2023 EDITION

CMS Call Center Monitoring Study

Partner with LanguageLine Solutions®
to Maximize Your Star Rating

You strive to meet the needs of your limited English proficient (LEP) members and prospective enrollees because it's the right thing to do. It also makes financial sense for your organization given our rapidly shifting demographics.

As of 2020, there were 25.3 million LEP residents in the U.S., and another 10 million were Deaf or Hard of Hearing. According to the Centers for Medicare and Medicaid Services (CMS), nearly half of all Hispanic beneficiaries are LEP. Meeting their needs means ensuring health equity for everyone.

Medicare plans that provide high-quality interpreting services and translation of written content can:

- Improve member satisfaction
- Attract new members
- Improve health outcomes
- Increase understanding and accessibility
- Earn 5 Stars on the Accuracy and Accessibility Study

CMS monitors the call centers of Medicare plans each year from February through early June to ensure that Medicare Advantage and Medicare Prescription Drug Benefit Plans are enabling effective communication for all seniors.

HHS announced a proposal to promote health equity in coverage—strengthening and expanding language access and accessibility requirements

CMS Star Quality Ratings

CMS rates Medicare plans on a 1 to 5 star system where 1 indicates poor performance and 5 excellent performance. The Star Rating System was created by CMS to measure the quality of the plans and assist seniors in choosing the most appropriate plan.

Approximately 51% of Medicare Advantage plans that currently offer prescription drug coverage earned an overall rating of 4 stars or higher for their 2023 Star Ratings. This was a 17% decline over the 2022 Star Ratings. Similarly, the star ratings in the Call Center—Foreign Language Interpreter and TTY Availability measure were also down across MA, MA(PD) and PD plans. The overall decline in star ratings was largely due to a change in methodology as a result of the COVID-19 pandemic that led to higher scores in the 2022 test period.

CMS doubled the weight of the Foreign Language Interpreter & TTY Availability measure from 2 to 4 for the 2023 Star Ratings

CMS Star Rating Calculations

The CMS weighting system for the star rating measures is complex. It examines measures across these five aspects of the patient journey:

1. **Outcomes:** Improvements in a beneficiary's health

2. **Intermediate Outcomes:** Reflect actions taken to assist in improving a beneficiary's health status, such as controlling blood pressure

3. **Patient Experience:** Beneficiaries' perspectives of the care they received

4. **Access:** Processes and issues that could create barriers to receiving care, including interpreter accessibility

5. **Process:** Services provided to assist in maintaining, monitoring, or improving health status

Process measures are weighted at the lowest level while improvements in a beneficiary's health are given the highest weighting.

Access measures (which include interpreter accessibility) aren't given the highest weighting, but they remain an important factor and contribute to the overall score.

The Accuracy and Accessibility Study

Data obtained from the study is used by CMS in the calculation of a plan's star rating. CMS conducts the study annually from February through June by placing calls to prospective enrollee beneficiary call centers to ensure quality. Part of this study measures performance in assisting callers in their preferred language.

This includes measuring both the availability of an interpreter and the accuracy of the information provided by the Medicare plan customer service representatives (CSRs) in these languages: Spanish, Mandarin, Cantonese, French, Vietnamese and Tagalog. Test calls are made from 8 a.m. to 8 p.m. local time, according to the service areas of the plans. For plans with a service area exclusively in Puerto Rico, English is tested as a foreign language.

The following requirements must be met by plans to ensure success in the CMS Accuracy and Accessibility study:

10 MIN Once the CMS test caller initiates a call, **a maximum of 10 minutes** is allowed to navigate the interactive voice response (IVR) process, including any "hold" time, **to reach a live customer service representative.**

8 MIN The next measure is "complete" once the CMS test caller has an interpreter on the line and **an introductory question is answered before beginning the first of 3 survey questions within 8 minutes of reaching a plan CSR**. Depending on the type of plan, this question is typically, "Are you the right person to answer questions about Medicare Part C/Part D?"

