

## Consumer Assessment of Healthcare Providers and Systems (CAHPS) for the Merit-based Incentive Payment System (MIPS) Survey Frequently Asked Questions for Survey Vendors

### Participation

**Q: What are the requirements for becoming a CMS-approved CAHPS for MIPS Survey vendor?**

**A:** To be considered for approval as a CAHPS for MIPS Survey vendor, organizations must meet **all** of the minimum business requirements and submit a completed application. The requirements and application are on the [Quality Payment Program \(QPP\) Resource Library](#).

**Q: How does my organization apply for consideration to be a CMS-approved CAHPS for MIPS Survey vendor?**

**A:** There's a two-step vendor approval process:

Step 1 – Vendor participation form application

- Complete and submit the vendor participation form application available on the [QPP Resource Library](#).
- All vendors with approved participation form applications will be placed on a list of conditionally approved CAHPS for MIPS Survey vendors. Vendors must complete Step 2 to obtain final approval from CMS.

Step 2 – Successful completion of vendor training and submission of a Quality Assurance Plan (QAP)

- Conditionally approved vendors (vendors' and subcontractors' key staff) must participate in training and pass an assessment at the end of the training session. This self-guided computer-based training will cover content related to:
  - Overview and background.
  - Sample design and patient selection.
  - Data analysis and public reporting.
  - Program requirements.
  - CMS data use agreement (DUA) and data safeguarding.
  - Data collection protocol.
  - Oversight activities.
- Organizations must also submit a QAP that conforms to the model QAP provided by CMS.



**Q: When may survey vendors submit applications for consideration to be a CMS-approved CAHPS for MIPS Survey vendor?**

**A:** The application period for survey vendor participation occurs once a year. For 2026, the vendor application period for the CAHPS for MIPS Survey will open on Monday, March 30, 2026, and close at 5 p.m. ET on Monday, April 20, 2026.

**Q: What is involved in the survey vendor application process?**

**A:** Interested survey vendors will need to complete the survey vendor application and include a detailed description of all subcontractor relationships. Be sure to fully document how your organization fulfills the survey vendor minimum business requirements and submit your application to the CAHPS for MIPS Survey project team during the application submission period. Applications will be accepted from Monday, March 30, 2026, until 5 p.m. ET on Monday, April 20, 2026.

If your organization's application is approved, you're conditionally approved as a CAHPS for MIPS Survey vendor. **To pursue final approval**, key staff – from your organization and your subcontractors – must participate in training and pass an assessment incorporated into the training session. The training covers an overview and background of MIPS plus scoring and reporting of the CAHPS for MIPS Survey. Final approval as a CAHPS for MIPS Survey vendor is contingent upon submission of a QAP and successful completion (i.e., receive a passing score) on an assessment in the training session. Approved vendors must participate in additional trainings.

**Q: My organization has previous experience with web-based survey administration followed by phone follow-up to non-respondents. Does that allow us to meet the mixed-mode experience required to be a CAHPS for MIPS Survey vendor?**

**A:** No. The mixed-mode experience specified for the CAHPS for MIPS Survey administration requires experience with mail survey administration followed by survey administration via Computer-Assisted Telephone Interviewing (CATI) with non-respondents. Web-based survey administration experience, combined either with phone (or mail) survey administration, wouldn't meet the mixed-mode requirement.

## Survey Administration

**Q: Who is included in the CAHPS for MIPS Survey?**

**A:** The CAHPS for MIPS Survey measures Medicare fee-for-service patients' experiences of care from groups, subgroups, virtual groups, or other Alternative Payment Model (APM) Entities, including Medicare Shared Savings Program Accountable Care Organizations (ACOs).

**Q: Who will select the sample?**

**A:** CMS will select the sample and provide the sample to approved vendors.

**Q: How many patients per group, subgroup, virtual group, or other APM Entity, including Shared Savings Program ACOs, will be sampled?**

**A:** CMS anticipates sampling 860 patients per year per group, subgroup, virtual group, or other APM Entity, including Shared Savings Program ACOs. Those that don't meet the minimum sample size requirement can't administer the CAHPS for MIPS Survey.

For groups, subgroups, virtual groups, or other APM Entities, including Shared Savings Program ACOs, the minimum number of patients required to administer the CAHPS for MIPS Survey is displayed in the table below.

