



CMS Test Call INFORMATION PACKET

The **Centers for Medicare and Medicaid Services (CMS)** monitor Medicare Parts C and D customer service calls throughout the year. The frequency of these “secret shopper” calls are increased from **February to May**. This year CMS will test interpreters who speak **Cantonese, Mandarin, Spanish, Vietnamese, Tagalog, and French**.

This packet of information includes common terminology used during these calls as well as a list of common questions. **These CMS test calls will grade interpreters based on accuracy and completeness of information, including knowledge of medical and insurance terminology.**

To ensure that you are prepared whenever interpreting, printing this glossary or saving it somewhere easily accessible like on the desktop of your computer or in a cloud-based storage system like Google Drive or iCloud is recommended.

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IDENTIFYING CMS TEST CALLS

Identifying CMS Test Calls can be easy. Here are 4 things to look for which can help you know if you're on a test call:

1. Most CMS Testers will begin the conversation by asking "Can you answer questions about Medicare Part D?" or "Can you answer questions about Medicare Part C?"
2. The test caller will generally sound scripted. If the LEP sounds like they are reading from a script, they may be a CMS Test Caller.
3. Test Callers generally say they are calling on behalf of a mother, father, or other family member. For example, a common question might be "My aunt uses Donnatal. Is that on your formulary?"
4. The questions the Test Caller asks will generally pertain to getting information or applying for Extra Help, drug coverage, the cost of certain drugs, or general questions concerning premiums, drug spending, the coverage gap, or the Medication Therapy Management Program (MTMP.)

THE #1 THING TO REMEMBER

Precisely reciting plan names is one of the most important parts of the CMS Test Calls. It can be one of the easiest parts of a CMS Test Call to get right, but if not relayed exactly the entire call will be failed.

Names must be relayed word for word and any missing component of a name will mean the failure of that call.

Often CMS Testers will recite the name of the health plan name and the Medicare part type in English, which should make it easy to relay these names, but they still must be relayed precisely. And when interpreting from English to another language, proper nouns, like the name of a health plan can be relayed in English.

For example, if the client says, "Thank you for calling Acme Medicare Rx," an interpreter cannot just say, "Thank you for calling **Acme Medicare**," or "Thank you for calling **Acme**." And if the LEP asks, "Can you answer questions about Medicare Part C," be sure to confirm the Medicare Part by asking, "Did you say Medicare Part C as in Cat?" or something like this.

When either the client or LEP mentions the plan name or the Medicare Part, be sure take a note of the full name and ask for repetition if necessary to get it noted correctly.

COMMON QUESTIONS

from CMS TEST CALLS

Interpreters should familiarize themselves with the types of questions that may be asked during a test call but remember that specific drug names may change. It is important to repeat the full plan name whenever interpreting. We have here substituted fake plan names for "Acme Insurance," but you will need to take notes and use the plan name given during the call. The questions here represent only a small sample of the type of questions test callers may ask. **It is important to interpret the answer that the client provides and to not just interpret the information provided here as an example.**

The questions here are organized into three categories: questions about medication; questions about Medicare plans; and questions about Medicare eligibility.

Questions about medication

Sample questions	Possible answers
Does the [insert plan name] plan cover [insert medication name]? If yes, under what tier?	Yes, [medication name] is covered as a tier 3 medication.
Does the Acme Medicare Rx cover [medication name] [dosage]?	Yes, [medication name] [dosage] is covered under the Acme Medicare Rx plan.
My aunt uses [medication name], is that on your formulary?	No, [medication name] is not covered.
Does the Acme Medicare Rx plan require a PA (Prior Authorization) for [medication name]?	No, PA is not required for [medication name].
Does the Acme Medicare Rx plan cover [medication name]?	Only the Acme Xtra and Acme Max plans cover [medication name]. This medication is not covered under the Secure plan.
My mother uses [medication name]. Is it on your formulary?	No, [medication name] is not on our formulary.
In 2016, is [medication name] on the formulary for Acme Medicare Rx?	Yes, [medication name] is on the Acme Medicare Rx plan formulary for 2016.
My mom wants to get preventive tetanus shot. She has not been injured. Is a preventive tetanus shot covered by Part D?	Yes, preventative tetanus shots are covered under Part D.

