For firms interested in becoming NCQA-Certified HEDIS/CAHPS Survey Vendors

Thank you for your interest in NCQA’s Survey Vendor Certification Program. The proposal deadline for HEDIS 2012 certification has passed.

The RFP for HEDIS 2013 survey vendors will be posted on this site in the summer of 2012. If you would like for the RFP to be emailed to you when it is ready next summer, please send your contact information to CAHPS@ncqa.org and we will add you to our list.

No information about HEDIS 2013 data collection and submission is presently available. The RFP for HEDIS 2012 is presented here solely to give interested firms some general information about NCQA’s Survey Vendor Certification Program. While the Survey Vendor Certification Program usually has only minor changes from one year to the next, there is no guarantee that any of the information provided in the HEDIS 2012 RFP will apply to NCQA’s Survey Vendor Certification Program for HEDIS 2013.
# REQUEST FOR PROPOSAL

HEDIS 2012 IMPLEMENTATION OF SURVEY MEASURES

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STATEMENT OF WORK

I. PURPOSE

This request for proposal (RFP) covers tasks necessary to produce HEDIS/CAHPS® survey results using the CAHPS 4.0H child and adult surveys for Health Maintenance Organization (HMO), Point of Service (POS) and Preferred Provider Organization (PPO) products in accordance with the HEDIS protocols to members of qualified health plans. Concern about variation in administering, reporting and auditing survey results described in HEDIS 2012 (for measurement year 2011) Volume 3, which includes the protocols for administering the CAHPS 4.0H surveys, led to NCQA’s Survey Vendor Certification Program. These implementation protocols were developed to ensure comparability of data across health plans through the use of NCQA-Certified and trained survey vendors.

While the surveys and protocols for administering the HEDIS surveys are described in HEDIS 2012, Volume 3: Specifications for Survey Measures, this RFP describes the information that survey vendors need to know to manage and conduct this work and to assess their capacity for performing this kind of work. HEDIS 2012, Volume 3: Specifications for Survey Measures is due to be published in October 2011.

II. BACKGROUND

NCQA’s Healthcare Effectiveness Data and Information Set (HEDIS) is the premier tool for monitoring the quality of care in health plans. HEDIS 2012 is the latest version of the measurement set. It was developed through a public/private partnership between NCQA, public and private organizations representing health care consumers and purchasers, health plans, and health services researchers. Individuals representing all of these interests serve on NCQA’s Committee on Performance Measurement (CPM), which oversees the evolution of the measurement set.

HEDIS 2012 includes the revised Volume 3 survey manual. This manual includes surveys and protocols for the CAHPS Health Plan Surveys, 4.0H. The CAHPS surveys represent an effort to accurately and reliably capture information from consumers about their experiences with care in health plans in the past year for commercial health plans and the past six months for Medicaid plans. The CAHPS survey for HMO and POS health plans was administered for the first time in 1999, capturing experience with care in 1998. The PPO version was available in 2004. It brings together into uniform survey instruments approaches to assessing consumer experiences based on the two preeminent efforts—the survey research that led to NCQA’s prior HEDIS Member Satisfaction Survey and CAHPS, sponsored by the Agency for Healthcare Research and Quality (AHRQ). Consumers, purchasers and health plans have a core survey instrument that reflects state-of-the-art research about key components of health care quality, about how to elicit from a

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1 CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).
2 This RFP does not cover survey vendor certification for the Medicare Health Outcomes Survey or the Medicare CAHPS Survey.
3 HEDIS volumes can be ordered by calling NCQA Customer Support: 888-275-7585, or through e-commerce at www.ncqa.org. Upon receipt of the certification fee, HEDIS 2012, Volume 3 will be provided to survey vendors at no additional charge.
broad range of consumers their experiences with those key components, and about how to report
the information meaningfully to the public. Health plans report survey results as part of HEDIS
data collection, and NCQA uses survey results to inform accreditation decisions and to create
national benchmarks for care. Health plans also collect HEDIS survey data for internal quality
improvement purposes.

The CAHPS surveys were designed to collect data across product lines (commercial, Medicaid)
and products (HMO, POS, PPO). The HEDIS 2012 reporting set includes CAHPS surveys
directed to sampled adult and child Medicaid beneficiaries and sampled adults and children with
commercial coverage who are health plan members. The child surveys incorporate a
measurement set to assess the experience of care for children with chronic conditions (CCC
survey).

There are four versions of the survey:
1. CAHPS Health Plan Survey 4.0H Adult Version Commercial
2. CAHPS Health Plan Survey 4.0H Adult Version Medicaid
3. CAHPS Health Plan Survey 4.0H Child Version (applicable to Commercial and
   Medicaid)
4. CAHPS Health Plan Survey 4.0H Child Version, Children With Chronic Conditions
   (applicable to Commercial and Medicaid)

The CAHPS survey for the Medicare population is administered directly by the Centers for
Medicare & Medicaid Services (CMS) through CMS-approved survey vendors to sampled
beneficiaries in Medicare health plans.

A core group of questions makes up each CAHPS 4.0H survey. The questions in the surveys are
worded to be understandable to a broad range of consumers and some questions combine to form
composites about key areas of care and service. These composites provide summary results that
are easier for consumers and purchasers to interpret. The questions chosen for these surveys were
those shown to discriminate best among health plans based on field tests. The HEDIS/CAHPS
Survey Results provide comparable results across populations—Medicaid, commercial and
Medicare.

