



**Experts in Defining and Improving
The Quality of Health Care**

Managed Long Term Care (MLTC) Plan Member Satisfaction Survey Report

Prepared on behalf of:

The New York State Department of Health (NYSDOH)

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**IPRO
Corporate Headquarters
Managed Care Department
1979 Marcus Avenue, First Floor
Lake Success, NY 11042-1002
516-326-7767 · 516-326-6177 (Fax)**

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Section One: Introduction

This study assesses the level of satisfaction of members participating in New York State Medicaid Managed Long Term Care (MLTC). The primary purpose of the study is to provide the New York State Department of Health (NYSDOH) with information regarding member satisfaction with the quality, accessibility, and timeliness of services provided by these plans.

A) Background

Satisfaction surveys are a key tool for improving the delivery of long term care services, and such surveys are integral to ongoing quality improvement efforts. On both federal and state levels, programs continue to utilize and expand the use of consumer-driven data and experiences to improve the health care quality of elderly, and in many cases, chronically ill populations.

On a national basis, since 1998, the Centers for Medicare and Medicaid Services (CMS) has collected information pertaining to consumer satisfaction and the health services experiences of Medicare managed care enrollees through the Consumer Assessment of Health Providers and Systems (CAHPS) survey. This survey includes the following domains:

- Getting Needed Care
- Getting Care Quickly
- Doctors Who Communicate Well
- Flu Shot Rate
- Overall Ratings of: Health Care, Health Plan, Doctor and Specialist

This survey has undergone periodic revisions; recently for example, for the 2006 year, data collection was expanded to include satisfaction and experience of members with Medicare enrolled in a Medicare Advantage Prescription Drug plan. CAHPS surveys are also collected for commercial and Medicaid managed care populations.

Examples of satisfaction surveys on state and local levels can be presented as well. About two years ago, Florida PACE engaged a consultant to help design a quality improvement initiative for the PACE centers. Part of the initiative included the development of a satisfaction survey which included questions related to transportation, day center activities, medical care, and overall care. The surveys were implemented several times during the year, telephonically, to all members. The survey results indicated that, while client satisfaction was remarkably high, it became apparent that there were some areas in which improvement was needed, namely, transportation, communication, and meals.¹

¹ South Florida Hospital News, September 21, 2007, pgs 1-3

Another example can be seen in Maine's Elderly and Home Based Care programs. Maximus, a consulting firm, conducted in-home surveys of 100 elderly clients in these two programs as part of an evaluation. The surveys examined satisfaction with care, knowledge of program services, and the quality of interaction between the client and the care manager.

IPRO's observation was that all of the MLTC plans conduct annual member satisfaction surveys. No standardized surveys exist for these plans; each plan had developed their own individualized surveys. IPRO reviewed a sample of these surveys. Several of them addressed satisfaction with plan services in a general sense, and covered courtesy and sensitivity, but specific questions relating to the quality of plan services, and timeliness and access to services, were often not addressed.

B) Objectives

IPRO and the NYSDOH developed a survey to evaluate satisfaction with the services provided by the MLTC plans. Specific objectives were:

- Whether MLTC enrollees are satisfied with:
 - § quality of health care services
 - § access to primary health care services
 - § timeliness of primary health care and long term care services
- Whether there are differences in care, and in satisfaction of care, between the two principal MLTC plan models (PACE, Partially Capitated plans) and between different age groups, reported state of health, race/ethnicity, and primary language.

Section Two: Methodology

To achieve the objectives, a scannable survey instrument was created. A copy of the survey is included as an attachment. The survey contained three (3) sections. The first section addressed members' general experience with their managed long-term care plan. The section included questions on plan of care involvement, courtesy and timeliness of responses with complaints and grievances, and whether or not the managed long term care plan would be recommended to others. The second section dealt with the quality of specific health care services, including both primary and long term care services. Members were asked to rate the quality of these services, whether covered by their plan or not. The second section also addressed timeliness of some key long term care services, and access to primary health care services. The third section contained general demographic questions (e.g., age, gender, race, education). Most of the questions in this section were adapted from the Medicaid

CAHPS survey. This section also included questions pertaining to living arrangements and whether assistance was provided in completing the survey.

After an initial draft was prepared, IPRO conducted focus groups with two MLTC plans in the fall of 2006. IPRO met with a sample of members from these plans. The purpose of the focus groups was to ensure that members understood the survey content, and that the questions were relevant to the population and the survey was comprehensive. Some minor changes and adjustments were made, resulting from the comments of the attendees of the focus groups.

English, Spanish, Russian, and Chinese versions were prepared and distributed based upon the primary language designations provided by the NYSDOH. Surveys were printed with randomly assigned identifiers used solely to track responses. The initial mailing went out in February 2007, with a follow up mailing in April 2007 in an effort to maximize the response rate.

To identify the eligible population for the survey, inclusion criteria were as follows:

- MLTC plan enrollees. Enrollees from 16 MLTC plans were included in the survey.
- Continuously enrolled in an MLTC plan for a minimum of 6 months as of November 30, 2006

The NYSDOH provided the enrollee file for the survey. The file consisted of 14,601 enrollees and included the primary language for approximately 90% of them. The sampling strategy entailed randomly selecting 400 enrollees, whenever possible, from each of the 16 plans. Eight plans had fewer than 400 enrollees, in which case all enrollees were included. The final sample, for mailing, was 4,518 enrollees. An English version of the survey was included with every foreign (Spanish, Russian, Chinese) mailing.

Enrollees were told that participation in the survey was voluntary and confidential. A toll free number was provided to them for assistance if necessary.

It should be noted that a problem occurred with the second mailing. A portion of the survey documents and the accompanying cover letters were mismatched. Therefore, these responses could not identify the member or the health plan. The problem affected 298 responses (roughly 21% of total responses). These responses were excluded from the calculation of plan specific response rates and other selected analyses. To eliminate this problem for future surveys, IPRO will make every effort to combine the cover letter and the survey into a single document, thus eliminating the need to match separate documents. If this is not possible, then IPRO will require the survey vendor to audit a sample of the documents prior to mailing, to insure that the match was done correctly.

Section Three: Results

A) Response Rates

Of the 4,518 surveys that were mailed, 314 were returned as undeliverable due to mailing address issues and an additional 17 were returned as deceased. This yielded an adjusted population of 4,187. A total of 1,403 surveys were completed, yielding an overall response rate of 33.5%. Of the 1,403 responses, 298 could not identify the member and were excluded from plan specific analyses.

Tables 1 and 2 display the response rates by plan model and by plan. Response rates differed by health plan, ranging from 15.6% to 33.8%.

Table 1: Survey Responses by Plan Model

	N	Percent
PACE		
Surveys Mailed (Total Population)	999	
Undeliverable	85	8.5
Member Deceased	5	0.5
Adjusted Population	909	
Completed	216	23.8
Partially Capitated		
Surveys Mailed (Total Population)	3,519	
Undeliverable	229	6.5
Member Deceased	12	0.3
Adjusted Population	3,278	
Completed	889	27.1
Combined Total		
Surveys Mailed (Total Population)	4,518	
Undeliverable	314	6.9
Member Deceased	17	.04
Adjusted Population	4,187	
Not Returned	2,784	66.5
Completed	1,105	26.4
Completed (no identifier)	298	7.1
Total Completed	1,403	33.5

Table 2: Number of Respondents and Response Rates by Plan/ Plan Model*

PACE	Adjusted Population	Number of Respondents	Percent
Comprehensive Care Management	368	115	31.3
Independent Living for Seniors	244	38	15.6
PACE CNY	239	48	20.1
Eddy Senior Care	58	15	25.9
Partially Capitated	Adjusted Population	Respondents	Percent
Health Partners of New York	378	93	24.6
VNS Choice	386	101	26.2
Co-op Care Plan	381	106	27.8
Senior Network Health, LLC.	298	73	24.5
Partners in Community Care	96	29	30.2
Elant Choice	87	19	21.8
Guild Net, Inc.	371	83	22.4
Independence Care System	364	102	28.0
Home First, Inc.	379	128	33.8
Senior Health Partners, Inc.	373	113	30.3
Total Aging in Place PGM, Inc.	106	27	25.5
Careplus Connection	59	15	25.4

* Excludes 298 unidentifiable responses

Early in the second mailing, IPRO observed that the response rate for one plan, Independent Living For Seniors, was significantly lower than the other plans. In reviewing the membership file, it was noted that many of the members were listed at an incorrect address (the plan's office address). The survey never reached these members. The plan was notified, address corrections were provided, and a new mailing was conducted. The plan's response rate improved, but ended up as still somewhat lower than the other plans.

Of the 1,403 responses, 246 (17.5%) were completed in a non-English version, as follows:

- Spanish- 135 responses
- Russian- 55 responses
- Chinese- 56 responses

B) Survey Demographics

Survey demographic results can be found in Appendix A, Table 26.

Approximately 76% of the survey respondents were female, and nearly 65% of the respondents were 75 years of age or older. English was the primary language for 63% of them, with Spanish as the next most common at 19%, and the remaining 17% either Russian, Chinese or other. Of the respondents, 64% were white, 19% black, 11% Asian, 6% other. Twenty five (25) percent were of Hispanic origin. Nearly one half of respondents had at least a high school diploma.

Forty five (45) percent of respondents rated their current state of health as fair, 24% rated their health as poor, 22% rated their health as good, 6% as very poor, 3% as very good. It should be noted that recent SAAM data indicated that approximately 62% of MLTC members statewide had DMS-1 scores in the 60-179 range. While this range clearly signifies a nursing home level of care, it represents a lower acuity level of such care. These results would seem to correlate somewhat with the survey, with 69% of respondents describing their health as either fair or poor, and only 6% as very poor.

