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| **TMMA Evaluation Form** | | | | | | |
|  | | | | | | |
| **CSR Name and DCU Number:** Choose an item. | | | | | | |
| **MATS number and Member Name:** | | | | | | |
| **Issue or Appeal Type:** Choose an item. | | | | | | |
| **Call Date and Call Time:** Click or tap to enter a date. | | | | | | |
| **Quality Reviewer Name and Review Date:** Click or tap to enter a date. | | | | | | |
|  | | | | | | |
| ***Quality Assurance Questions – errors, problems, and issue spotting*** | | | | | | |
|  | | | | | | |
| **Greeting** 5 PTS. | | | **POINTS** | **YES** | **NO** | **TOTAL** |
| **1- Did the CSR use the appropriate greeting?**  *\* Thank you for calling Member Medical Appeals, are you calling for yourself or someone else?* | | |  |  |  | 5 |
| **Script Compliance** 27 PTS. | | |  |  |  | 0 |
| **2 - Did the CSR choose and follow the correct script?**  *\*Selected correct issue type(s) \*Followed script order?* | | |  |  |  | 10 |
| **3 - Did the CSR have a working knowledge of TennCare?**  *\*Understood policies and procedures \*Provided correct information* | | |  |  |  | 7 |
| **4 - Did the CSR verify caller demographics?**  *\*SSN \*Name \*DOB \*Phone\*Email \*Address \*Verified conflicting information* | | |  |  |  | 10 |
| **Customer Service Skills** 34 PTS. | | |  |  |  | 0 |
| **5 - Did the CSR stay in control of the call?**  *\*Avoided rambling \*Used active listening skills \*Patiently interjected an over-talker* | | |  |  |  | 7 |
| **6 - Did the CSR stay professional on the call?**  *\*Remained calm during difficulties \*Courteous, friendly \*Spoke with empathy* | | |  |  |  | 10 |
| **7 - Did the CSR speak with a clear and confident tone of voice?**  \**Spoke at a steady speed \*Sounded self-assured* | | |  |  |  | 7 |
| **8 - Did the CSR properly communicate with the member or caller?**  *\*Avoided dead Air (15 seconds) \*Used proper hold time (2 minutes) \*Provided hold reason* | | |  |  |  | 10 |
| **Closing** 10 PTS. | | |  |  |  | 0 |
| **9 - Did the CSR use the appropriate closing script?**  *\*Read closing script completely (verbatim) \*Offered further assistance* | | |  |  |  | 10 |
| **MATS – Issue or Appeal** 24 PTS | | |  |  |  | 0 |
| **10 - Did the CSR correctly complete all issue or appeal questions?**  *\*Answered all relevant questions based on caller’s responses* | | |  |  |  | 7 |
| **11 - Did the CSR accurately document the reason for the call?**  *\*Accurate representation of the call \*Documented caller details completely\*Linked other open issues in household, if applicable.* | | |  |  |  | 10 |
| **12 – Did the call sheet have any spelling or grammar errors?**  \**Misspelled words \*Used slang \*Incomplete sentences* | | |  |  |  | 7 |
| TOTAL | | |  |  |  | 100% |
| **% Total** | **Unit Expectations** |  |  | | | |
| 96-100 | Exceeds Expectations |
| 90-95 | Meets Expectations |
| 80-89 | Below Expectations |
| 0-79 | Unsatisfactory |

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| --- | --- |
| For each failed quality assurance question, the reviewer will write and explain **in detail**: (1) the specific CSR error, problem, or issue - and - (2) what action steps the CSR needs to do to correct the error, problem, or issue. | |
| **Greeting** |  |
| 1 - Did the CSR use the appropriate greeting? |  |
| **Script Compliance** |  |
| 2 - Did the CSR choose and follow the correct script? |  |
| 3 - Did the CSR have a working knowledge of TennCare? |  |
| 4 - Did the CSR verify caller demographics? |  |
| **Customer Service Skills** |  |
| 5 - Did the CSR stay in control of the call? |  |
| 6 - Did the CSR stay professional on the call? |  |
| 7 - Did the CSR speak with a clear and confident tone of voice? |  |
| 8 - Did the CSR properly communicate with the member or caller? |  |
| **Closing** |  |
| 9 - Did the CSR use the appropriate closing script? |  |
| **MATS Issue or Appeal** |  |
| 10 - Did the CSR correctly complete all issue or appeal questions? |  |
| 11 – Did the CSR accurately document the reason for the call? |  |
| 12 – Did the call sheet have any spelling or grammar errors? |  |

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