# 2003 CAHPS® 3.0H ADULT MEDICAID MEMBER SATISFACTION SURVEY

**Plan-Specific Report** 



# COLORADO MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

**State of Colorado Medicaid Program** 

June 30, 2003



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### **Executive Summary**

The State of Colorado requires annual administration of the Consumer Assessment of Health Plans (CAHPS®) 3.0H survey of all health plans serving Medicaid beneficiaries. The Colorado Department of Health Care Policy and Financing (DHCPF) contracts with Health Services Advisory Group (HSAG) as the External Quality Review Organization (EQRO) to administer and report the results of the CAHPS® 3.0H survey. This report is one of two health plan specific documents reporting the results of the 2003 CAHPS® 3.0H Adult Medicaid survey for plans in the Colorado Medicaid program. Adult members from each health plan completed the survey during the period of January through April 2003. All of the health plan members sampled received an English version of the survey with the option to complete the survey by telephone in Spanish.

The Colorado Medicaid program average number of returned surveys was 541. The results for **Colorado Medicaid's Primary Care Physician Program (PCPP)**<sup>2</sup> presented in this report are based on 562 completed surveys. This represents a response rate of 41.48 percent. The distribution of survey dispositions and response rate for Colorado Medicaid's PCPP are presented in detail on page A14.

#### **OVERALL MEMBER SATISFACTION**

Table A1 depicts your health plan's overall member satisfaction ratings on four global measures. The star assignments are based on the National Committee for Quality Assurance (NCQA) 2003 CAHPS® 3.0H Benchmarks. A detailed description of the methodology used to derive the star ratings for the global ratings can be found in the Methodology section on page C14.

Table A1 Overall Member Satisfaction Ratings on Global Measures						
		RATING OF HEALTH PLAN	RATING OF ALL HEALTH CARE	RATING OF PERSONAL DOCTOR	RATING OF SPECIALIST	
Colorado Medio	caid's PCPP	***	****	**	***	
What do the stars represent?  Best Very Good Good Fair Poor Not Applicable  ★★★★★ ★★★★ ★★★ ★★						
Please note, star ratings are based on scores of 562 Colorado Medicaid's PCPP adult members who completed the CAHPS <sup>®</sup> 3.0H Adult Medicaid survey. For the Medicaid product line a minimum of 100 responses for the global ratings is required in order to be reported as CAHPS <sup>®</sup> survey results. Global ratings that do not meet the minimum number of responses are denoted as Not Applicable (NA).						

<sup>&</sup>lt;sup>1</sup> CAHPS<sup>®</sup> is a registered trademark of the Agency for Healthcare Research and Quality.

<sup>&</sup>lt;sup>2</sup> For purposes of this report, Colorado Medicaid's PCPP is referred to as "your plan."

Table A2 depicts your health plan's overall member satisfaction ratings on five composite scores. The star assignments are based on the NCQA 2003 CAHPS $^{\text{@}}$  3.0H Benchmarks. A detailed description of the methodology used to derive the star ratings for the composite scores can be found in the Methodology section on page C14.

Table A2 Overall Member Satisfaction Ratings on Composite Scores					S	
	GETTING NEEDED CARE QUICKLY COMMUNICATE COURTEOUS & HELPFUL OFFICE STAFF  COUNTEOUS & HELPFUL OFFICE SERVICE					
Colorado Medica	aid's PCPP	***	***	***	***	NA
What do the standard Best ★★★★★	rs represent Very Goo			Fair P ★★	oor No <b>☆</b>	t Applicable

Please note, star ratings are based on scores of 562 Colorado Medicaid's PCPP adult members who completed the CAHPS® 3.0H Adult Medicaid survey. For the Medicaid product line a minimum of 100 responses for the composite scores is required in order to be reported as CAHPS® survey results. Composite scores that do not meet the minimum number of responses are denoted as Not Applicable (NA).

Table A3 depicts Colorado Medicaid's PCPP's 2003 results on the four global ratings. The results are presented on a three point scale and include the variance and 95% confidence interval [95% CI]. The 2003 Colorado Medicaid weighted averages and the 2002 NCQA National Adult Medicaid averages are presented for comparative purposes.<sup>3</sup> Interpretation of these results requires an understanding of sampling error, a detailed description of which can be found in the Reader's Guide (section B). Additional information on the scoring of the global measures can be found in the Methodology (section C).

TABLE A3 SUMMARY OF CAHPS® 3.0H ADULT MEDICAID GLOBAL RATINGS						
Measure of Member Satisfaction	2003 COLORADO MEDICAID'S PCPP MEAN RATING (VARIANCE) [95% CI]	2003 COLORADO MEDICAID WEIGHTED MEAN RATING (VARIANCE) [95% CI]	2002 NCQA National Adult Medicaid Mean Rating			
Rating of Health Plan	2.414 (0.5605) [2.351 - 2.477]	2.366 (0.6118) [2.318 - 2.414]	2.310			
Rating of All Health Care	2.438 (0.5396) [2.373 - 2.504]	2.430 (0.5459) [2.380 - 2.479]	2.349			
Rating of Personal Doctor	2.424 (0.5703) [2.356 - 2.492]	2.448 (0.5419) [2.399 - 2.496]	2.451			
Rating of Specialist	2.512 (0.5038) [2.425 - 2.599]	2.445 (0.5654) [2.377 - 2.512]	2.431			

Please note, for the Medicaid product line a minimum of 100 responses for the global ratings is required in order to be reported as CAHPS® survey results. Global ratings that do not meet the minimum number of responses are denoted as Not Applicable (NA).

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<sup>&</sup>lt;sup>3</sup> NCQA national Medicaid data for 2003 were not available at the time this report was prepared.

Table A4 depicts Colorado Medicaid's PCPP's 2003 results on the five composite scores. The results are presented on a three point scale and include the variance and 95% confidence interval. The 2003 Colorado Medicaid weighted averages and the 2002 NCQA National Adult Medicaid averages are presented for comparative purposes.<sup>4</sup> As was the case with the interpretation of the global ratings, the interpretation of the composite scores requires an understanding of sampling error, a detailed description of which can be found in the Reader's Guide (section B). Additional information on the scoring of the composite scores can be found in the Methodology (section C).

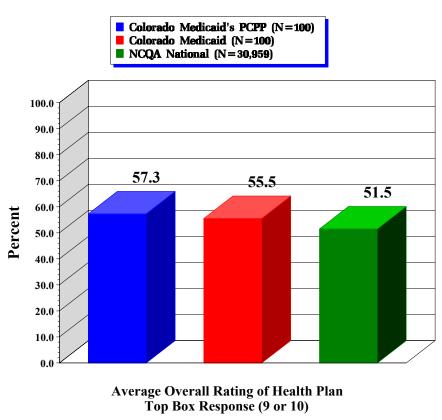
TABLE A4 SUMMARY OF CAHPS® 3.0H ADULT MEDICAID COMPOSITE SCORES						
Measure of Member Satisfaction	2003 Colorado Medicaid's PCPP Mean Score (Variance) [95% CI]	2003 COLORADO MEDICAID WEIGHTED MEAN SCORE (VARIANCE) [95% CI]	2002 NCQA National Adult Medicaid Mean Score			
Getting Needed Care	2.641 (0.0005) [2.598 - 2.685]	2.656 (0.0003) [2.624 - 2.688]	Not Trendable			
Getting Care Quickly	2.273 (0.0008) [2.218 - 2.327]	2.262 (0.0004) [2.223 - 2.302]	Not Trendable			
How Well Doctors Communicate	2.486 (0.0007) [2.434 - 2.539]	2.491 (0.0004) [2.452 - 2.529]	2.462			
Courteous and Helpful Office Staff	2.573 (0.0008) [2.518 - 2.628]	2.591 (0.0004) [2.551 - 2.631]	2.539			
Customer Service	NA	2.332 (0.0023) [2.238 - 2.425]	2.570			

2002 NCQA National Adult Medicaid Means for "Getting Needed Care" and "Getting Care Quickly" are not trendable due to changes to these composites in 2003. Please note, for the Medicaid product line a minimum of 100 responses for the composite scores is required in order to be reported as CAHPS® survey results. Composite scores that do not meet the minimum number of responses are denoted as Not Applicable (NA).

<sup>&</sup>lt;sup>4</sup> NCQA national Medicaid data for 2003 were not available at the time this report was prepared.

Figure A1 illustrates the top satisfaction rating (rating of "9 or 10" on a scale of "0 to 10") for overall "Rating of Health Plan" surveyed in 2003. The weighted average for the Colorado Medicaid program reflects the relative number of respondents in each of the two Medicaid health plans. The figure enables you to compare member satisfaction with Colorado Medicaid's PCPP to the 2003 Colorado Medicaid Adult Medicaid weighted average and the 2002 NCQA National Adult Medicaid average.<sup>5</sup>

FIGURE A1
OVERALL RATING OF HEALTH PLAN



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<sup>&</sup>lt;sup>5</sup> NCQA national Medicaid data for 2003 were not available at the time this report was prepared.

#### **SUMMARY RATES AND PROPORTIONS**

#### Global Ratings

A question summary rate is calculated for each global rating question. Tables A5 and A6 present the question summary rates and 95% confidence intervals for the global ratings questions. The mean question summary rates represent the percentage of respondents providing a "top box" response. Prior to the 2002 CAHPS® survey administration, a "top box" response was defined as a response value of "8, 9, or 10." Beginning in 2002, NCQA defined a "top box" response as a response value of "9 or 10." For comparative purposes to prior years' data, 2003 question summary rates are presented using the old "8, 9, or 10" top box scoring methodology (Table A5 below) and the new "9 or 10" top box scoring methodology (Table A6 on page A7). For additional information on the calculation of question summary rates, please refer to the Methodology (section C).

TABLE A5 QUESTION SUMMARY RATES FOR THE GLOBAL RATINGS QUESTIONS USING "8, 9, OR 10" TOP BOX SCORING					
2003   2003   2002     2002					
Rating of Health Plan (8, 9, or 10)	73.1% [69.4% - 76.8%]	70.6% [67.8% - 73.4%]	69.2%		
Rating of All Health Care (8, 9, or 10)	76.0% [72.2% - 79.8%]	75.1% [72.2% - 77.9%]	71.6%		
Rating of Personal Doctor (8, 9, or 10)	75.9% [72.1% - 79.8%]	75.2% [72.4% - 78.0%]	76.6%		
Rating of Specialist (8, 9, or 10)	79.1% [74.1% - 84.1%]	74.5% [70.6% - 78.4%]	75.5%		

Please note, for the Medicaid product line a minimum of 100 responses for the composite scores is required in order to be reported as  $CAHPS^{\otimes}$  survey results. Composite scores that do not meet the minimum number of responses are denoted as Not Applicable (NA).

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<sup>&</sup>lt;sup>6</sup> "Top box" responses receive a score of 1; all other responses receive a score of 0 (refer to the Methodology, section C for more details).

<sup>&</sup>lt;sup>7</sup> National Committee for Quality Assurance. *HEDIS*<sup>®</sup> 2002, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2001.

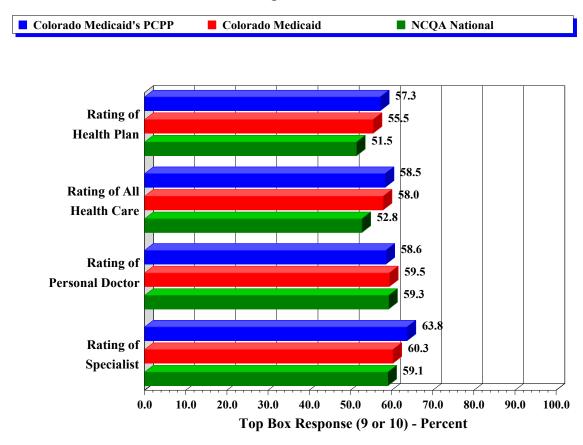
# TABLE A6 QUESTION SUMMARY RATES FOR THE GLOBAL RATINGS QUESTIONS USING "9 OR 10" TOP BOX SCORING

Measure of Member Satisfaction	2003 COLORADO MEDICAID'S PCPP GLOBAL PROPORTION [95% CI]	2003 COLORADO MEDICAID GLOBAL PROPORTION [95% CI]	2002 NCQA NATIONAL ADULT MEDICAID GLOBAL PROPORTION
Rating of Health Plan (9 or 10)	57.3% [53.1% - 61.4%]	55.5% [52.5% - 58.6%]	51.5%
Rating of All Health Care (9 or 10)	58.5% [54.0% - 62.9%]	58.0% [54.7% - 61.3%]	52.8%
Rating of Personal Doctor (9 or 10)	58.6% [54.2% - 63.1%]	59.5% [56.3% - 62.7%]	59.3%
Rating of Specialist (9 or 10)	63.8% [57.9% - 69.7%]	60.3% [55.9% - 64.7%]	59.1%

Please note, for the Medicaid product line a minimum of 100 responses for the composite scores is required in order to be reported as CAHPS® survey results. Composite scores that do not meet the minimum number of responses are denoted as Not Applicable (NA).

Figure A2 depicts the "top box" question summary rates for Colorado Medicaid's PCPP, the Colorado Medicaid program, and the NCQA National Adult Medicaid total utilizing "9 or 10" top box scoring.<sup>8</sup>

FIGURE A2
GLOBAL RATINGS: QUESTION SUMMARY RATES



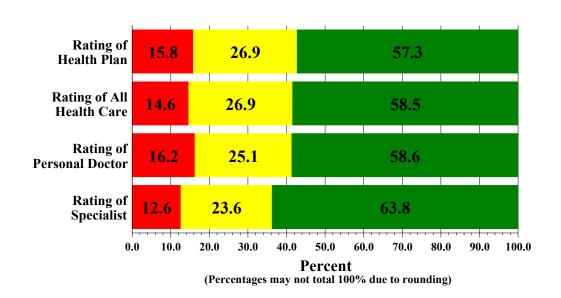
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<sup>&</sup>lt;sup>8</sup> NCQA national Medicaid data for 2003 were not available at the time this report was prepared.

For each global rating question, responses were also classified into "satisfied," "neutral," and "dissatisfied" categories. A response of 9 or 10 was classified as "satisfied," whereas a response of 7 or 8 was classified as "neutral," and a response of 0 to 6 as "dissatisfied." Figure A3 depicts the proportion of respondents satisfied, neutral, or dissatisfied on each global rating question for Colorado Medicaid's PCPP.

FIGURE A3
GLOBAL RATINGS: PROPORTION SATISFIED, NEUTRAL, OR DISSATISFIED





#### Composite Scores

A global proportion is calculated for each composite score. Tables A7 and A8 present the global proportions and 95% confidence intervals for each of the composite measures. The proportions are based on the percentage of respondents providing a "top box" response. Prior to the 2002 CAHPS® survey administration, a "top box" response was defined as a response of "Usually or Always" for the Getting Care Quickly, How Well Doctors Communicate, and Courteous and Helpful Office Staff composites. Beginning in 2002, NCQA defined a "top box" response on these composites as a response of "Always." The "top box" response for the Getting Needed Care and Customer Service composites did not change. A response of "Not a problem" is considered a top box response on these two composites. For comparative purposes to prior years' data, 2003 global proportions are presented using the old "Usually or Always" top box scoring methodology (Table A7 below) and the new "Always" top box scoring methodology (Table A8 on page A11). For additional information on the calculation of global proportions for each composite score, please refer to the Methodology (section C).

TABLE A7 GLOBAL PROPORTIONS FOR THE COMPOSITE SCORES USING "NOT A PROBLEM" AND "USUALLY OR ALWAYS" TOP BOX SCORING					
Measure of Member Satisfaction	2003 COLORADO MEDICAID'S PCPP GLOBAL PROPORTION [95% CI]	2003 COLORADO MEDICAID GLOBAL PROPORTION [95% CI]	2002 NCQA NATIONAL ADULT MEDICAID GLOBAL PROPORTION		
Getting Needed Care (Not a Problem)	73.7% [70.9% - 76.6%]	74.7% [72.6% - 76.9%]	Not Trendable		
Getting Care Quickly (Usually or Always)	78.7% [76.0% - 81.4%]	78.0% [76.1% - 80.0%]	Not Trendable		
How Well Doctors Communicate (Usually or Always)	87.8% [85.5% - 90.1%]	88.2% [86.5% - 89.9%]	85.8%		
Courteous and Helpful Office Staff (Usually or Always)	90.0% [87.5% - 92.5%]	90.2% [88.4% - 92.0%]	88.2%		
Customer Service (Not a Problem)	NA	51.0% [44.7% - 57.3%]	67.2%		

2002 NCQA National Adult Medicaid Global Proportions for "Getting Needed Care" and "Getting Care Quickly" are not trendable due to changes to these composites in 2003. Please note, for the Medicaid product line a minimum of 100 responses for the composite scores is required in order to be reported as CAHPS® survey results. Composite scores that do not meet the minimum number of responses are denoted as Not Applicable (NA).

<sup>&</sup>lt;sup>9</sup> "Top box" responses receive a score of 1; all other responses receive a score of 0 (refer to the Methodology, section C for more details).

<sup>&</sup>lt;sup>10</sup> National Committee for Quality Assurance. *HEDIS® 2002, Volume 3: Specifications for Survey Measures.* Washington, DC: NCQA Publication, 2001.

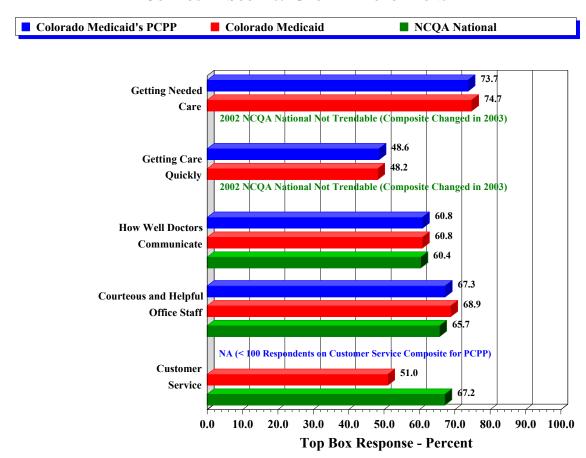
# TABLE A8 GLOBAL PROPORTIONS FOR THE COMPOSITE SCORES USING "NOT A PROBLEM" AND "ALWAYS" TOP BOX SCORING

Measure of Member Satisfaction	2003 COLORADO MEDICAID'S PCPP GLOBAL PROPORTION [95% CI]	2003 COLORADO MEDICAID GLOBAL PROPORTION [95% CI]	2002 NCQA NATIONAL ADULT MEDICAID GLOBAL PROPORTION
Getting Needed Care (Not a Problem)	73.7% [70.9% - 76.6%]	74.7% [72.6% - 76.9%]	Not Trendable
Getting Care Quickly (Always)	48.6% [45.1% - 52.0%]	48.2% [45.7% - 50.7%]	Not Trendable
How Well Doctors Communicate (Always)	60.8% [57.2% - 64.4%]	60.8% [58.1% - 63.5%]	60.4%
Courteous and Helpful Office Staff (Always)	67.3% [63.6% - 71.0%]	68.9% [66.2% - 71.5%]	65.7%
Customer Service (Not a Problem)	NA	51.0% [44.7% - 57.3%]	67.2%

2002 NCQA National Adult Medicaid Global Proportions for "Getting Needed Care" and "Getting Care Quickly" are not trendable due to changes to these composites in 2003. Please note, for the Medicaid product line a minimum of 100 responses for the composite scores is required in order to be reported as CAHPS® survey results. Composite scores that do not meet the minimum number of responses are denoted as Not Applicable (NA).