Sample questions	Possible answers
Is [medication name] covered on the 2016 Acme Medicare Rx plan formulary?	Yes, [medication name] is covered under all 3 Acme Medicare Rx plans.
Does Acme Medicare Rx plan cover [medication name] [dosage] tablets?	No, Acme Medicare Rx plan does not cover [medication name] [dosage] tablets.
Can you tell me if your plan covers flu shot immunization?	No, flu shot immunization is not covered under Medicare Part D.
What does “quantity limit” for a drug mean?	“Quantity Limit” means members can only obtain coverage for a certain quantity of drugs during a specified period of time. The limits can vary from drug to drug.

Questions about Medicare plans

Sample questions	Possible answers
My mom thinks it is cheaper to buy some of her prescriptions at Target and pay \$4.00 for a generic drug instead of using her insurance. If she enrolls in your plan, does she have to show her plan card and buy her drugs through your plan or can she continue to pay for drugs on her own?	She may continue to pay out of pocket for her prescriptions without using the Acme Medicare Rx card however the total amount will not go towards her TROOP or coverage gap amount.
Will my mom receive anything that summarizes which prescriptions she’s received and how much she’s paid?	Yes, Acme Medicare Rx sends to its members a monthly Explanation of Benefits (EOB) document showing the member’s true out of pocket expenses (TROOP), in addition to the amount the plan pays, and the total drug spending.
If my mom joins your plan, and one of her medications is not covered by your plan, can she at least get a one time, temporary supply of her medicine within the first 90 days of her enrollment in the plan?	Yes, all new members are eligible for transitional benefits during the first 90 days in our plan, where they are able to fill Medicare Part D approved prescriptions not on the formulary.

Sample questions	Possible answers
What is the drug deductible for Acme Medicare Rx? My mom does not get Extra Help and she is not on Medicaid.	Acme Medicare Rx currently offers three plans. The Secure Plan has a deductible of \$310, Secure-Xtra and the Secure-Max has a \$0 deductible.
For Acme Medicare Rx what is the maximum cost share for a one-month supply of a Tier 1/preferred generic drug at an in-network pharmacy?	For a Tier 1 preferred generic, the copay is \$10 at our network pharmacy and \$0 at our preferred pharmacy on all three plans.
If my mom reaches the coverage gap in 2016, will she get the discount when paying at the pharmacy or will she be reimbursed a few days later?	She will receive the discount at the pharmacy; the price being charged to her will include the discount.
My father does not get extra help and he is not on Medicaid. What is the monthly premium for Acme Medicaid Rx?	Acme Medicare Rx offers 3 plans for 2016. Depending on his state of residency, his 2016 premium range may vary.
If a doctor prescribes a brand name drug that is covered by your plan, how much of a discount will there be while in the coverage gap?	When reaching the coverage gap, you will pay 47.5% co-insurance for brand name medication and 72% towards generic medications.
Do my premium payments count toward the coverage gap?	No.
If required to pay an extra amount for prescription drug coverage because of the Part D- IRMAA requirements, can it just be added it to the monthly premium payment?	No. You should not add this amount to your monthly plan premium payment. The extra amount can be withheld from SSA benefits or is billed directly by Medicare if SSA benefits cannot cover the amount.
How will I know if I have to pay Part D-IRMAA?	If you need to pay Part D-IRMAA, the Social Security Administration will send you a letter with instructions on how to pay the extra amount.
If my doctor wants me to try out a new medication for just a few days, would I have to pay a full month's supply copay?	No.
My mother speaks Spanish. Is the plan information available in Spanish?	Yes.

Sample questions	Possible answers
Does my premium count towards my deductible?	No.
Where can I get all the information regarding the plan?	You can get information about the plan over the phone from one of our customer service representative (such as myself). Additionally, you can access information about the plan online at our website or by visiting www.medicare.gov
Where can I find the formulary?	You can request an abridged formulary through me or any other customer service representative. Our complete formulary is available online.
Is the plan information available in Chinese?	No, our plan information is only available in English or Spanish. However, we do offer free language line translation services to cater to our non-English speaking customers.
Where can I find info on your plans star ratings?	Information about our star ratings can be obtained over the phone from a customer service representative (such as myself), online through our website, or by visiting www.medicare.gov .