NCQA-Certified HEDIS Survey Vendors carry out the survey data collection. NCQA is seeking
to train and certify survey vendors to collect HEDIS/CAHPS Survey Results from health plans
according to the HEDIS protocols. Once certified, survey vendors may enter into contracts with
health plans to survey a sample of members. It is anticipated that approximately 500 health plans
will report HEDIS/CAHPS survey results in 2012, which covers approximately 700 adult and
child survey samples for the various product lines (commercial, Medicaid) and products (HMO,
POS, PPO). Survey vendors must be capable of meeting the specific tasks spelled out below and
must meet the criteria under the section titled “General Requirements for Program Participation.”
III. SPECIFIC TASKS

A. General Requirements for Program Participation

The survey vendor will furnish the necessary personnel, facilities, equipment, materials, and supplies to perform the work set forth in HEDIS 2012 Volume 3: Specifications for Survey Measures. Included in the volume are requirements for reproduction and mailing of questionnaires, provision of telephone facility and interview capacity, data collection, data processing, production of computer files, report production, and any other tasks NCQA specifies as necessary to qualify as a vendor for the survey. The survey vendor will have the capacity necessary to administer large-scale questionnaire mailings and to conduct follow-up telephone interviews using computer-assisted telephone interviewing (CATI) systems. Subcontracting is allowed as long as the survey vendor can document in their proposal that capacity needs are met and that there is survey vendor oversight of the quality of services provided by subcontractors.

Each proposal will indicate the maximum number of survey samples that the survey vendor thinks it can handle given its organizational capacity and competing obligations. Based on a review of proposals, NCQA will certify each survey vendor for a maximum number of survey samples for which it can contract. The survey vendor will provide substantial detail to NCQA concerning the administration of the HEDIS/CAHPS surveys. NCQA seeks to ensure the standardization of data collection among survey vendors and the validity of plan-to-plan comparisons.

B. NCQA’s Process for Survey Vendor Certification

Step 1—Submit Proposal to NCQA for Review

Applicants desiring to become an NCQA-Certified HEDIS Survey Vendor for collecting HEDIS/CAHPS Survey Results must submit a proposal to NCQA by the close of business (5:30 PM EDT) on Wednesday, August 31, 2011, with a $500 non-refundable application fee. Please make the check payable to NCQA and include project code 1108-000 on the check. The proposal will follow the guidelines spelled out in this RFP. Proposals will be reviewed and rated by a team of reviewers using the criteria spelled out in the section titled “Technical Proposal Evaluation Criteria.” Successful survey vendors will be notified in September. Certification as a HEDIS survey vendor lasts for one year.

Step 2—Pay Training Fee

Survey vendors will bear the financial cost of training. After receiving notice of selection based on acceptance of the proposal, the survey vendor must submit a $5,750 non-refundable fee. This fee covers the costs of survey vendor training for one year and it enables each selected survey vendor to bring two persons to the training. The cost of bringing additional people to training, such as subcontractors is $1,200 per person. These fees must be paid in advance of the training to reserve places at the training.
Step 3—Attend NCQA Training and Certification

NCQA will provide a one-day training program for key personnel from each selected survey vendor. New survey vendors selected for the program will come to Washington, DC on Thursday, October 13, 2011 for a one-day in-depth training. Details of the training will be distributed to successful survey vendors at the time of notification of selection into the certification program. At a minimum, the survey vendor’s project director and one other staff member are required to attend the training for administering the surveys on the date and at the location specified by NCQA.

A separate training will be held on Thursday, October 20, 2011 by Web Ex for all participating survey vendors. New survey vendors will join returning survey vendors on a Web Ex call with NCQA staff to discuss updates to survey administration for 2012 and a review of 2011 survey administration results. Survey vendor certification will be contingent upon a vendor’s successful completion of the NCQA training program. Survey vendors will enter into a one-year certification agreement with NCQA after successful completion of training. (NCQA reserves the right to decertify a survey vendor at any time for cause, e.g., concerns over the quality of data collection and delivery, or safeguarding of patient confidentiality.)

Step 4—Sign Certification Agreement with NCQA

Each selected survey vendor must agree to the terms in the agreement for survey vendor certification before being considered an NCQA-Certified HEDIS Survey Vendor. Certification Agreements will be sent to survey vendors after successful completion of the training sessions.

Step 5—Pay Certification Fee

A non-refundable payment of $8,000 must accompany the returned and signed survey vendor certification agreement. This agreement and the $8,000 payment are due to NCQA within a week after the survey vendor receives the agreement.

Step 6—Contract with Health Plans

The proposal review panel will assess each survey vendor’s demonstrated capacity and desire to handle a specified maximum volume of samples and NCQA will certify each approved survey vendor for a specified number of samples for which they can enter into contracts based on the survey vendor’s demonstrated capacity and quality oversight plan. After certification agreements are signed and the certification fee is received by NCQA, a listing of certified survey vendors selected by NCQA to conduct the surveys will be posted on NCQA’s Web site—www.ncqa.org—(November 2011). Health plans will then be free to enter into contracts with these survey vendors to conduct HEDIS/CAHPS surveys. (Survey vendors will abide by NCQA’s Guidelines for Marketing and Advertising HEDIS/CAHPS Survey Vendor Certification [Attachment 2] when marketing themselves to health plans.) Health plan/survey vendor contracting will take place independently of NCQA. By the beginning of February 2012 survey vendors will report names of health plans with which they have contracts to NCQA. Survey vendors will pay NCQA an additional fee for each sample surveyed. Per sample fees are due to
NCQA on Friday, June 29, 2012. For surveys done after this date fees are due 30 days after the survey is finished (see Fee Schedule - Attachment 3). These per sample fees cover the quality assurance, data submission process and technical oversight that NCQA provides for the project.