Figure A4 depicts the composite score global proportions for Colorado Medicaid's PCPP, the Colorado Medicaid program, and the NCQA National Adult Medicaid total using "Not a Problem" and "Always" top box scoring.<sup>11</sup>

FIGURE A4
COMPOSITE SCORES: GLOBAL PROPORTIONS

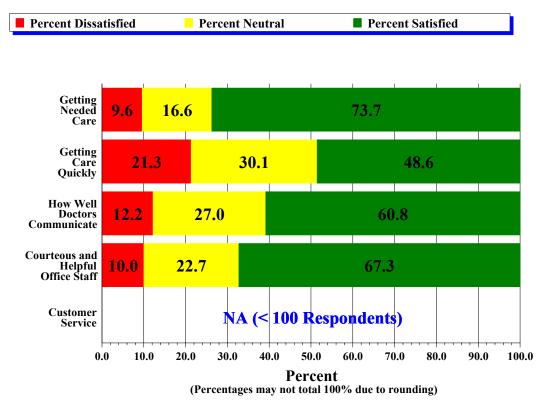


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<sup>&</sup>lt;sup>11</sup> NCQA national Medicaid data for 2003 were not available at the time this report was prepared.

For each question within a composite, responses were also classified into "satisfied," "neutral," and "dissatisfied" categories. A response of "Not a problem" or "Always" was classified as "satisfied," whereas a response of "A small problem" or "Usually" was classified as "neutral," and a response of "A big problem" or "Sometimes/Never" was classified as "dissatisfied." Figure A5 depicts the proportion of respondents satisfied, neutral, or dissatisfied on each composite measure for Colorado Medicaid's PCPP.

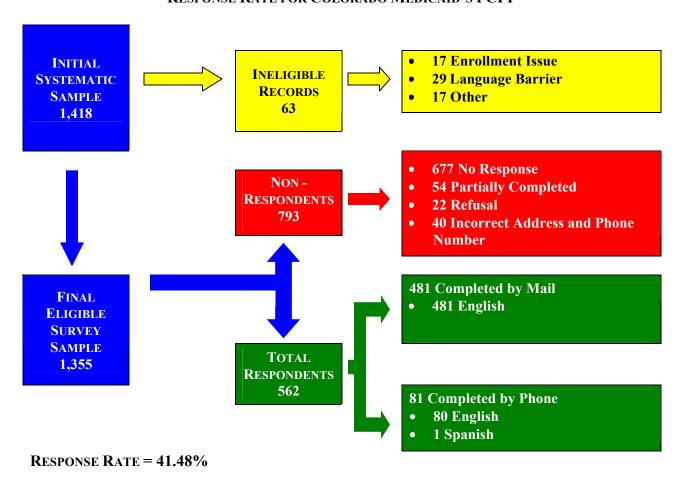
FIGURE A5
COMPOSITE SCORES: PROPORTION SATISFIED, NEUTRAL, OR DISSATISFIED



#### RESPONSE RATES

A member's survey is assigned a disposition code of "completed survey" when question #1 and 80 percent of the total pertinent questions are answered. Questions that are appropriately skipped (i.e., item is skipped per skip pattern instructions) do not count against the required 80 percent. Response rates were calculated for each plan using the "completed survey" definition. The response rate is equal to the total number of respondents divided by the final eligible survey sample. Prior to the 2002 survey administration, NCQA classified surveys with "incorrect addresses and phone numbers" as ineligible; however, beginning in 2002, "incorrect addresses and phone numbers" were included in the non-respondent category. This change in protocol by NCQA results in lower response rates. Therefore, caution should be exercised when comparing 2003 response rates to response rates from prior to 2002. Figure A6, below, depicts the distribution of survey dispositions and response rate for your plan. For additional information on the calculation of response rates, please refer to the Data Analysis subsection of the Methodology (section C).

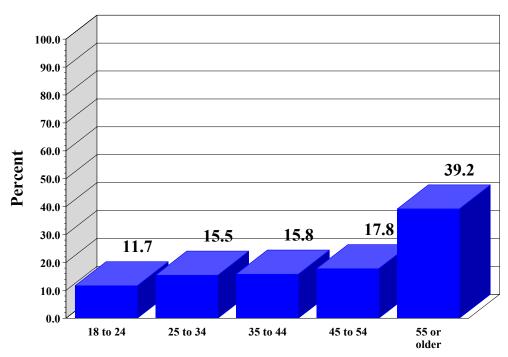
FIGURE A6
DISTRIBUTION OF SURVEY DISPOSITIONS AND THE
RESPONSE RATE FOR COLORADO MEDICAID'S PCPP



#### RESPONDENT DEMOGRAPHICS

The following figures, A7 – A12, depict the demographic characteristics of the members who completed the CAHPS® 3.0H Adult Medicaid survey in Colorado Medicaid's PCPP. In general, the demographics of a response group influence the overall results. For example, older and healthier members tend to report higher levels of satisfaction. NCQA does not recommend case mix adjusting CAHPS® results to account for these differences.

### FIGURE A7 DISTRIBUTION OF AGE IN YEARS FOR COLORADO MEDICAID'S PCPP



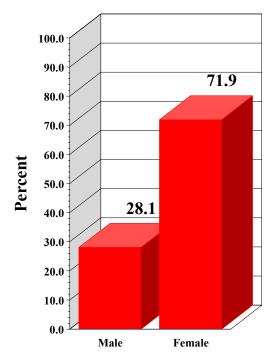
Colorado Medicaid's PCPP, N = 556 (Percentages may not total 100% due to rounding)

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<sup>&</sup>lt;sup>12</sup> Agency for Health Care Policy and Research. *CAHPS*<sup>™</sup> *2.0 Survey and Reporting Kit.* Rockville, MD: US Department of Health and Human Services, October 1999.

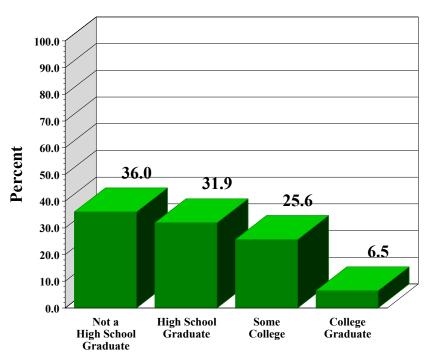
<sup>&</sup>lt;sup>13</sup> Agency for Health Care Policy and Research. "Article 3: NCQA's Use of the CAHPS® Survey." *CAHPS® 3.0 Survey and Reporting Kit.* Rockville, MD: US Department of Health and Human Services, October 2002.

FIGURE A8
DISTRIBUTION OF GENDER FOR
COLORADO MEDICAID'S PCPP



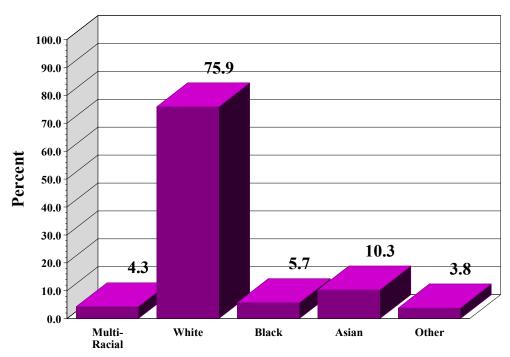
Colorado Medicaid's PCPP, N = 559 (Percentages may not total 100% due to rounding)

FIGURE A9
DISTRIBUTION OF EDUCATION FOR
COLORADO MEDICAID'S PCPP



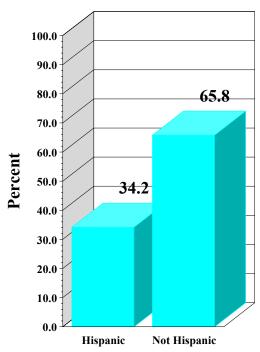
Colorado Medicaid's PCPP, N = 542 (Percentages may not total 100% due to rounding)

## FIGURE A10 DISTRIBUTION OF RACE/ETHNICITY FOR COLORADO MEDICAID'S PCPP



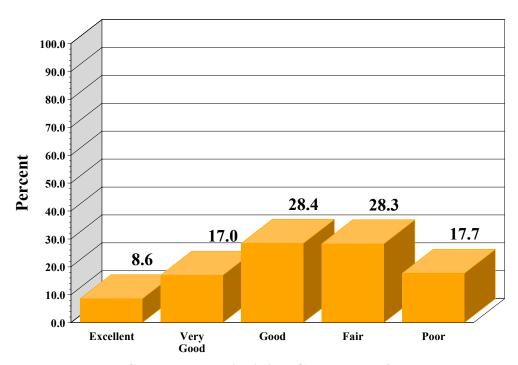
Colorado Medicaid's PCPP, N = 419 (Percentages may not total 100% due to rounding)

## FIGURE A11 DISTRIBUTION OF HISPANIC ETHNICITY FOR COLORADO MEDICAID'S PCPP



Colorado Medicaid's PCPP, N = 544 (Percentages may not total 100% due to rounding)

FIGURE A12
DISTRIBUTION OF REPORTED HEALTH STATUS FOR
COLORADO MEDICAID'S PCPP



Colorado Medicaid's PCPP, N = 559 (Percentages may not total 100% due to rounding)

#### DISCUSSION

The opportunity to compare CAHPS® data provides valuable information about a health plan's performance. The data presented in this report will enable a health plan to compare its results to the Colorado Adult Medicaid average and the NCQA Adult Medicaid national average (if available).

The psychometric properties of the CAHPS® Adult Medicaid survey instrument have been thoroughly documented. The CAHPS® 0 to 10 overall rating of the health plan item correlates strongly with an adult Medicaid beneficiary's willingness to recommend the plan to family or friends (r = 0.75, p < 0.01), and intention to sign up for the plan if given a choice of plans (r = 0.77, p < 0.01). <sup>14</sup>

The nine measures included in the Adult Medicaid version of CAHPS® 3.0H assess different aspects of care. Health plans can use these measures to identify areas requiring quality improvement. Once quality improvement activities are implemented, the nine measures can be used to assess the efficacy of the quality improvement activities. Recommendations based on Colorado Medicaid's PCPP's 2003 Adult Medicaid CAHPS® results are provided on page A26.

In addition to examining the global ratings and composite scores, it is strongly recommended that plans carefully study the results of each question. Examining the results of each question may assist in identifying particular areas requiring quality improvement. The question specific responses for your plan are included on the accompanying CD-ROM (section E).

For additional information on interpreting CAHPS® results, please refer to the Report Interpretation subsection of the Reader's Guide in this report (section B).

<sup>&</sup>lt;sup>14</sup> Hays RD, *et al.* Psychometric properties of the CAHPS 1.0 survey measures: Consumer Assessment of Health Plans Study. *Medical Care.* 1999; 37(3 Suppl): MS22-31.

#### RECOMMENDATIONS

A series of recommendations have been compiled based on Colorado Medicaid's PCPP's First, recommendations for the global ratings are presented. These recommendations recommendations for composite are followed by the scores. Recommendations are grouped into three main categories for quality improvement: high, moderate, and low priority. The priority of the recommendations is based on a plan's overall member satisfaction (star) ratings. The following is a list of priority assignments based on overall member satisfaction ratings.

- $\rightarrow$  High Priority overall member satisfaction of one ( $\bigstar$ ) to two ( $\bigstar\star$ ) stars
- ➤ Moderate Priority overall member satisfaction of three (★★★) to four (★★★★) stars or Not Applicable (NA)
- ➤ Low Priority overall member satisfaction of five (★★★★★) stars

#### Rating of Health Plan

As depicted in Table A1, on page A1, Colorado Medicaid's PCPP Adult Medicaid members' overall rating of their health plan was between the 75th and 90th percentiles (four stars) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, this overall rating is principally driven by member perception of both health plan and physician office operations.

Health plan operations include those services provided by the health plan directly:

- > distribution of information about the plan
- > customer service
- > identification of a provider

Physician office operations cover all activities that take place in physician offices:

- > scheduling of routine appointments
- > obtaining interpreters
- > member satisfaction with their physicians

In order to improve your plan's overall health plan rating, quality improvement activities should target both health plan operations and physician office operations.

<sup>&</sup>lt;sup>15</sup> National Committee for Quality Assurance. *HEDIS/CAHPS*<sup>®</sup> 3.0H Benchmarks and Thresholds for Accreditations 2003. Washington, DC: NCQA, March 24, 2003.

#### Rating of All Health Care

As depicted in Table A1, on page A1, Colorado Medicaid's PCPP Adult Medicaid members' overall rating of their health care was between the 75th and 90th percentiles (four stars) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, rating of physicians, perception of access to care, experience with care, and experience with the health plan principally drive this overall rating. The rating of physicians includes the overall satisfaction with both personal doctors and specialists.

#### Access to care issues include:

- > problems obtaining the care that the member and/or physician thought was necessary
- > problems obtaining urgent care in a timely fashion
- > problems finding a personal doctor
- > difficulty receiving assistance when calling physician offices

#### Experience with care issues include:

- > receiving ample time with the physician
- having questions and concerns addressed by the physician
- > receiving understandable and useful information from the physician
- being provided care in a timely fashion

#### Experience with the health plan issues include:

- > receiving accurate and understandable information from the plan
- > receiving adequate customer service
- > avoiding problems with health plan paperwork

In order to improve your plan's overall health care rating, quality improvement activities should target member satisfaction with physicians, member perception of access to care, experience with care, and experience with the health plan.

#### Rating of Personal Doctor

As depicted in Table A1, on page A1, Colorado Medicaid's PCPP Adult Medicaid members' overall rating of their personal doctor was between the 25th and 50th percentiles (two stars) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *High* Priority for Improvement. At the member level, communication and waiting time issues principally drive this rating.

#### Communication issues include:

- being treated with courtesy and respect
- being listened to carefully
- > receiving clear explanations

#### Waiting time issues include:

> getting needed care as soon as desired

In order to improve your plan's rating of the personal doctor, quality improvement activities should target being treated with courtesy and respect, being listened to carefully, receiving clear explanations, and getting needed care as soon as desired.

#### Rating of Specialist

As depicted in Table A1, on page A1, Colorado Medicaid's PCPP Adult Medicaid members' overall rating of their specialist was between the 75th and 90th percentiles (four stars) based on NCQA's 2003 CAHPS<sup>®</sup> 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement.

At the member level, "red tape" issues principally drive this rating and include:

- > ease of obtaining health plan approval for the specialist visit
- > ease of obtaining a referral to see the specialist

In order to improve your plan's specialist rating, quality improvement activities should target the ease of obtaining health plan approval for the specialist visit and the ease of obtaining a referral to see the specialist.

#### Getting Needed Care

As depicted in Table A2, on page A2, Colorado Medicaid's PCPP Adult Medicaid members' satisfaction with getting needed care was between the 50th and 75th percentiles (three stars) based on NCQA's 2003 CAHPS<sup>®</sup> 3.0H Benchmarks.<sup>16</sup> Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, access to care issues principally drive this composite.

Access to care issues include:

- > obtaining the care a doctor believed to be necessary
- > helpfulness of office staff

Some potential causes may be attributed to resource limitations, technical limits including telephone systems, and service expectations. In order to improve your members' satisfaction with getting needed care, quality improvement activities should target obtaining the care a doctor believed to be necessary, and helpfulness of office staff. Other potential actions could include producing a flowchart of the process from the client's view from beginning to end, identifying barriers or unnecessary steps, and creating new avenues of information.

#### Getting Care Quickly

As depicted in Table A2, on page A2, Colorado Medicaid's PCPP Adult Medicaid members' satisfaction with getting care quickly was between the 50th and 75th percentiles (three stars) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, waiting time issues principally drive this composite.

Waiting time issues include:

- > waiting for an appointment for routine care
- > waiting more than 15 minutes in the doctor's office

In order to improve your members' satisfaction with getting care quickly, quality improvement activities should target waiting for an appointment for routine care, and waiting more than 15 minutes in the doctor's office.

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<sup>&</sup>lt;sup>16</sup> National Committee for Quality Assurance. *HEDIS/CAHPS*<sup>®</sup> 3.0H Benchmarks and Thresholds for Accreditations 2003. Washington, DC: NCQA, March 24, 2003.

#### How Well Doctors Communicate

As depicted in Table A2, on page A2, Colorado Medicaid's PCPP Adult Medicaid members' satisfaction with how well doctors communicate was between the 50th and 75th percentiles (three stars) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, issues involving both providing information to, and receiving information from, the provider principally drive this composite.

#### These issues include:

- > careful listening by the providers
- > clear explanations in response to questions
- > spending a sufficient amount of time during the exchange of information

Other possible causes pertaining to provider communication could be attributed to time constraints, perceptions of the clients, and differences in experience, education, culture and expectations. In order to improve your members' satisfaction with how well doctors communicate, quality improvement activities should target careful listening by the providers, clear explanations in response to questions, and spending a sufficient amount of time during the exchange of information. Other potential actions could include staff training, mentoring or coaching, direct client feedback and reviewing performance expectations and guidelines.

#### Courteous and Helpful Office Staff

As depicted in Table A2, on page A2, Colorado Medicaid's PCPP Adult Medicaid members' satisfaction with courteous and helpful office staff was between the 50th and 75th percentiles (three stars) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, face-to-face interactions with the office staff principally drive this composite.

#### These issues include:

- > perceptions of the courtesy and respect shown by the office staff
- > helpfulness of the office staff

Some potential causes pertaining to this composite could be the physical non-verbal barriers, greeting and departure rituals, and resources to assist with procedures. In order to improve your members' satisfaction with office staff courtesy and helpfulness, quality improvement activities should target perceptions of the courtesy and respect shown by the office staff and the helpfulness of the office staff. Some additional potential actions may include trouble shooting with clients, suggestion boxes and a client initiated reward or recognition system.

#### Customer Service

As depicted in Table A2, on page A2, Colorado Medicaid's PCPP Adult Medicaid members' satisfaction with customer service was not applicable (too few respondents) based on NCQA's 2003 CAHPS® 3.0H Benchmarks. Therefore, this measure is a *Moderate* Priority for Improvement. At the member level, issues involving both obtaining and understanding information from the health plan are the key drivers.

#### These issues include:

- > difficulty getting help when calling customer service
- > problems pertaining to filling out paperwork

In order to improve your members' satisfaction with customer service, quality improvement activities should target perceptions of the accessibility and usefulness of the information provided. Other potential actions could include customer service training, allowing members to voice concerns and questions via a technical support line, and updating information to account for differences in experience, education, culture and expectations.