Questions about eligibility

Sample questions	Possible answers
Would a copy of a Medicaid card that includes my mom's name and eligibility date be acceptable best available evidence for low income subsidy? (Exclude plans in Puerto Rico)	Yes. Providing a copy of a Medicaid card is an acceptable form of best available evidence (BAE) for proof of low-income subsidy.

COMMON TERMINOLOGY

from CMS TEST CALLS

While interpreting, it can be helpful to understand the meaning these terms common to Medicare/Medicaid calls. Familiarize yourself with these particular terms and their uses. Further terminology and language specific translations can be found on the following pages.

Allowance	The amount the plan will give the member towards the purchase of an item or payment for service. Example: if the plan provides a \$100 allowance for eyewear, the plan will provide the member \$100 towards the purchase of eyewear.
Copay	The amount the member has to pay when a service or benefit is received.
Cost Share	The amount the member has to pay when a service or benefit is received. SAME AS COPAY.
Coverage Gap/Donut hole	The period during the plan year where the member is required to pay for their prescription medication.
Deductible	Amount paid by the member before the plan begins to pay.
Enhanced	A benefit that is categorized or considered better than basic.
Extra Help	Financial assistance for medical or prescription drug cost that may be available to a qualified member.
IRMAA	Medicare Part D acronym for Income Related Monthly Adjustment Amount.
Maximum-Out-Of-Pocket (or) Out-Of-Pocket Costs	The “most” a member will pay for specific services in a plan year.
Medication Therapy Management Program	A benefit offered by the plan.
Outpatient	Benefits provided at a hospital facility.
Part D IRMAA	Acronym for Income Related Monthly Adjustment Amount.
Premium	The monthly amount paid to be a member of the plan.
Skilled Nursing Care	A plan benefit for rehabilitation.

COMMON MEDICATION NAMES

from CMS TEST CALLS

The following medication names have been used frequently in CMS test calls from past years. Test callers this year may use different medication names and it is important to take note and interpret the exact name mentioned by the LEP test caller. **Transparently ask for repetition of medication names (or other proper nouns like plan names) to ensure that the exact name is being interpreted from the source language into English.**

Medication name
Asmanex
Bisoprolol
Citalopram
Diovan
Donnatal
Lanoxin
Lansoprazole
Librax
Lyrica
Sprycel
Stribild
Zocor

LANGUAGE SPECIFIC TRANSLATIONS of **MEDICARE/ MEDICAID TERMINOLOGY**

The following pages provide translations of common Medicare and Medicaid terminology in Simplified and Traditional Chinese characters, Spanish, Vietnamese, Tagalog, and French. The translations are suggestions to help guide interpreters. The terms used by CMS test callers may differ. When interpreting from English, you should use the term or phrase that seems most accurate to you.

Simplified and Traditional Chinese Characters

Medicare Terminology	Traditional Characters	Simplified Characters
Advantage Plan	優勢計劃	优势计划
Ambulance services	救護車服務	救护车服务
Authorized referral	授權轉診	授权转诊
Brand name	商標名稱/品牌	商标名称/品牌
Brand name drug	原廠藥/專利藥/品牌藥	原厂药/专利药/品牌药
Chemotherapy	化療	化疗
Co-pay	共付額	共付额
Cost share	費用分擔	费用分担
Coverage Gap	承保缺口	承保缺口
Deductible	自付額	自付额
Discount	折扣	折扣
Drug	藥物/藥品/毒品	药物/药品/毒品
Eligibility	資格/申請資格	资格/申请资格
Emergency room visit	急診室睇病	急诊室看病
Enrollment	加入	加入
Evidence	證據	证据
Eyewear	眼鏡	眼镜
Formulary	受保藥品清單	受保药品清单
Generic	非專利/通用	非专利/通用
Home health coverage	居家健康保險	居家健康保险
Hospital expenses	住院費用	住院费用
In-Network	網絡中(有簽約)	网络中(有签约)
Insurance	保險	保险
IRMAA	IRMAA	IRMAA

