

SAMPLE Education Activity Report COVER SHEET

Education Activity Report
Provider Customer Service Program
Contract Year (mm/dd/yy-mm/dd/yy)¹

Contractor Name
Contractor Number (A/B MAC or DME MAC Include Jurisdiction)
Contractor Type (Carrier, FI, DME MAC or A/B MAC)
Contractor Address
Contractor Web Address

EAR Coordinator: Name, Title
Telephone number
E-mail address

¹ For legacy Title XVIII contractors, the “contract year” is the Fiscal Year

Education Activity Report

Carriers / Fiscal Intermediaries / DME MACs/A/B MACs

Background

Contractors shall prepare a semi-annual Education Activity Plan (EAR). The EAR summarizes the contractor's provider education and training activities during the reporting period defined in IOM Pub 100-9, Chapter 6, section 20, 40 and 50. These activities include training events, efforts to reduce the error rate, internet or website efforts, provider education conferences and teleconferences, materials development and dissemination, inquiry analyses and follow-up actions, "Ask-the-Contractor" teleconferences and advisory group meetings.

The first report, which contains information about Provider Outreach & Education (POE) activities in months 1-6 of the contract year, will be due to CMS on the 30th day after the first six months of the contract year. The second report, covering the months 7-12 of the contract year, is due 30 days after the last day of the contract year. If the 30th day falls on a weekend or holiday, the report will be due at close of business on the next business day. All EARs shall be should be sent electronically in MS Word to ProviderServices@cms.hhs.gov with a subject line of "EAR/Contractor Name." A/B Medicare Administrative Contractors (MACs) and DME MAC contractors shall submit the EAR to their respective CMS Project Officer.

For the purposes of this report, the term "provider" references any organization, institution, or individual that offers health care services to Medicare beneficiaries and is meant to include suppliers.

This format is to be used beginning with the 1st EAR submitted in FY08, and not for the 2nd EAR for FY07 activities.

Guidance/Instructions for Reporting

1. Your EAR should not be a restatement of the question or topic but should be sufficiently detailed for CMS to be able to understand your educational program. Contractors who merely restate the questions in this document will have their EAR returned to them as non-responsive and will be deemed as not meeting the semi-annual requirement.
2. We have removed all references to strategy to make this document results driven. Make every effort to provide us with a true picture of your educational activities.
3. Brevity is appreciated. If the question can be answered in a paragraph, no need to submit a multi-page response. The judicious use of attachments is acceptable and will not count toward the total page count. Try to keep the report to less than 20 pages.
4. Whenever possible, you may use links to information available on your website.
5. Multistage jurisdictions should submit one report. It is not necessary to submit a separate report for each state. However, state specific information should be clearly identifiable.

EAR – Provider Customer Service Program Components

The report must include information on the Provider Customer Service Program and the provider/supplier communications activities held during the previous 6 month time period. The EAR must address the following:

- A. Provider Data Analysis
- B. Provider Outreach and Education Activities
- C. Provider Education Resources
- D. Provider Education Technology
- E. Partnering with External Entities
- F. Provider Outreach and Education Advisory Group (POE AG) and “Ask-the-Contractor” Teleconferences (ACT)
- G. Internal Development of Provider Issues
- H. Internal Staff Development and Training
- I. Other Provider Outreach and Education Activities

A. Provider Data Analysis

1. Error Rate Reduction Data

- What training was offered specifically related to error rate reduction?
Provide the names of the courses and a brief description of each course.

2. Inquiry Analysis (Telephone and Written Inquiries)

Complete the chart below with the types of events and activities (e.g., FAQs, IVR/Queue messaging, ACTs, workshops, etc.) that were held in response to the top categories indicated on your inquiry tracking form, **beyond claim status and eligibility.** The chart below can be submitted as an attachment.

Top Five Inquiry Categories*	Specific Activity(s) held and date**	Total participants (if applicable)	Audience (provider type, CSR etc.)

*** Inquiry Categories**

T= Telephone

W= Written

****Activities Held**

FAQ = Frequently Asked Questions developed and posted on the web

IVR = IVR/Queue messaging

TT = CSR Training topic(s)

ACT = “Ask-the-Contractor” Teleconference

OTH= Other, please specify

3. Claims Submission Data Analysis

Top Five Claim Submission Errors*	Number Received	Educational Events held	Target Audience (provider type, CSR etc.)

*** If error codes are provided, you must include description of the code.**

4. Provider Relations Research Specialists

- What types of issues/inquiries were referred to the PRRS by POE and what, if any, internal or external training was held in response to the PRRS referrals?
- Who was the intended audience for events and activities held as a result of PRRS referrals (e.g., provider type, CSR)? This should include internal/external training sessions.