#### **Action Planning Process**

In order to "fine-tune" quality improvement activities directed at the provided recommendations, the following four-step process is suggested:

- ① Convene a Quality Improvement (QI) work group to determine which individual survey questions will make the best targets for QI activities. Ideally, each of the global ratings and composite scores identified as High and Moderate Priorities should be addressed. However, the number of items to be addressed, as well as which specific items should be addressed, will partly depend on the plan's available resources. The work group may find it necessary to address only a subset of the High Priority items. Or, it may be the case that one or more of the lower priority items may require fewer resources to address. A work group decision to go for an "easy victory" to build support for more difficult initiatives later on may be the best strategy.
- ② Once the work group has identified its QI target questions, conduct interviews with small samples of adult Medicaid members and staff to probe further into the sources of dissatisfaction with the issues addressed by each of these questions, as well as member expectations regarding positive performance in these areas. The interviews should consist of these target questions, exactly as worded on the CAHPS® 3.0H questionnaire, as well as follow-up questions designed to probe further into the reasons for members' responses. The purpose of the interviews is qualitative not quantitative; key barriers to satisfaction will usually emerge as common themes after only a small number of interviews.
- ③ Design and implement QI activities that address the underlying problems expressed during the interviews. The rapid cycle approach to quality improvement developed by the Institute for Healthcare Improvement (IHI) is strongly recommended as a model for the work group's efforts. Details and examples of QI projects based on the IHI approach can be found at http://www.ihi.org.
- Conduct periodic follow-up interviews with small samples of adult Medicaid members to
   determine progress in improving member satisfaction. The results of these interviews will
   help to keep staff motivated between administrations of the formal CAHPS® 3.0H survey.

### Reader's Guide

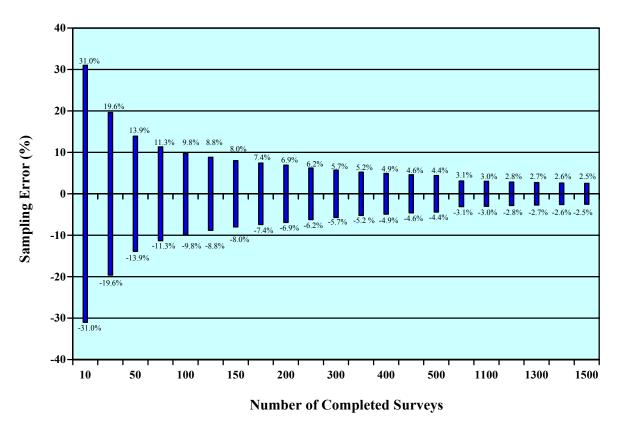
#### UNDERSTANDING SAMPLING ERROR

The interpretation of CAHPS® 3.0H results requires an understanding of sampling error, since it is generally not feasible to survey an entire health plan's population. For this reason, surveys include only a sample from the population and use statistical techniques to maximize the probability that the sample results apply to the entire population.

In order for results to be generalizable to the entire population, the sample selection process must give each person in the population an equal chance of being selected for inclusion in the study. In the CAHPS® 3.0H survey, this is accomplished by drawing a sample that randomly selects beneficiaries for inclusion from the entire health plan. This assures that no single group of beneficiaries in the sample are over-represented relative to the entire population. For example, if there was a larger number of beneficiaries surveyed between the ages of 45 to 64, it would indicate that their views had a disproportionate influence on the results over other age groups whose views were equally relevant and important.

Since every member in the health plan's total population is not surveyed, the actual percentage of satisfied beneficiaries cannot be determined. Statistical techniques are utilized to ensure that the unknown actual percentage of satisfied beneficiaries lies within a given interval, called the confidence interval, 95 percent of the time. The 95 percent confidence interval has a characteristic sampling error (sometimes called "margin of error"). For example, if the sample error of a survey is + 10 percent with a confidence interval of 95 percent, this indicates that if 100 samples were selected from the population of the same health plan, the results of these samples would be within plus or minus 10 percentage points of the results from a single sample in 95 of the 100 samples. The size of the sample error shown in Figure B1, on page B2, is based on the number of beneficiaries who completed the survey. Figure B1 indicates that if 400 plan members complete a survey, the margin of error is + 4.9 percent. Note that the calculations used in the graph assume that the size of the eligible population is greater than 2,000, as is the case with most Medicaid health plans. The smaller the number of beneficiaries completing the survey, then the larger the sampling error. Lower response rates may bias results because the proportion of beneficiaries responding to the survey may not necessarily reflect the randomness of the entire sample.

FIGURE B1
SAMPLE ERROR AND THE NUMBER OF COMPLETED SURVEYS



As Figure B1 demonstrates, sample error declines as the sample size increases. Consequently, when the sample size is very large and sampling error is very small, almost any difference is statistically significant; however, this does not indicate that such differences are important. Likewise, even if the difference between two measured rates is not statistically significant, it may be important from a health plan's perspective. The context in which the health plan data are being reviewed will influence the interpretation of results.

#### REPORT INTERPRETATION

This section of the report offers an approach to the interpretation of your health plan's results. One CAHPS® 3.0H Adult Medicaid survey instrument (in English) was mailed to those beneficiaries chosen at random from the total enrollment of a health plan as permitted by the HEDIS®/CAHPS® 3.0H methodology. This number took into account the loss of some potential respondents due to errors in enrollment status, death, etc. The goal was to obtain as high a response rate as possible. As discussed in the previous section, the fewer the number of responses, the wider the sampling error. Table B1 depicts the sampling errors for a range in the number of responses.

Table B1 Sampling Error and the Number of Survey Responses								
Number of Responses	100	150	200	250	300	350	400	500
Approximate Sampling Error (%)	<u>+</u> 9.8	<u>+</u> 8.0	<u>+</u> 6.9	<u>+</u> 6.2	<u>+</u> 5.7	<u>+</u> 5.2	<u>+</u> 4.9	<u>+</u> 4.4

It may be helpful to review how sampling error can impact the interpretation of plan results. For example, assume the state Medicaid average of 150 respondents (i.e., 8 percent sampling error) was 80 percent satisfied with their personal doctor. The true satisfaction rate ranges between 72 percent and 88 percent. If 100 of a plan's beneficiaries completed the survey and 85 percent of those completing the survey reported being satisfied with their personal doctor, it is tempting to view this difference of five percentage points between the two rates as important. However, the true satisfaction rate of the plan's respondents ranges between 77 percent and 93 percent, thereby overlapping the state Medicaid average including sample error. Whenever two measures fall within each other's sampling error, the difference may *not* be statistically significant. At the same time, lack of statistical significance is not the same as lack of importance. The significance of this five percentage point difference is open to interpretation at both the individual plan level and the state level.

After potential sampling error has been taken into consideration, it is recommended that your plan's results be compared to your state's 2003 Adult Medicaid weighted average and to the 2002 NCQA Adult Medicaid national average.<sup>1</sup> This comparison is provided in the Executive Summary section of this report (section A).

In addition to examining the global ratings and composite scores, it is strongly recommended that plans carefully study the results of each question. Question specific results for **your** health plan are included on the accompanying CD-ROM (section E).

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<sup>&</sup>lt;sup>1</sup> NCQA national Medicaid data for 2003 were not available at the time this report was prepared.

### Methodology

#### **SURVEY OVERVIEW**

The standardized survey instrument selected for the survey was the CAHPS® 3.0H Adult Medicaid survey. The CAHPS® 3.0H surveys are a set of standardized surveys that assess patient satisfaction with the experience of care. Originally, CAHPS® was a five year collaborative project sponsored by the United States Agency for Healthcare Research and Quality (AHRQ), formerly known as the Agency for Health Care Policy and Research The CAHPS® questionnaires and consumer reports were developed under cooperative agreements among AHRQ, Harvard University, RAND, the Research Triangle Institute (RTI), and Westat. In 1997, NCQA in conjunction with AHRQ, created the CAHPS® 2.0H survey measure as part of NCQA's Health Plan Employer Data and Information Set (HEDIS®). In 2002, AHRQ convened the CAHPS® Instrument Panel to reevaluate and update the CAHPS® surveys and to improve the state-of-the-art methods for assessing members' experiences with care.<sup>2</sup> The result of this reevaluation and update process was the development of the CAHPS® 3.0H surveys. The overarching goal of the CAHPS® 3.0H surveys is to effectively and efficiently obtain information from the person receiving care. NCQA also includes CAHPS® results as part of the scoring algorithm in their accreditation program for managed care plans.

The HEDIS® sampling and data collection procedures for the CAHPS® 3.0H surveys are designed to capture accurate and complete information about consumer reported experiences with health care. The sampling and data collection procedures promote both the standardized administration of survey instruments and the comparability of the resulting health plan data. The administration of this survey was completed with strict adherence to required specifications.

The CAHPS® 3.0H Medicaid questionnaire set includes separate versions for adult and child populations in English and Spanish. The adult Medicaid version is included in Section D of this report. The survey assesses topics such as quality of care provided, access to care, the communication skills of providers and administrative staff, and overall satisfaction with health plans.

The CAHPS® 3.0H Adult Medicaid survey was fielded January through April 2003 for Colorado Medicaid adult members who met the enrollment and age criteria during calendar year 2002. These results provide your state and its health plans with comprehensive survey results to enhance the communication of this important health plan satisfaction information to consumers. While the primary purpose of the CAHPS® 3.0H surveys is to facilitate plan to plan comparisons, the results are also valuable for identifying potential areas where consumer

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<sup>&</sup>lt;sup>1</sup> National Committee for Quality Assurance. *HEDIS*<sup>®</sup> 2002, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2001.

<sup>&</sup>lt;sup>2</sup> National Committee for Quality Assurance. *HEDIS*® 2003, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2002.

satisfaction can be improved and targeting intervention strategies within health plans to those areas.

The CAHPS® 3.0H protocol uses a rigorous methodology designed to maximize the number of responses and facilitate comparison of results across health plans. The Centers for Medicare & Medicaid Services (CMS) uses CAHPS® 3.0H results for its "Medicare Compare" reporting. NCQA requires CAHPS® 3.0H as part of HEDIS® for accreditation of managed care organizations.

The CAHPS® 3.0H Adult Medicaid survey includes 67 core questions that can be summarized in nine measures of satisfaction. These include four global rating questions (e.g., how respondents rate all health care received from their health plan) and five composite measures (as depicted in Table C1). The global ratings reflect overall satisfaction with the health plan. The composite measures are sets of questions grouped together to address different aspects of care (e.g., "getting needed care" or "getting care quickly"). Figure A2 (on page A8) and Figure A4 (on page A12) show the proportion of survey respondents who gave Colorado Medicaid's PCPP the highest scores (top box) for the global and composite measures. The Colorado Medicaid program averages and the NCQA national Medicaid averages are also included. For the global measures, a rating of 9 or 10 on a scale of 0 to 10 is considered the top box score. For the composite scores, a rating of "Always" or "Not a problem" is considered the top box score.

TABLE C1 GLOBAL AND COMPOSITE MEASURES				
GLOBAL RATINGS COMPOSITE SCORES				
Rating of Health Plan	Getting Needed Care			
Rating of All Health Care	Getting Care Quickly			
Rating of Personal Doctor How Well Doctors Communicate				
Rating of Specialist	Courteous and Helpful Office Staff			
	Customer Service			

#### SAMPLING PROCEDURES

#### Sample Frame

Those members eligible for sampling included beneficiaries who were health plan members at the time the sample was drawn, who were age 18 years and older (as of December 31, 2002), and who were continuously enrolled in the health plan for at least five of the last six months (July through December) of 2002.

#### Sample Size

A random sample of 1,418 beneficiaries was selected from your plan. NCQA requires that no more than one individual per household be surveyed. A total of 2,836 adult surveys were mailed out for the two participating Medicaid plans in Colorado. NCQA protocol permits oversampling in 5 percent increments up to a 30 percent over-sampling rate. For the Colorado Medicaid program, 5 percent over-sampling was performed.

#### SURVEY PROTOCOL

The survey administration protocol was designed with the goal that a high response rate would be achieved from beneficiaries, thus minimizing the potential effects of non-response bias. The survey process allows for two methods in which the beneficiary can complete the survey. The first "phase" consists of a mailed survey that is to be completed and mailed back by the beneficiary. All of the health plan members sampled received an English version of the survey with the option to complete the survey by telephone in Spanish. The second "phase" of the survey is a Computer Assisted Telephone Interview (CATI) survey of members who have not mailed in their survey or who have mailed in an incomplete survey. An incomplete survey is defined as one that has less than 80 percent of the pertinent questions answered and/or is missing responses to critical questions as designated by NCQA.<sup>3</sup> Table C2, on page C4, depicts the survey administration timeframe.

HEDIS® specifications require that HSAG be provided with a list of all eligible members for the sampling frame. Following HEDIS® requirements, HSAG sampled members who met the following criteria:

- ① Were age 18 years or older as of December 31, 2002
- 2 Were currently enrolled in the health plan
- 3 Had been continuously enrolled for at least five of the last six months of 2002
- 4 Had Medicaid as the primary payer

HSAG inspected a sample of the file records to check for any apparent problems with the files, such as missing address elements or subscriber numbers.

<sup>&</sup>lt;sup>3</sup> National Committee for Quality Assurance. *NCQA Quality Assurance Plan: HEDIS*® 2003 Surveys. Washington, DC: NCQA Publication, 2002.

A random sample of records from each health plan was passed through the United States Postal Service's National Change of Address (NCOA) process to obtain new addresses for members who had moved (if they had given the Postal Service a new address). From the resulting file, the *final sample* for the survey was drawn. Following NCQA requirements, the survey sample was a random sample with no more than one beneficiary being selected per household.

The HEDIS® specifications for CAHPS® 3.0H require that the name of the health plan appear in the questionnaire, letters and postcards; that the letters and cards bear the signature of a high ranking health plan or State official; and that the questionnaire packages include a postage paid reply envelope addressed to the organization conducting the survey. HSAG complied with these specifications.

According to  $\text{HEDIS}^{\circledR}$  specifications for the CAHPS $^{\circledR}$  3.0H survey, this survey was completed using the following timeframe:

TABLE C2 CAHPS® 3.0H SURVEY TIMEFRAME	
BASIC TASKS FOR CONDUCTING THE SURVEY	TIMEFRAME
Send first questionnaire with cover letter to the respondent	Day 1
Send a postcard reminder to non-respondents four to 10 days after mailing the first questionnaire	Days 5 - 11
Send a second questionnaire (and letter) to non-respondents approximately 30 days after mailing the first questionnaire	Day 31
Send a second postcard reminder to non-respondents 4 to 10 days after mailing the second questionnaire	Days 35 - 41
Initiate CATI interviews for non-respondents approximately 21 days after mailing the second questionnaire	Day 52
Initiate systematic contact for all non-respondents such that at least three telephone calls are attempted at different times of the day, on different days of the week and in different weeks	Days 52 - 74
Telephone follow up sequence completed (i.e., completed interviews obtained or maximum calls reached for all non-respondents) approximately 22 days after initiation	Day 74

The administration of the CAHPS® 3.0H survey is comprehensive and is designed to garner the highest possible response rate. A high response rate facilitates the generalization of the survey responses to the health plan's entire population.

#### DATA ANALYSIS

#### Response Rates

A beneficiary's survey is assigned a disposition code of "completed survey" when question #1 and 80 percent of the total pertinent questions are answered. Questions that are appropriately skipped (i.e., item is skipped per skip pattern instructions) do not count against the required 80 percent.

A response rate is calculated for each sample. The response rate is the total number of completed surveys divided by all eligible members of the sample.<sup>4</sup> Eligible members include the entire random sample (including any over-sample) minus invalid members. Invalid members of the sample meet one of the following criteria: deceased, ineligible (do not meet criteria described on page C3), mentally or physically incapacitated, or have a language barrier.

Response rates for your plan are presented in the Executive Summary section of this report (page A14).

#### **Global Rating Calculations**

Rating means, variances, and 95% confidence intervals are calculated for each of the four global rating questions (Rating of Health Plan, Rating of All Health Care, Rating of Personal Doctor, and Rating of Specialist). Scoring is based on a three point scale: response values of 0 through 6 are given a score of 1; response values of 7 and 8 are given a score of 2; and response values of 9 and 10 are given a score of 3. For more details, please refer to Table C3 on page C6.

The three point rating mean is the sum of the response scores (1, 2, or 3) divided by the total number of responses to the rating question.

Global Rating Mean 
$$=\sum_{i=1}^{n} \frac{x}{n}$$

i = 1, ..., n members responding to question x = score of member on question (either 1, 2, or 3)

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<sup>&</sup>lt;sup>4,5</sup> National Committee for Quality Assurance. *HEDIS*® 2003, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2002.

An unbiased variance is calculated for each three point global rating using a standard unbiased variance formula where x is the score value (1, 2, or 3).

Global Rating Variance 
$$= \sum_{i=0}^{n} \frac{\left(x - \overline{x}\right)^{2}}{n - 1}$$

i = 1, ..., n members responding to question

x = score of member on question (either 1, 2, or 3)

 $\overline{x}$  = mean global rating score

The unbiased mean and variance are utilized to calculate a 95% confidence interval for each three point global rating mean. The following formula is used to calculate the 95% confidence interval for the three point global rating means.

Global Rating 95%  
Confidence Interval = 
$$(GRM) \pm 1.96\sqrt{\frac{GRV}{n}}$$

Table C3 Determining Global Rating Three Point S	SCORE VALUES
GLOBAL RATING QUESTIONS 5, 11, 35, A	ND 52
RESPONSE CHOICE	SCORE VALUE
0 Worst Possible	1
1	1
2	1
3	1
4	1
5	1
6	1
7	2
8	2
9	3
10 Best Possible	3

In addition to the mean three point score values, corresponding variances and 95% confidence intervals, question summary rates, variances, and 95% confidence intervals are calculated for each global rating question. Prior to the 2002 survey administration, response choices of 8, 9, or 10 were assigned a score value of 1, and all other response choices were assigned a value of 0. Beginning with the 2002 survey administration, response choices of 9 or 10 are assigned a score value of 1, and all other response choices are assigned a score value of 0. For comparative purposes to prior years' data, this report includes results utilizing both scoring methodologies. Please note, those response choices assigned a score value of 1 are considered the "top box" scores. For more details, please refer to Table C4 on page C8.

The question summary rate is the sum of the score values (0 or 1) divided by the total number of responses to the rating question.

Question Summary Rate 
$$=\sum_{i=1}^{n} \frac{x}{n}$$
 (QSR)

i = 1, ..., n members responding to question x = score of member on question (either 0 or 1)

An unbiased variance is calculated for each question summary rate using a standard unbiased variance formula where x is the score value (0 or 1).

Question Summary Rate 
$$= \sum_{i=0}^{n} \frac{(x-x)^{2}}{n-1}$$
Variance (QSRV)

i = 1, ..., n members responding to question

 $x = score \ of \ member \ on \ question \ (either \ 0 \ or \ 1)$ 

 $\overline{x}$  = mean question summary rate

The unbiased mean and variance are utilized to calculate a 95% confidence interval for each question summary rate. The following formula is used to calculate the 95% confidence interval for each question summary rate.

Question Summary Rate 
$$= (QSR) \pm 1.96 \sqrt{\frac{QSRV}{n}}$$

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<sup>&</sup>lt;sup>6</sup> National Committee for Quality Assurance. *HEDIS*® 2003, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2002.