Number of Eligible Clinicians	Minimum number of patients required to administer the CAHPS for MIPS Survey
100 or More	416
25 – 99	255
2 - 24	125

For Shared Savings Program ACOs that can't administer the survey due to not meeting the minimum sample size, the number of measures included in the calculation of the ACO's quality performance scores will be reduced from 6 to 5 measures in the APM Performance Pathway (APP).

**Q: When will the 2026 CAHPS for MIPS Survey occur?**

**A:** The 2026 CAHPS for MIPS Survey will be administered from October 2026 to January 2027.

**Q: What is the data collection protocol for the CAHPS for MIPS Survey?**

**A:** The 2026 CAHPS for MIPS Survey uses a mixed-mode data collection protocol in which mail is the primary mode and CATI is the secondary - or non-response - mode. The mail component of the data collection protocol includes mailing of a prenotification letter, initial survey and cover letter, and a second survey and cover letter to sampled patients who didn't respond to the first mailed survey. The telephone component of the data collection protocol consists of outbound CATI to any sampled patient who didn't respond via the mail survey. Vendors may use a CATI system of their choosing, and the protocol sets a limit of 6 phone attempts.

**Q: What languages are required for the CAHPS for MIPS Survey administration?**

**A:** The CAHPS for MIPS Survey must be administered in English and Spanish, using the translation provided by CMS as outlined in the CAHPS for MIPS Survey Quality Assurance Guidelines (QAG) Version 2026. Groups, subgroups, virtual groups, or other APM Entities, including Shared Savings Program ACOs, in Puerto Rico must administer the survey in Spanish and offer English, if requested.

**Q: What translations are available for the CAHPS for MIPS Survey?**

**A:** CMS has translated the CAHPS for MIPS Survey into Cantonese, Korean, Mandarin, Portuguese, Russian, Spanish, and Vietnamese. Groups, virtual groups, subgroups, or other APM Entities, including Shared Savings Program ACOs, must administer the CAHPS for MIPS Survey in Spanish, and have the option of administering the survey in one or more of the other available languages. Survey vendors may use only the CAHPS for MIPS Survey translations provided by CMS.

**Q: How will approved survey vendors obtain the survey materials?**

**A:** Survey materials will be provided to the point of contact identified by each vendor organization via email.

**Q: Are vendors permitted to add supplemental questions to the CAHPS for MIPS Survey?**

**A:** CMS doesn't allow the addition of supplemental questions to the CAHPS for MIPS Survey.

**Q: Are there any restrictions on fielding other surveys at the same time as the CAHPS for MIPS Survey?**

**A:** No, while there are not restrictions on fielding other surveys, CMS strongly encourages groups, subgroups, virtual groups, or other APM Entities, including Shared Savings Program ACOs, and survey vendors NOT to ask Medicare fee-for-service patients any CAHPS for MIPS Survey questions 4 weeks prior to, and 4 weeks after, the CAHPS for MIPS Survey administration period. This recommendation doesn't apply to other CMS surveys. Groups, subgroups, virtual groups, or other APM Entities, including Shared Savings Program ACOs, should take respondent burden and response rates into account when considering the timing of any additional data collection efforts.

**Q: Are survey vendors allowed to conduct analysis of the CAHPS for MIPS Survey data?**

**A:** Survey vendors may provide clients with informal survey results. Vendor results may not match official CMS results. Any data that survey vendors wish to append to survey results or sample data for use in analysis must have advance written approval from CMS. All reports survey vendors provide to clients (whether paper or electronic format) must include a statement that vendor results are unofficial and are for the group's internal quality improvement purposes only. Intervention or follow-up with specific patients based on their survey responses isn't permitted.

Vendors must follow the requirements of an executed CMS Data Use Agreement (DUA) and assure that no data that's based on fewer than 11 cases is included in any report of any kind (whether frequency, cross-tabulation, or other data display). Failure to adhere to the CMS DUA may constitute a violation of the requirements of the Privacy Act of 1974, the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy Rule and CMS data release policies and may be considered a breach or violation of data safeguarding. Please visit [cms.gov/privacy](https://www.cms.gov/privacy) to learn more about CMS privacy policies and data safeguarding.

**Q: How will survey vendors be paid?**

**A:** Groups, subgroups, virtual groups, or other APM Entities, including Shared Savings Program ACOs, are responsible for the cost of the CAHPS for MIPS Survey data collection and must contract directly with CMS-approved CAHPS for MIPS Survey vendors.