

# Monitoring and Evaluation of Medicare Part C and D Plan Sponsors' Customer Service and Pharmacy Call Centers

## Client: Centers for Medicare & Medicaid Services

### Overview

The Centers for Medicare & Medicaid Services (CMS) has established arrangements with Medicare Advantage Organizations (MAOs), Medicare Advantage Prescription Drug Plans (MA-PDs), Prescription Drug Plans (PDPs), and Medicare-Medicaid Plans (MMPs) to provide Medicare coverage. Organizations that provide Part C (medical coverage) and/or Part D (prescription drug) benefits, including MMPs, must meet certain standards for providing information to current and potential enrollees and contracted providers. For this project, Insight monitors and evaluates Medicare Part C and D plan sponsors' customer service and pharmacy technical assistance call centers for CMS to determine if they meet or exceed certain standards.

Using performance measures established by CMS, Insight and our subcontractors evaluate sponsors' call center availability, functionality, accuracy, and responsiveness to current and prospective enrollees and contracted providers. This work is accomplished by placing telephone calls to sponsors' call centers, making appropriate Interactive Voice Recognition selections as needed, and requesting information. The study serves two purposes:

- Monitor the performance of MAOs, MA-PDs, PDPs, and MMPs to ensure they meet the Medicare requirements while maintaining their customer service goals.
- Support the development of performance metrics for each sponsor and publicly available star ratings; the ratings help prospective and current beneficiaries make informed choices among the many plan alternatives available to them under Medicare Parts C and D.

This project entails implementing two surveys: (1) a Timeliness Survey (conducted quarterly), which provides metrics-related hours of operation and specific limits for average hold times and disconnect percentage rates; and (2) an Accuracy and Accessibility Survey (conducted annually),



which measures standards for providing information to current and potential enrollees, including text telephone functionality for users who are hearing impaired and speech impaired, interpreter availability for individuals with limited English proficiency, and accuracy of answers to questions about plan-specific benefits or general Medicare benefits.

In each of the 5 years of this contract, over 190,000 calls will be made for the Timeliness Survey, and over 47,000 calls will be made for the Accuracy and Accessibility Survey.

As part of this implementing this study, Insight—

- Develops oversight and quality assurance procedures
- Oversees the work and progress of two subcontractors who conduct the quarterly and annual surveys
- Provides quality assurance checks on all products and datafiles
- Reviews and responds to disputes and inquiries from plans
- Manages overall operation of the contract

### Products

Study protocols; daily status reports; monthly and annual reports