The overwhelming majority of respondents, 95%, live at home. Of those, nearly half (49%) live alone. Seventy (70) percent reported getting assistance in completing the survey. Most of the assistance came from family members. IPRO compared the responses from members who either completed the survey alone or received assistance from family or friends to those who received assistance from other than family or friends. Some differences were found primarily in the demographic questions, not in how services or the health plan were rated. IPRO looked at the responses from members who had gotten special assistance (the questions were answered for them, the questions had been translated). The differences between these and all other responses were primarily in the demographic questions and no other patterns were observed.

C) Plan Evaluation / Rating of Health Plan

Section One of the survey contained questions about members' experience with their MLTC plan. Frequency distributions of these questions can be found in Appendix A, Table 22. The majority of members responded favorably in regards to their satisfaction with the plan. An overwhelming majority (91%) indicated that they would recommend their plan. Overall rating of the plan as being excellent or good was also high (87%), and 85% of respondents indicated that the plan always or usually explained services clearly. While two thirds of respondents reported calling the plan with a question or for help, less than half had called the plan with a complaint or grievance. Of the members who called the plan for help or with a complaint, the majority felt that their concerns were treated in a timely manner and with politeness and respect.

Table 3 shows the comparison between PACE and partially capitated plans on how members rated their health plan. The results showed no significant differences between the plan models on any of the items.

Table 3: Comparison of PACE and Partially Capitated Plans – Plan Evaluation

Item		PACE	Partially Capitated	p value**
		n = 216*	n = 889*	
1	MLTC plan explains services clearly always or usually	81.3%	85.8%	n.s.
2	Involved in decisions about care always or usually	75.9%	76.6%	n.s.
3	Called plan with question or for help	68.9%	69.8%	n.s.
4♦	Always spoke with a person quickly	51.8%	55.6%	n.s.
5a♦	Questions always answered quickly	58.7%	60.1%	n.s.
5b♦	Always able to understand the answers	65.7%	68.6%	n.s.
6♦	Always treated with politeness and respect	88.1%	87.5%	n.s.
7	Called with a complaint or grievance	43.1%	37.3%	n.s.
8♦	Complaint was always responded to in a timely manner	62.4%	51.3%	n.s.
9♦	Always satisfied with the response	48.8%	41.5%	n.s.
10♦	Always treated with politeness and respect	80.5%	76.7%	n.s.
11	Plan has helped manage illness	83.6%	83.7%	n.s.
12	Would recommend the plan	88.7%	90.6%	n.s.
13	Plan rated as good or excellent	91.1%	86.5%	n.s.

Note. Table data based on subset of respondents with member identifier.

* n reflects the total number of members who completed the survey. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

♦ Items based on a skip pattern.

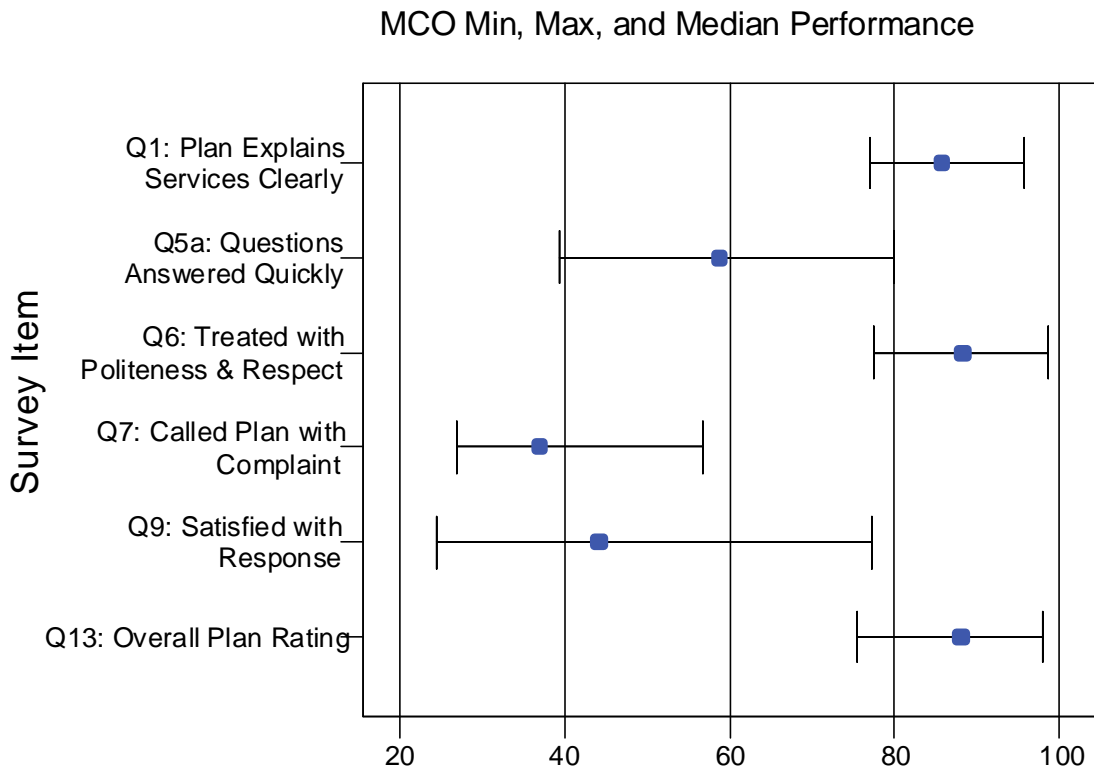
** Statistical significance (n.s. means not significant)

In order to evaluate whether there was any statistically significant difference among respondents on the health plan rating (survey item 13), IPRO conducted a regression analysis involving the following variables: gender, race/ethnicity, education, primary language, current state of health, living arrangement, and age. Results can be found in Appendix B, Table 27 and revealed that there was statistical significance related to both race and current health status. Members

who were white were 3.2 times more likely to rate their plan positively than non white members, and members who rated their health as good or very good, were 3.3 times more likely to rate their plan positively than members who rated their health as poor.

To examine variation among plans on selected plan evaluation items, the minimum rate, maximum rate, range, and median rate on these items were calculated and the results are illustrated in Figure 1. Three plans were excluded due to low sample size: Eddy SeniorCare, Elant Choice, and CarePlus Connections. Item 1 had the smallest range, indicating that the majority of respondents felt that the plan explained services clearly. The largest range occurred in Item 9, with responses ranging from 24% to 77% in regards to satisfaction with a plan’s response about a complaint.

Figure 1: MCO Variation



Note: Based on Plans with at Least 20 Respondents

D. Quality of Care

In Section Two of the survey, members were asked to rate the quality of their care providers. Frequency distributions of the 22 Quality of Care items can be found in Appendix A, Table 23. The majority of respondents found care to be good or excellent with highly utilized services such as their regular doctor, visiting nurse, care manager, social worker, home health aide, eye care professional, and foot doctor. Providers less utilized had a higher number of not applicable responses. This included providers such as occupational therapist, speech therapist and nutritionist. Of those members that had seen these providers, the majority of them found the quality of care to be good or excellent. Services such as medical supplies, hearing aids and home delivered meals also received favorable quality of care ratings.

Table 4 displays members' rank ordered positive responses to the Quality of Care section. The majority of members responded favorably on all items. The highest member satisfaction was in pharmacy services. Ninety two (92) percent of responses rated pharmacy services as good or excellent, followed by regular doctor with 89%. Speech therapist had the lowest satisfaction at 64%, but also reflected the lowest number of responses when not applicable answers were excluded.

Dental services may be of some special note. A large number of members (864) rated the quality of dental care. The percentage rating dentists as good or excellent, while relatively high at 71%, was somewhat lower than for the other frequently utilized services. IPRO had conducted a dental survey for the MLTC plan membership earlier in 2006, with similar findings. Other dental survey findings pointed to difficulty finding dentists that speak members' language, and, in general, a limited selection of dentists. Possibly these issues may be impacting how some members are rating the quality of their care.

Table 4: Percentage of Respondents Rating Quality of Care as Good/Excellent (Rank Ordered)

Item	Service	Denominator*	Percent
32	Pharmacy Services	1183	91.6
14	Regular Doctor	1271	89.0
25	Medical Supplies	1077	88.4
20a	Visiting Nurse	1209	88.3
19	Care Manager	1255	88.0
24	Social Worker	965	85.7
18a	Home Health Aide	1213	84.7
16	Eye Care	1050	82.8
17	Foot Doctor	950	82.2
29	Day Health Center Activities	455	82.2
30	Transportation Services	1094	81.3
33	Nutritionist	468	81.2
20b	On Call Nurse	876	81.1
21	Physical Therapist	687	80.8
18b	Home Health Agency	1183	80.3
27	Home Delivered Meals	248	79.0
28	Meals served at Day Center	439	77.0
31	Nursing Home	158	74.7
22	Occupational Therapist	360	73.9
26	Audiology	309	72.5
15	Dentist	869	71.2
23	Speech Therapist	144	63.9

Note: Table data based on all respondents regardless of member identifier.

* Denominator excludes not applicable responses.

Table 5 shows a comparison between PACE and partially capitated plans on how the quality of services were rated. Of the twenty-two (22) items, two significant differences between PACE and partially capitated plans were noted. PACE members responded more favorably than partially capitated members about the quality of transportation services, and partially capitated members responded more favorably than PACE members about the quality of their home health aide services.