C. Terms of Certification

- Survey vendors pay NCQA a non-refundable $5,750 training fee.
- Upon successful completion of training, survey vendors sign a Certification Agreement with NCQA and pay NCQA a non-refundable $8,000 survey vendor certification fee.
- The term for HEDIS/CAHPS survey vendor certification is one year.
- Survey vendors follow the survey methodology spelled out in HEDIS 2012, Volume 3.
- Certified survey vendors follow NCQA’s grievance procedures [HEDIS 2012, Volume 3].
- Certified survey vendors follow the NCQA Guidelines for Marketing and Advertising HEDIS/CAHPS Survey Vendor Certification [Attachment 2].
- After conducting HEDIS/CAHPS surveys using the HEDIS protocols, certified survey vendors pay NCQA per sample fees under the terms specified by NCQA [Attachment 3].
- Certified survey vendors carry at least two million dollars in liability insurance.
- Certified survey vendors follow the survey process specified below and document to NCQA in interim and final reports, as specified by NCQA, the names of health plans with which they have contracts, their survey management system, confidentiality plan, quality control procedure for NCQA surveys, and any data collection problems encountered.

D. HEDIS/CAHPS Survey Administration

Data collection for HEDIS/CAHPS surveys will be conducted in 2012 for a sample of Medicaid or commercial members of health plans enrolled in measurement year 2012 following the HEDIS Protocol for Administering the CAHPS Survey as delineated in HEDIS 2012, Volume 3. Via a secure link on NCQA’s Web site, NCQA supplies survey vendors with mail and telephone versions of the CAHPS Surveys and the text for letters. Using the NCQA supplied script, the survey vendor formats a CATI version for telephone follow-up. Survey vendors also use the text for letters and postcards as specified in HEDIS 2012, Volume 3. The survey vendor is responsible for printing and reproduction of sufficient numbers of all questionnaires, cover letters and reminder postcards, and for conducting telephone follow-up, as specified below.

*Sample*[^4]. After contracting with health plans, the survey vendor uses the eligible member files supplied to the survey vendor by the health plans for sampling. For commercial health plans, the adult sample of approximately 1100 is drawn before the child sample in order to de-duplicate the sample frame. For Medicaid health plans, the adult sample of approximately 1350 is drawn before the child sample is drawn. For the commercial child survey, survey vendors draw a sample of around 900 (Sample A) and 1375 (Sample B) = 2275. For the Medicaid child survey, the survey vendors draw a sample of approximately 1650 (Sample A) and 1840 (Sample B) = 3490. (Sample B, if applicable represents surveys of children with chronic conditions.) The sample is expected to return at least 411 completed surveys. In order to produce the most reliable data possible, survey vendors are required to continue data collection until the protocol is

[^4]: Final sample sizes for the 2012 HEDIS/CAHPS survey administration will be determined in the fall of 2011.
completed even if they have already achieved the 411 completed surveys. The survey vendor is responsible for ensuring that accurate addresses and telephone numbers are available for all beneficiaries and propose to NCQA methods for determining accurate addresses and telephone numbers.

Survey Option 1 – Mail Only Surveys. CAHPS mail surveys are sent to enrollees in the sample that survey vendors draw from the health plans’ eligible population using the methodology described by NCQA in HEDIS 2012, Volume 3. The survey is implemented using three survey mailings. NCQA will provide to survey vendors the questionnaire and the text for the introductory letters. Survey vendors will insert their name and those of health plans in specified places on these letters, envelopes and postcards. There are four versions of the questionnaires—adult commercial, adult Medicaid, child with chronic conditions (CCC), and child without CCC (applicable to commercial and Medicaid populations). The average length of the adult questionnaires is approximately 60 questions. The child questionnaire (without chronic condition measure) is 47 questions. The child with chronic condition measure questionnaire is 82 questions. The adult commercial questionnaire is used for surveying PPOs. There is no child PPO survey at this time.

Survey Option 2 - Mail and Telephone Surveys. CAHPS mail surveys are sent to enrollees in the sample that survey vendors draw from the health plans’ eligible population using the methodology described by NCQA in HEDIS 2012, Volume 3. The survey is implemented using a combination of two survey mailings and three telephone follow-ups. (Subject to the conditions specified in HEDIS 2012, Volume 3, alternative data collection methodologies, such as interactive voice recognition (IVR) data collection, or all-telephone data collection, is allowed only with prior written approval from NCQA.) NCQA will provide to survey vendors the questionnaire and text for the introductory letters and postcards. Survey vendors will insert their name and those of health plans in specified places on these letters, envelopes and postcards. There are four versions of the questionnaires—adult commercial, adult Medicaid, and child with CCC, and child without CCC (applicable to commercial and Medicaid populations). The average length of the adult questionnaires is approximately 60 questions. The child questionnaire (without chronic condition measure) is 47 questions. The child with chronic condition measure questionnaire is 82 questions. The adult commercial questionnaire is used for surveying PPOs. There is no child PPO survey at this time.

Confidentiality. The survey vendor must protect the confidentiality of sampled individuals during each phase of the survey process. The survey vendor will document to NCQA their policies and procedures for protecting patient confidentiality.
Method of Administration

1) NCQA will supply electronic versions of the mail and telephone surveys and instructions for final formats of both questionnaires immediately upon training and certification as a survey vendor. The survey vendor will format both the mail and telephone questionnaires in accordance with the instructions supplied, and will customize and reproduce the appropriate number of questionnaires with each health plan’s name. NCQA will approve all mail survey materials before they are sent. Electronic character recognition software is acceptable but alternative electronic formats need to be reviewed by NCQA.5

2) The survey vendor will maintain a toll-free telephone number that is accessible weekdays from 9 AM - 8 PM (survey vendor local time) and staffed by trained personnel who can handle questions pertaining to completion of the survey or its legitimacy. This number will be supplied to NCQA in the survey vendor’s Quality Assurance Plan.

3) The survey vendor will draw a simple random sample for each health plan reporting entity with which it contracts. The survey vendor will draw a sample of approximately 1100 eligible enrollees for the adult commercial sample and 1350 for adult Medicaid sample. For the child commercial survey, survey vendors will draw a sample of 900 (Sample A) and 1375 (Sample B) = 2275. For the Medicaid child survey the survey vendor will draw a sample of 1650 (Sample A) and 1840 (Sample B) = 3490. (Sample B, if applicable represents surveys of children with chronic conditions.) Adult samples will be drawn first and households de-duplicated before the child sample is drawn following methods outlined in HEDIS 2012, Volume 3. Survey vendors will need to reproduce sufficient questionnaires to support two mailouts (or three mailouts if using mail-only methodology) to respondents. Survey vendors will be responsible for all reproduction activities (of commercial quality, with quality of reproduction to be verified by NCQA), envelopes, first class mail, and business reply envelopes.