7 MIN The final measure includes **3 survey questions** asked of the plan CSR by the test caller. Each of 3 questions is allowed **a maximum of 7 minutes**. The questions are taken from CMS publications such as the 2023 edition of *Medicare and You* and plan-specific benefit information.

CMS calculates the number of "completed" calls out of all of the foreign language test calls made to the plan and uses that figure in their scoring and to ensure a plan's compliance. A plan may pass the compliance portion during the test call process with a score above 75% (and therefore not be subject to corrective action). CMS uses another metric for assigning the star ratings. The star rating cut points are based on the data from the previous year's audit and can be found in the *Medicare 2023 Part C & D Star Rating Technical Notes*.

While each plan wants to achieve a successful compliance grade, they also want to score much higher to achieve a 5-star rating. According to CMS, cut points aren't set for call center measures until CMS has all the data to be rated. Therefore, the cut points for the data collected during the upcoming test period won't be published until after the test period has ended.

Recommendations for a Plan's Success

As an organization that aims to provide an excellent experience regardless of language or culture, it is vital that you be able to deliver language access wherever and whenever it is needed. Ensuring on-demand access to professional medical interpreters improves health and wellness, increases productivity, ensures outstanding customer care and maximizes reimbursements.
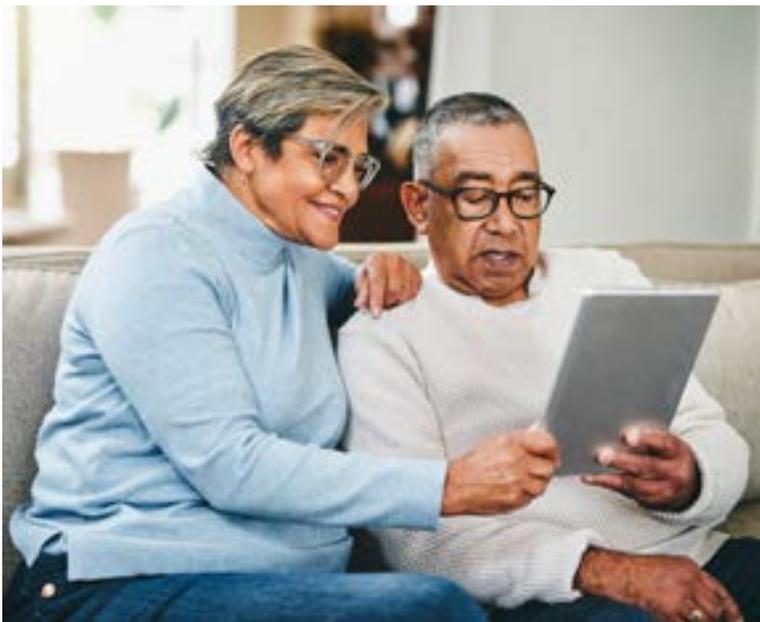
Understand the CMS requirements and their impact on your organization.

Train your customer service agents on how to effectively partner with an interpreter.

Partner with LanguageLine Solutions. We provide our healthcare clients with on-demand medical interpreters on any mobile device in over 240 languages, including American Sign Language. We are exceedingly proud to be the trusted partner to over 80% of 5-Star Medicare contracts.

Educating Your Customer Service Representatives

It's essential that you educate your representatives about the CMS Study requirements and how best to prepare, including the following recommendations:

1 Confirm call centers are aware of the test period and are open and staffed appropriately from 8 a.m. to 8 p.m. local time during the test period to ensure the availability of CSRs.

2 Make sure CSRs are reminded that the study is being conducted—so they can be alert to any calls coming in from CMS test callers.

3 Make sure CSRs know how to quickly access a LanguageLine Solutions' interpreter. Ensure they have easy access to Quick Reference Guides that provide the toll free number, Client ID, and any additional information your plan requires.

4 Make use of our *Please Hold Guide* to let callers know, in their own language, to remain on the line until an interpreter is reached.