Table 5: Comparison of PACE and Partially Capitated Plans – Rating of Care Providers as Good/Excellent

Item		PACE	Partially Capitated	p value**
		n = 216*	n = 889*	
32	Pharmacy Services	92.4%	92.3%	n.s.
14	Regular Doctor	89.9%	89.6%	n.s.
25	Medical Supplies	90.5%	87.2%	n.s.
20a	Visiting Nurse	88.9%	87.9%	n.s.
19	Care Manager	88.1%	87.9%	n.s.
24	Social Worker	88.5%	83.8%	n.s.
18a	Home Health Aide	76.6%	86.6%	.001
16	Eye Care	80.2%	82.3%	n.s.
17	Foot Doctor	77.8%	83.6%	n.s.
29	Day Health Center Activities	81.8%	81.0%	n.s.
30	Transportation Services	89.8%	78.9%	.001
33	Nutritionist	83.9%	76.2%	n.s.
20b	On Call Nurse	83.3%	79.3%	n.s.
21	Physical Therapist	84.4%	79.2%	n.s.
18b	Home Health Agency	79.6%	80.5%	n.s.
27	Home Delivered Meals	76.1%	82.0%	n.s.
28	Meals served at Day Center	78.0%	76.3%	n.s.
31	Nursing Home	69.0%	75.0%	n.s.
22	Occupational Therapist	81.7%	70.0%	n.s.
26	Audiology	66.2%	75.4%	n.s.
15	Dentist	65.3%	71.6%	n.s.
23	Speech Therapist	62.1%	67.4%	n.s.

Notes: Table data based on subset of respondents with member identifier. Bold values represent the statistically higher value in that row.

* n reflects the total number of members who completed the survey. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

In order to evaluate whether there were any statistically significant differences among respondents on how provider quality of care was rated, IPRO conducted a logistic regression analysis involving the following variables: gender, race/ethnicity, education, primary language, current state of health, living arrangement, and age. This analysis did not reveal any significant associations with these variables.

Table 6 provides a comparison between age groups on quality of care ratings. As the table shows, no significant differences were found.

Table 6: Comparison of Age Groups – Rating of Care Providers as Good/Excellent

Item		18 – 64	65+	p value**
		n = 219*	n = 1181*	
32	Pharmacy Services	88.8%	92.3%	n.s.
14	Regular Doctor	88.4%	89.1%	n.s.
25	Medical Supplies	82.9%	89.5%	n.s.
20a	Visiting Nurse	81.6%	89.4%	n.s.
19	Care Manager	86.1%	88.4%	n.s.
24	Social Worker	82.8%	86.3%	n.s.
18a	Home Health Aide	84.4%	84.8%	n.s.
16	Eye Care	80.0%	83.3%	n.s.
17	Foot Doctor	75.2%	83.3%	n.s.
29	Day Health Center Activities	74.2%	83.5%	n.s.
30	Transportation Services	76.9%	82.1%	n.s.
33	Nutritionist	78.7%	81.7%	n.s.
20b	On Call Nurse	71.4%	82.7%	n.s.
21	Physical Therapist	72.6%	82.4%	n.s.
18b	Home Health Agency	76.5%	81.0%	n.s.
27	Home Delivered Meals	64.5%	81.1%	n.s.
28	Meals served at Day Center	70.0%	77.9%	n.s.
31	Nursing Home	56.0%	78.2%	n.s.
22	Occupational Therapist	62.0%	76.7%	n.s.
26	Audiology	53.1%	74.7%	n.s.
15	Dentist	74.7%	70.3%	n.s.
23	Speech Therapist	60.0%	65.1%	n.s.

* n reflects the total number of members who answered the age item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 7 compares current health status on quality of care ratings. As seen in the table, those members rating their health as good or very good responded more favorably to the following items: eye care, home health aide, on call nurse, social worker, and transportation services.

Table 7: Comparison of Current Health Status – Rating of Care Providers as Good/Excellent

Item		Very Poor/Poor/Fair	Good/Very Good	p value**
		n = 1032*	n = 343*	
32	Pharmacy Services	91.2%	93.0%	n.s.
14	Regular Doctor	87.6%	93.6%	n.s.
25	Medical Supplies	86.9%	93.2%	n.s.
20a	Visiting Nurse	87.1%	92.0%	n.s.
19	Care Manager	86.6%	92.3%	n.s.
24	Social Worker	83.7%	92.2%	.001
18a	Home Health Aide	82.6%	90.5%	.001
16	Eye Care	80.3%	89.6%	.001
17	Foot Doctor	80.6%	87.1%	n.s.
29	Day Health Center Activities	79.2%	88.6%	n.s.
30	Transportation Services	78.6%	88.3%	.0001
33	Nutritionist	77.7%	90.1%	n.s.
20b	On Call Nurse	78.5%	88.6%	.001
21	Physical Therapist	78.4%	87.8%	n.s.
18b	Home Health Agency	78.9%	84.5%	n.s.
27	Home Delivered Meals	75.1%	89.2%	n.s.
28	Meals served at Day Center	74.3%	83.2%	n.s.
31	Nursing Home	71.2%	86.5%	n.s.
22	Occupational Therapist	70.7%	83.3%	n.s.
26	Audiology	69.5%	82.1%	n.s.
15	Dentist	68.5%	79.1%	n.s.
23	Speech Therapist	57.8%	79.5%	n.s.

Note: Bold values represent the statistically higher value in that row.

* n reflects the total number of members who completed the current health item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

The four race categories were also compared on quality of care ratings. As Table 8 shows, white members were more likely to respond favorably about the quality of their occupational therapist and on call nurse in comparison to black members.

Table 8: Comparison of Races – Rating of Care Providers as Good/Excellent

Item	White	Black	Asian	Other	Trend	p value**
	n = 752*	n = 219*	n = 125*	n = 100*		
32 Pharmacy Services	93.9%	88.7%	93.2%	91.1%		n.s.
14 Regular Doctor	90.3%	90.8%	88.7%	89.2%		n.s.
25 Medical Supplies	90.6%	86.4%	92.6%	85.5%		n.s.
20a Visiting Nurse	90.6%	84.8%	90.9%	88.9%		n.s.
19 Care Manager	90.9%	86.4%	90.8%	82.8%		n.s.
24 Social Worker	88.0%	86.5%	87.0%	91.8%		n.s.
18a Home Health Aide	86.8%	82.6%	80.4%	78.8%		n.s.
16 Eye Care	86.9%	82.5%	72.0%	81.8%		n.s.
17 Foot Doctor	86.7%	79.9%	78.1%	73.8%		n.s.
29 Day Health Center Activities	84.6%	79.7%	80.9%	83.9%		n.s.
30 Transportation Services	85.4%	76.0%	84.0%	80.2%		n.s.
33 Nutritionist	86.2%	79.5%	77.1%	71.8%		n.s.
20b On Call Nurse	86.0%	71.2%	86.2%	83.3%	W > B	.001
21 Physical Therapist	85.6%	72.0%	78.8%	82.6%		n.s.
18b Home Health Agency	83.3%	77.6%	84.0%	67.9%		n.s.
27 Home Delivered Meals	83.1%	70.0%	72.2%	73.7%		n.s.
28 Meals served at Day Center	78.8%	70.8%	70.2%	77.4%		n.s.
31 Nursing Home	81.6%	50.0%	85.7%	66.7%		n.s.
22 Occupational Therapist	83.4%	62.7%	63.6%	60.9%	W > B	.001
26 Audiology	78.9%	59.4%	58.8%	68.8%		n.s.
15 Dentist	75.1%	68.5%	59.7%	74.6%		n.s.
23 Speech Therapist	79.2%	46.4%	58.8%	64.3%		n.s.

Note: Bold values represent the statistically higher value in that row; W = White, B = Black

* n reflects the total number of members who completed the race item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Members' primary language spoken was also compared on quality of care ratings. As Table 9 shows, those members who spoke English responded more favorably about the quality of their medical supplies, foot doctor and nutritionist than Spanish speaking members. English speaking members were also more likely to respond favorably about the quality of their eye doctor than Spanish or Chinese speaking members.

Table 9: Comparisons by Primary Language Spoken – Rating of Care Providers as Good/Excellent

Item		English	Spanish	Russian	Chinese	Other	Trend	p value**
		n = 873*	n = 267*	n = 68*	n = 99*	n = 71*		
32	Pharmacy Services	91.9%	88.8%	95.2%	92.3%	95.0%		n.s.
14	Regular Doctor	89.3%	84.7%	97.0%	87.9%	92.2%		n.s.
25	Medical Supplies	90.8%	78.0%	84.3%	91.7%	88.9%	E > S	.0001
20a	Visiting Nurse	88.6%	83.3%	94.9%	89.8%	92.4%		n.s.
19	Care Manager	89.2%	83.1%	89.8%	92.9%	83.3%		n.s.
24	Social Worker	87.7%	77.6%	85.0%	90.8%	81.3%		n.s.
18a	Home Health Aide	84.0%	86.8%	96.3%	82.4%	80.0%		n.s.
16	Eye Care	86.1%	74.5%	83.9%	71.6%	80.5%	E > S, C	.0001
17	Foot Doctor	84.4%	71.1%	88.6%	77.6%	85.4%	E > S	.001
29	Day Health Center Activities	83.3%	78.2%	100.0%	77.1%	76.5%		n.s.
30	Transportation Services	82.7%	73.5%	82.5%	84.9%	82.2%		n.s.
33	Nutritionist	87.0%	64.5%	71.4%	69.6%	84.2%	E > S	.0001
20b	On Call Nurse	82.4%	74.2%	92.0%	83.7%	84.1%		n.s.
21	Physical Therapist	82.6%	70.4%	87.9%	80.9%	81.3%		n.s.
18b	Home Health Agency	80.2%	78.1%	91.1%	88.2%	74.6%		n.s.
27	Home Delivered Meals	81.4%	67.7%	100.0%	78.6%	63.6%		n.s.
28	Meals served at Day Center	75.4%	81.7%	100.0%	67.6%	77.8%		n.s.
31	Nursing Home	74.8%	60.0%	n/a	83.3%	100.0%		n.s.
22	Occupational Therapist	77.3%	65.3%	85.7%	66.7%	66.7%		n.s.
26	Audiology	76.1%	65.0%	76.9%	60.7%	61.5%		n.s.
15	Dentist	73.8%	66.5%	71.7%	57.6%	78.4%		n.s.
23	Speech Therapist	62.8%	59.5%	100.0%	66.7%	70.0%		n.s.