4) The survey vendor will print and send with the first survey mailing an initial cover letter to all respondents with the message content, design and format determined by NCQA. The mailing envelope will have the “Address Service Requested” or “Return Service Requested” designation on it. All mailings will be sent first class and have postal bar coding. Incentives of any kind are prohibited.

5) A second complete questionnaire with cover letter will be sent to non-respondents thirty-five days after the first survey is sent. The cover letter sent with this second questionnaire will differ from that sent with the first mailout, with message content and format determined by NCQA.

6) For Survey Option 1, mail only, the vendor will send a third questionnaire with cover letter sixty days after the first questionnaire. The cover letter sent with this third questionnaire will be the same as that sent with the second questionnaire.

5 The CAHPS surveys contain several questions that potentially require the respondent to write-in an answer.
7) For survey Option 2, mail with telephone, the survey vendor will obtain telephone numbers for all respondents who have not replied by mail, in sufficient time to begin telephone follow-up twenty-two days after the second questionnaire was sent. It is possible to obtain telephone numbers from member lists supplied by the health plans. However, survey vendors also will propose alternative methods to obtain any missing telephone numbers and to verify health plan supplied telephone numbers. Survey vendors are required to use telephone search methods such as Telematch or directory assistance to obtain and verify respondent telephone numbers. At least three calls will be made in order to reach each potential respondent. No proxy response will be allowed for the adult surveys.

8) Survey vendors submit member-level data to NCQA. NCQA computes the summary-level data and composite scores and returns these reports to the survey vendors.

The chart below outlines the required survey methodology.

**Survey Vendor Tasks – (Survey Option 1 – Mail Only)**

<table>
<thead>
<tr>
<th>Time Frame</th>
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</thead>
<tbody>
<tr>
<td>0 days</td>
</tr>
<tr>
<td>35 days</td>
</tr>
<tr>
<td>60 days</td>
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<tr>
<td>81 days</td>
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</tbody>
</table>

**Survey Vendor Tasks – (Survey Option 2 – Mail with Telephone)**

<table>
<thead>
<tr>
<th>Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 days</td>
</tr>
<tr>
<td>35 days</td>
</tr>
<tr>
<td>56 days</td>
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<tr>
<td>56-70 days</td>
</tr>
<tr>
<td>70 days</td>
</tr>
</tbody>
</table>

**HEDIS/CAHPS Survey Timeline – 2011-2012**

<table>
<thead>
<tr>
<th>Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 13, 2011</td>
</tr>
<tr>
<td>October 20, 2011</td>
</tr>
<tr>
<td>November 2011</td>
</tr>
<tr>
<td>November/December 2011</td>
</tr>
</tbody>
</table>
### Basic tasks and time frames for conducting the survey are:

<table>
<thead>
<tr>
<th>Task</th>
<th>Time Frame</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health plans create sample frame for the surveys by following age and continuous enrollment criteria (member addresses and telephone numbers updated by health plan)</td>
<td>January 2012</td>
</tr>
<tr>
<td>NCQA-Certified HEDIS Compliance Auditors validate sample frame creation for accuracy</td>
<td>January 2012</td>
</tr>
<tr>
<td>Health plans provide clean and audited sample frames to survey vendors</td>
<td>January 2012</td>
</tr>
<tr>
<td>Survey vendors draw sample</td>
<td>January 2012</td>
</tr>
<tr>
<td>Survey vendors create mail surveys, add any additional questions and send them to NCQA for approval</td>
<td>January 2012</td>
</tr>
<tr>
<td>Survey vendors send selected samples to NCOA for address update and update telephone numbers through Internet searches, directory assistance</td>
<td>Late January/early February 2012</td>
</tr>
<tr>
<td><strong>Surveys begin</strong></td>
<td><strong>Mid-February 2012</strong></td>
</tr>
<tr>
<td>Surveys fielded using Survey Option 1 or Survey Option 2</td>
<td>0 – 60/70 days</td>
</tr>
<tr>
<td><strong>Surveys end</strong></td>
<td>May 2012</td>
</tr>
<tr>
<td>Survey vendors submit member-level data to NCQA and view survey results through NCQA Internet site</td>
<td>May 14 - June 1, 2012</td>
</tr>
<tr>
<td>NCQA provides calculated HEDIS/CAHPS survey results to health plans</td>
<td>June 1 - June 14, 2012</td>
</tr>
<tr>
<td>Health plans submit signed attestations to NCQA</td>
<td>June 15, 2012</td>
</tr>
</tbody>
</table>
E. Survey Process

Task 1—Develop a Survey Management System

Upon certification by NCQA, each survey vendor develops a computer-based survey management system to track the tasks associated with the project, i.e., mailings, returned completed questionnaires, follow-up telephone interviews, and data entry. Survey vendors provide detailed documentation of the survey management system in its quality assurance plan to NCQA in Interim Report #1.

Task 2—Data Collection

The reliability, confidentiality and comparability of each health plan’s data are priorities of the data collection protocols. To ensure these objectives are met, independent survey vendors trained and certified by NCQA assume responsibility for data collection, processing and data submission. Certified survey vendors protect the confidentiality of sampled members when handling and processing member information in each phase of survey administration.