Medicare Terminology	Traditional Characters	Simplified Characters
Low income subsidy	低收入補貼	低收入补贴
Medicaid	醫療補助(計劃)	医疗补助(计划)
Medicaid card	醫療補助卡(白卡)	医疗补助卡(白卡)
Medicare	聯邦醫療保健(計劃)	联邦医疗保健(计划)
Medication Therapy Management	藥物治療管理(計劃)	药物治疗管理(计划)
Medications	藥物	药物
Medigap Policy	補充性醫療保單	补充性医疗保单
Original Medicare	原有聯邦醫療保健(計劃)	原有联邦医疗保健(计划)
Out-of-Network	網絡以外/非網絡	网络以外/非网络
Out-of-pocket costs	自費額	自费额
Outpatient diagnostic lab	門診診斷性檢驗	门诊诊断性检验
Part D	D部分(處方藥物計劃)	D部分(处方药物计划)
Pharmacy	藥店/藥房	药店/药房
Premium	保險費	保险费
Prescriptions	處方	处方
Preventative services	預防性服務	预防性服务
Preventative Tetanus Shot	預防性破傷風針	预防性破伤风针
Primary Care Physician	主治醫生	主治医生
Prior Authorization	預授權	预授权
Quantity Limit	數量限制	数量限制
Referral	轉介	转介
Reimbursed	補償/退款	补偿/退款
Renal dialysis	透析/洗腎	透析/洗肾
Rules	規則	规则
Skilled Nursing Facility	專業護理機構	专业护理机构
Star Rating	星级	星级
Summarizes	總結	总结
Temporary supply	臨時供應品	临时供应品
Tier 1 / Preferred generic drug	第一層次(等級)/首選仿製藥	第一层次(等级)/首选仿制药
Vision Exams	視力檢查	视力检查

Spanish

Medicare Terminology	Spanish
Advantage Plan	Plan de beneficios 'Advantage'
Ambulance services	Servicios de ambulancia
Authorized referral	Referencia autorizada
Brand name	Marca
Brand name drug	Medicamento de marca
Chemotherapy	Quimioterapia
Co-pay	Copago
Cost share	Porción del costo
Coverage Gap	Periodo sin cobertura
Deductible	Deducible
Discount	Descuento
Drug	Medicamento / Medicina / Medicación
Eligibility	Elegibilidad
Emergency room visit	Visita de emergencia
Enrollment	Registro
Evidence	Evidencia
Eyewear	Lentes / Anteojos / Gafas
Formulary	Formulario
Generic	Genérico
Home health coverage	Cobertura de servicios médicos a domicilio
Hospital expenses	Costos hospitalarios
In-Network	Dentro de la red
Insurance	Seguro
IRMAA	IRMAA
Low income subsidy	Subsidio para bajos ingresos
Medicaid	Medicaid
Medicaid card	Tarjeta de Medicaid
Medicare	Medicare
Medication Therapy Management	Administración de terapia con medicamentos
Medications	Medicamentos
Medigap Policy	Políticas de Medigap
Original Medicare	Medicare original
Out-of-Network	Fuera de la red
Out-of-pocket costs	Gastos por cuenta propia
Outpatient diagnostic lab	Laboratorio de diagnóstico para pacientes externos
Part D	Parte D
Pharmacy	Farmacia
Premium	Prima

Medicare Terminology	Spanish
Prescriptions	Recetas / Prescripciones
Preventative services	Servicios preventivos
Preventative Tetanus Shot	Vacuna preventiva contra el tétanos
Primary Care Physician	Médico de cabecera
Prior Authorization	Autorización previa
Quantity Limit	Cantidad límite
Referral	Referido
Reimbursed	Reembolsado
Renal dialysis	Diálisis renal
Rules	Reglas / Normas
Skilled Nursing Facility	Instalación de enfermería especializada
Star Rating	Clasificación
Summarizes	Resume
Temporary supply	Provisión temporal
Tier 1 / Preferred generic drug	Nivel 1 / Medicamento genérico preferido
Vision Exams	Exámenes a la vista