Note: Bold values represent the statistically higher value in that row; n/a = no responses; E = English, S = Spanish, C = Chinese

* n reflects the total number of members who completed the language spoken item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

E. Timeliness of Care

In Section Two of the survey, members were asked to rate the timeliness of some key services. Appendix A, Table 24 displays the frequency distributions for all 15 Timeliness of Care items. With the exception of speech therapist, the majority of respondents found providers and services to be always or usually on time. As was found in the previous section, when not applicable responses were excluded, the denominator for speech therapist was the smallest in this section.

Table 10 displays members' rank ordered positive responses to the Timeliness of Care section. The highest member satisfaction for service timeliness was in home health aide services at 84%, followed by pharmacy services at 83%. Speech therapist was the lowest ranked, with members equally split between favorable and unfavorable responses.

Table 10: Percentage of Respondents Rating Service as Always or Usually Timely (Rank Ordered)

Item	Service	Denominator*	Percent
34	Home Health Aide	1139	83.6
44	Pharmacy Services	1128	83.4
35	Care Manager/Case Manager	1133	78.9
36a	Regular Visiting Nurse	1185	78.9
43	Medical Supplies	973	78.9
42c	Transportation to the doctor	982	75.3
42b	Transportation from day center	409	74.3
42a	Transportation to day center	429	74.1
42d	Transportation from the doctor	960	73.5
36b	On Call Nurse	829	72.6
40	Social Worker	851	70.2
37	Physical Therapist	553	69.4
41	Home Delivered Meals	260	66.9
38	Occupational Therapist	293	62.1
39	Speech Therapist	127	49.6

Note: Table data based on all respondents regardless of member identifier.

* Denominator excludes not applicable responses.

Table 11 compares results of the Timeliness of Care section for PACE and partially capitated plans. There were no significant differences between the plans for any of the 15 items.

Table 11: Comparison of PACE and Partially Capitated Plans – Rating Timeliness of Care Providers as Always/Usually on Time

Item		PACE	Partially Capitated	p value**
		n = 216*	n = 889*	
34	Home Health Aide	82.2%	84.9%	n.s.
44	Pharmacy Services	85.3%	84.1%	n.s.
35	Care Manager/Case Manager	76.9%	79.0%	n.s.
36a	Regular Visiting Nurse	80.1%	78.4%	n.s.
43	Medical Supplies	83.6%	77.3%	n.s.
42c	Transportation to the doctor	81.7%	73.4%	n.s.
42b	Transportation from day center	81.0%	67.8%	n.s.
42a	Transportation to day center	80.7%	67.4%	n.s.
42d	Transportation from the doctor	81.8%	72.5%	n.s.
36b	On Call Nurse	74.0%	70.8%	n.s.
40	Social Worker	76.8%	66.5%	n.s.
37	Physical Therapist	77.3%	65.2%	n.s.
41	Home Delivered Meals	68.2%	62.1%	n.s.
38	Occupational Therapist	74.4%	57.0%	n.s.
39	Speech Therapist	57.1%	48.7%	n.s.

Note: Table data based on subset of respondents with member identifier.

* n reflects the total number of members who completed the survey. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses

** Statistical significance (n.s. means not significant).

In order to evaluate whether there were any statistically significant differences among respondents on how timeliness of these services was rated, IPRO conducted a logistic regression analysis involving the following variables: gender, race/ethnicity, education, primary language, current state of health, living arrangement, and age. Results can be found in Appendix B, Table 27. Results of this regression indicated that members whose primary language was English were 3.4 times more likely to rate medical supplies and 2.4 times more likely to rate pharmacy services as being always or usually on time, than members whose primary language was not English.

Table 12 provides a comparison between age groups on timeliness of care ratings. As the table shows, no significant differences were found.

Table 12: Comparison of Age Groups – Rating Timeliness of Care Providers as Always/Usually on Time

Item		18-64	65+	p value**
		n = 219*	n = 1181*	
34	Home Health Aide	83.8%	83.5%	n.s.
44	Pharmacy Services	84.4%	83.3%	n.s.
35	Care Manager/Case Manager	77.2%	79.3%	n.s.
36a	Regular Visiting Nurse	72.9%	80.0%	n.s.
43	Medical Supplies	79.1%	79.0%	n.s.
42c	Transportation to the doctor	79.9%	74.4%	n.s.
42b	Transportation from day center	73.7%	74.4%	n.s.
42a	Transportation to day center	71.6%	74.6%	n.s.
42d	Transportation from the doctor	80.0%	72.3%	n.s.
36b	On Call Nurse	68.3%	73.4%	n.s.
40	Social Worker	77.9%	68.6%	n.s.
37	Physical Therapist	66.0%	70.2%	n.s.
41	Home Delivered Meals	45.2%	70.2%	n.s.
38	Occupational Therapist	58.3%	63.2%	n.s.
39	Speech Therapist	53.3%	49.0%	n.s.

* n reflects the total number of members who answered the age item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 13 compares current health status on timeliness of care ratings. As can be seen in the table, no significant differences were found.

Table 13: Comparison of Current Health Status – Rating Timeliness of Care Providers as Always/Usually on Time

Item		Very Poor/Poor/Fair	Good/Very Good	p value**
		n = 1032*	n = 343*	
34	Home Health Aide	84.3%	81.3%	n.s.
44	Pharmacy Services	83.5%	83.9%	n.s.
35	Care Manager/Case Manager	78.5%	80.9%	n.s.
36a	Regular Visiting Nurse	79.1%	79.1%	n.s.
43	Medical Supplies	79.7%	76.8%	n.s.
42c	Transportation to the doctor	75.2%	75.0%	n.s.
42b	Transportation from day center	74.3%	75.5%	n.s.
42a	Transportation to day center	73.9%	76.1%	n.s.
42d	Transportation from the doctor	73.4%	73.4%	n.s.
36b	On Call Nurse	72.6%	73.1%	n.s.
40	Social Worker	70.3%	70.6%	n.s.
37	Physical Therapist	70.8%	66.4%	n.s.
41	Home Delivered Meals	69.7%	61.8%	n.s.
38	Occupational Therapist	63.8%	57.9%	n.s.
39	Speech Therapist	49.4%	52.9%	n.s.

* n reflects the total number of members who answered the current health item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 14 provides a comparison between the four race categories on timeliness of care ratings. As the table shows, members who were white responded more favorably about the timeliness of their home health aide than those in the “other” category. White members also responded more favorably about the timeliness of pharmacy services in comparison to Asian members.

Table 14: Comparison of Races – Rating Timeliness of Care Providers as Always/Usually on Time

Item		White	Black	Asian	Other	Trend	p value**
		n = 752*	n = 219*	n = 125*	n = 100*		
34	Home Health Aide	87.4%	78.6%	75.6%	70.4%	W>O	.0001
44	Pharmacy Services	86.9%	79.1%	72.8%	81.9%	W>A	.001
35	Care Manager/Case Manager	82.3%	73.1%	74.7%	76.5%		n.s.
36a	Regular Visiting Nurse	81.3%	74.3%	78.5%	68.6%		n.s.
43	Medical Supplies	79.6%	81.1%	74.6%	79.2%		n.s.
42c	Transportation to the doctor	78.3%	70.6%	72.2%	72.7%		n.s.
42b	Transportation from day center	80.6%	66.7%	67.4%	72.4%		n.s.
42a	Transportation to day center	80.8%	63.8%	69.8%	68.6%		n.s.
42d	Transportation from the doctor	75.0%	71.9%	69.8%	70.7%		n.s.
36b	On Call Nurse	77.5%	66.4%	65.2%	62.5%		n.s.
40	Social Worker	71.0%	65.7%	71.4%	76.6%		n.s.
37	Physical Therapist	74.8%	65.2%	70.2%	60.5%		n.s.
41	Home Delivered Meals	75.9%	53.6%	47.6%	58.8%		n.s.
38	Occupational Therapist	71.8%	57.9%	51.7%	50.0%		n.s.
39	Speech Therapist	61.5%	37.5%	18.8%	66.7%		n.s.

Note: Bold values represent the statistically higher value in that row; W = White, O = Other, A = Asian

* n reflects the total number of members who completed the race item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 15 provides comparisons of primary language spoken on ratings of timeliness of care providers. English speaking members responded more favorably in their rating of the timeliness of medical supplies than Spanish and Russian speaking members.