Task 3—Quality Control (All surveys)

Survey vendors will report to NCQA about their quality control procedures for this project. Survey vendors will set up and document quality control procedures for all phases of survey implementation, including but not limited to, training for staff involved in survey operations including subcontractors, printing, mailing and recording of receipt of surveys, information and assistance calls handled on the toll-free line, telephone administration of the survey, coding and editing, or keying in survey data, details of how response rates were calculated, and preparation of reports. Survey vendors will be responsible for the quality oversight of all work by subcontractors. Survey vendors should expect follow-up telephone calls from NCQA staff after survey administration begins to clarify any data irregularities. NCQA may at its discretion conduct on-site visits during survey implementation to observe data collection and quality processes. NCQA may also, at its discretion, review survey vendor Web sites for appropriate advertising, request to remotely monitor telephone interviews for the surveys, or test toll free customer support numbers.

Task 4—Interim and Final Report (All surveys)

Survey vendors will send interim and final reports to NCQA. The first interim report will contain the confidentiality processes put in place by the survey vendors for these samples, a description of the survey management system, a list of the health plans with which the survey vendor is contracting, the data collection methodology for each health plan and detail of the survey vendor’s quality control system. This interim report is due to NCQA by February 1, 2012. The final report will document any problems with data collection, contain an updated list of health plans with which the survey vendor has contracted and payment to NCQA of per sample fees. This report is due at NCQA on June 29, 2012.
**Task 5—Delivery of the Data Sets (All surveys)**

After collecting the survey results, survey vendors should anticipate providing NCQA with the member level data for each sample. NCQA will provide detailed file specifications for survey vendors to follow. Survey vendors report all data as specified by NCQA, including response rates. All data files submitted to NCQA are clean, edited and contain appropriate documentation to facilitate analysis. NCQA computes summary-level data or scores and returns data to survey vendors and health plans via a secure Web site. In early June, health plans can review their data files, attest to their accuracy, and determine whether or not they want to publicly report their data.
GENERAL PROCEDURE

Proposals submitted in response to this RFP are evaluated for technical merit using the rating categories and relative weights contained below. All proposals are reviewed and evaluated by a committee assembled by NCQA. NCQA survey vendor certification is for the CAHPS Health Plan Survey, 4.0Hcommercial and Medicaid surveys.

I. TECHNICAL PROPOSAL EVALUATION CRITERIA

Upon receipt of the proposals, NCQA may request further supporting documentation. Proposals that do not comply with the minimum requirements outlined in the request for proposal will not be considered further. The following criteria and weights are used in the technical evaluation of proposals, which comply with the minimum requirements.

1. Relevant Survey Experience (20 points)

The proposal is reviewed with respect to the offeror’s technical competence in running large-scale survey research operations. Attention will be paid to the offeror’s experience in working with health issues particularly in health plans using consumer satisfaction surveys and disease-specific surveys. Specific attention will be paid to the offeror’s background in conducting large-scale mail surveys, its capacity and performance in conducting CATI system telephone interviews and its experience with primary client management.

2. Organizational/Survey Capacity (25 points)

The proposal is reviewed with respect to the offeror’s capacity to effectively execute this project, including access to requisite resources and staff. Depending on the number of health plans that contract with a specific survey vendor and the number of qualified survey vendors, the potential processing volume could exceed 50,000 mail surveys. Thousands of telephone interviews may be required in the prescribed time period for telephone data collection. An offeror’s capacity to handle a large volume of mail questionnaires and capacity to conduct highly standardized CATI interviewing in a short time frame is considered strongly for this evaluation. Proposals will include a description of the facilities available to conduct this project, including computer and technical equipment, mailing and telephone survey capacity, CATI software with the capacity for remote monitoring, and creation of toll free customer support lines. The offeror is to present in a clear, concise and sound manner how the work will be carried out to ensure that the protocol timeline is met. Specifically, the offeror will indicate the maximum number of surveys it can conduct in the specified time period and provide detailed documentation of offeror’s capacity to handle this volume. Based on this information, the offeror will then propose the maximum number of samples for which it wishes to be certified to contract.
3. **Quality Control/Management Plan (30 points)**

   The proposal is reviewed for quality control and management planning. Specifically, in order to complete the tasks in the time limit specified with the highest response rates and best quality data, the proposal will outline the specificity and nature of the responsibility of key personnel. The offeror will demonstrate its capacity for and the nature of the staff training it will provide and quality control mechanisms it will employ to assure an adequate response to the mail surveys and the telephone interviews. The offeror must demonstrate its ability to implement an intensive work plan for three months of data collection. The offeror will demonstrate ability to perform quality checks on any work performed by subcontractors, on returned data and on CATI interviewing. The offeror must demonstrate how it will protect and store electronic data, returned mail questionnaires and patient confidentiality.

4. **Personnel (10 points)**

   The proposal is reviewed with respect to relevant background and experience of key staff, including the project director and those he/she will directly supervise for this work. In addition, the offeror will describe staff available to conduct the mail and telephone surveys and any subcontracting arrangements. The offeror will indicate any need to hire temporary workers to meet the project goals, how these workers will be recruited, and the training that these workers will get to meet the project goals. NCQA also expects the offeror to indicate how it will meet the obligations of this project given the offeror’s competing obligations and given the prescribed time frame of this project, i.e., three months of data collection within the January 1 to June 29, 2012 time frame.

5. **Past Performance (15 points)**

   Past performance (project specific) is reviewed in light of the offeror’s capacity, experience and actual performance on work similar to that required under this request for proposal. Demonstrated evidence of the capacity to field and otherwise complete all aspects of implementation of large scale surveys (particularly the ability to do so under tight deadlines while achieving relatively high response rates). Offerors will document efforts to verify addresses, obtain telephone numbers, process data accurately, produce complete data files and documentation, and produce clearly written reports of survey processes. **Survey vendors must provide letters of reference (or email references) from two recent clients with their proposals.** Email references are acceptable. (NCQA will not accept references from telephone callers, nor will NCQA call references with names provided by applicants.)