TABLE C4 DETERMINING GLOBAL RATING TOP BOX SCORE VALUES GLOBAL RATING QUESTIONS 5, 11, 35, AND 52			
RESPONSE CHOICE	PRIOR TO 2002 SCORE VALUE	2003 SCORE VALUE	
0 Worst Possible	0	0	
1	0	0	
2	0	0	
3	0	0	
4	0	0	
5	0	0	
6	0	0	
7	0	0	
8	1	0	
9	1	1	
10 Best Possible	1	1	

#### Composite Score Calculations

Rating means and variances are calculated for each of the five composite scores (Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Courteous and Helpful Office Staff, and Customer Service). In general, scoring is based on a three point scale: responses of "Always" or "Not a problem" are given a score of 3; responses of "Usually" and "A small problem" are given a score of 2; all other responses are given a score of 1.7 For more details, please refer to Table C5 on page C10.

The three point composite mean is the average of the mean score for each question included in the composite.

Composite Score = 
$$\frac{1}{m} \sum_{i=1}^{m} \left( \sum_{j=1}^{n_i} \frac{x_{ij}}{n_i} \right)$$

i = 1, ..., m questions in a composite  $j = 1, ..., n_i$  members responding to question i $x_{ij}$  = score of member j on question i (either 1, 2, or 3)

An unbiased variance is calculated for each three point composite mean. The following formula is used to calculate the composite variance.

Composite Score 
$$Variance (CSV) = \frac{N}{N-1} \sum_{j=1}^{N} \left( \sum_{i=1}^{m} \frac{1}{m} * \frac{x_{ij} - \overline{x_i}}{n_i} \right)^2$$

i = 1, ..., m questions in a composite  $j = 1, ..., n_i$  members responding to question i $x_{ii}$  = score of member j on question i (either 1, 2, or 3)

 $\frac{\sqrt{3}}{x_i}$  = average score for question i

N = number of members responding to at least one question in the composite

The unbiased mean and variance are utilized to calculate a 95% confidence interval for each three point composite mean. The following formula is used to calculate the 95% confidence interval for the three point composite means:

Composite 95% = 
$$(CSM) \pm 1.96\sqrt{CSV}$$
  
Confidence Interval

Colorado Medicaid's PCPP COLORADO DHCPF

<sup>&</sup>lt;sup>7</sup> National Committee for Quality Assurance. HEDIS<sup>®</sup> 2003, Volume 3: Specifications for Survey Measures. Washington, DC: NCQA Publication, 2002.

TABLE C5 DETERMINING COMPOSITE SCORE THREE POINT VALUES				
	GETTING NEEDED CARE COM	IPOSITE		
QUESTION #	RESPONSE CHOICE	SCORE VALUE		
7, 9, 24, 25, and 26	A big problem	1		
	A small problem	2		
	Not a problem	3		
Please note, question 25 is a gate item for question 26. Respondents that select "No" to question 25 are instructed to skip question 26. As a result of the skip pattern, respondents who appropriately skip question 26 (i.e., who select "No" to question 25) are scored as "Not a problem" for question 26.				
	GETTING CARE QUICKLY COM	MPOSITE		
QUESTION #	RESPONSE CHOICE	SCORE VALUE		
14, 16, 19, and 27	Never	1		
	Sometimes	1		
	Usually	2		
	Always	3		
Hov	V WELL DOCTORS COMMUNICAT	TE COMPOSITE		
QUESTION #	RESPONSE CHOICE	SCORE VALUE		
30, 32, 33, and 34	Never	1		
	Sometimes	1		
	Usually	2		
	Always	3		
Cour	TEOUS AND HELPFUL OFFICE ST	AFF COMPOSITE		
QUESTION #	RESPONSE CHOICE	SCORE VALUE		
28 and 29	Never	1		
	Sometimes	1		
	Usually	2		
	Always	3		
CUSTOMER SERVICE COMPOSITE				
QUESTION #	RESPONSE CHOICE	SCORE VALUE		
43 and 45	A big problem	1		
	A small problem	2		
	Not a problem	3		

<sup>8</sup> National Committee for Quality Assurance. *HEDIS*® 2003, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2002.

In addition to the mean three point score values, corresponding variances and confidence intervals, a global proportion is calculated for each composite. Prior to the 2002 CAHPS® survey administration, responses of "Usually or Always" for the Getting Care Quickly, How Well Doctors Communicate, and Courteous and Helpful Office Staff composites were assigned a score value of 1, and all other response choices were assigned a value of 0. Beginning in 2002, responses of "Always" on these composites are assigned a score value of 1, and all other response choices are assigned a value of 0.9, 10 The scoring values for the Getting Needed Care and Customer Service composites did not change. Responses of "Not a problem" are assigned a score value of 1, and all other response choices are assigned a value of 0. For more details, please refer to Table C6 on page C13.

The composite global proportion is calculated by first determining the average score (i.e., proportion responding with a score of 1) for each question. This step is repeated for each of the questions in the composite. Finally, the average proportion responding with a score of 1 is determined across all of the questions in the composite. This average is the composite global proportion.

Composite Global 
$$=\frac{1}{m}\sum_{i=1}^{m}\left(\sum_{j=1}^{n_i}\frac{x_{ij}}{n_i}\right)$$

i = 1, ..., m questions in a composite  $j = 1, ..., n_i$  members responding to question i  $x_{ij} = score$  of member j on question i (either 0 or 1)

An unbiased variance is calculated for each composite global proportion. The following formula is used to calculate the composite global proportion variance.

Composite GP  
Variance (GPV) = 
$$\frac{N}{N-1} \sum_{j=1}^{N} \left( \sum_{i=1}^{m} \frac{1}{m} * \frac{x_{ij} - \overline{x}_i}{n_i} \right)^2$$

i = 1, ..., m questions in a composite

 $j = 1, ..., n_i$  members responding to question i

 $x_{ij}$  = score of member j on question i (either 0 or 1)

 $\vec{x}_i$  = average score for question i

N = number of members responding to at least one question in the composite

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<sup>&</sup>lt;sup>9</sup> National Committee for Quality Assurance. *HEDIS*® 2002, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2001.

<sup>&</sup>lt;sup>10</sup> National Committee for Quality Assurance. *HEDIS*® 2003, *Volume 3: Specifications for Survey Measures.* Washington, DC: NCQA Publication, 2002.

The unbiased mean and variance are utilized to calculate a 95% confidence interval for each composite global proportion. The following formula is used to calculate the 95% confidence interval for each composite global proportion.

Composite GP 95% = 
$$(GP)\pm 1.96\sqrt{GPV}$$
  
Confidence Interval

Table C6 Determining Composite Global Proportions: Assigning Score Values			
	GETTING NEEDED CARE C	OMPOSITE	
QUESTION#	RESPONSE CHOICE	PRIOR TO 2002 SCORE VALUE	2003 SCORE VALUE
7, 9, 24, 25, and 26	A big problem	0	0
	A small problem	0	0
	Not a problem	1	1
instructed to skip questio	is a gate item for question 26. Respon n 26. As a result of the skip pattern, re to question 25) are scored as "Not a pro	spondents who approp	oriately skip question
	GETTING CARE QUICKLY (	COMPOSITE	
QUESTION #	RESPONSE CHOICE	PRIOR TO 2002 SCORE VALUE	2003 SCORE VALUE
14, 16, 19, and 27	Never	0	0
	Sometimes	0	0
	Usually	1	0
	Always	1	1
Hov	V WELL DOCTORS COMMUNIC	CATE COMPOSIT	E
QUESTION #	RESPONSE CHOICE	PRIOR TO 2002 SCORE VALUE	2003 SCORE VALUE
30, 32, 33, and 34	Never	0	0
	Sometimes	0	0
	Usually	1	0
	Always	1	1
Cour	TEOUS AND HELPFUL OFFICE	STAFF COMPOSI	TE
QUESTION #	RESPONSE CHOICE	PRIOR TO 2002 SCORE VALUE	2003 SCORE VALUE
28 and 29	Never	0	0
	Sometimes	0	0
	Usually	1	0
	Always	1	1
	CUSTOMER SERVICE CO	MPOSITE	_
QUESTION #	RESPONSE CHOICE	PRIOR TO 2002 SCORE VALUE	2003 SCORE VALUE
43 and 45	A big problem	0	0
	A small problem	0	0
	Not a problem	1	1

<sup>11</sup> National Committee for Quality Assurance. *HEDIS*® 2003, *Volume 3: Specifications for Survey Measures*. Washington, DC: NCQA Publication, 2002.

#### Overall Member Satisfaction Tables

The Overall Member Satisfaction Tables (Tables A1 and A2 in the Executive Summary) depict beneficiary satisfaction using a one to five star rating system. The star assignments are based on NCOA's CAHPS® 3.0H Benchmarks. 12

- \*\*\*\*\* indicates a score at or above the 90<sup>th</sup> percentile
   \*\*\*\* indicates a score between the 75<sup>th</sup> and 90<sup>th</sup> percentiles
   indicates a score between the 50<sup>th</sup> and 75<sup>th</sup> percentiles
   indicates a score between the 25<sup>th</sup> and 50<sup>th</sup> percentiles
   indicates a score below the 25<sup>th</sup> percentile

TABLE C7 OVERALL MEMBER SATISFACTION RATINGS CROSSWALK					
	Number of Stars				
AREA RATED	*	**	***	****	****
GLOBAL RATINGS					
Health Plan	0 - 2.219	2.220 - 2.339	2.340 - 2.409	2.410 - 2.479	≥ 2.480
All Health Care	0 - 2.229	2.230 - 2.329	2.330 - 2.409	2.410 - 2.459	≥ 2.460
Personal Doctor	0 - 2.369	2.370 - 2.439	2.440 - 2.499	2.500 - 2.539	≥ 2.540
Specialist	0 - 2.389	2.390 - 2.439	2.440 - 2.489	2.490 - 2.549	≥ 2.550
COMPOSITE SCORES					
Getting Needed Care	0 - 2.519	2.520 - 2.629	2.630 - 2.689	2.690 - 2.749	≥ 2.750
Getting Care Quickly	0 - 2.129	2.130 - 2.259	2.260 - 2.319	2.320 - 2.369	≥ 2.370
How Well Doctors Communicate	0 - 2.409	2.410 - 2.459	2.460 - 2.509	2.510 - 2.549	≥ 2.550
Courteous & Helpful Office Staff	0 - 2.509	2.510 - 2.559	2.560 - 2.599	2.600 - 2.659	≥ 2.660
Customer Service	0 - 2.439	2.440 - 2.519	2.520 - 2.599	2.600 - 2.699	≥ 2.700
			THE TOLOUTE OR A CO		

Note: Source of star benchmarks: HEDIS® Measures and HEDIS/CAHPS® 3.0H Benchmarks and Thresholds for Accreditation 2003 Medicaid Product Line.

<sup>&</sup>lt;sup>12</sup> National Committee for Quality Assurance. HEDIS/CAHPS® 3.0H Benchmarks and Thresholds for Accreditations 2003. Washington, DC: NCQA, March 24, 2003.

# CAHPS® 3.0H

## Adult Medicaid Survey Instrument

## CAHPS® 3.0H Adult Questionnaire (MEDICAID) SURVEY INSTRUCTIONS

•	You are sometimes told to skip over some questions in this survey. When this happens
	you will see an arrow with a note that tells you what question to answer next, like this:
	✓ Yes →Go to Question 1
	□ No

All information that would let someone identify you or your family will be kept private. We will not share your personal information with anyone without your OK. You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get.

You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned your survey so we don't have to send you reminders.

<ul> <li>Our records show that you are now in &lt;<plan name="" program="">&gt;. Is that right?</plan></li> <li>☐ Yes →Go to Question 3</li> <li>☐ No →Go to Question 2</li> </ul>	5. Using any number from 0 to 10, where 0 is the worst personal doctor or nurse possible and 10 is the best personal doctor or nurse possible, what number would you use to rate your personal doctor or nurse?
2. What is the name of your health plan? (please print)	□ 0 Worst personal doctor or nurse possible □ 1
3. How many months or years in a row have you been in this health plan?  Less than 6 months  At least 6 months but less than 1 year  At least 1 year but less than 2 years  At least 2 years but less than 5 years  5 or more years  YOUR PERSONAL DOCTOR OR NURSE	☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 Best personal doctor or nurse possible
The next questions ask about <u>your own</u> health care. <u>Do not</u> include care you got when you stayed overnight in a hospital. <u>Do not</u> include the times you went for dental care visits.	6. Did you have the same personal doctor or nurse <u>before</u> you joined this health plan?  ☐ Yes → Go to Question 8
4. A personal doctor or nurse is the health provider who knows you best. This can	☐ Yes →Go to Question 8 ☐ No →Go to Question 7
be a general doctor, a specialist doctor, a nurse practitioner, or a physician assistant.	7. Since you joined your health plan, how much of a problem, if any, was it to get a personal doctor or nurse you are happy with?
Do you have one person you think of as your personal doctor or nurse?	☐ A big problem☐ A small problem
<ul> <li>☐ Yes → Go to Question 5</li> <li>☐ No → Go to Question 7</li> </ul>	□ Not a problem
	GETTING HEALTH CARE FROM A SPECIALIST
	When you answer the next questions, <u>do not</u> include dental visits.
	8. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care.
	In the last 6 months, did you or a doctor think you needed to see a specialist?
	<ul> <li>☐ Yes →Go to Question 9</li> <li>☐ No →Go to Question 10</li> </ul>

9.	In the last 6 months, how much of a problem, if any, was it to see a specialist that you needed to see?  ☐ A big problem ☐ A small problem	14.	In the last 6 months, when you called during regular office hours, how often did you get the help or advice you needed?  Never
10.	□ Not a problem  In the last 6 months, did you see a		<ul><li>☐ Sometimes</li><li>☐ Usually</li><li>☐ Always</li></ul>
11.	specialist?  ☐ Yes →Go to Question 11 ☐ No →Go to Question 13  We want to know your rating of the	15.	In the last 6 months, did you have an illness, injury or condition that needed care right away in a clinic, emergency room or doctor's office?
11.	We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist		<ul> <li>☐ Yes →Go to Question 16</li> <li>☐ No →Go to Question 18</li> </ul>
	possible and 10 is the best specialist possible, what number would you use to rate the specialist?  □ 0 Worst specialist possible □ 1 □ 2 □ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 Best specialist possible	16.	In the last 6 months, when you needed care right away for an illness, injury, or condition, how often did you get the care as soon as you wanted?
			<ul><li>□ Never</li><li>□ Sometimes</li><li>□ Usually</li><li>□ Always</li></ul>
		17.	In the last 6 months, when you needed care right away for an illness, injury, or condition, how long did you usually have to wait between trying to get care and actually seeing a provider?
12.	In the last 6 months, not counting the times you needed health care right away, was the specialist you saw most often the same doctor as your personal doctor?  □ Yes □ No		□ Same day □ 1 day □ 2 days □ 3 days □ 4–7 days □ 8–14 days □ 15 days or longer
	YOUR HEALTH CARE IN THE LAST 6 MONTHS	18.	A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a
13.	In the last 6 months, did you call a doctor's office or clinic <u>during regular</u> office hours to get help or advice for		nurse, or anyone else you would see for health care.
	yourself?  □ Yes →Go to Question 14 □ No →Go to Question 15		In the last 6 months, not counting the times you needed health care right away did you make any appointments with a doctor or other health provider for health care?
			<ul> <li>□ Yes →Go to Question 19</li> <li>□ No →Go to Question 21</li> </ul>

19.	In the last 6 months, not counting the times you needed health care right away, how often did you get an appointment for health care as soon as you wanted?	24.	In the last 6 months, how much of a problem, if any, was it to get the care, tests or treatment you or a doctor believed necessary?	
	<ul><li>□ Never</li><li>□ Sometimes</li><li>□ Usually</li><li>□ Always</li></ul>		<ul><li>☐ A big problem</li><li>☐ A small problem</li><li>☐ Not a problem</li></ul>	
20.	In the last 6 months, not counting the times you needed health care right away,		In the last 6 months, did you need approval from your health plan for any care, tests or treatment?	
	how many <u>days</u> did you usually have to wait between making an <u>appointment</u> and actually <u>seeing a provider</u> ?		<ul> <li>□ Yes →Go to Question 26</li> <li>□ No →Go to Question 27</li> </ul>	
	□ Same day □ 1 day □ 2–3 days □ 4–7 days	26.	In the last 6 months, how much of a problem, if any, were delays in health care while you waited for approval from your health plan?	
	□ 8–14 days □ 15–30 days □ 31 days or longer		<ul><li>□ A big problem</li><li>□ A small problem</li><li>□ Not a problem</li></ul>	
21.	In the last 6 months, how many times did you go to an emergency room to get care for yourself?	27.	In the last 6 months, how often were you taken to the exam room within 15 minutes of your appointment?	
	□ None □ 1 □ 2 □ 3 □ 4 □ 5 to 9		<ul><li>□ Never</li><li>□ Sometimes</li><li>□ Usually</li><li>□ Always</li></ul>	
22	In the last 6 months (not counting times you went to an emergency room), how many times did you go to a doctor's office or clinic to get care for yourself?  □ None → Go to Question 36	28.	In the last 6 months, how often did office staff at a doctor's office or clinic treat you with courtesy and respect?	
22.			<ul><li>□ Never</li><li>□ Sometimes</li><li>□ Usually</li><li>□ Always</li></ul>	
	<ul> <li>□ 1</li></ul>	29.	In the last 6 months, how often were office staff at a doctor's office or clinic a helpful as you thought they should be?  Never	
23.	☐ 10 or more → Go to Question 23  In the last 6 months, did you or a doctor believe you needed any care, tests or treatment?		<ul><li>☐ Sometimes</li><li>☐ Usually</li><li>☐ Always</li></ul>	
	<ul> <li>☐ Yes → Go to Question 24</li> <li>☐ No → Go to Question 25</li> </ul>			

30.	In the last 6 months, how often did doctors or other health providers <u>listen</u> carefully to you?  ☐ Never ☐ Sometimes	35.	Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?
	☐ Usually ☐ Always		<ul><li>□ 0 Worst health care possible</li><li>□ 1</li><li>□ 2</li></ul>
31.	In the last 6 months, how often did you have a hard time speaking with or understanding a doctor or other health providers because you spoke different languages?  Never Sometimes Usually Always  In the last 6 months, how often did doctors or other health providers explain things in a way you could understand?  Never Sometimes Usually Always		□ 3 □ 4 □ 5 □ 6 □ 7 □ 8 □ 9 □ 10 Best health care possible
32.		36.	An interpreter is someone who repeats or signs what one person says in a language used by another person.
			In the last 6 months, did you need an interpreter to help you speak with doctors or other health providers?  □ Yes →Go to Question 37 □ No →Go to Question 38
33.	In the last 6 months, how often did doctors or other health providers show respect for what you had to say?  Never Sometimes	37.	In the last 6 months, when you needed an interpreter to help you speak with doctors or other health providers, how often did you get one?
34.	☐ Usually ☐ Always  In the last 6 months, how often did		<ul><li>□ Never</li><li>□ Sometimes</li><li>□ Usually</li><li>□ Always</li></ul>
	doctors or other health providers <u>spend</u> <u>enough time</u> with you?		YOUR HEALTH PLAN
	□ Never □ Sometimes □ Usually □ Always		next questions ask about your experience your <u>health plan</u> .
		38.	Some states pay health plans to care for people covered by < <plan program="">&gt;. With these health plans, you may have to choose a doctor from the plan list or go to a clinic or health care center on the plan list.</plan>
			Are you covered by a health plan like this?
			<ul> <li>☐ Yes →Go to Question 39</li> <li>☐ No →Go to Question 42</li> </ul>