Table 15: Comparison of Primary Language Spoken – Rating Timeliness of Care Providers as Always/Usually on Time

Item		English	Spanish	Russian	Chinese	Other	Trend	p value**
		n = 873*	n = 267*	n = 68*	n = 99*	n = 71*		
34	Home Health Aide	85.2%	83.5%	83.3%	73.6%	82.0%		n.s.
44	Pharmacy Services	86.2%	83.0%	77.4%	71.4%	75.9%		n.s.
35	Care Manager/Case Manager	81.8%	72.6%	73.3%	72.5%	83.6%		n.s.
36a	Regular Visiting Nurse	79.9%	76.6%	75.8%	75.6%	85.7%		n.s.
43	Medical Supplies	83.5%	69.4%	52.3%	75.5%	78.8%	E>S, R	.0001
42c	Transportation to the doctor	78.3%	67.7%	73.6%	69.1%	68.4%		n.s.
42b	Transportation from day center	78.6%	62.5%	88.9%	60.0%	75.0%		n.s.
42a	Transportation to day center	78.9%	62.1%	90.9%	65.5%	70.0%		n.s.
42d	Transportation from the doctor	75.8%	68.5%	72.2%	67.6%	65.8%		n.s.
36b	On Call Nurse	75.7%	66.8%	61.5%	58.7%	87.8%		n.s.
40	Social Worker	72.1%	67.1%	54.1%	67.8%	76.7%		n.s.
37	Physical Therapist	73.7%	58.9%	53.6%	63.4%	72.0%		n.s.
41	Home Delivered Meals	73.2%	50.0%	20.0%	47.1%	58.3%		n.s.
38	Occupational Therapist	67.0%	48.3%	71.4%	42.9%	75.0%		n.s.
39	Speech Therapist	55.2%	51.6%	50.0%	18.2%	40.0%		n.s.

Note: Bold values represent the statistically higher value in that row; E = English, S = Spanish, R = Russian

* n reflects the total number of members who completed the language spoken item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

F. Access to Care

In Section Two, members were asked to indicate how long they generally had to wait for routine and urgent appointments for frequently utilized providers (regular doctor, dentist, foot doctor, eye care). Appendix A, Tables 25a and 25b provide frequency distributions for these results.

Tables 16a and 16b display the rank ordered results for timely access to routine and urgent appointments. For routine appointments, the highest member satisfaction was for access to their regular doctor. Responses were equally distributed between favorable and unfavorable concerning access to foot doctors, eye care, and dentists.

For urgent appointments, access to a regular doctor also reflected the highest level of satisfaction. Fifty one (51) percent reported being able to schedule appointments within the same day. Percentages were notably lower for same day appointments for foot doctors, dentists, and eye care. Less than 23% of members were able to get same day appointments with these providers.

Table 16a: Percentage of Respondents With Timely Access (Within 30 days) for Routine Appointments (Rank Ordered)

Item	Service	Denominator*	Percent
45	Regular Doctor	1130	64.2%
48	Foot Doctor	798	50.4%
47	Eye Care	880	50.1%
46	Dentist	684	48.8%

Note: Table data based on all respondents regardless of member identifier.

* Denominator excludes not applicable responses.

Table 16b: Percentage of Respondents With Timely Access (Same day) for Urgent Appointments (Rank Ordered)

Item	Service	Denominator*	Percent
49	Regular Doctor	897	51.1%
50	Dentist	449	22.9%
51	Eye Care	554	19.7%
52	Foot Doctor	549	18.6%

Note: Table data based on all respondents regardless of member identifier.

* Denominator excludes not applicable responses.

Tables 17a and 17b compare PACE and partially capitated plans on members' satisfaction with access to care. There were no significant differences between plans for routine access to appointments. For urgent appointments, PACE members were more likely to positively rate access to their regular doctor than partially capitated members.

Table 17a: Comparison of PACE and Partially Capitated Plans – Rating Access to Care for a Routine Appointment within 30 days

Item		PACE	Partially Capitated	p value**
		n = 216*	n = 889*	
45	Regular Doctor	72.5%	60.8%	n.s.
48	Foot Doctor	48.0%	49.9%	n.s.
47	Eye Care	49.7%	48.3%	n.s.
46	Dentist	51.3%	46.5%	n.s.

Note: Table data based on subset of respondents with member identifier.

* n reflects the total number of members who completed the survey. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 17b: Comparison of PACE and Partially Capitated Plans – Rating Access to Care for an Urgent Appointment within the same day

Item		PACE	Partially Capitated	p value**
		n = 216*	N = 889*	
49	Regular Doctor	66.2%	46.1%	.0001
50	Dentist	22.0%	24.9%	n.s.
51	Eye Care	25.6%	19.6%	n.s.
52	Foot Doctor	20.0%	18.4%	n.s.

Notes: Table data based on subset of respondents with member identifier. Bold values represent the statistically higher value in that row.

* n reflects the total number of members who completed the survey. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

In order to evaluate whether there were any statistically significant differences among respondents on how access to these services was rated, IPRO conducted a logistic regression analysis involving the following variables: gender,

race/ethnicity, education, primary language, current state of health, living arrangement, and age. This analysis did not reveal any significant associations with these variables.

Tables 18a and 18b provide a comparison of age groups on access to care ratings. No significant differences were found.

Table 18a: Comparison of Age Groups – Rating Access to Care for a Routine Appointment within 30 days

Item		18-64	65+	p value**
		n = 219*	n = 1181*	
45	Regular Doctor	56.0%	65.8%	n.s.
48	Foot Doctor	44.0%	51.3%	n.s.
47	Eye Care	48.3%	50.4%	n.s.
46	Dentist	54.0%	47.4%	n.s.

* n reflects the total number of members who completed the age item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 18b: Comparison of Age Groups – Rating Access to Care for an Urgent Appointment within the same day

Item		18-64	65+	p value**
		n = 219*	n = 1181*	
49	Regular Doctor	40.9%	53.2%	n.s.
50	Dentist	28.3%	21.4%	n.s.
51	Eye Care	21.3%	19.3%	n.s.
52	Foot Doctor	17.6%	18.8%	n.s.

* n reflects the total number of members who completed the age item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Tables 19a and 19b compare current health status on access to care ratings. As can be seen below, no significant differences were found.

Table 19a: Comparison of Health Status – Rating Access to Care for a Routine Appointment within 30 days

Item		Very Poor/Poor/Fair	Good/Very Good	p value**
		n = 1032*	n = 343*	
45	Regular Doctor	66.4%	58.2%	n.s.
48	Foot Doctor	51.3%	47.7%	n.s.
47	Eye Care	52.2%	44.4%	n.s.
46	Dentist	51.1%	43.5%	n.s.

* n reflects the total number of members who completed the current health item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 19b: Comparison of Health Status – Rating Access to Care for an Urgent Appointment within the same day

Item		Very Poor/Poor/Fair	Good/Very Good	p value**
		n = 1032*	n = 343*	
49	Regular Doctor	50.8%	52.7%	n.s.
51	Eye Care	18.8%	22.6%	n.s.
50	Dentist	23.6%	22.0%	n.s.
52	Foot Doctor	18.1%	20.8%	n.s.

* n reflects the total number of members who completed the current health item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Tables 20a and 20b provide comparisons of the four race categories on access to care ratings. As seen in Table 20a, White members were more likely to report that they were able to get a routine appointment with their regular doctor, foot doctor, and eye doctor within one month in comparison to black members. There were no significant differences by race for access to urgent appointments.

Table 20a: Comparison of Race – Rating Access to Care for a Routine Appointment within 30 days

Item		White	Black	Asian	Other	Trend	p value**
		n = 752*	n = 219*	n = 125*	n = 100*		
45	Regular Doctor	72.0%	53.9%	63.8%	57.8%	W > B	.0001
48	Foot Doctor	57.6%	39.7%	43.6%	44.0%	W > B	.001
47	Eye Care	57.8%	39.1%	51.3%	46.3%	W > B	.001
46	Dentist	55.9%	43.5%	48.4%	45.3%		n.s.

Note: Bold values represent the statistically higher value in that row; W = White, B = Black

* n reflects the total number of members who completed the race item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 20b: Comparison of Race – Rating Access to Care for an Urgent Appointment within the same day

Item		White	Black	Asian	Other	p value**
		n = 752*	n = 219*	n = 125*	n = 100*	
49	Regular Doctor	52.4	46.0	57.9	42.9	n.s.
50	Dentist	23.5	21.8	19.4	23.1	n.s.
51	Eye Care	20.1	18.1	21.6	20.8	n.s.
52	Foot Doctor	19.2	16.1	16.7	18.9	n.s.

* n reflects the total number of members who completed the race item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Tables 21a and 21b display comparisons between language spoken on access to care for routine and urgent appointments. English speaking members were more likely to be able to see their regular doctor, eye doctor and dentist for a routine appointment than Spanish speaking members. No differences in access to urgent, same day appointments were found.

Table 21a: Comparison of Primary Language Spoken – Rating Access to Care for a Routine Appointment within 30 days

Item		English	Spanish	Russian	Chinese	Other	Trend	p value**
		n = 873*	n = 267*	n = 68*	n = 99*	n = 71*		
45	Regular Doctor	67.1%	52.7%	73.3%	65.8%	63.3%	E > S	.001
48	Foot Doctor	53.1%	38.4%	54.5%	45.5%	50.0%		n.s.
47	Eye Care	54.5%	36.8%	50.0%	56.7%	40.5%	E > S	.001
46	Dentist	54.7%	31.7%	45.7%	55.3%	41.9%	E > S	.0001

Note: Bold values represent the statistically higher value in that row; E = English, S = Spanish

* n reflects the total number of members who completed the language spoken item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Table 21b: Comparison of Primary Language Spoken – Rating Access to Care for an Urgent Appointment within the same day

Item		English	Spanish	Russian	Chinese	Other	p value**
		n = 873*	n = 267*	n = 68*	n = 99*	n = 71*	
49	Regular Doctor	50.1%	48.0%	65.9%	60.0%	45.7%	n.s.
50	Dentist	21.5%	20.9%	50.0%	20.0%	14.3%	n.s.
52	Foot Doctor	19.1%	17.0%	28.0%	13.0%	15.4%	n.s.
51	Eye Care	19.9%	19.8%	24.1%	25.0%	8.0%	n.s.

* n reflects the total number of members who completed the language spoken item. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude not applicable responses.