**TOTAL = 100 POINTS**

In November 2011, NCQA will send survey vendors who have successfully completed training a certification agreement for review and signature. NCQA will post the contact information of survey vendors selected on the basis of technical merit to conduct HEDIS/CAHPS surveys on its Web site: http://web.ncqa.org/tabid/170/Default.aspx. Health plans can then commence negotiations with survey vendors on the NCQA list to perform HEDIS/CAHPS surveys.
II. TECHNICAL PROPOSAL INSTRUCTIONS

Responses to this request for proposal will be a maximum of 30 pages of text (double spaced, Times Roman 12 point font, with 1” margins all around). Extensive appendices are discouraged. Any supporting materials other than CVs will be reviewed at the discretion of NCQA reviewers. Proposals that merely restate the RFP will be considered non-responses. To facilitate proposal review and evaluation, the offeror will respond to the RFP using the following format:

Executive summary
I. Relevant survey experience/technical competence
II. Organizational/survey capacity/facilities available
III. Quality control/management plan
IV. Personnel available/qualification of key personnel/subcontracting arrangements
   [CVs are acceptable as appendices over and above page limitations]
V. Past performance/institutional experience related to the project/demonstration of capacity/ability to meet deliverable schedule/letters of reference
Name and contact information of primary contact person
Desired sample capacity

Two NCQA staff members will review each proposal. A third independent review will take place in cases where the scores of the primary reviewers diverge significantly.

NCQA may:
- Approve the proposal
- Ask for revisions to the proposal
- Request a more extensive proposal
- Decline the proposal.

There will be no critiques of proposals that are declined.

All proposals are confidential.

Selection of survey vendors will be announced in September 2011. Selected survey vendors will attend NCQA training October 13 (in Washington, DC) and October 20 (via Web Ex) and will enter into a contract (Certification Agreement) with NCQA.

Survey vendors will bear the financial responsibility for all training and certification costs.

Survey vendors will store hard copies or electronic copies of data. NCQA retains the right to access copies of the data for up to three years after data collection ends.
ATTACHMENT 1

Administrative Policies and Procedures Related to NCQA Survey Vendors

A. Monitoring Performance

NCQA will periodically conduct on-site visits to Certified Organizations to review the systems in place for data collection and quality oversight.

B. Survey Vendor Grievance Procedures

NCQA-Certified Organizations are responsible for the conduct of employees that they contract with or employ. Survey vendors will have a formal grievance procedure in place and communicate about it to health plans. Complaints against the actions or conduct of an employee by a health plan with regard to the HEDIS/CAHPS 2012 survey process will be handled through the Certified Organization’s grievance process. If a health plan is not satisfied with the outcome of the complaint, the Certified Organization’s procedure for the specific complaint and the complaint outcome will be forwarded to NCQA. In these cases, complaints will be reviewed and investigated by NCQA. A valid, substantiated complaint which is not satisfactorily resolved by the Certified Organization may result in cancellation of the Certification Agreement. Certified Organizations must inform NCQA of all unresolved grievances.

C. Marketing/Advertising Guidelines

Please refer to Attachment 2—Guidelines for Marketing and Advertising HEDIS/CAHPS Survey Vendor Certification— for marketing and advertising guidelines.

D. Code of Professional Conduct for NCQA-Certified Organizations

Each Certified Organization applying for certification must agree to the Code of Professional Conduct for NCQA-Certified Organizations.

In promoting high standards of ethical conduct, the employees and subcontractors of the Certified Organization will:

1. Conduct themselves professionally, with truth, accuracy, fairness, and responsibility to clients.

2. Act as faithful agents/trustees for each employer and client.

3. Strive to enhance the prestige and competence of NCQA-Certified Organizations.

4. Assist employees in Certified Organizations in developing their HEDIS/CAHPS survey skills.
5. Ensure that credit for the work of others is given to those to whom it is due.

6. Not misrepresent any survey team member’s qualifications, competence, or experience, nor undertake survey work beyond their qualifications.

7. Maintain confidentiality of all information pertaining to the survey and not discuss or disclose any information unless authorized in writing by the health plan and NCQA.

8. Not accept retainers, commissions, or valuable considerations from any interested parties in exchange for offering confidential information or disclosures which is in any way related to NCQA, clients, NCQA-Certified Organizations, or health plans.

9. Not intentionally communicate false or misleading information that may compromise the integrity of any survey or any of NCQA’s programs.

10. Preface any public statements related to HEDIS/CAHPS 2012 Survey Results clearly indicating on whose behalf they are made.

11. Not accept compensation from more than one party for the same service without the consent of all parties.

12. Not act in any way that would prejudice the reputation of NCQA and HEDIS/CAHPS 2012 Survey Results, and fully cooperate with an inquiry in the event of an alleged breach of this code.

13. Not act as a Certified Organization for any health plan by which staff of the Certified Organization are employed or have a significant interest, including financial, familial or personal.


E. Revisions to Policies and Procedures

NCQA may amend the NCQA Administrative Policies and Procedures, Grievance and Appeal Procedures, or any other survey vendor certification program policy, at its sole discretion.
ATTACHMENT 2

Guidelines for Marketing and Advertising
HEDIS Survey Vendor Certification

NCQA encourages you to publicize your achievement and we have developed the following Marketing and Advertising Guidelines to help you get the most out of your NCQA status. The Guidelines include how to market your achievement, appropriate language to incorporate into your marketing and advertising materials and helpful ideas to get you started.

The guidelines are designed to help NCQA customers create advertising and marketing materials that reference their NCQA status in a clear, factual and accurate manner. They are also designed to protect the integrity of NCQA’s programs and to allow all participants to benefit from their achievement in a fair and accurate manner. The most recent version of these guidelines may be found on NCQA’s Web site at www.ncqa.org/marketing.aspx.