39.	Did you choose your health plan or were you told which plan you were in?  ☐ I chose my plan	46.	In the last 6 months, have you called or written your health plan with a complaint or problem?
	☐ I was told which plan I was in		<ul> <li>☐ Yes →Go to Question 47</li> <li>☐ No →Go to Question 50</li> </ul>
40.	You can get information about plan services in writing, by telephone, on the Internet, or in-person.	47.	How long did it take for the health plan to resolve your complaint?
	Did you get any information <u>about</u> your health plan before you signed up for it?  ☐ Yes →Go to Question 41 ☐ No →Go to Question 42		<ul> <li>□ Same day</li> <li>□ 2-7 days</li> <li>→ Go to Question 48</li> <li>□ 8-14 days</li> <li>□ 15-21 days</li> <li>□ More than 21 days</li> </ul>
41.	How much of the information you were given before you signed up for the plan was correct?		→ Go to Question 48  ☐ I am still waiting for it to be settled → Go to Question 49
	□ All of it	48.	Was your <u>complaint or problem</u> settled to your satisfaction?
	<ul><li>☐ Most of it</li><li>☐ Some of it</li><li>☐ None of it</li></ul>		<ul> <li>☐ Yes →Go to Question 50</li> <li>☐ No →Go to Question 50</li> </ul>
42.	In the last 6 months, did you look for any information about how your health plan works in written materials or on the Internet?  ☐ Yes →Go to Question 43 ☐ No →Go to Question 44	49. 50.	How long have you been waiting for your health plan to resolve your complaint?  1-7 days 8-14 days 15-21 days More than 21 days In the last 6 months, did you have to fill
43.	In the last 6 months, how much of a problem, if any, was it to find or understand this information?  ☐ A big problem ☐ A small problem ☐ Not a problem	51.	out any paperwork for your health plan?  ☐ Yes → Go to Question 51 ☐ No → Go to Question 52  In the last 6 months, how much of a
44.	In the last 6 months, did you call your health plan's <u>customer service</u> to get information or help?  ☐ Yes → Go to Question 45 ☐ No → Go to Question 46		problem, if any, did you have with paperwork for your health plan?  ☐ A big problem ☐ A small problem ☐ Not a problem
45.	In the last 6 months, how much of a problem, if any, was it to get the help you needed when you called your health plan's customer service?		
	<ul><li>☐ A big problem</li><li>☐ A small problem</li><li>☐ Not a problem</li></ul>		

52.	Using any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible, what number would you use to rate your health plan?	57. In the last 6 months, on how many visits were you <u>advised to quit</u> smoking by a doctor or other health provider in your plan?  □ None
	□ 0 Worst health plan possible □ 1 □ 2 □ 3 □ 4 □ 5	☐ 1 visit ☐ 2 to 4 visits ☐ 5 to 9 visits ☐ 10 or more visits ☐ I had no visits in the last 6 months
	□ 6 □ 7 □ 8 □ 9 □ 10 Best health plan possible	58. On how many visits was medication recommended or discussed to assist you with quitting smoking (for example: nicotine gum, patch, nasal spray, inhaler, prescription medication)?
	ABOUT YOU	□ None □ 1 visit
53.	In general, how would you rate <u>your</u> overall health now? □ Excellent	<ul> <li>□ 2 to 4 visits</li> <li>□ 5 to 9 visits</li> <li>□ 10 or more visits</li> <li>□ I had no visits in the last 6 months</li> </ul>
	☐ Very good ☐ Good ☐ Fair ☐ Poor	59. On how many visits did your doctor or health provider recommend or discuss methods and strategies (other than medication) to assist you with quitting
54.	Have you ever <u>smoked</u> at least 100 cigarettes in your entire life?	smoking? □ None
	<ul> <li>☐ Yes</li> <li>☐ No</li> <li>☐ Don't know</li> <li>→ Go to Question 55</li> <li>→ Go to Question 60</li> <li>→ Go to Question 60</li> </ul>	☐ 1 visit☐ 2 to 4 visits☐ 5 to 9 visits☐ 10 or more visits☐ I had no visits in the last 6 months
55.	Do you now smoke every day, some days or not at all?	60. What is your age now?
	<ul> <li>□ Every day</li> <li>□ Some days</li> <li>□ Not at all</li> <li>□ Don't know</li> <li>→Go to Question 57</li> <li>→Go to Question 56</li> <li>→Go to Question 60</li> </ul>	□ 18 to 24 □ 25 to 34 □ 35 to 44 □ 45 to 54 □ 55 to 64
56.	How long has it been since you <u>quit</u> <u>smoking</u> cigarettes?	□ 65 to 74 □ 75 or older
	☐ 6 months or less  →Go to Question 57	61. Are you male or female?
	☐ More than 6 months	□ Male
	→ Go to Question 60  □ Don't know → Go to Question 60	☐ Female

62.	What is the highest grade or level of school that you have <u>completed</u> ?	66.	Did someone help you complete this survey?
	<ul> <li>□ 8th grade or less</li> <li>□ Some high school, but did not graduate</li> <li>□ High school graduate or GED</li> <li>□ Some college or 2-year degree</li> <li>□ 4-year college graduate</li> </ul>		<ul> <li>Yes →Go to Question 67</li> <li>No →Please return the survey in the postage-paid envelope</li> </ul>
	☐ More than 4-year college degree	67.	How did that person help you? (Check all that apply)
63.	Are you of Hispanic or Latino origin or descent?		<ul><li>☐ Read the questions to me</li><li>☐ Wrote down the answers I gave</li></ul>
	<ul><li>☐ Yes, Hispanic or Latino</li><li>☐ No, not Hispanic or Latino</li></ul>		<ul><li>Answered the questions for me</li><li>Translated the questions into my language</li></ul>
64.	What is your race? Please mark one or more.		☐ Helped in some other way
	<ul> <li>□ White</li> <li>□ Black or African-American</li> <li>□ Asian</li> <li>□ Native Hawaiian or other Pacific Islander</li> <li>□ American Indian or Alaska Native</li> <li>□ Other</li> </ul>		
65.	What language do you mainly speak at home?		
	<ul><li>□ English</li><li>□ Spanish</li><li>□ Some other language</li></ul>		

**THANK YOU** 

Please return the completed survey in the postage paid envelope.

#### **CD-ROM**

The accompanying CD includes all of the information from the Executive Summary, Reader's Guide, Methodology, and Survey Instrument sections of this report. Additionally, the CD contains supplemental information (cross tabulations) depicting your plan's question specific responses to the 2003 Consumer Assessment of Health Plans (CAHPS®) 3.0H Adult Medicaid survey. Please note, the contents are in the form of an Adobe Acrobat portable document file (PDF). A free Adobe Acrobat Reader can be downloaded from Adobe's website (www.adobe.com).

#### 2003 CAHPS 3.0H ADULT MEDICAID STATE OF COLORADO (302)

MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

Q1. WHETHER RESPONDENT IS CURRENTLY ENROLLED IN THIS HEALTH PLAN

		Education													Overal Health	
				Age	of Res	sponder	nt		Ge	nder						Good
		Total	18-24	25-34	35-44	45-54	55-64	65+	Male	Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base:	Analyzed Respondents	562	65	86	88	99	88	130	157	402		368	139	35	143	416
Yes		562 100%	65 100%	86 100%	88 100%	99 100%	88 100%	130 100%	157 100%	402 100%		368 100%	139 100%	35 100%	143 100%	416 100%

Q3. NUMBER OF MONTHS OR YEARS IN A ROW RESPONDENT HAS BEEN IN THIS HEALTH PLAN

														Overal Health	
			Age	of Rea	sponde	nt		Ge	nder		Educ	ation			Good
	Total	18-24	25-34	35-44					Female	_		Some College	_	Excellent Very Good	
Base: Analyzed Respondents	552	62	86	86	98	86	128	152	397		361	137	34	142	407
Less than 6 months (.25)	12 2%	2 3%	1 1%	2 2%	2 2%	1 1%	4 3%	2 1%	10 3%		8 2%	2 1%	1 3%	4 3%	7 2%
At least 6 months but less than 1 year (.75)	27 5%		5 6%	4 5%	2 2%	2 2%	6 5%	3 2%	24 6%		22 6%	4 3%	-	11 8%	16 4%
At least 1 year but less than 2 years (1.5)	68 12%	15 24%	26 30%	10 12%	9 9%	4 5%	3 2%	17 11%	51 13%		35 10%	29 21%	3 9%	26 18%	42 10%
At least 2 years but less than 5 years (3.5)	155 28%		24 28%	26 30%	22 22%	25 29%	31 24%	45 30%	107 27%		96 27%	42 31%	13 38%	47 33%	107 26%
5 or more years (10)	290 53%		30 35%	44 51%	63 64%	54 63%	84 66%	85 56%	205 52%		200 55%	60 44%	17 50%	54 38%	235 58%
Refused	10	3	_	2	1	2	2	5	5		7	2	1	1	9
Mean (in years)	6.5	4.0	5.0	6.4	7.4	7.4	7.5	6.8	6.4		6.7	5.8	6.5	5.3	6.9
Std dev	3.8	3.3	3.8	3.8	3.6	3.5	3.6	3.7	3.9		3.8	3.8	3.6	3.8	3.7
Std err	0.16	0.42	0.41	0.41	0.36	0.37	0.31	0.30	0.19		0.20	0.33	0.63	0.32	0.18

Q4. WHETHER HAVE ONE PERSON THINK OF AS A PERSONAL DOCTOR OR NURSE

June, 2003

Overall

										Edua	ation		Health	
			Age	of Res	sponde	nt		Ge:	nder					Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	555	65	86	87	96	88	127	156	396	362	138	35	142	410
Yes	481 87%	54 83%	70 81%	74 85%	86 90%	80 91%	112 88%	138 88%	340 86%	314 87%	121 88%	31 89%	114 80%	364 89%
No	74 13%	11 17%	16 19%	13 15%	10 10%	8 9%	15 12%	18 12%	56 14%	48 13%	17 12%	4 11%	28 20%	46 11%
Refused	7	-	-	1	3	-	3	1	6	6	1	=	1	6

Q5. RATING OF PERSONAL DOCTOR OR NURSE

										Overal Health	L			
			Age	of Re	sponde	nt			nder					Good
	Total						65+	Male	Female	High Schoo or less	College	Grad+	Excellent Very Good	Poor
Base: Analyzed Respondents	474	54	70	73	86	77	109	135	336	309	119	31	113	358
Top 3 box	360	47	51	56	63	59	79	94	263	238	90	24	95	263
	76%	87%	73%	77%	73%	77%	72%	70%	78%	77%	76%	77%	84%	73%
10 Best possible	214 45%	25 46%	29 41%	29 40%	42 49%	37 48%	49 45%	49 36%	163 49%	156 50%	44 37%	8 26%	56 50%	156 44%
9	64 14%	10 19%	11 16%	11 15%	12 14%	9 12%	9 8%	18 13%	46 14%	34 11%	24 20%	5 16%	17 15%	47 13%
8	82 17%	12 22%	11 16%	16 22%	9 10%	13 17%	21 19%	27 20%	54 16%	48 16%	22 18%	11 35%	22 19%	60 17%
7	37 8%	3 6%	7 10%	7 10%	6 7%	4 5%	10 9%	13 10%	24 7%	20 6%	10 8%	4 13%	9 8%	28 8%
6	25 5%	3 6%	2 3%	4 5%	1 1%	8 10%	7 6%	8 6%	17 5%	16 5%	6 5%	2 6%	3 3%	22 6%
5	34 7%	1 2%	7 10%	4 5%	10 12%	4 5%	8 7%	18 13%	16 5%	22 7%	9 8%	1 3%	3 3%	31 9%
4	5 1%	- -	1 1%	2 3%	2 2%	<u>-</u>	-	- -	5 1%	3 1%	2 2%	- -	1 1%	4 1%
3	2	- -	- -	-	2 2%	- -	- -	1 1%	1 *	1	1 1%	- -	- -	2 1%
Bottom 3 box	11	_	2	_	2	2	5	1	10	9	1	-	2	8
	2%	-	3%	-	2%	3%	5%	1%	3%	3%	1%	=	2%	2%
2	3 1%	-	- -	- -	1 1%	1 1%	1 1%	-	3 1%	2 1%	- -	- -	1 1%	2 1%
1	4 1%	- -	<u>-</u>	- -	- -	1 1%	3 3%	- -	4 1%	4 1%	- -	- -	1 1%	3 1%

June, 2003 Q5. RATING OF PERSONAL DOCTOR OR NURSE

										_			Overal Health		
			Age	of Res	sponde	nt		Ge:	nder		ation			Good	
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyzed Respondents	474	54	70	73	86	77	109	135	336	309	119	31	113	358	
0 Worst possible	4 1%	-	2 3%	-	1 1%	- -	1 1%	1 1%	3 1%	3 1%	1 1%	- -	<u>-</u> -	3 1%	
Refused	14	_	-	2	3	3	6	4	10	11	3	-	2	12	
Mean	8.4	8.9	8.2	8.5	8.3	8.5	8.2	8.1	8.5	8.5	8.4	8.3	8.8	8.3	
Std Dev	2.0	1.3	2.2	1.7	2.3	2.0	2.3	1.9	2.1	2.1	1.9	1.4	1.7	2.1	
Std Err	0.09	0.18	0.27	0.20	0.25	0.22	0.22	0.17	0.11	0.12	0.17	0.24	0.16	0.11	

Q6. WHETHER HAD THE SAME PERSONAL DOCTOR OR NURSE BEFORE JOINED THIS HEALTH PLAN

	Education													1
			Age	of Rea	sponde	nt		Ge	nder					Good
	Total	18-24	25-34	35-44	45-54	4 55-64 	65+	Male	Female	High Schoo or less	l Some College 	College Grad+	Excellent Very Good	Fair Poor 
Base: Analyzed Respondents	471	54	69	74	86	78	105	134	334	306	120	31	113	355
Yes	194 41%	27 50%	32 46%	25 34%	31 36%	33 42%	43 41%	65 49%	128 38%	132 43%	41 34%	14 45%	54 48%	138 39%
No	277 59%	27 50%	37 54%	49 66%	55 64%	45 58%	62 59%	69 51%	206 62%	174 57%	79 66%	17 55%	59 52%	217 61%
Refused	17	_	1	1	3	2	10	5	12	14	2	-	2	15

Q7. SINCE JOINED HEALTH PLAN, HOW MUCH OF A PROBLEM IT WAS TO GET A PERSONAL DOCTOR OR NURSE THAT RESPONDENT WAS HAPPY WITH

										-1			Overal Health	
			Age	of Res	sponde	nt		Ge:	nder	Edu	cation 			Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High Schoo or less	l Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	344	38	50	61	62	53	77	86	256	217	94	21	86	257
Big problem	45 13%	4 11%	9 18%	10 16%	8 13%	6 11%	8 10%	13 15%	32 13%	27 12%	11 12%	5 24%	6 7%	39 15%
Small problem	86 25%	10 26%	9 18%	19 31%	13 21%	13 25%	21 27%	27 31%	59 23%	46 21%	31 33%	8 38%	22 26%	64 25%
Not a problem	213 62%	24 63%	32 64%	32 52%	41 66%	34 64%	48 62%	46 53%	165 64%	144 66%	52 55%	8 38%	58 67%	154 60%
Refused	24	-	4	2	6	2	10	6	18	19	4	=	3	21

Q8. IN THE LAST 6 MONTHS, WHETHER DOCTOR OR RESPONDENT THOUGHT RESPONDENT NEEDED TO SEE A SPECIALIST

		Education													1
			Age	of Res	sponde	nt		Ge	nder						Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	558	64	85	88	98	87	130	156	399	;	365	138	35	143	412
Yes	272 49%	20 31%	32 38%	46 52%	61 62%	47 54%	64 49%	83 53%	189 47%		162 44%	77 56%	25 71%	44 31%	227 55%
No	286 51%	44 69%	53 62%	42 48%	37 38%	40 46%	66 51%	73 47%	210 53%		203 56%	61 44%	10 29%	99 69%	185 45%
Refused	4	1	1	_	1	1	-	1	3		3	1	-	-	4

Q9. IN THE LAST 6 MONTHS, HOW MUCH OF A PROBLEM IT WAS TO SEE A SPECIALIST THAT RESPONDENT NEEDED TO SEE

											Educ	ation		Overal Health	
			Age	of Re	sponde:	nt		Ge	nder						Good
	Total	18-24	25-34	35-44	45-54 	55-64 	65+	Male	Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	270	20	32	46	61	47	62	83	187		161	77	25	43	226
Big problem	42 16%	2 10%	4 13%	9 20%	14 23%	5 11%	8 13%	15 18%	27 14%		20 12%	14 18%	6 24%	6 14%	36 16%
Small problem	45 17%	2 10%	2 6%	9 20%	12 20%	4 9%	16 26%	15 18%	30 16%		30 19%	11 14%	4 16%	8 19%	37 16%
Not a problem	183 68%	16 80%	26 81%	28 61%	35 57%	38 81%	38 61%	53 64%	130 70%		111 69%	52 68%	15 60%	29 67%	153 68%
Refused	6	1	1	_	1	1	2	1	5		4	1	-	1	5

Q10. IN THE LAST 6 MONTHS, WHETHER RESPONDENT SAW A SPECIALIST

													Overal Health	
			Age	of Rea	sponde	nt		Ge	nder	Edu	cation 		Good	
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High Schoo or less	l Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	553	65	85	88	97	88	124	154	396	363	136	34	140	410
Yes	254 46%	21 32%	36 42%	38 43%	54 56%	52 59%	53 43%	76 49%	178 45%	157 43%	69 51%	22 65%	41 29%	212 52%
No	299 54%	44 68%	49 58%	50 57%	43 44%	36 41%	71 57%	78 51%	218 55%	206 57%	67 49%	12 35%	99 71%	198 48%
Refused	9	-	1	_	2	-	6	3	6	5	3	1	3	6