** Statistical significance (n.s. means not significant)

Section Four: Conclusions and Recommendations

Overall survey findings were very favorable. The majority of MLTC respondents are evidently satisfied with their health plan, and most would recommend their plan to others, whether it be a PACE or a partially capitated plan. The majority of members rated the quality of MLTC services to be good or excellent and the majority of respondents found providers and services to be always or usually on time. The majority of respondents reported being able to schedule routine and urgent appointments with their regular doctor in reasonable timeframes. It was encouraging to see high satisfaction rates for quality and timeliness for such critical long term care services as visiting nurses and home health aides. However, IPRO had observations with the results of some survey items, such as dental care, transportation, home health aides, and responses to complaints.

Some recommendations for the NYSDOH and IPRO to consider going forward are as follows:

- 1) The NYSDOH may want to give consideration to utilizing this standardized survey for the plans to administer on an ongoing basis, to replace the individualized surveys currently in place. It should be noted that the 33.5% response rate (including all respondents) was higher than for previous MLTC surveys conducted by IPRO. The availability of the survey in multiple languages (Chinese and Russian as well as Spanish) most likely contributed to the improved response rates. It is recommended that the survey continue to be administered in these languages.
- 2) It is recommended that the NYSDOH and IPRO review the membership file for any obvious mailing address errors or patterns prior to mailing. In like manner, plans should make every effort to keep the DOH updated with current contact information for their members.
- 3) One question addressed by the survey was if the MLTC plan has helped members to better manage their illnesses since they joined the plan. IPRO and the NYSDOH may consider modifying this survey going forward, to include several questions pertaining to members' experience with the quality of their care. For example, members could be asked if they've received a flu shot, a vision exam, a mammogram, etc. To offset these additional items and keep the survey to its existing length, possibly several questions relating to services infrequently utilized (i.e. speech therapy, audiology) could be eliminated.

Observations for the MLTC plans to consider based upon survey results are as follows:

- 1) The survey showed a significant variation of responses for item 9 (satisfaction with a plan's response about a complaint). Plans may want to

review their complaint/grievance databases to determine how many complaints required significant time to resolve in the last 12 months or so, and how many complaints were not resolved or have recurred. Possibly, changes to procedure, process, etc may be necessary.

2) Plans may want to review dental services, in general, for how accessible dentists are and if members have enough dentists to choose from. IPRO's dental survey pointed to similar findings and these could be impacting how some members feel about their dental care. Plans may also want to determine if members whose primary language is not English are satisfied with their dental care.

3) PACE members responded somewhat more favorably than partially capitated members about the quality of transportation services. Also, partially capitated members responded more favorably than PACE members about the quality of home health aide services. Some plans provide transportation and home health services directly, or through an affiliated company, and therefore may be in a better position to provide oversight over the quality of these services. Other plans may be subcontracting these services to outside vendors and providing quality oversight may be more of a challenge. It is recommended that the plans evaluate these services to see if any issues or problems exist with specific vendors.

4) While a significant percentage of respondents reported that they are able to schedule routine appointments with their regular doctor or PCP in a timely manner, the same levels of satisfaction were not expressed with foot doctors, dentists, or for eye care. For urgent needs, a significant number of respondents indicated that same day appointments are not possible with any of these providers. Plans may wish to investigate this through possibly interviewing these providers to determine exactly how urgent visits are handled.

5) There were some observed language differences with some of the responses. English speaking members tended to respond more favorably about the timeliness of some specific services (medical supplies, pharmacy services) than non-English speaking members. English speaking members also tended to respond more favorably about the quality of their medical supplies, foot doctor, nutritionist, and eye doctor than non-English speaking members. It would appear that language difficulties might be playing a role in not being satisfied with some services, and with not getting them on time. This may be a worthwhile area for the plans to explore. Access to multilingual providers of these services may be limited.

Appendix A

Aggregate Frequency Distribution Tables (Includes all respondents)

Table 22. MLTC Plan Evaluation

Item	N	Percent
1	MLTC plan explains services clearly (n = 1317)	
	693	52.6
	429	32.6
	166	12.6
	29	2.2
	<i>Don't know or not sure (n = 62)</i>	
2	Involved in decisions about care (n =1318)	
	662	50.2
	342	25.9
	212	16.1
	102	7.7
	<i>Don't know or not sure (n = 51)</i>	
3	Called the plan with questions (n = 1377)	
	951	69.1
	426	30.9
4♦	Speak with a person quickly (n = 922)	
	502	54.4
	387	42.0
	33	3.6
5a♦	Were questions answered quickly (n = 922)	
	552	59.9
	344	37.3
	26	2.8
5b♦	Were you able to understand answers (n = 914)	
	620	67.8
	278	30.4
	16	1.8
6♦	Treated with politeness and respect (n = 924)	
	812	87.9
	104	11.3
	8	0.9
7	Called with complaint/grievance (n = 1360)	
	530	39.0
	830	61.0

♦ Items based on skip pattern.

Table 22. MLTC Plan Evaluation (continued)

Item		N	Percent
8♦	Responded to in timely manner (n = 515)		
	Always	272	52.8
	Sometimes	200	38.8
	Never	43	8.3
9♦	Were you satisfied with the response (n = 517)		
	Always	224	43.3
	Sometimes	251	48.5
	Never	42	8.1
10♦	Treated with politeness and respect (n = 521)		
	Always	400	76.8
	Sometimes	113	21.7
	Never	8	1.5
11	Has plan helped manage illness (n = 1374)		
	Yes	1152	83.8
	No	56	4.1
	About the same	166	12.1
12	Would you recommend plan (n = 1366)		
	Yes	1237	90.6
	No	129	9.4
13	How would you rate your plan (n = 1388)		
	Excellent	594	42.8
	Good	614	44.2
	Fair	147	10.6
	Poor	33	2.4

♦ Items based on skip pattern.

Table 23: Quality of Care Providers

Item		N	Percent
14	Regular Doctor (n = 1271)		
	Poor	17	1.3
	Fair	123	9.7
	Good	462	36.3
	Excellent	669	52.6
	<i>Not Applicable (n = 74)</i>		
15	Dentist (n = 869)		
	Poor	73	8.4
	Fair	177	20.4
	Good	360	41.4
	Excellent	259	29.8
	<i>Not Applicable (n = 403)</i>		
16	Eye Care (n = 1050)		
	Poor	49	4.7
	Fair	132	12.6
	Good	457	43.5
	Excellent	412	39.2
	<i>Not Applicable (n = 260)</i>		
17	Foot Doctor (n = 950)		
	Poor	43	4.5
	Fair	126	13.3
	Good	383	40.3
	Excellent	398	41.9
	<i>Not Applicable (n = 333)</i>		
18a	Home Health Aide (n = 1213)		
	Poor	39	3.2
	Fair	146	12.0
	Good	387	31.9
	Excellent	641	52.8
	<i>Not Applicable (n = 115)</i>		
18b	Home Health Agency (n = 1183)		
	Poor	60	5.1
	Fair	173	14.6
	Good	488	41.3
	Excellent	462	39.1
	<i>Not Applicable (n = 154)</i>		

Table 23: Quality of Care Providers (continued)

Item		N	Percent
19	Care Manager (n = 1255)		
	Poor	30	2.4
	Fair	120	9.6
	Good	443	35.3
	Excellent	662	52.7
	<i>Not Applicable (n = 72)</i>		
20a	Regular Visiting Nurse (n = 1209)		
	Poor	40	3.3
	Fair	102	8.4
	Good	429	35.5
	Excellent	638	52.8
	<i>Not Applicable (n = 121)</i>		
20b	Covering/On Call Nurse (n = 876)		
	Poor	50	5.7
	Fair	116	13.2
	Good	376	42.9
	Excellent	334	38.1
	<i>Not Applicable (n = 404)</i>		
21	Physical Therapist (n = 687)		
	Poor	38	5.5
	Fair	94	13.7
	Good	290	42.2
	Excellent	265	38.6
	<i>Not Applicable (n = 588)</i>		
22	Occupational Therapist (n = 360)		
	Poor	34	9.4
	Fair	60	16.7
	Good	136	37.8
	Excellent	130	36.1
	<i>Not Applicable (n = 874)</i>		
23	Speech Therapist (n = 144)		
	Poor	27	18.8
	Fair	25	17.4
	Good	59	41.0
	Excellent	33	22.9
	<i>Not Applicable (n = 1066)</i>		

Table 23 Quality of Care Providers (continued)

Item	N	Percent
24	Social Worker (n = 965)	
	Poor	38 3.9
	Fair	100 10.4
	Good	353 36.6
	Excellent	474 49.1
	<i>Not Applicable (n = 308)</i>	
25	Medical Supplies/Equipment (n = 1077)	
	Poor	38 3.5
	Fair	87 8.1
	Good	403 37.4
	Excellent	549 51.0
	<i>Not Applicable (n = 223)</i>	
26	Audiology/Hearing Aids (n = 309)	
	Poor	40 12.9
	Fair	45 14.6
	Good	129 41.7
	Excellent	95 30.7
	<i>Not Applicable (n = 926)</i>	
27	Home Delivered Meals (n = 248)	
	Poor	25 10.1
	Fair	27 10.9
	Good	98 39.5
	Excellent	98 39.5
	<i>Not Applicable (n = 981)</i>	
28	Meals at Day Health Center (n = 439)	
	Poor	32 7.3
	Fair	69 15.7
	Good	182 41.5
	Excellent	156 35.5
	<i>Not Applicable (n = 811)</i>	
29	Day Health Center Activities (n = 455)	
	Poor	27 5.9
	Fair	54 11.9
	Good	196 43.1
	Excellent	178 39.1
	<i>Not Applicable (n = 797)</i>	

