-reach demographics such as older members of the population.²

The literature has evaluated the various attributes of online surveys, such as response rate, speed of administration, accuracy of data entry, response completeness, and the opportunity for immediate validation checks. Studies have found that Internet surveys are "more rapid and cost efficient than other interview modes" within epidemiologic studies in a geographically varied population,^{3 4} and Internet surveys have shown a faster response speed than normal pen-and-paper surveys.⁵ In addition, several studies have addressed the reliability and validity of data collected online and found them to be comparable to data collected through more traditional interview methods.⁶

¹ Whitaker C, Stevelink S, Fear N. (2017) The use of Facebook in recruiting participants for health research purposes: A systematic review. *J Med Internet Res.* 19(8): e290.

² Wiersma, W. "The validity of surveys: Online and Offline." Oxford Internet Institute. 2013.

³ Rankin, KM et al. (2008) Comparing the reliability of responses to telephone-administered vs. self-administered web based surveys in a case-control study of adult malignant brain cancer. *Cancer Epidemiol Biomarkers Prev*, 17(10): 2639-2646.

⁴ Yazdy MM, Werler MM. (2015) Comparison of web versus interview participants in a case-control study. *Ann Epidemiol*, 25(10): 794-796.

⁵ Truell, A., Bartlett, J., and Alexander, M. (2002) Response rate, speed, and completeness: A comparison of Internet-based and mail surveys. *Behavior Research Methods, Instruments, & Computers*, 34(1), 2002, 46-49.

⁶ Eysenbach G, Wyatt J. (2002) Using the Internet for surveys and health research. *J Med Internet Res.* 4(2): e13.

Survey Results Transparency

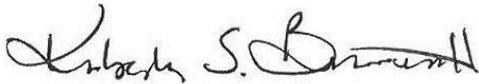
CMS should publicize survey results and the results should be available within a reasonable timeframe. This would allow all stakeholders to be aware of trends with the program in-real time. The survey results should be published on CMS' website.

AAHomecare further recommends:

1. CMS should issue the same surveys in advance of the implementation of the Round 2021 competitive bidding program, to develop a baseline against which CMS can compare survey results from during the competitive bidding program.
2. CMS should survey the stakeholders twice a year, to better monitor trends and changes in competitive bid program impacts.
3. Once surveys reveal particular negative impacts, CMS needs to conduct a root cause analysis and develop a corrective action plan that is shared with industry in the spirit of transparency.

We are happy to further discuss these surveys and related issues. Please contact me at (202) 372-0750 or kimb@aahomecare.org.

Sincerely,



Kimberley S. Brummett, MBA
Vice President of Regulatory Affairs

cc: Michael Keane
Director, Division of DMEPOS Competitive Bidding
Centers for Medicare and Medicaid Services

Attachments:

1. Recommended Survey Questions for:
 - a. Beneficiary/Caregiver
 - b. Referral Agents
 - c. Contract Suppliers
 - d. Non-Invasive Ventilator Patient
 - e. Baseline Non-Invasive Ventilator Patient
2. List of state and national organizations for CMS to contact
3. List of DMEPOS state association for CMS to contact