Q11. RATING OF SPECIALIST SAW MOST OFTEN IN THE LAST 6 MONTHS

													Overal Health	L
		Age of Respondent							nder	Educ	ation			Good
	Total	18-24				 55-64	65+	 Male	 Female	High School or less	College	Grad+	Excellent Very Good	Poor
Base: Analyzed Respondents	254	21	36	38	54	52	53	76	178	157	69	22	41	212
Top 3 box	201	15	27	25	42	47	45	57	144	123	55	18	35	165
	79%	71%	75%	66%	78%	90%	85%	75%	81%	78%	80%	82%	85%	78%
10 Best possible	129 51%	10 48%	17 47%	12 32%	29 54%	28 54%	33 62%	37 49%	92 52%	88 56%	30 43%	9 41%	23 56%	105 50%
9	33 13%	- -	7 19%	8 21%	5 9%	8 15%	5 9%	10 13%	23 13%	13 8%	13 19%	7 32%	8 20%	25 12%
8	39 15%	5 24%	3 8%	5 13%	8 15%	11 21%	7 13%	10 13%	29 16%	22 14%	12 17%	2 9%	4 10%	35 17%
7	21 8%	1 5%	5 14%	4 11%	6 11%	2 4%	3 6%	11 14%	10 6%	11 7%	7 10%	3 14%	2 5%	19 9%
6	6 2%	2 10%	1 3%	2 5%	1 2%	-	- -	1 1%	5 3%	5 3%	1 1%	- -	2 5%	4 2%
5	11 4%	1 5%	2 6%	3 8%	3 6%	-	2 4%	4 5%	7 4%	8 5%	3 4%	- -	1 2%	10 5%
4	5 2%	- -	1 3%	2 5%	-	1 2%	1 2%	1 1%	4 2%	4 3%	1 1%	- -	<del>-</del> -	5 2%
3	3 1%	- -	<del>-</del>	- -	1 2%	1 2%	1 2%	1 1%	2 1%	2 1%	- -	1 5%	- -	3 1%
Bottom 3 box	7	2	-	2	1	1	1	1	6	4	2	-	1	6
	3%	10%	-	5%	2%	2%	2%	1%	3%	3%	3%	-	2%	3%
2	2 1%	- -	- -	- -	1 2%	1 2%	- -	1 1%	1 1%	- -	2 3%	- -	- -	2 1%
1	2 1%	1 5%	- -	- -	- -	- -	1 2%	- -	2 1%	2 1%	- -	- -	1 2%	1

Q11. RATING OF SPECIALIST SAW MOST OFTEN IN THE LAST 6 MONTHS

										Fdu	cation		Overall Health		
			Age	of Re	sponde	nt		Ge	nder				Good		
	Total	18-24	25-34 	35-44	45-54 	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyzed Respondents	254	21	36	38	54	52	53	76	178	157	69	22	41	212	
0 Worst possible	3 1%	1 5%	-	2 5%	- -	- -	- -	-	3 2%	2 1%	<u>-</u> -	- -	- -	3 1%	
Refused	9	-	1	-	2	-	6	3	6	5	3	1	3	6	
Mean	8.6	7.9	8.7	7.8	8.6	8.9	8.9	8.6	8.5	8.6	8.6	8.8	8.9	8.5	
Std Dev	2.1	2.9	1.7	2.6	1.9	1.8	2.0	1.9	2.2	2.2	1.9	1.7	1.8	2.2	
Std Err	0.13	0.64	0.28	0.42	0.26	0.24	0.27	0.21	0.17	0.18	0.22	0.35	0.28	0.15	

Q12. IN THE LAST 6 MONTHS, WHETHER SPECIALIST SEEN MOST OFTEN WAS THE SAME DOCTOR AS RESPONDENT'S PERSONAL DOCTOR

													Overall Health		
			Age	of Re	sponde	nt		Ge	nder	Educ	ation 		Good		
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyzed Respondents	251	21	36	37	54	50	53	75	176	155	68	22	40	210	
Yes	71 28%	6 29%	7 19%	11 30%	15 28%	11 22%	21 40%	23 31%	48 27%	52 34%	12 18%	4 18%	13 33%	58 28%	
No	180 72%	15 71%	29 81%	26 70%	39 72%	39 78%	32 60%	52 69%	128 73%	103 66%	56 82%	18 82%	27 68%	152 72%	
Refused	12	-	1	1	2	2	6	4	8	7	4	1	4	8	

Q13. IN THE LAST 6 MONTHS, WHETHER CALLED A DOCTOR'S OFFICE OR CLINIC DURING REGULAR OFFICE HOURS TO GET HELP OR ADVICE FOR SELF

		Education											Overall Health	
			Age	of Re	sponde	nt		Ge	nder				Good	
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	561	65	86	88	98	88	130	156	402	367	139	35	143	415
Yes	358 64%	43 66%	52 60%	62 70%	67 68%	62 70%	70 54%	102 65%	254 63%	224 61%	99 71%	25 71%	78 55%	278 67%
No	203 36%	22 34%	34 40%	26 30%	31 32%	26 30%	60 46%	54 35%	148 37%	143 39%	40 29%	10 29%	65 45%	137 33%
Refused	1	-	-	-	1	-	-	1	_	1	-	-	-	1

June, 2003

#### 2003 CAHPS 3.0H ADULT MEDICAID STATE OF COLORADO (302) MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

Q14. IN THE LAST 6 MONTHS, WHEN CALLING DURING REGULAR OFFICE HOURS, FREQUENCY RECEIVED HELP OR ADVICE NEEDED

											Overall Health				
			Age of Respondent						nder		Educ.	ation 		Good	
	Total	18-24	25-34 	35-44	45-54 				Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	357	43	52	62	66	62	70	102	253		224	99	24	78	277
Always (4)	206 58%	27 63%	31 60%	27 44%	38 58%	38 61%	44 63%	56 55%	148 58%		129 58%	57 58%	13 54%	55 71%	149 54%
Usually (3)	94 26%	9 21%	14 27%	20 32%	16 24%	16 26%	18 26%	28 27%	66 26%		58 26%	26 26%	7 29%	15 19%	79 29%
Sometimes (2)	44 12%	6 14%	3 6%	12 19%	11 17%	7 11%	5 7%	14 14%	30 12%		29 13%	11 11%	4 17%	4 5%	40 14%
Never	13 4%	1 2%	4 8%	3 5%	1 2%	1 2%	3 4%	4 4%	9 4%		8 4%	5 5%	- -	4 5%	9 3%
Refused	2	-	-	-	2	-	-	1	1		1	-	1	-	2
Mean	3.4	3.4	3.4	3.1	3.4	3.5	3.5	3.3	3.4		3.4	3.4	3.4	3.6	3.3
Std Dev	0.8	0.8	0.9	0.9	0.8	0.8	0.8	0.9	0.8		0.8	0.9	0.8	0.8	0.8
Std Err	0.04	0.13	0.13	0.11	0.10	0.10	0.10	0.09	0.05	(	0.06	0.09	0.16	0.09	0.05

Q15. IN THE LAST 6 MONTHS, WHETHER RESPONDENT HAD AN ILLNESS, INJURY OR CONDITION THAT NEEDED CARE RIGHT AWAY IN A CLINIC, EMERGENCY ROOM OR DOCTOR'S OFFICE

										Educ	ation		Overal Health	
			Age	of Re	sponde	nt		Ge	nder				T11	Good
	Total	18-24	25-34	35-44 	45-54 	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	557	65	85	88	98	88	127	156	398	366	138	35	141	413
Yes	257 46%	29 45%	38 45%	44 50%	56 57%	44 50%	43 34%	58 37%	198 50%	164 45%	68 49%	17 49%	57 40%	199 48%
No	300 54%	36 55%	47 55%	44 50%	42 43%	44 50%	84 66%	98 63%	200 50%	202 55%	70 51%	18 51%	84 60%	214 52%
Refused	5	_	1	_	1	_	3	1	4	2	1	_	2	3

Q16. IN THE LAST 6 MONTHS, WHEN NEEDED CARE RIGHT AWAY FOR ILLNESS, INJURY OR CONDITION, FREQUENCY RECEIVED CARE AS SOON AS WANTED

													Overal Health	
			Age	of Re	sponde:	nt		Ge:	nder	Educ	ation			Good
	Total	18-24							Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	255	29	38	43	55	44	43	57	197	162	68	17	57	197
Always (4)	163 64%	19 66%	24 63%	22 51%	35 64%	29 66%	32 74%	35 61%	127 64%	108 67%	40 59%	10 59%	42 74%	120 61%
Usually (3)	61 24%	8 28%	8 21%	12 28%	14 25%	11 25%	8 19%	15 26%	46 23%	39 24%	15 22%	6 35%	12 21%	49 25%
Sometimes (2)	24 9%	1 3%	5 13%	7 16%	5 9%	3 7%	3 7%	6 11%	18 9%	11 7%	11 16%	1 6%	2 4%	22 11%
Never	7 3%	1 3%	1 3%	2 5%	1 2%	1 2%	- -	1 2%	6 3%	4 2%	2 3%	- -	1 2%	6 3%
Refused	7	-	1	1	2	-	3	2	5	4	1	_	2	5
Mean	3.5	3.6	3.4	3.3	3.5	3.5	3.7	3.5	3.5	3.5	3.4	3.5	3.7	3.4
Std Dev	0.8	0.7	0.8	0.9	0.7	0.7	0.6	0.8	0.8	0.7	0.9	0.6	0.6	0.8
Std Err	0.05	0.14	0.13	0.14	0.10	0.11	0.09	0.10	0.06	0.06	0.10	0.15	0.08	0.06

June, 2003

Q17. IN THE LAST 6 MONTHS, WHEN RESPONDENT NEEDED CARE RIGHT AWAY FOR AN ILLNESS, INJURY OR CONDITION, NUMBER OF DAYS RESPONDENT USUALLY HAD TO WAIT BETWEEN TRYING TO GET CARE AND ACTUALLY SEEING A PROVIDER

Overall Health Education Age of Respondent Gender Good ----- High School Some College Excellent Fair Total 18-24 25-34 35-44 45-54 55-64 65+ Male Female or less College Grad+ Very Good Poor Base: Analyzed 29 162 254 38 43 56 42 43 57 196 67 17 57 196 Respondents Same day 127 12 24 17 25 25 23 37 90 80 37 8 30 96 40% (0) 50% 41% 63% 45% 60% 53% 65% 46% 49% 55% 47% 53% 49% 1 day 37 6 6 5 7 5 7 6 31 26 9 1 14 23 15% 21% 16% 12% 13% 12% 16% 11% 16% 16% 13% 6% 25% 12% (1) 2 days 22 2 3 8 3 2 19 13 7 1 4 18 6 (2) 9% 7% 8% 19% 11% 7% 4% 10% 8% 10% 6% 7% 9% 3 days 2 3 2 6 2 3 9 5 2 3 16 19 4 16 (3) 7% 14% 5% 7% 4% 14% 5% 5% 88 6% 7% 12% 5% 8% 4-7 days 4 5 9 3 3 20 16 6 1 4 20 24 4 12% 7% 7% 7% 10% 10% 7% 10% (5.5)9% 14% 16% 9% 6% 8-14 days 13 1 2 3 3 4 3 10 8 1 4 1 12 (11)5% 3% 5% 5% 7% 9% 5% 5% 5% 1% 24% 2% 6% 15 days or longer 2 3 2 2 12 1 4 1 10 10 1 11 (17)5% 3% 5% 7% 7% 2% 4% 6% 3% 2% 6% 5% Refused 8 1 1 2 3 2 6 4 2. 2 6 1 Mean 2.1 1.7 3.0 3.1 1.7 2.2 1.9 2.6 2.6 1.7 3.4 1.4 2.7 Std Dev 4.2 3.4 4.1 4.7 4.8 3.1 4.0 4.0 4.3 4.6 3.4 2.9 4.5 Std Err 0.27 0.64 0.67 0.72 0.65 0.47 0.62 0.53 0.31 0.36 0.42 1.11 0.38 0.32

Q18. IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES NEEDED HEALTH CARE RIGHT AWAY, WHETHER MADE ANY APPOINTMENTS WITH A DOCTOR OR OTHER HEALTH PROVIDER FOR HEALTH CARE

26%

3

Refused

25%

28%

27%

24%

1

24%

1

June, 2003

Overall

31%

24%

3

											Edua	ation		Health	<u>.</u>	
			Age	of Res	sponde	nt		Ge	nder						Good	
	Total	18-24	25-34	35-44	45-54	55-64	65+	Male	Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyze Respond		65	86	88	98	87	129	157	399		367	138	35	143	413	
Yes	415 74%	49 75%	62 72%	64 73%	74 76%	66 76%	96 74%	117 75%	296 74%		263 72%	109 79%	30 86%	99 69%	313 76%	
No	144	16	24	24	24	21	33	40	103		104	29	5	44	100	

26%

1

25%

26%

3

28%

21%

1

14%

Q19. IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES NEEDED HEALTH CARE RIGHT AWAY, FREQUENCY RECEIVED AN APPOINTMENT FOR HEALTH CARE AS SOON AS WANTED

Base: Analyzed

Always (4)
Usually (3)

Sometimes (2)

Never

(1)

Mean

Refused

Std Dev

Std Err

Respondents

12

7

0.8

3.3 3.2

0.8

3

0.8

5%

5%

3.3 3.1 3.2 3.4

0.04 0.12 0.11 0.11 0.10 0.10 0.08 0.08

0.8

1%

0.8

0.8

June, 2003

Overall Health

8

6

3.2

0.8

0.05

1

3.4

0.8

0.08

3%

		Age	of Res	znondei	nt		Gei	nder		Educa	ation			Good
Total	18-24				55-64	65+		Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
411	49	61	64	72	66	95	117	292		259	109	30	98	310
200	21	30	24	32	39	51	55	143		131	48	13	55	142
49%	43%	49%	38%	44%	59%	54%	47%	49%		51%	44%	43%	56%	46%
138	19	22	27	25	15	29	43	95		84	40	10	29	109
34%	39%	36%	42%	35%	23%	31%	37%	33%		32%	37%	33%	30%	35%
61	7	6	10	14	12	12	14	47		37	16	7	10	51
15%	14%	10%	16%	19%	18%	13%	12%	16%		14%	15%	23%	10%	16%

7

7

3.3

0.8

0.05

2%

3%

5

3.3

0.8

0.05

5%

1

3.2

0.8

0.15

3.2

0.9

0.08

4%

3.3

0.8

2

3.3

0.8

Q20. IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES NEEDED HEALTH CARE RIGHT AWAY, NUMBER OF DAYS USUALLY HAD TO WAIT BETWEEN MAKING AN APPOINTMENT AND ACTUALLY SEEING A PROVIDER

													Overal Health	
			Age	of Re	sponde:	nt.		Ge:	nder	Edu	cation 			Good
	Total	18-24							 Female	High School		Grad+	Excellent Very Good	Fair
Base: Analyzed Respondents	412	49	61	64	73	65	96	117	293	260	109	30	98	311
Same day	66 16%	4 8%	12 20%	12 19%	10 14%	11 17%	14 15%	23 20%	43 15%	45 17%	18 17%	- -	18 18%	48 15%
1 day (1)	62 15%	7 14%	12 20%	5 8%	11 15%	13 20%	13 14%	20 17%	41 14%	38 15%	17 16%	3 10%	16 16%	45 14%
2-3 days (2.5)	99 24%	17 35%	10 16%	21 33%	11 15%	14 22%	26 27%	19 16%	79 27%	64 25%	27 25%	6 20%	23 23%	75 24%
4-7 days (5.5)	85 21%	11 22%	9 15%	11 17%	22 30%	11 17%	21 22%	23 20%	62 21%	56 22%	17 16%	9 30%	20 20%	64 21%
8-14 days (11)	47 11%	6 12%	7 11%	5 8%	11 15%	7 11%	11 11%	11 9%	36 12%	24 9%	17 16%	5 17%	12 12%	35 11%
15-30 days (22.5)	32 8%	1 2%	6 10%	5 8%	5 7%	8 12%	7 7%	15 13%	17 6%	22 8%	4 4%	6 20%	4 4%	28 9%
31 days or longer (33)	21 5%	3 6%	5 8%	5 8%	3 4%	1 2%	4 4%	6 5%	15 5%	11 4%	9 8%	1 3%	5 5%	16 5%
Refused	6	-	1	_	2	2	1	-	6	4	1	-	1	5
Mean	6.6	6.1	7.6	7.0	6.7	6.1	6.3	7.3	6.3	6.3	6.9	9.7	5.8	6.8
Std Dev	8.6	8.1	10.1	9.7	8.0	7.9	8.1	9.3	8.3	8.3	9.3	8.8	8.1	8.7
Std Err	0.42	1.16	1.30	1.21	0.93	0.98	0.83	0.86	0.48	0.52	0.89	1.60	0.82	0.50

Q21. IN THE LAST 6 MONTHS, NUMBER OF VISITS RESPONDENT MADE TO THE EMERGENCY ROOM TO GET CARE FOR SELF

June, 2003

											- 1			Overal Health	
			Age	of Re	sponde	nt		Ge:	nder			ation			Good
	Total	18-24	25-34 	35-44	45-54	55-64 		Male	Female		School less	Some College		Excellent Very Good	
Base: Analyzed Respondents	559	65	86	87	98	87	130	156	400	;	367	139	34	142	414
None (0)	399 71%	41 63%	64 74%	60 69%	65 66%	62 71%	103 79%	120 77%	277 69%		263 72%	95 68%	25 74%	114 80%	283 68%
1 visit (1)	100 18%	12 18%	17 20%	16 18%	18 18%	17 20%	19 15%	23 15%	77 19%		60 16%	32 23%	6 18%	22 15%	78 19%
2 visits (2)	26 5%	4 6%	1 1%	3 3%	5 5%	6 7%	6 5%	4 3%	21 5%		18 5%	5 4%	3 9%	2 1%	23 6%
3 visits (3)	17 3%	3 5%	4 5%	2 2%	6 6%	1 1%	1 1%	6 4%	11 3%		12 3%	4 3%	- -	4 3%	13 3%
4 visits (4)	6 1%	1 2%	- -	2 2%	2 2%	1 1%	- -	- -	6 2%		4 1%	2 1%	- -	- -	6 1%
5 to 9 visits (7)	9 2%	4 6%	- -	2 2%	2 2%	- -	1 1%	2 1%	7 2%		8 2%	1 1%	- -	- -	9 2%
10 or more visits (12)	2	- -	- -	2 2%	- -	- -	- -	1 1%	1 *		2 1%	- -	- -	- -	2 *
Refused/Multiple Responses	3	-	-	1	1	1	-	1	2		1	-	1	1	2
Mean	0.6	0.9	0.4	0.9	0.7	0.4	0.3	0.5	0.6	(	0.6	0.5	0.4	0.3	0.7
Std Dev	1.3	1.8	0.7	2.2	1.3	0.8	0.8	1.4	1.3	:	1.5	1.0	0.6	0.6	1.5
Std Err	0.06	0.22	0.08	0.23	0.14	0.08	0.07	0.11	0.07	0	.08	0.08	0.11	0.05	0.07

Multiple Responses Accepted

Q22. IN THE LAST 6 MONTHS, NOT COUNTING THE TIMES WENT TO THE EMERGENCY ROOM, NUMBER OF VISITS RESPONDENT MADE TO A DOCTOR'S OFFICE OR CLINIC TO GET CARE FOR SELF