Table 23 Quality of Care Providers (continued)

Item		N	Percent
30	Transportation Services (n = 1094)		
	Poor	66	6.0
	Fair	139	12.7
	Good	424	38.8
	Excellent	465	42.5
	<i>Not Applicable (n = 220)</i>		
31	Nursing Home (n = 158)		
	Poor	20	12.7
	Fair	20	12.7
	Good	62	39.2
	Excellent	56	35.4
	<i>Not Applicable (n = 1040)</i>		
32	Pharmacy Services (n = 1183)		
	Poor	21	1.8
	Fair	78	6.6
	Good	441	37.3
	Excellent	643	54.4
	<i>Not Applicable (n = 132)</i>		
33	Nutritionist (n = 468)		
	Poor	27	5.8
	Fair	61	13.0
	Good	214	45.7
	Excellent	166	35.5
	<i>Not Applicable (n = 772)</i>		

Table 24. Timeliness of Care

Item	N	Percent
34	Home Health Aide (n = 1139)	
	Always	666 58.5
	Usually	286 25.1
	Sometimes	119 10.4
	Never	68 6.0
	<i>Not Applicable (n = 154)</i>	
35	Care Manager/Case Manager (n = 1133)	
	Always	599 52.9
	Usually	295 26.0
	Sometimes	150 13.2
	Never	89 7.9
	<i>Not Applicable (n = 139)</i>	
36a	Regular Visiting Nurse (n = 1185)	
	Always	664 56.0
	Usually	271 22.9
	Sometimes	167 14.1
	Never	83 7.0
	<i>Not Applicable (n = 145)</i>	
36b	Covering/On Call Nurse (n = 829)	
	Always	366 44.1
	Usually	236 28.5
	Sometimes	142 17.1
	Never	85 10.3
	<i>Not Applicable (n = 448)</i>	
37	Physical Therapist (n = 553)	
	Always	236 42.7
	Usually	148 26.8
	Sometimes	98 17.7
	Never	71 12.8
	<i>Not Applicable (n = 698)</i>	
38	Occupational Therapist (n = 293)	
	Always	103 35.2
	Usually	79 27.0
	Sometimes	52 17.7
	Never	59 20.1
	<i>Not Applicable (n = 936)</i>	

Table 24. Timeliness of Care (continued)

Item		N	Percent
39	Speech Therapist (n = 127)		
	Always	37	29.1
	Usually	26	20.5
	Sometimes	22	17.3
	Never	42	33.1
	<i>Not Applicable (n = 1081)</i>		
40	Social Worker (n = 851)		
	Always	391	45.9
	Usually	206	24.2
	Sometimes	165	19.4
	Never	89	10.5
	<i>Not Applicable (n = 407)</i>		
41	Home Delivered Meals (n = 260)		
	Always	122	46.9
	Usually	52	20.0
	Sometimes	32	12.3
	Never	54	20.8
	<i>Not Applicable (n = 972)</i>		
42a	Transportation TO day center (n = 429)		
	Always	220	51.3
	Usually	98	22.8
	Sometimes	55	12.8
	Never	56	13.1
	<i>Not Applicable (n = 667)</i>		
42b	Transportation FROM day center (n = 409)		
	Always	211	51.6
	Usually	93	22.7
	Sometimes	54	13.2
	Never	51	12.5
	<i>Not Applicable (n = 644)</i>		
42c	Transportation TO the doctor (n = 982)		
	Always	508	51.7
	Usually	231	23.5
	Sometimes	167	17.0
	Never	76	7.7
	<i>Not Applicable (n = 248)</i>		

Table 24. Timeliness of Care (continued)

Item	N	Percent
42d	Transportation FROM the doctor (n = 960)	
	Always	476 49.6
	Usually	230 24.0
	Sometimes	167 17.4
	Never	87 9.1
	<i>Not Applicable (n = 246)</i>	
43	Medical Supplies/Equipment (n = 973)	
	Always	509 52.3
	Usually	259 26.6
	Sometimes	120 12.3
	Never	85 8.7
	<i>Not Applicable (n = 297)</i>	
44	Pharmacy Services (n = 1128)	
	Always	709 62.9
	Usually	232 20.6
	Sometimes	99 8.8
	Never	88 7.8
	<i>Not Applicable (n = 162)</i>	

Table 25a. Access to Care for a Routine Appointment

Item		N	Percent
45	Your regular doctor (n = 1130)		
	Less than 1 month	725	64.2
	1 to 3 months	330	29.2
	Longer than 3 months	75	6.6
	<i>Not Applicable (n = 190)</i>		
46	Dentist (n = 684)		
	Less than 1 month	334	48.8
	1 to 3 months	182	26.6
	Longer than 3 months	168	24.6
	<i>Not Applicable (n = 563)</i>		
47	Eye Care (n = 880)		
	Less than 1 month	441	50.1
	1 to 3 months	195	22.2
	Longer than 3 months	244	27.7
	<i>Not Applicable (n = 418)</i>		
48	Foot Doctor (n = 798)		
	Less than 1 month	402	50.4
	1 to 3 months	277	34.7
	Longer than 3 months	119	14.9
	<i>Not Applicable (n = 481)</i>		

Table 25b. Access to Care for Urgent Appointment

Item		N	Percent
49	Your regular doctor (n = 897)		
	Same day	458	51.1
	1 to 3 days	320	35.7
	4 days or longer	119	13.3
	<i>Not Applicable (n = 400)</i>		
50	Dentist (n = 449)		
	Same day	103	22.9
	1 to 3 days	177	39.4
	4 days or longer	169	37.6
	<i>Not Applicable (n = 794)</i>		
51	Eye Care (n = 554)		
	Same day	109	19.7
	1 to 3 days	200	36.1
	4 days or longer	245	44.2
	<i>Not Applicable (n = 708)</i>		
52	Foot Doctor (n = 549)		
	Same day	102	18.6
	1 to 3 days	221	40.3
	4 days or longer	226	41.2
	<i>Not Applicable (n = 721)</i>		

Table 26: About You

Item		N	Percent
53	Rate your current state of health (n = 1375)		
	Very poor	80	5.8
	Poor	333	24.2
	Fair	619	45.0
	Good	299	21.7
	Very Good	44	3.2
54	What is your gender (n = 1397)		
	Male	336	24.1
	Female	1061	75.9
55	What is your age (n = 1400)		
	18-44	40	2.9
	45-64	179	12.8
	65-74	277	19.8
	75-84	455	32.5
	Over 85	449	32.1
56a	Are you of Hispanic/Latino origin (n = 1321)		
	Yes	327	24.8
	No	994	75.2
56b +	What is your race (n = 1196)		
	American Indian or Alaska Native	20	1.7
	Asian	127	10.6
	Black or African American	228	19.1
	Native Hawaiian or Pacific Islander	5	0.4
	White	761	63.6
	Other	74	6.2
57	Primary Language Spoken at home (n = 1378)		
	English	873	63.4
	Spanish	267	19.4
	Russian	68	4.9
	Chinese	99	7.2
	Other	71	5.2

+ Member can check all that apply.

Table 26: About You (continued)

Item	N	Percent
58	Education level completed (n = 1333)	
	8 th grade or less	437 32.8
	Some high school, did not graduate	251 18.8
	High school graduate or GED	377 28.3
	Some college or 2 year degree	146 11.0
	4 year college graduate	73 5.5
	More than 4 year college degree	49 3.7
59	Where do you live (n = 1376)	
	At home	1305 94.8
	Nursing home	71 5.2
60♦	Do you live (n = 1283)	
	Alone	624 48.6
	With a family member or friend	598 46.6
	With other than a family member or friend	61 4.8
61	Did someone help complete survey (n = 1382)	
	Yes	961 69.5
	No	421 30.5
62♦	Who helped you (n = 933)	
	Family Member	615 65.9
	Friend	55 5.9
	Home care aide	121 13.0
	Care manager or visiting nurse	62 6.6
	Other	80 8.6
63♦+	How did this person help (n = 946)	
	Read the questions to me	488 51.6
	Wrote down the answers I gave	443 46.8
	Answered the questions for me	329 34.8
	Translated into my language	123 13.0
	Helped in some other way	55 5.8

♦ Items based on skip pattern.

+ Member can check all that apply.

Appendix B

Statistically Significant Findings From Regression Analyses

Table 27 – Multivariate Regression Results

Plan Evaluation	Odds Ratio	P Value
Plan Rated as Good or Excellent - Race		
White	3.2	.001
Non-White*	1.0	
Plan Rated as Good or Excellent – Current Health		
Health Good/Very Good	3.3	.0001
Health Poor/Very Poor/Fair*	1.0	
Timeliness of Care – Always/Usually	Odds Ratio	P Value
Medical Supplies – Primary Language		
English	3.4	.0001
Non-English*	1.0	
Pharmacy Services – Primary Language		
English	2.4	.0001
Non-English*	1.0	

* = Reference Group

Office use only

①	①	①	①	①	①	①	①
①	①	①	①	①	①	①	①
②	②	②	②	②	②	②	②
③	③	③	③	③	③	③	③
④	④	④	④	④	④	④	④
⑤	⑤	⑤	⑤	⑤	⑤	⑤	⑤
⑥	⑥	⑥	⑥	⑥	⑥	⑥	⑥
⑦	⑦	⑦	⑦	⑦	⑦	⑦	⑦
⑧	⑧	⑧	⑧	⑧	⑧	⑧	⑧
⑨	⑨	⑨	⑨	⑨	⑨	⑨	⑨

NYS DOH / I P R O

Managed Long Term Care

Member Satisfaction Survey

MARKING INSTRUCTIONS

- Use a No. 2 pencil or a blue or black ink pen only.
- Do not use pens with ink that soaks through the paper.
- Make solid marks that fill the response completely.
- Make no stray marks on this form.