Marketing and Advertising Materials

References to the terms “advertising,” “advertising material,” or “advertising and marketing materials” in the following document encompass all external and internal communications including, but not limited to:

- All Printed Material
- TV ads
- Radio ads
- Posters
- Annual reports
- Billboards
- Press Releases
- Newsletters
- Responses to Requests for Proposals (RFPs)
- Responses to Requests for Information (RFIs)
- HEDIS® Report Cards
- Durable Products – e.g. mugs, t-shirts
- Letters to Employers
- Letters to Practitioners
- Letters to Providers
- Letters to Consumers
- Letters to Insurance Brokers
- Marketing & Sales brochures
- Web sites or other electronic material
- Any other promotional material

Use of NCQA Logo

The use and reproduction of NCQA’s logo is strictly prohibited. Organizations who have received Accreditation, Certification, Recognition, or other distinction from NCQA are prohibited from using the NCQA logo in any marketing and advertising materials including Web sites, emails and other Web-based applications. If you would like to provide a link to NCQA’s Web site, please use www.ncqa.org.
Use of HEDIS Survey Vendor Certification Seals

- NCQA issues one seal for organizations that have earned HEDIS Survey Vendor Certification
- The seals may not be modified in any way, including font and color
- Seals are provided in EPS and JPG formats
- NCQA has updated all program seals effective with the HEDIS 2012 cycle. All organizations, regardless of their place in the review cycle, must use the updated seals on their materials and must cease use of any old seals no later than December 31, 2011. All electronic materials and Web sites should be updated immediately and all new print materials or reprints should use the new seal as well.
- Organizations should be aware that Certification statuses can change which may affect the statement on durable goods (e.g.: a billboard that is no longer accurate will have to be corrected). It is the organization’s responsibility to maintain and update accurate marketing materials. Should your status change, you are responsible for updating all promotional items, and must cease distribution of all materials with incorrect status information. Updating of Web sites and other distributed materials should take place within 30 days of the status change.

How to Advertise NCQA Certification Status

- Survey vendors may not say they are the exclusive or preferred HEDIS survey vendor for NCQA’s HEDIS/CAHPS surveys.
- Survey vendors may not use quotations from any NCQA staff members in their advertising material.
- Survey vendors may not release any portion of survey vendor feedback letters from NCQA or other communications from NCQA in their advertising or marketing materials.
- The survey vendor will not engage in advertising which features competitive comparisons with other survey vendors.
- Survey vendors should clearly state that they have received NCQA certification. For example: *Survey vendor X is NCQA-Certified to conduct HEDIS®/CAHPS® surveys.*

Recommended Language

NCQA-Certified HEDIS Survey Vendors may use the following statements, alone or in combination with other language, to identify or describe NCQA, the accreditation process or their accreditation status.

* Descriptions of NCQA

- NCQA is an independent, not-for-profit organization dedicated to improving health care quality.
- NCQA is an independent, not-for-profit organization dedicated to assessing and reporting on the quality of health plans, managed behavioral healthcare organizations, preferred provider organizations, new health plans, physician organizations, credentials verification organizations, disease management programs and other health-related programs.
NCQA is committed to providing information on the quality of health plans. Consumers can easily access health plans’ NCQA Accreditation statuses and other information on health care quality on NCQA’s Web site at www.ncqa.org, or by calling NCQA’s Customer Support at (888) 275-7585.

NCQA is governed by a Board of Directors that includes employers, consumer and labor representatives, health plans, quality experts, regulators, and representatives from organized medicine.

NCQA’s mission is to improve the quality of health care.

CAHPS 4.0H Health Plan Surveys:

- Developed jointly by the Agency for Healthcare Research and Quality (AHRQ) and NCQA, the Consumer Assessment of Health Care Providers and Systems (CAHPS) is the most comprehensive tool available for assessing consumers’ experiences with their health plans.

- CAHPS® provides consumers, purchasers and health plans with information about a broad range of key consumer issues such as overall satisfaction, average wait times, physician availability, obstacles to receiving care, and parents’ impressions of their children’s care.

- NCQA’s HEDIS/CAHPS Survey Vendor program was developed by NCQA to ensure standardization of data collection, thus, results from consumer experiences are comparable across health plans. To become an NCQA-Certified HEDIS Survey Vendor, an organization must demonstrate that it has the capabilities, experience, and expert personnel to accurately administer the survey.

The HEDIS/CAHPS survey provides a survey instrument that can be used by a broad variety of health systems to capture experiences from health care consumers.

NCQA Trademarks

HEDIS
The Healthcare Effectiveness Data and Information Set (HEDIS) is a registered trademark of NCQA. The registered trademark symbol should be applied directly after the word “HEDIS.” The organization need only apply the trademark to the first and last reference of the term “HEDIS” within the written material. At the bottom of the page where the registered trademark first appears there should be a footnote, which states “HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).”

Quality Compass®
Quality Compass is a registered trademark of NCQA. The registered trademark symbol should be applied directly after the word “Compass.” The organization need only apply the trademark to the first and last reference of the term “Quality Compass” within the written material. At the bottom of the page where the registered trademark first appears there should be a footnote which states “Quality Compass® is a registered trademark of the National Committee for Quality Assurance (NCQA).”
NCQA HEDIS Compliance Audit™
NCQA HEDIS Compliance Audit™ is a trademark of NCQA. The trademark symbol should be applied directly after the word “Audit.” The organization need only apply the trademark to the first and last reference of the term “NCQA HEDIS Compliance Audit” within the written material. At the bottom of the page where the trademark first appears there should be a footnote which states “NCQA HEDIS® Compliance Audit™ is a trademark of the National Committee for Quality Assurance (NCQA).”

CAHPS
CAHPS is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ). The registered trademark symbol should be applied directly after the word “CAHPS®.” The organization need only apply the trademark to the first reference of the term “CAHPS” within the written material. At the bottom of the page where the trademark first appears there should be a footnote which states “CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).”

HOW TO DESCRIBE YOUR NCQA DATA IN A PRESS RELEASE
All of the preceding rules apply to press releases.