										-1			Overal Health	
			Age	of Re	sponde	nt		Ge:	nder	Educ	ation 			Good
	Total	 18-24								High School or less				
Base: Analyzed Respondents	562	65	86	88	99	88	130	157	402	368	139	35	143	416
None (0)	80	12	9	12	14	10	23	23	56	59	15	3	29	51
	14%	18%	10%	14%	14%	11%	18%	15%	14%	16%	11%	9%	20%	12%
1 visit (1)	108	17	18	17	11	9	35	36	72	71	23	8	35	73
	19%	26%	21%	19%	11%	10%	27%	23%	18%	19%	17%	23%	24%	18%
2 visits (2)	98	13	15	11	11	21	25	29	67	64	21	6	28	69
	17%	20%	17%	13%	11%	24%	19%	18%	17%	17%	15%	17%	20%	17%
3 visits (3)	77	6	11	16	13	16	15	26	51	44	24	6	20	57
	14%	9%	13%	18%	13%	18%	12%	17%	13%	12%	17%	17%	14%	14%
4 visits (4)	62	1	19	5	16	8	11	13	49	37	20	4	11	51
	11%	2%	22%	6%	16%	9%	8%	8%	12%	10%	14%	11%	8%	12%
5 to 9 visits (7)	91	8	12	13	23	20	15	21	70	65	21	5	13	77
	16%	12%	14%	15%	23%	23%	12%	13%	17%	18%	15%	14%	9%	19%
10 or more visits (12)	46	8	2	14	11	4	6	9	37	28	15	3	7	38
	8%	12%	2%	16%	11%	5%	5%	6%	9%	8%	11%	9%	5%	9%
Mean	3.5	3.3	3.1	4.2	4.3	3.6	2.7	3.1	3.7	3.5	3.9	3.6	2.6	3.8
Std Dev	3.4	3.9	2.5	4.0	3.6	3.0	2.9	3.1	3.5	3.4	3.5	3.3	2.9	3.4
Std Err	0.14	0.48	0.27	0.43	0.36	0.32	0.26	0.24	0.17	0.18	0.30	0.57	0.24	0.17

Q23. IN THE LAST 6 MONTHS, WHETHER DOCTOR OR RESPONDENT BELIEVED THAT RESPONDENT NEEDED ANY CARE, TESTS OR TREATMENT

											Educa	ation		Overal Health	
	Total	 18-24			sponde:  45-54	nt  55-64	 65+		nder  Female	_	School less	Some College	College Grad+	Excellent Very Good	Good Fair Poor
Base: Analyzed Respondents	480	53	76	76	85	77	107	134	344		308	124	32	113	364
Yes	376 78%	37 70%	54 71%	61 80%	78 92%	62 81%	80 75%	114 85%	260 76%		236 77%	102 82%	28 88%	74 65%	299 82%
No	104 22%	16 30%	22 29%	15 20%	7 8%	15 19%	27 25%	20 15%	84 24%		72 23%	22 18%	4 13%	39 35%	65 18%
Refused	2	-	1	_	_	1	_	_	2		1	-	-	1	1

Q24. IN THE LAST 6 MONTHS, HOW MUCH OF A PROBLEM IT WAS TO GET THE NECESSARY CARE, TESTS OR TREATMENT

											Fduc	ation		Overal Health	
				Age	of Re	sponde	nt		Ge:	nder			 College	Excellent	Good Fair
		Total	18-24	25-34	35-44	45-54 	55-64 	65+ 	Male	Female	High School or less	Some College		Very Good	Poor
	Analyzed Respondents	372	37	54	59	77	61	80	114	256	232	102	28	74	295
Big pr	oblem	24 6%	2 5%	-	3 5%	8 10%	4 7%	7 9%	8 7%	16 6%	14 6%	5 5%	5 18%	4 5%	20 7%
Small	problem	67 18%	2 5%	8 15%	10 17%	21 27%	7 11%	19 24%	21 18%	46 18%	39 17%	20 20%	5 18%	11 15%	56 19%
Not a	problem	281 76%	33 89%	46 85%	46 78%	48 62%	50 82%	54 68%	85 75%	194 76%	179 77%	77 75%	18 64%	59 80%	219 74%
Refuse	d	6	-	1	2	1	2	-	-	6	5	_	_	1	5

June, 2003

Overall

#### 2003 CAHPS 3.0H ADULT MEDICAID STATE OF COLORADO (302)

MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

Q25. IN THE LAST 6 MONTHS, WHETHER NEEDED APPROVAL FROM HEALTH PLAN FOR ANY CARE, TESTS OR TREATMENT

Health Education Age of Respondent Gender ----------- High School Some College Excellent Fair Total 18-24 25-34 35-44 45-54 55-64 65+ Male Female or less College Grad+ Very Good Poor Base: Analyzed 478 53 77 74 83 78 107 132 344 306 123 32 113 362 Respondents 132 8 20 30 23 22 28 32 100 84 36 9 20 111 Yes 28% 15% 26% 41% 28% 28% 26% 24% 29% 27% 29% 28% 18% 31% 346 45 57 60 56 79 100 244 222 87 23 93 251 44 No 72% 85% 74% 59% 72% 72% 74% 76% 71% 73% 71% 72% 82% 69% Refused 4 - - 2 2 - - 2 2 3 1 -1 3

Q26. IN THE LAST 6 MONTHS, HOW MUCH OF A PROBLEM WERE DELAYS IN HEALTH CARE, WHILE WAITING FOR APPROVAL FROM HEALTH PLAN

				Overal Health										
			Age	of Re	sponde:	nt		Ge	nder	Educ	ation 			Good
	Total	18-24	25-34 	35-44	45-54 	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	131	8	19	30	23	22	28	32	99	84	36	9	19	111
Big problem	16 12%	1 13%	1 5%	7 23%	4 17%	1 5%	2 7%	1 3%	15 15%	8 10%	6 17%	1 11%	3 16%	13 12%
Small problem	33 25%	2 25%	4 21%	9 30%	5 22%	3 14%	10 36%	13 41%	20 20%	21 25%	8 22%	4 44%	5 26%	28 25%
Not a problem	82 63%	5 63%	14 74%	14 47%	14 61%	18 82%	16 57%	18 56%	64 65%	55 65%	22 61%	4 44%	11 58%	70 63%
Refused	5	_	1	2	2	_	_	2	3	3	1	_	2	3

Q27. IN THE LAST 6 MONTHS, FREQUENCY WAS TAKEN TO EXAM ROOM WITHIN 15 MINUTES OF APPOINTMENT

													Overal Health	
			Age	of Re	sponde:	nt		Gei	nder	Educ	ation			Good
	Total	18-24					65+ 			High School or less	Some College		Excellent Very Good	Fair Poor
Base: Analyzed Respondents	476	52	76	74	85	78	105	134	340	305	123	32	113	360
Always (4)	114 24%	13 25%	23 30%	13 18%	22 26%	22 28%	19 18%	36 27%	76 22%	85 28%	20 16%	6 19%	26 23%	86 24%
Usually (3)	175 37%	22 42%	23 30%	25 34%	30 35%	28 36%	46 44%	58 43%	117 34%	103 34%	52 42%	16 50%	39 35%	135 38%
Sometimes (2)	110 23%	11 21%	14 18%	21 28%	16 19%	20 26%	28 27%	22 16%	88 26%	68 22%	30 24%	7 22%	24 21%	86 24%
Never	77 16%	6 12%	16 21%	15 20%	17 20%	8 10%	12 11%	18 13%	59 17%	49 16%	21 17%	3 9%	24 21%	53 15%
Refused	6	1	1	2	_	-	2	-	6	4	1	-	1	5
Mean	2.7	2.8	2.7	2.5	2.7	2.8	2.7	2.8	2.6	2.7	2.6	2.8	2.6	2.7
Std Dev	1.0	1.0	1.1	1.0	1.1	1.0	0.9	1.0	1.0	1.0	1.0	0.9	1.1	1.0
Std Err	0.05	0.13	0.13	0.12	0.12	0.11	0.09	0.08	0.06	0.06	0.09	0.15	0.10	0.05

Q28. IN THE LAST 6 MONTHS, FREQUENCY THE OFFICE STAFF AT A DOCTOR'S OFFICE OR CLINIC TREATED RESPONDENT WITH COURTESY AND RESPECT

													Overal Health	
			Age	of Re	sponde	nt		Gei	nder	Educ	ation			Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	480	53	77	75	84	78	107	134	344	307	124	32	114	363
Always (4)	359 75%	45 85%	56 73%	48 64%	67 80%	57 73%	81 76%	100 75%	257 75%	234 76%	91 73%	21 66%	91 80%	265 73%
Usually (3)	82 17%	6 11%	17 22%	13 17%	10 12%	17 22%	18 17%	23 17%	59 17%	45 15%	24 19%	10 31%	16 14%	66 18%
Sometimes (2)	28 6%	1 2%	3 4%	11 15%	5 6%	4 5%	4 4%	7 5%	21 6%	20 7%	6 5%	1 3%	5 4%	23 6%
Never (1)	11 2%	1 2%	1 1%	3 4%	2 2%	- -	4 4%	4 3%	7 2%	8 3%	3 2%	- -	2 2%	9 2%
Refused	2	-	-	1	1	-	-	-	2	2	-	-	-	2
Mean	3.6	3.8	3.7	3.4	3.7	3.7	3.6	3.6	3.6	3.6	3.6	3.6	3.7	3.6
Std Dev	0.7	0.6	0.6	0.9	0.7	0.6	0.7	0.7	0.7	0.7	0.7	0.6	0.6	0.7
Std Err	0.03	0.08	0.07	0.10	0.08	0.06	0.07	0.06	0.04	0.04	0.06	0.10	0.06	0.04

Q29. IN THE LAST 6 MONTHS, FREQUENCY THE OFFICE STAFF AT A DOCTOR'S OFFICE OR CLINIC WAS AS HELPFUL AS RESPONDENT THOUGHT THEY SHOULD BE

													Overal Health	
			Age	of Re	sponde:	nt		Ge:	nder	Edu	cation 			Good
	Total	18-24					65+ 	Male	Female	High Schoo or less	l Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	480	53	77	74	85	78	107	134	344	308	124	32	114	363
Always	287 60%	36 68%	43 56%	35 47%	56 66%	51 65%	63 59%	78 58%	207 60%	189 61%	74 60%	14 44%	70 61%	214 59%
Usually (3)	136 28%	12 23%	29 38%	24 32%	18 21%	19 24%	32 30%	42 31%	94 27%	80 26%	37 30%	15 47%	34 30%	102 28%
Sometimes (2)	46 10%	4 8%	5 6%	10 14%	11 13%	8 10%	8 7%	12 9%	34 10%	32 10%	9 7%	3 9%	8 7%	38 10%
Never	11 2%	1 2%	- -	5 7%	- -	- -	4 4%	2 1%	9 3%	7 2%	4 3%	<u>-</u>	2 2%	9 2%
Refused	2	-	-	2	-	-	-	-	2	1	-	-	-	2
Mean	3.5	3.6	3.5	3.2	3.5	3.6	3.4	3.5	3.5	3.5	3.5	3.3	3.5	3.4
Std Dev	0.8	0.7	0.6	0.9	0.7	0.7	0.8	0.7	0.8	0.8	0.8	0.7	0.7	0.8
Std Err	0.03	0.10	0.07	0.11	0.08	0.08	0.08	0.06	0.04	0.04	0.07	0.12	0.07	0.04

Q30. IN THE LAST 6 MONTHS, FREQUENCY THE DOCTORS OR OTHER HEALTH PROVIDERS LISTENED CAREFULLY TO RESPONDENT

													Overal Health	
			Age	of Re	sponde:	nt		Ger	nder		ation			Good
	Total	18-24	25-34 	35-44	45-54				Female	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	479	52	77	76	85	77	106	134	343	307	123	32	114	362
Always (4)	309 65%	35 67%	51 66%	37 49%	61 72%	52 68%	69 65%	76 57%	231 67%	210 68%	70 57%	17 53%	83 73%	223 62%
Usually (3)	119 25%	13 25%	19 25%	22 29%	13 15%	21 27%	29 27%	48 36%	71 21%	67 22%	35 28%	13 41%	24 21%	95 26%
Sometimes (2)	46 10%	4 8%	6 8%	14 18%	10 12%	4 5%	8 8%	10 7%	36 10%	26 8%	17 14%	2 6%	7 6%	39 11%
Never (1)	5 1%	- -	1 1%	3 4%	1 1%	- -	- -	-	5 1%	4 1%	1 1%	- -	- -	5 1%
Refused	3	1	_	-	_	1	1	-	3	2	1	-	-	3
Mean	3.5	3.6	3.6	3.2	3.6	3.6	3.6	3.5	3.5	3.6	3.4	3.5	3.7	3.5
Std Dev	0.7	0.6	0.7	0.9	0.7	0.6	0.6	0.6	0.7	0.7	0.8	0.6	0.6	0.7
Std Err	0.03	0.09	0.08	0.10	0.08	0.07	0.06	0.05	0.04	0.04	0.07	0.11	0.06	0.04

Q31. IN THE LAST 6 MONTHS, FREQUENCY RESPONDENT HAD A HARD TIME SPEAKING WITH OR UNDERSTANDING A DOCTOR OR OTHER HEALTH PROVIDERS BECAUSE SPOKE DIFFERENT LANGUAGES

													Overal Health	
			Age	of Re	sponde	nt		Ge.	nder	Educ	ation 			Good
	Total	18-24 					65+ 			111311 0011001	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	480	52	77	75	85	78	107	134	344	308	123	32	114	363
Always (4)	27 6%	1 2%	4 5%	6 8%	2 2%	6 8%	8 7%	8 6%	19 6%	23 7%	2 2%	1 3%	6 5%	20 6%
Usually (3)	15 3%	1 2%	2 3%	3 4%	- -	4 5%	5 5%	3 2%	12 3%	8 3%	4 3%	1 3%	2 2%	13 4%
Sometimes (2)	59 12%	3 6%	1 1%	6 8%	13 15%	12 15%	23 21%	21 16%	38 11%	38 12%	13 11%	8 25%	16 14%	42 12%
Never	379 79%	47 90%	70 91%	60 80%	70 82%	56 72%	71 66%	102 76%	275 80%	239 78%	104 85%	22 69%	90 79%	288 79%
Refused	2	1	_	1	_	_	_	_	2	1	1	-	-	2
Mean	1.4	1.2	1.2	1.4	1.2	1.5	1.5	1.4	1.3	1.4	1.2	1.4	1.3	1.4
Std Dev	0.8	0.5	0.7	0.9	0.6	0.9	0.9	0.8	0.8	0.9	0.6	0.7	0.8	0.8
Std Err	0.04	0.07	0.08	0.10	0.06	0.10	0.09	0.07	0.04	0.05	0.05	0.13	0.07	0.04

Q32. IN THE LAST 6 MONTHS, FREQUENCY THAT DOCTORS OR OTHER HEALTH PROVIDERS EXPLAINED THINGS IN A WAY THAT THE RESPONDENT COULD UNDERSTAND

													Overal Health	
			Age	of Re	sponde:	nt		Ge:	nder	Educ	ation			Good
	Total	18-24					65+ 		Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	479	52	76	76	85	77	107	134	343	307	123	32	114	362
Always (4)	288 60%	30 58%	53 70%	40 53%	51 60%	45 58%	65 61%	80 60%	206 60%	184 60%	78 63%	18 56%	78 68%	208 57%
Usually (3)	129 27%	12 23%	18 24%	22 29%	22 26%	24 31%	31 29%	41 31%	88 26%	80 26%	30 24%	14 44%	26 23%	103 28%
Sometimes (2)	48 10%	8 15%	3 4%	13 17%	8 9%	7 9%	9 8%	9 7%	39 11%	36 12%	10 8%	- -	6 5%	41 11%
Never	14 3%	2 4%	2 3%	1 1%	4 5%	1 1%	2 2%	4 3%	10 3%	7 2%	5 4%	- -	4 4%	10 3%
Refused	3	1	1	-	_	1	-	-	3	2	1	_	-	3
Mean	3.4	3.3	3.6	3.3	3.4	3.5	3.5	3.5	3.4	3.4	3.5	3.6	3.6	3.4
Std Dev	0.8	0.9	0.7	0.8	0.8	0.7	0.7	0.8	0.8	0.8	0.8	0.5	0.8	0.8
Std Err	0.04	0.12	0.08	0.09	0.09	0.08	0.07	0.07	0.04	0.04	0.07	0.09	0.07	0.04

Q33. IN THE LAST 6 MONTHS, FREQUENCY THE DOCTORS OR OTHER HEALTH PROVIDERS SHOWED RESPECT FOR WHAT RESPONDENT HAD TO SAY

													Overal Health	
			Age	of Re	sponde	nt		Ge:	nder	Educ	ation			Good
	Total	18-24 								High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	481	53	77	76	85	77	107	134	345	308	124	32	114	364
Always (4)	315 65%	39 74%	51 66%	43 57%	53 62%	50 65%	73 68%	83 62%	230 67%	207 67%	81 65%	18 56%	85 75%	227 62%
Usually (3)	117 24%	6 11%	23 30%	23 30%	19 22%	21 27%	25 23%	39 29%	78 23%	70 23%	29 23%	12 38%	23 20%	94 26%
Sometimes (2)	39 8%	7 13%	2 3%	7 9%	10 12%	5 6%	8 7%	9 7%	30 9%	25 8%	11 9%	2 6%	5 4%	34 9%
Never (1)	10 2%	1 2%	1 1%	3 4%	3 4%	1 1%	1 1%	3 2%	7 2%	6 2%	3 2%	- -	1 1%	9 2%
Refused	1	-	-	-	-	1	-	-	1	1	_	_	_	1
Mean	3.5	3.6	3.6	3.4	3.4	3.6	3.6	3.5	3.5	3.6	3.5	3.5	3.7	3.5
Std Dev	0.7	0.8	0.6	0.8	0.8	0.7	0.7	0.7	0.7	0.7	0.8	0.6	0.6	0.8
Std Err	0.03	0.11	0.07	0.09	0.09	0.08	0.06	0.06	0.04	0.04	0.07	0.11	0.06	0.04

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### ADULT MEDICAID STATE OF COLORADO (302) MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

Q34. IN THE LAST 6 MONTHS, FREQUENCY THAT THE DOCTORS OR OTHER HEALTH PROVIDERS SPENT ENOUGH TIME WITH RESPONDENT

													Overal Health	
			Age	of Re	sponde	nt		Ge.	nder	Educ	ation 			Good
	Total	 18-24					 65+ 			High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	479	52	77	75	85	77	107	134	343	308	123	32	114	362
Always (4)	255 53%	30 58%	39 51%	34 45%	50 59%	41 53%	57 53%	67 50%	186 54%	172 56%	61 50%	13 41%	71 62%	181 50%
Usually (3)	152 32%	15 29%	26 34%	25 33%	20 24%	29 38%	36 34%	49 37%	103 30%	91 30%	43 35%	14 44%	30 26%	122 34%
Sometimes (2)	61 13%	6 12%	10 13%	14 19%	13 15%	6 8%	12 11%	16 12%	45 13%	38 12%	17 14%	4 13%	11 10%	50 14%
Never	11 2%	1 2%	2 3%	2 3%	2 2%	1 1%	2 2%	2 1%	9 3%	7 2%	2 2%	1 3%	2 2%	9 2%
Refused	3	1	-	1	-	1	-	-	3	1	1		-	3
Mean	3.4	3.4	3.3	3.2	3.4	3.4	3.4	3.4	3.4	3.4	3.3	3.2	3.5	3.3
Std Dev	0.8	0.8	0.8	0.8	0.8	0.7	0.8	0.7	0.8	0.8	0.8	0.8	0.7	0.8
Std Err	0.04	0.11	0.09	0.10	0.09	0.08	0.07	0.06	0.04	0.04	0.07	0.14	0.07	0.04