Vietnamese

Medicare Terminology	Vietnamese
Advantage Plan	Chương trình Advantage
Ambulance services	Hệ thống dịch vụ xe cứu thương
Authorized referral	Sự ủy quyền giới thiệu
Brand name	Thương hiệu có tiếng
Brand name drug	Dược phẩm / hay thuốc với thương hiệu có tiếng
Chemotherapy	Hóa học trị liệu / hay điều trị bằng hóa chất
Co-pay	Đồng phụ trả
Cost share	Chia sẻ chi phí
Coverage Gap	Mức chi trả khoảng thiếu hụt giữa phần đã được bảo hiểm
Deductible	Tiền khấu trừ trả trước
Discount	Phần được giảm giá
Drug	Thuốc/ dược phẩm
Eligibility	Đủ tư cách/Thích hợp được
Emergency room visit	Điều trị tại phòng cấp cứu
Enrollment	Đăng ký
Evidence	Bằng chứng/ chứng cứ
Eyewear	Kính đeo mắt
Formulary	Danh sách hay bản liệt kê thuốc/ dược phẩm
Generic	Dùng cho thuốc hay dược phẩm có cùng chung công thức khác tên thương mại
Home health coverage	Chi trả bao gồm luôn chăm sóc y tế tại nhà
Hospital expenses	Các chi phí bệnh viện
In-Network	Trong mạng lưới hay trong hệ thống
Insurance	Bảo hiểm
IRMAA	IRMAA
Low income subsidy	Trợ cấp do thu nhập thấp
Medicaid	Chương trình bảo hiểm y tế liên bang và tiểu bang
Medicaid card	Thẻ bảo hiểm y tế tiểu bang và liên bang
Medicare	Chương trình bảo hiểm y tế liên bang
Medication Therapy Management	Chương trình quản lý dược phẩm/ thuốc điều trị
Medications	Thuốc/ dược phẩm
Medigap Policy	Chính sách bảo hiểm y tế do các công ty tư nhân bán phụ trợ với bảo hiểm gốc
Original Medicare	Bảo hiểm y tế gốc
Out-of-Network	Ngoài mạng lưới/ ngoài hệ thống

Medicare Terminology	Vietnamese
Out-of-pocket costs	Chi phí không được bảo hiểm mà phải tự chi trả
Outpatient diagnostic lab	Chẩn đoán xét nghiệm ngoại trú
Part D	Phần D
Pharmacy	Nhà thuốc tây
Premium	Phí bảo hiểm
Prescriptions	Toa thuốc
Preventative services	Dịch vụ phòng ngừa
Preventative Tetanus Shot	Thuốc chích ngừa bệnh phong đòn gánh/ uốn ván
Primary Care Physician	Bác sĩ chăm sóc chính
Prior Authorization	Cho phép trước
Quantity Limit	Số lượng giới hạn
Referral	Sự giới thiệu /chuyển đến
Reimbursed	Hoàn lại hay trả lại
Renal dialysis	Sự thẩm thấu thận/ chạy thận nhân tạo
Rules	Nguyên tắc/ luật lệ
Skilled Nursing Facility	Cơ sở chăm sóc điều dưỡng chuyên môn
Star Rating	Xếp loại đánh giá theo tiêu chuẩn sao
Summarizes	Tóm tắt / Tổng kết
Temporary supply	Cung cấp tạm thời
Tier 1 / Preferred generic drug	Bậc 1/ Dược phẩm hay thuốc ưa thích có cùng công thức với thuốc có thương hiệu.
Vision Exams	Khám mắt