5 Remind CSRs to remain on the line once an interpreter is connected as they need to help facilitate the call and answer the LEP caller's questions.

6 Educate CSRs on how to partner with an interpreter to communicate effectively throughout the call. To learn more or for a complimentary training, please contact your LanguageLine Account Executive or our CMS specialist.

7 Ensure CSRs are aware of and know the contents of the publication *Medicare and You* as well as the specifics of their plans.

8 Remind CSRs to be prepared for multiple similar or seemingly "artificial" calls.

9 CMS recommends the CSR notate on the beneficiary's call center record the caller's preferred language, if other than English.

10 Have your call center agents practice conferencing-in an interpreter in advance of the test period.

Partnering with LanguageLine is like hanging a sign that says, "240 Languages Spoken Here."

Partner with LanguageLine Solutions

LanguageLine is committed to helping our clients optimize their success in this important CMS study. We understand the impact these test calls have on the Medicare Sponsors' ability to secure additional federal dollars and to successfully market their products. LanguageLine provides the fastest connect times to the best interpreters in the industry.

Tips to Optimize Support from LanguageLine Solutions:

✓ **LanguageLine Account Executives, our CMS Specialist, and Medicare plan representatives should meet** prior to the start of the study period. Working together, they can proactively address any needs they identify such as consolidating accounts for tracking purposes, review call flows to make sure they are streamlined, or secure plan-specific information to share with interpreters for training purposes, etc.

✓ **Work with LanguageLine to set up a dedicated CMS line** for enhanced tracking and reporting and an IVR call menu in the 6 tested CMS languages to expedite access to the interpreter in the selected language.

✓ **Share plan resource materials** such as plan job aids with your LanguageLine Account Executive. These materials can be shared with LanguageLine's interpreters and housed in our CMS Interpreter Resource Library for training purposes.

✓ **Identify any issues as soon as possible.** Contact your LanguageLine Account Executive or customer service, or submit a Voice of the Customer Feedback Form, as soon as an issue occurs so that it can be resolved in anticipation of additional test calls.

- Voice of the Customer Feedback Form
- Call 1-800-752-6096 or email Customer Service

✓ **If needed, ask LanguageLine for additional training for call center staff** on how to access interpreter services. LanguageLine can also provide quick reference guides and best practices for partnering with an interpreter.

✓ **Conduct weekly or bi-weekly meetings** with your Account Executive to review the calls, and discuss any improvements needed.
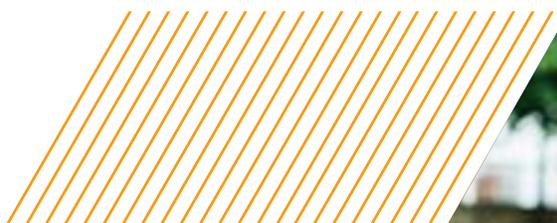
We're the Only Language Solutions Provider Working to Earn You a 5-Star Rating

Ongoing Contact with CMS

LanguageLine staff communicates with CMS throughout the year to stay on top of changes in the process, such as languages to be tested, CMS scoring changes, and issues with the auditors.

Optimized Interpreter Staffing

LanguageLine's Workforce Management Team ensures appropriate interpreter staffing levels for CMS targeted languages during the test period.

Interpreter Training and Refreshed and Ongoing Quality Assurance

LanguageLine's Training Department incorporates the meaningful use of Medicare-related terminology into the training and assessment provided to our interpreters so that they will be comfortable and proficient with the terminology used in the questions. LanguageLine's Senior Language Specialists monitor calls and conduct coaching to ensure the highest level of interpreter quality.

Dedicated CMS Line

LanguageLine provides clients with the option of creating a dedicated CMS line for streamlined calls and enhanced tracking and reporting.

Real-Time Process Improvement

LanguageLine works with clients as quickly as possible to identify problems and escalate resolutions to ensure your ongoing success.

LanguageLine
Solutions ®

For More Information

Contact your Account Executive
or call 1-800-752-6096