CORRECT: ● INCORRECT:    

Section One: Your Managed Long Term Care Plan

The following questions ask about your experience with your managed long-term care plan

1. Does the health plan explain all of their services to you clearly?

- ① Always
- ② Usually
- ③ Sometimes
- ④ Never
- ⑤ Don't know or not sure

2. Are you involved in making decisions about your plan of care?

- ① Always
- ② Usually
- ③ Sometimes
- ④ Never
- ⑤ Don't know or not sure

3. Have you, a family member, or your caregiver ever called the plan with questions or for help?

- ① Yes
- ② No (Skip to question #7)

4. Were you able to speak with a person quickly?

- ① Always
- ② Sometimes
- ③ Never

5a. Were your questions answered quickly?

- ① Always
- ② Sometimes
- ③ Never

5b. Were you able to understand the answers?

- ① Always
- ② Sometimes
- ③ Never

6. Were you treated with politeness and respect?

- ① Always
- ② Sometimes
- ③ Never

7. Have you, a family member, or your caregiver ever called the plan with a complaint or grievance?

- ① Yes
- ② No (Skip to question #11)

8. Was the complaint or grievance responded to in a timely manner?

- ① Always
- ② Sometimes
- ③ Never

9. Were you satisfied with the response?

- ① Always
- ② Sometimes
- ③ Never

10. Were you treated with politeness and respect?

- ① Always
- ② Sometimes
- ③ Never

11. Do you feel that your managed long-term care plan has helped you or your family to better manage your illnesses since you joined your plan?

- ① Yes
- ② No
- ③ About the same

12. Would you recommend your managed long-term care plan to others?

- ① Yes
- ② No

13. Overall, how would you rate your managed long-term care plan?

- ① Excellent
- ② Good
- ③ Fair
- ④ Poor

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Section Two: Your Care Providers

A) Quality of your Care Providers

Please rate the providers and services you receive or have received within the last 6 months. Please rate the service even if it is not covered, or paid for, by your managed long-term care plan.

Please note that we are asking that you rate the quality of these services or supplies. There are questions for timeliness (how quickly you receive these services) later in the survey.

In some plans, the care manager (19) and the visiting nurse (20a) may be the same person. If they are, rate the person under BOTH Care Manager and Visiting Nurse.

Please mark "Not Applicable" if you've never used the provider or service.

14. Your regular doctor

15. Dentist

16. Eye Care (Having your eyes checked and getting glasses or contact lenses)

17. Foot Doctor

18a. Home Health AIDE, Personal Care AIDE (aide that comes to your house to take care of you)

18b. Home Health AGENCY, Personal Care AGENCY (company that your home health aide works for)

19. Care Manager / Case Manager (person who prepares your plan of care)

	POOR	FAIR	GOOD	EXCELLENT	NOT APPLICABLE
14. Your regular doctor	1	2	3	4	5
15. Dentist	1	2	3	4	5
16. Eye Care (Having your eyes checked and getting glasses or contact lenses)	1	2	3	4	5
17. Foot Doctor	1	2	3	4	5
18a. Home Health AIDE, Personal Care AIDE (aide that comes to your house to take care of you)	1	2	3	4	5
18b. Home Health AGENCY, Personal Care AGENCY (company that your home health aide works for)	1	2	3	4	5
19. Care Manager / Case Manager (person who prepares your plan of care)	1	2	3	4	5

20a. Regular Visiting Nurse / Registered Nurse (comes to your house for regular visits)

20b. Covering / On Call Nurse (comes to your house when your regular nurse can not come)

21. Physical Therapist

22. Occupational Therapist

23. Speech Therapist

24. Social Worker

25. Medical Supplies and Equipment (Wheelchairs, Diapers etc.)

26. Audiology / Hearing Aids

27. Home Delivered Meals / Meals on Wheels

28. Meals served at the Day Health Center

29. Day Health Center Activities

30. Transportation Services

31. Nursing Home

32. Pharmacy Services

33. Nutritionist

	POOR	FAIR	GOOD	EXCELLENT	NOT APPLICABLE
20a. Regular Visiting Nurse / Registered Nurse (comes to your house for regular visits)	1	2	3	4	5
20b. Covering / On Call Nurse (comes to your house when your regular nurse can not come)	1	2	3	4	5
21. Physical Therapist	1	2	3	4	5
22. Occupational Therapist	1	2	3	4	5
23. Speech Therapist	1	2	3	4	5
24. Social Worker	1	2	3	4	5
25. Medical Supplies and Equipment (Wheelchairs, Diapers etc.)	1	2	3	4	5
26. Audiology / Hearing Aids	1	2	3	4	5
27. Home Delivered Meals / Meals on Wheels	1	2	3	4	5
28. Meals served at the Day Health Center	1	2	3	4	5
29. Day Health Center Activities	1	2	3	4	5
30. Transportation Services	1	2	3	4	5
31. Nursing Home	1	2	3	4	5
32. Pharmacy Services	1	2	3	4	5
33. Nutritionist	1	2	3	4	5

B) Timeliness

In the last 6 months please rate how often the following services were on time or if you were able to see the provider at the scheduled time.

In some plans, the care manager (35) and the visiting nurse (36a) may be the same person. If they are, rate the person under BOTH Care Manager and Visiting Nurse.

Please mark "Not Applicable" if you have not used the service or seen the provider in the last 6 months.

	ALWAYS	USUALLY	SOMETIMES	NEVER	NOT APPLICABLE
34. Home Health Aide, Personal Care Aide	①	②	③	④	⑤
35. Care Manager / Case Manager (person who prepares your plan of care)	①	②	③	④	⑤
36a. Regular Visiting Nurse / Registered Nurse (comes to your house for regular visits)	①	②	③	④	⑤
36b. Covering / On Call Nurse (comes to your house when your regular nurse can not come)	①	②	③	④	⑤
37. Physical Therapist	①	②	③	④	⑤
38. Occupational Therapist	①	②	③	④	⑤
39. Speech Therapist	①	②	③	④	⑤
40. Social Worker	①	②	③	④	⑤
41. Home Delivered Meals / Meals on Wheels	①	②	③	④	⑤
42. Transportation:					
a. TO Day Center	①	②	③	④	⑤
b. FROM Day Center	①	②	③	④	⑤
c. TO the doctor	①	②	③	④	⑤
d. FROM the doctor	①	②	③	④	⑤
43. Medical Supplies and Equipment (Wheelchairs, Diapers etc.)	①	②	③	④	⑤
44. Pharmacy Services	①	②	③	④	⑤

C) Access

In the last 6 months, when you called for a REGULAR APPOINTMENT, how long did you generally have to wait between making an appointment and seeing providers?

Please mark "Not Applicable" if you have not scheduled an appointment in the last 6 months with any of the providers or if your plan schedules regular appointments for you.

	LESS THAN 1 MONTH	1 TO 3 MONTHS	LONGER THAN 3 MONTHS	NOT APPLICABLE
45. Your regular doctor	①	②	③	④
46. Dentist	①	②	③	④
47. Eye Care (Having your eyes checked and getting glasses or contact lenses)	①	②	③	④
48. Foot Doctor	①	②	③	④

In the last 6 months, when you needed care RIGHT AWAY, how long did you usually have to wait between trying to get care and actually seeing providers?

Please mark "Not Applicable" if you have not required urgent care in the last 6 months.

	SAME DAY	1 TO 3 DAYS	4 DAYS OR LONGER	NOT APPLICABLE
49. Your regular doctor	①	②	③	④
50. Dentist	①	②	③	④
51. Eye Care (Having your eyes checked and getting glasses or contact lenses)	①	②	③	④
52. Foot Doctor	①	②	③	④

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Section Three: About You

53. How would you rate your current state of health?

- ① Very poor
- ② Poor
- ③ Fair
- ④ Good
- ⑤ Very good

54. What is your gender?

- ① Male
- ② Female

55. What is your age?

- ① 18 - 44
- ② 45 - 64
- ③ 65 - 74
- ④ 75 - 84
- ⑤ over 85

56a. Are you of Hispanic or Latino origin or descent?

- ① Yes, Hispanic or Latino
- ② No, not Hispanic or Latino

56b. What is your race (MARK ALL THAT APPLY)

- ① American Indian or Alaska Native
- ② Asian
- ③ Black or African American
- ④ Native Hawaiian or Pacific Islander
- ⑤ White
- ⑥ Other _____

57. Primary language spoken at home? (CHOOSE ONLY ONE)

- ① English
- ② Spanish
- ③ Russian
- ④ Chinese
- ⑤ Other _____

58. Education level completed?

- ① 8th grade or less
- ② Some high school, but did not graduate
- ③ High school graduate or GED
- ④ Some college or 2 year degree
- ⑤ 4-year college graduate
- ⑥ More than 4 year college degree

59. Where do you live?

- ① At home
- ② Nursing home (skip to question #61)

60. Do you live?

- ① Alone
- ② With a family member or friend
- ③ With other than a family member or friend

61. Did someone help you to complete this survey?

- ① Yes (skip to question #62)
- ② No (You are done!)

62. Who helped you (MARK ALL THAT APPLY)

- ① Family member
- ② Friend
- ③ Home Care Aide
- ④ Care Manager or Visiting Nurse
- ⑤ Other _____

63. How did this person help you? (MARK ALL THAT APPLY)

- ① Read the questions to me
- ② Wrote down the answers that I gave
- ③ Answered the questions for me
- ④ Translated into my language
- ⑤ Helped in some other way

Thank you for participating in this survey

Please return the survey to IPRO in the enclosed postage-paid envelope at your earliest convenience