Organizations are welcome to create their own press releases mentioning their NCQA status. Please make sure your press release includes a description of the survey from above and the NCQA boiler plate below:

- NCQA is a private, non-profit organization dedicated to improving health care quality. NCQA accredits and certifies a wide range of health care organizations. It also recognizes clinicians and practices in key areas of performance. NCQA is committed to providing health care quality information for consumers, purchasers, health care providers and researchers.

Please contact communications@ncqa.org, if you have questions related to press releases.

COMPLIANCE
It is the responsibility of the organization to follow and conform to all applicable NCQA Marketing and Advertising Guidelines. The information referencing your NCQA status or product must be accurate and not misleading. Only the organization that obtained the NCQA status can advertise such status and use the corresponding seal. The organizations’ affiliates, including delegated entities, contractors and partners, are not allowed to use the NCQA status and seal. Failure to comply with these guidelines may jeopardize the organization’s NCQA status.

In addition, NCQA will conduct periodic audits of customers’ marketing and advertising materials at any time to ensure that marketing materials are true, not misleading, and that the organization’s NCQA status is represented correctly. Failure to participate in the NCQA audit or refuse to comply with NCQA’s request to address inaccuracies in information related to NCQA, NCQA status and/or product in your marketing and/or advertising materials constitutes a
violation of NCQA’s advertising guidelines and may result in, at NCQA’s discretion, a revocation of an organization’s NCQA status(es).

The organizations must maintain all copies of their marketing and advertising materials referencing NCQA status(es) and/or product(s) released from September 15 of each year until December 31 of the following year (for a period of 15 1/2 months).

NCQA reserves the right to require an organization to withdraw their advertising materials from distribution immediately or to publish, at the organization's cost, a retraction and/or clarification in connection with any false or misleading statements or any violation of all applicable NCQA Marketing and Advertising Guidelines. Each organization agrees in advance to remedy such violation with the action deemed appropriate by NCQA.

SPECIAL SITUATIONS
NCQA realizes that these guidelines may not address all potential marketing and advertising materials. In such instances, organizations should contact the NCQA Marketing department at marketing@ncqa.org to discuss the proposed marketing/advertising activity and associated marketing and/or advertising materials to achieve outcomes consistent with the spirit of these guidelines.

NCQA will respond to complaints regarding inaccurate and/or misleading advertising materials by our customers and their affiliates. Such complaints could initiate an audit of an organization’s materials outside of the regular audit process.

Thank you for observing these guidelines, and please do not hesitate to contact us with questions at marketing@ncqa.org.
Attachment 3

Survey Vendor Certification Program Pricing Structure

Below is the pricing structure for the NCQA survey vendor certification program.

<table>
<thead>
<tr>
<th>Service</th>
<th>Fee</th>
<th>Due Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Fee</td>
<td>$500</td>
<td>August 31, 2011 (Due with response to RFP).</td>
</tr>
<tr>
<td>Training Fee</td>
<td>$5,750</td>
<td>October 3, 2011</td>
</tr>
<tr>
<td>Additional Training Attendee Fee</td>
<td>$1,200</td>
<td>October 3, 2011</td>
</tr>
<tr>
<td>Certification Fee</td>
<td>$8,000</td>
<td>Due with signed Certification Agreement in mid November</td>
</tr>
<tr>
<td>CAHPS 4.0H Adult Per Sample Fee</td>
<td>$1,100</td>
<td>Due 30 days after survey completed or June 29, 2012 whichever is earlier.</td>
</tr>
<tr>
<td>CAHPS 4.0H Child Per Sample Fee</td>
<td>$750</td>
<td>Due 30 days after survey completed or June 29, 2012 whichever is earlier.</td>
</tr>
<tr>
<td>Late Reporting Fee</td>
<td>18% of outstanding balance annually (or 1.5% monthly)</td>
<td></td>
</tr>
<tr>
<td>Resubmission Fee</td>
<td>Additional fees may be incurred if a resubmission due to survey vendor error is required after the data submission deadline has passed.</td>
<td></td>
</tr>
</tbody>
</table>

Description of Fees:

- **Application Fee**: A non-refundable $500 application fee for each new application. This is a one-time fee to be collected in early September when applications are due. The fee covers the cost of reviewing the application and setting up the survey vendor in the system. The fee is in addition to the training and certification fees.

- **Training Fee**: A non-refundable $5,750 fee to be collected October 3, 2011, which allows two of the survey vendors’ staff to attend the training seminar in October.

- **Additional Training Attendee Fee**: Each survey vendor is required to have a minimum of two representatives from their firm in attendance at training. The $5,750 Training Fee covers the training of these two survey vendor representatives. For on-site training, additional attendees will be assessed the Additional Training Fee of $1,200.
• **Survey Vendor Certification Fee:** This is a non-refundable $8,000 fee. The $8,000 survey vendor certification fee will be paid after training in November and will accompany the signed survey vendor certification contract.

• **CAHPS 4.0H Adult Per Sample Fee:** This fee is paid to NCQA when the survey vendor submits CAHPS 4.0H survey data to NCQA for the calculation of survey results. The certified survey vendor is obligated to submit to NCQA the appropriate sample fees ($1,100 for an adult sample).

• **CAHPS 4.0H Child Per Sample Fee:** This fee is paid to NCQA when the survey vendor submits CAHPS 4.0H survey data to NCQA for the calculation of survey results. The certified survey vendor is obligated to submit to NCQA the appropriate sample fees ($750 for a child sample).

• **Late Reporting / Payment Fee:** If survey vendors do not pay sample fees on time or within one month after a survey is completed for surveys continuing beyond June, they are assessed an 18% annual (or 1.5% monthly) penalty of the outstanding balance.

• **Resubmission Fee:** Additional fees may be incurred if a resubmission due to survey vendor error is required after the data submission deadline has passed.