B. Provider Outreach and Education Activities

1. Educational Events

Event Type*	Date	Location	Major Topics	Rationale for selecting topics**	# of lines/# present	Fee Charged (if any)

Note - You may provide a link to the information on your website or include this chart as an attachment.

***Event types**

- ACT = “Ask-the-Contractor” Teleconference
- N = New Provider Training
- O= 1:1 Training
- POE-AG = POE Advisory Group Meeting
- P = Presentation at Association Meeting or Other functions/Partnerships
- S/W = Seminar/Workshop
- SP = Training Tailored to Small Providers
- T = Teleconference
- X = Other/Special Projects (PQRI, NPI etc.)

****Rationale for selecting educational topics**

- POE AG = POE Advisory Group
- IAP = Inquiry Analysis Program (telephone and written inquiries)
- CSE = Claim Submission Error
- ACT= “Ask –the-Contractor” Teleconference
- MR = Medical Review referrals
- ER = Error Rate Analysis
- O = Other (PQRI, NPI, Remittance Advice, Preventative Benefits etc.) If anything else, be specific about the reason.

2. Narrative - Fees Charged

In the second EAR, report your total fees or charges collected to attend completed fee-associated provider education and training events as of the end of the 9th month of the contract year. Refer to §20.6 of IOM Pub 100-9, Chapter 6.

C. Provider Education Resources

1. Bulletins and Newsletters

- Discuss how you encouraged providers to obtain electronic copies of bulletins/newsletters and other notices through your website or during education/outreach events.
- How many providers received paper copies?
- How often were your bulletins/newsletters produced?
- How many total bulletin copies were produced during the previous 6 month time period?

2. Educational Materials

- What educational resources (e.g., brochures, manuals, reference books, fact sheets, videos, audio tapes, CDs, etc.) were developed and distributed to providers during the reporting period?
- What, if any national education materials should CMS develop and why?

D. Provider Education Technology

1. New Technologies

- What technology and web enhancements (e.g., computer based training, web-based conferencing and web-based training, IVR and CSR queue messaging, etc.) were used as an efficient, timely and cost-effective means of disseminating Medicare provider information? Were any of these enhancements related to feedback from the Website Satisfaction Survey or the Medicare Contractor Provider Satisfaction Survey (MCPSS)?
- What did you do to market the use of self-service technology?

2. Electronic Mailing Listserv(s)

- What efforts were taken to actively promote your listserv(s) to the provider community during the reporting period?
- State the number of unique individual members of your listserv(s) at the end of the EAR reporting period, and the percentage of your active providers/suppliers this number represents.
- Provide a link to a website page that contains information about listserv(s) messages sent to providers last quarter, if available.

E. Partnering with External Entities

- What organizations did you partner with during the reporting period and what activities were held?
- Discuss specific accomplishments that resulted from these partnerships.

F. Provider Outreach and Education Advisory Group (POE AG) and “Ask-the-Contractor” Teleconferences (ACT)

1. Provider Outreach and Education Advisory Group (POE AG)

- What ideas, issues, or suggestions were raised by the members of your POE AG?
- Discuss how these ideas, issues, or suggestions were incorporated into your Provider Customer Service Program activities?
- Provide a link to the minutes on your website, or attach a copy to this report.

2. “Ask-the-Contractor” Teleconferences (ACT)

- How were the ACT topics selected? What additional topics were discussed during ACT meetings?
- How many participants attended the ACT meetings?
- Based on the topics discussed, what follow up activities were put in place after the ACT?

G. Internal Development of Provider Issues

- Summarize how you worked with the various departments within your organization, to exchange information about provider issues. Discuss specific issues that were brought to your attention by the Provider Contact Center (PCC) and other areas within your organization? What education, if any, was done as a result of this coordination?
- What issues were brought to your attention by the Medical Review (MR) Department? How many referrals were made to your area and how were the referrals handled? What type of coordination has been implemented to handle referrals? Discuss specific examples and results.

H. Internal Staff Development and Training

- What type of internal training sessions were held during the reporting period for your POE staff?
- If you did not provide internal training sessions during the reporting period, provide an explanation.
- How were the training topics selected?
- Who attended the training (e.g., departments, number of participants)?
- Based on the evaluations, how effective was the training? What changes, if any were made, based on the evaluations?

I. Other Provider Outreach and Education Activities

- What, if any, additional POE activities or efforts, not previously discussed, were implemented during the reporting period? Why were these activities selected? This area can be used to report such things as effectiveness of educational events, to include results of pre and post testing and feedback from evaluations.