Tagalog

Medicare Terminology	Tagalog
Advantage Plan	Naaangkop na Plano
Ambulance services	Mga Serbisyon Ambulansiya
Authorized referral	Pinahintulang Repera
Brand name	Orihinal na pangalan
Brand name drug	Gamot na may orihinal na pangalan
Chemotherapy	Chemotherapy o paggagamot sa pama- magitan ng Chemotherapy
Co-pay	Parte na babayaran na galing sa bulsa
Cost share	Hati sa gastusin
Coverage Gap	Panahong walang insiyurans
Deductible	Parteng babayaran
Discount	Bawas
Drug	Gamot
Eligibility	Pagkakaroon
Emergency room visit	Pagbisita sa kuwarto ng emerhensiya
Enrollment	Pagpapalista
Evidence	Ebidensiya
Eyewear	Gamit ng mata
Formulary	Listahan ng mga gamot
Generic	Kapareho
Home health coverage	Proteksiyong pangkalusugan sa bahay
Hospital expenses	Gastusin sa ospital
In-Network	Nasa-Sakop
Insurance	Insiyurans
IRMAA	IRMAA
Low income subsidy	Suporta sa mababang sahod
Medicaid	Medicaid
Medicaid card	Kard sa medicaid
Medicare	Medicare
Medication Therapy Management	Pamamalakad ng Medikasyong Lunas
Medications	Mga Medikasyon
Medigap Policy	Proteksiyon sa Medigap
Original Medicare	Orihinal Medicare
Out-of-Network	Hindi-Sakop
Out-of-pocket costs	Mga Gastosing -manggagaling-sa-bulsa
Outpatient diagnostic lab	Laboratoryong taga-suri-ng pasyente sa labas ng ospital
Part D	Parte D
Pharmacy	Parmasya
Premium	kabayaran

Medicare Terminology	Tagalog
Prescriptions	Mga resita
Preventative services	Mga Serbisiyong Prebensiyon
Preventative Tetanus Shot	Bakuna Prebensiyong Tetano
Primary Care Physician	Primerong manggagamot na taga-pag-alaga
Prior Authorization	Kaagahang Pahintulot
Quantity Limit	Limitasyong Bilang
Referral	Reperal
Reimbursed	Pagsa-uli
Renal dialysis	Renal Dialysis o Renal Dayalises
Rules	Mga alituntunin
Skilled Nursing Facility	Pasilidad ng Dalubhasang Nag-aalaga
Star Rating	Star na Grado
Summarizes	Kabuodan
Temporary supply	Temporaryong pagkakaroon
Tier 1 / Preferred generic drug	Tier 1 / mas-ang-kop na generik na gamot
Vision Exams	Eksaminasyong Paningin

French

Medicare Terminology	French
Advantage Plan	Plan Advantage
Ambulance services	Services d'ambulance
Authorized referral	Recommandation autorisée
Brand name	Marque
Brand name drug	Médicament de marque
Chemotherapy	Chimiothérapie
Co-pay	Quote-part
Cost share	Partage du coût
Coverage Gap	Déficit de couverture
Deductible	Déductible
Discount	Remise
Drug	Médicament
Eligibility	Éligibilité
Emergency room visit	Viste aux urgences
Enrollment	Adhésion
Evidence	Preuve
Eyewear	Lunettes
Formulary	Formulaire
Generic	Générique
Home health coverage	Couverture médicale à domicile
Hospital expenses	Dépenses hospitalières
In-Network	Partie du réseau
Insurance	Assurance
IRMAA	IRMAA
Low income subsidy	Subvention pour les faibles revenus
Medicaid	Medicaid
Medicaid card	Carte Medicaid
Medicare	Medicare
Medication Therapy Management	Gestion de la thérapie médicamenteuse
Medications	Médicaments
Medigap Policy	Politique Medigap
Original Medicare	Original Medicare
Out-of-Network	Hors réseau
Out-of-pocket costs	Coûts à la charge du patient
Outpatient diagnostic lab	Laboratoire de diagnostic pour les patients externes
Part D	Partie D
Pharmacy	Pharmacie
Premium	Prime

Medicare Terminology	French
Prescriptions	Ordonnances
Preventative services	Services préventifs
Preventative Tetanus Shot	Vaccin préventif contre le tétanos
Primary Care Physician	Médecin traitant
Prior Authorization	Autorisation préalable
Quantity Limit	Quantité limite
Referral	Recommandation
Reimbursed	Remboursé
Renal dialysis	Dialyse rénale
Rules	Règles
Skilled Nursing Facility	Structure médicale compétente
Star Rating	Classement
Summarizes	Résumés
Temporary supply	Approvisionnement temporaire
Tier 1 / Preferred generic drug	Niveau 1 / Médicament générique préféré
Vision Exams	Examen de la vue

For a more extensive glossary of common Medicare terminology please visit:

<http://www.medicare.gov/glossary/>