Q35. RATING OF ALL RESPONDENT'S HEALTH CARE IN THE LAST 6 MONTHS

														Overal Health	1
			Age	of Rea	sponde:	nt		Ge	nder	E		tion			Good
	Total					55-64	65+	Male	Female	High Sch or les	ss	College	Grad+	Excellent Very Good	Poor
Base: Analyzed Respondents	479	52	77	76	85	76	107	134	343	307	7	123	32	114	362
Top 3 box	364	41	57	50	62	67	82	100	262	235	5	93	21	95	266
	76%	79%	74%	66%	73%	88%	77%	75%	76%	75	7%	76%	66%	83%	73%
10 Best possible	193 40%	21 40%	26 34%	25 33%	37 44%	33 43%	48 45%	40 30%	151 44%	135 44		40 33%	11 34%	54 47%	136 38%
9	87 18%	13 25%	17 22%	13 17%	14 16%	17 22%	12 11%	32 24%	55 16%	53 17		30 24%	4 13%	28 25%	59 16%
8	84	7	14	12	11	17	22	28	56	47	7	23	6	13	71
	18%	13%	18%	16%	13%	22%	21%	21%	16%	15	5%	19%	19%	11%	20%
7	45 9%	6 12%	4 5%	8 11%	11 13%	5 7%	11 10%	15 11%	30 9%	24	1 3%	13 11%	8 25%	8 7%	37 10%
6	19 4%	2 4%	5 6%	5 7%	1 1%	1 1%	5 5%	5 4%	14 4%	14	1 5%	4 3%	1 3%	5 4%	14 4%
5	26 5%	2 4%	8 10%	2 3%	5 6%	3 4%	5 5%	9 7%	17 5%	18 6	3 5%	7 6%	1 3%	2 2%	24 7%
4	9 2%	- -	- -	5 7%	2 2%	<u>-</u>	2 2%	2 1%	7 2%		7 2%	- -	1 3%	1 1%	8 2%
3	4 1%	- -	- -	3 4%	1 1%	<u>-</u>	<u>-</u>	<u>-</u>	4 1%	1	L *	3 2%	- -	1 1%	3 1%
Bottom 3 box	12	1	3	3	3	-	2	3	9	8	3	3	-	2	10
	3%	2%	4%	4%	4%	-	2%	2%	3%	3	3%	2%	-	2%	3%
2	4 1%	- -	1 1%	1 1%	2 2%	<u>-</u> -	<del>-</del>	1 1%	3 1%		3 L%	1 1%	-	- -	4 1%
1	2	1 2%	-	- -	- -	- -	1 1%	- -	2 1%	2	2 L%	- -	- -	1 1%	1

Q35. RATING OF ALL RESPONDENT'S HEALTH CARE IN THE LAST 6 MONTHS

											<b></b>			Overal Health	
			Age	of Res	sponde:	nt		Ge	nder			ation			Good
	Total	18-24	25-34	35-44	45-54 	55-64 	65+ 	Male	Female	High S or l		Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	479	52	77	76	85	76	107	134	343	3	307	123	32	114	362
0 Worst possible	6 1%	- -	2 3%	2 3%	1 1%	- -	1 1%	2 1%	4 1%		3 1%	2 2%	 -	1 1%	5 1%
Refused	3	1	-	-	-	2	-	-	3		2	1	-	-	3
Mean	8.4	8.6	8.1	7.8	8.3	8.9	8.5	8.2	8.4	8	3.4	8.3	8.3	8.8	8.2
Std Dev	2.1	1.8	2.2	2.5	2.2	1.3	1.9	1.9	2.1	2	2.1	2.1	1.6	1.8	2.1
Std Err	0.09	0.24	0.25	0.29	0.24	0.15	0.19	0.17	0.11	0.	.12	0.18	0.29	0.17	0.11

Q36. IN THE LAST 6 MONTHS, WHETHER RESPONDENT NEEDED AN INTERPRETER TO HELP SPEAK WITH DOCTORS OR OTHER HEALTH PROVIDERS

											Educ	ation		Overal Health	
			Age	of Re	sponde:	nt		Ge	nder		School		 College	Excellent	Good Fair
	Total	18-24	25-34	35-44	45-54	55-64	65+	Male	Female	_	less	College	_	Very Good	Poor
Base: Analyzed Respondents	557	65	86	88	98	88	126	156	398		364	139	35	141	413
Yes	70 13%	3 5%	5 6%	5 6%	2 2%	10 11%	45 36%	29 19%	41 10%		49 13%	10 7%	8 23%	19 13%	50 12%
No	487 87%	62 95%	81 94%	83 94%	96 98%	78 89%	81 64%	127 81%	357 90%		315 87%	129 93%	27 77%	122 87%	363 88%
Refused	5	-	_	_	1	-	4	1	4		4	-	-	2	3

Q37. IN THE LAST 6 MONTHS, FREQUENCY RESPONDENT RECEIVED AN INTERPRETER TO HELP SPEAK WITH DOCTORS OR OTHER HEALTH PROVIDERS WHEN NEEDED

													Overal Health	
			Age	of Re	sponde	nt.		Ge:	nder	Educ	ation			Good
	Total	18-24					65+ 	 Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	68	3	5	3	2	10	45	29	39	47	10	8	19	48
Always (4)	36 53%	1 33%	3 60%	2 67%	1 50%	5 50%	24 53%	16 55%	20 51%	25 53%	5 50%	5 63%	11 58%	25 52%
Usually (3)	13 19%	- -	1 20%	1 33%	1 50%	<del>-</del>	10 22%	5 17%	8 21%	9 19%	2 20%	2 25%	2 11%	11 23%
Sometimes (2)	11 16%	- -	1 20%	- -	- -	3 30%	7 16%	4 14%	7 18%	8 17%	2 20%	- -	4 21%	6 13%
Never	8 12%	2 67%	- -	- -	- -	2 20%	4 9%	4 14%	4 10%	5 11%	1 10%	1 13%	2 11%	6 13%
Refused	7	-	-	2	1	-	4	1	6	6	_	_	2	5
Mean	3.1	2.0	3.4	3.7	3.5	2.8	3.2	3.1	3.1	3.1	3.1	3.4	3.2	3.1
Std Dev	1.1	1.7	0.9	0.6	0.7	1.3	1.0	1.1	1.1	1.1	1.1	1.1	1.1	1.1
Std Err	0.13	1.00	0.40	0.33	0.50	0.42	0.15	0.21	0.17	0.16	0.35	0.38	0.26	0.15

Q38. WHETHER COVERED BY HEALTH PLAN FROM WHICH RESPONDENT MAY HAVE TO CHOOSE A DOCTOR, GO TO A CLINIC, OR HEALTH CARE CENTER ON THE PLAN LIST

										Educ	ation		Overal Health	
			Age	of Re	sponde	nt		Ge	nder					Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	535	62	85	86	96	78	122	150	383	348	135	34	135	397
Yes	305 57%	40 65%	44 52%	51 59%	49 51%	48 62%	71 58%	78 52%	227 59%	198 57%	78 58%	19 56%	80 59%	224 56%
No	230 43%	22 35%	41 48%	35 41%	47 49%	30 38%	51 42%	72 48%	156 41%	150 43%	57 42%	15 44%	55 41%	173 44%
Refused	27	3	1	2	3	10	8	7	19	20	4	1	8	19

Q39. WHETHER RESPONDENT CHOSE OR WAS TOLD WHICH HEALTH PLAN THEY WERE IN

										n.i.			Overal Health	
			Age	of Re	sponde	nt		Ge	nder	Educ	ation 			Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	299	40	43	49	49	48	68	77	222	194	76	19	80	218
Chose plan	177 59%	29 73%	30 70%	24 49%	32 65%	24 50%	37 54%	46 60%	131 59%	115 59%	43 57%	15 79%	55 69%	122 56%
Was told which plan was in	122 41%	11 28%	13 30%	25 51%	17 35%	24 50%	31 46%	31 40%	91 41%	79 41%	33 43%	4 21%	25 31%	96 44%
Refused	33	3	2	4	3	10	11	8	24	24	6	1	8	25

Q40. WHETHER RECEIVED ANY INFORMATION (IN WRITING, BY TELEPHONE, ON INTERNET OR IN PERSON)
ABOUT THE HEALTH PLAN BEFORE SIGNING UP FOR IT

										na.			Overal Health	
			Age	of Re	sponde:	nt.		Ge	nder	Educ	ation			Good
	Total	18-24				55-64 	65+ 		Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	297	40	42	49	49	47	68	76	221	190	78	19	79	217
Yes	178 60%	31 78%	26 62%	30 61%	26 53%	28 60%	37 54%	45 59%	133 60%	106 56%	50 64%	17 89%	56 71%	121 56%
No	119 40%	9 23%	16 38%	19 39%	23 47%	19 40%	31 46%	31 41%	88 40%	84 44%	28 36%	2 11%	23 29%	96 44%
Refused	35	3	3	4	3	11	11	9	25	28	4	1	9	26

Q41. HOW MUCH OF THE INFORMATION GIVEN BEFORE SIGNING UP FOR THE PLAN WAS CORRECT

													Overal Health	
			Age	of Re	sponde:	nt		Ge:	nder	Educ	ation			Good
	Total	18-24								111311 0011001	Some College		Excellent Very Good	Fair Poor
Base: Analyzed Respondents	175	31	25	29	26	28	36	43	132	103	50	17	55	119
All of it (4)	96 55%	23 74%	17 68%	15 52%	13 50%	14 50%	14 39%	22 51%	74 56%	62 60%	23 46%	9 53%	37 67%	59 50%
Most of it (3)	55 31%	7 23%	6 24%	9 31%	10 38%	6 21%	17 47%	16 37%	39 30%	29 28%	18 36%	6 35%	15 27%	39 33%
Some of it (2)	21 12%	1 3%	2 8%	4 14%	3 12%	6 21%	5 14%	4 9%	17 13%	11 11%	7 14%	2 12%	3 5%	18 15%
None of it (1)	3 2%	<u>-</u>	<u>-</u> -	1 3%	- -	2 7%	- -	1 2%	2 2%	1 1%	2 4%	- -	- -	3 3%
Refused	38	3	4	5	3	11	12	11	26	31	4	1	10	28
Mean	3.4	3.7	3.6	3.3	3.4	3.1	3.3	3.4	3.4	3.5	3.2	3.4	3.6	3.3
Std Dev	0.8	0.5	0.6	0.8	0.7	1.0	0.7	0.8	0.8	0.7	0.8	0.7	0.6	0.8
Std Err	0.06	0.09	0.13	0.16	0.14	0.19	0.12	0.12	0.07	0.07	0.12	0.17	0.08	0.07

Q42. IN THE LAST 6 MONTHS, WHETHER LOOKED FOR ANY INFORMATION ABOUT HOW HEALTH PLAN WORKS IN WRITTEN MATERIALS OR ON THE INTERNET

										Educ	ation		Overal Health	
			Age	of Re	sponde	nt		Ge	nder				E	Good
	Total	Total 18-24	25-34	35-44 	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor 
Base: Analyzed Respondents	550	65	84	85	98	85	127	154	393	359	137	35	138	410
Yes	59 11%	3 5%	8 10%	16 19%	10 10%	6 7%	15 12%	17 11%	42 11%	36 10%	18 13%	5 14%	13 9%	46 11%
No	491 89%	62 95%	76 90%	69 81%	88 90%	79 93%	112 88%	137 89%	351 89%	323 90%	119 87%	30 86%	125 91%	364 89%
Refused	12	_	2	3	1	3	3	3	9	9	2	_	5	6

Q43. IN THE LAST 6 MONTHS, HOW MUCH OF A PROBLEM IT WAS TO FIND OR UNDERSTAND INFORMATION ABOUT PLAN

										Educ	ation		Overal Health	
			Age	of Rea	sponde	nt		Ge	nder					Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	59	3	8	16	10	6	15	17	42	36	18	5	13	46
Big problem	4 7%	-	-	3 19%	-	-	1 7%	1 6%	3 7%	- -	3 17%	1 20%	3 23%	1 2%
Small problem	26 44%	1 33%	4 50%	5 31%	2 20%	5 83%	9 60%	11 65%	15 36%	18 50%	5 28%	3 60%	3 23%	23 50%
Not a problem	29 49%	2 67%	4 50%	8 50%	8 80%	1 17%	5 33%	5 29%	24 57%	18 50%	10 56%	1 20%	7 54%	22 48%
Refused	12	-	2	3	1	3	3	3	9	9	2	=	5	6

Q44. IN THE LAST 6 MONTHS, WHETHER CALLED HEALTH PLAN'S CUSTOMER SERVICE TO GET INFORMATION OR HELP

														Overal Health	
			Age	of Res	sponde	nt		Ge	nder		Educa 				Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	High Sch or les		Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	554	65	85	86	98	86	128	154	397	361	1	139	34	142	409
Yes	102 18%	18 28%	21 25%	22 26%	19 19%	12 14%	9 7%	27 18%	75 19%	57 16	7 5%	35 25%	7 21%	27 19%	75 18%
No	452 82%	47 72%	64 75%	64 74%	79 81%	74 86%	119 93%	127 82%	322 81%	304 84	4 4%	104 75%	27 79%	115 81%	334 82%
Refused	8	-	1	2	1	2	2	3	5	7	7	-	1	1	7

Q45. IN THE LAST 6 MONTHS, HOW MUCH OF A PROBLEM IT WAS TO GET THE HELP NEEDED WHEN CALLING THE HEALTH PLAN'S CUSTOMER SERVICE

										11 de			Overal Health	
			Age	of Re	sponde:	nt		Ge	nder		ation 			Good
	Total	18-24	25-34 	35-44 	45-54 	55-64 	65+	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	101	18	21	22	19	12	8	27	74	56	35	7	27	74
Big problem	24 24%	3 17%	3 14%	6 27%	6 32%	4 33%	2 25%	3 11%	21 28%	13 23%	7 20%	2 29%	3 11%	21 28%
Small problem	32 32%	7 39%	5 24%	10 45%	6 32%	2 17%	2 25%	13 48%	19 26%	14 25%	13 37%	5 71%	6 22%	26 35%
Not a problem	45 45%	8 44%	13 62%	6 27%	7 37%	6 50%	4 50%	11 41%	34 46%	29 52%	15 43%	- -	18 67%	27 36%
Refused	9	_	1	2	1	2	3	3	6	8	_	1	1	8

Q46. IN THE LAST 6 MONTHS, WHETHER CALLED OR WROTE HEALTH PLAN WITH A COMPLAINT OR PROBLEM

						- 1			Overal Health					
			Age	of Re	sponde	nt		Ge	nder		ation			Good
	Total	18-24	25-34 	35-44 	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	550	65	85	86	97	86	125	156	391	360	135	35	141	406
Yes	25 5%	2 3%	5 6%	8 9%	4 4%	3 3%	3 2%	6 4%	19 5%	15 4%	7 5%	1 3%	9 6%	16 4%
No	525 95%	63 97%	80 94%	78 91%	93 96%	83 97%	122 98%	150 96%	372 95%	345 96%	128 95%	34 97%	132 94%	390 96%
Refused	12	-	1	2	2	2	5	1	11	8	4	-	2	10

Q47. NUMBER OF DAYS THE HEALTH PLAN TOOK TO RESOLVE COMPLAINT

										77 de 1 de	ation		Overal Health		
					sponde			Ge						Good	
	Total	18-24	25-34	35-44	45-54	55-64	65+	Male	Female	High School or less	College	Grad+	Very Good	Poor	
Base: Analyzed Respondents	25	2	5	8	4	3		6	19	15		1	9	16	
Same day	6 24%	1 50%	2 40%	1 13%	- -	1 33%	1 33%	1 17%	5 26%	4 27%	2 29%	- -	2 22%	4 25%	
2-7 days (4.5)	2 8%	- -	1 20%	- -	1 25%	- -	- -	1 17%	1 5%	- -	1 14%	- -	1 11%	1 6%	
8-14 days (11)	3 12%	_ _	- -	1 13%	1 25%	1 33%	- -	1 17%	2 11%	2 13%	1 14%	- -	- -	3 19%	
15-21 days (18)	1 4%	<del>-</del> -	- -	1 13%	- -	- -	- -	1 17%	- -	- -	1 14%	- -	1 11%	<del>-</del> -	
21 or more days (25.5)	4 16%	<del>-</del> -	- -	1 13%	1 25%	- -	2 67%	1 17%	3 16%	3 20%	1 14%	- -	3 33%	1 6%	
Still waiting for to be settled	it 9 36%		2 40%	4 50%	1 25%	1 33%	- -	1 17%	8 42%	6 40%	1 14%	1 100%	2 22%	7 44%	
Refused	12	_	1	2	2	2	5	1	11	8	4	_	2	10	
Mean (in days)	10.5	1.0	2.2	13.9	13.7	6.0	17.3	12.0	9.8	11.4	10.2	-	14.4	7.4	
Std dev	10.2	-	2.0	10.4	10.8	7.1	14.1	10.0	10.8	11.3	10.0	-	11.8	8.2	
Std err	2.56	_	1.17	5.21	6.21	5.00	8.17	4.45	3.24	3.78	4.07	_	4.47	2.74	

Q48. WHETHER COMPLAINT OR PROBLEM WAS SETTLED TO SATISFACTION

										Edua	ation		Overal Health	
			Age	of Rea	sponder	nt		Ge	nder					Good
	Total	18-24	25-34 	35-44	45-54 	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed	16	1	3	4	3	2	3	5	11	9	6	-	7	9
Respondents														
Yes	14 88%	-	3 100%	4 100%	2 67%	2 100%	3 100%	4 80%	10 91%	7 78%	6 100%	- -	5 71%	9 100%
No	2 13%	1 100%	-	-	1 33%	-	-	1 20%	1 9%	2 22%	<del>-</del>	-	2 29%	<del>-</del>
Refused	12	_	1	2	2	2	5	1	11	8	4	-	2	10

Q49. NUMBER OF DAYS HAVE BEEN WAITING FOR HEALTH PLAN TO RESOLVE COMPLAINT

										_,			Overal Health	
			Age	of Res	sponde	nt		Ge	nder		ation			Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	8	1	2	3	1	1	-	1	7	5	1	1	2	6
21 or more days (25.5)	8 100%	1 100%	2 100%	3 100%	1 100%	1 100%	- -	1 100%	7 100%	5 100%	1 100%	1 100%	2 100%	6 100%
Refused	13	_	1	3	2	2	5	1	12	9	4	-	2	11
Mean (in days)	25.5	25.5	25.5	25.5	25.5	25.5	-	25.5	25.5	25.5	25.5	25.5	25.5	25.5
Std dev	0.0	-	0.0	0.0	-	-	-	-	0.0	0.0	-	-	0.0	0.0
Std err	0.00	_	0.00	0.00	-	-	-	_	0.00	0.00	_	_	0.00	0.00

Q50. IN THE LAST 6 MONTHS, WHETHER HAD TO FILL OUT ANY PAPERWORK FOR HEALTH PLAN

June, 2003

Overall

											Edua	ation		Health	
			Age	of Rea	sponde	nt		Ge	nder						Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	540	64	83	86	98	82	121	152	385		352	137	34	137	400
Yes	86 16%	8 13%	16 19%	23 27%	10 10%	9 11%	20 17%	21 14%	65 17%		53 15%	26 19%	5 15%	25 18%	60 15%
No	454 84%	56 88%	67 81%	63 73%	88 90%	73 89%	101 83%	131 86%	320 83%		299 85%	111 81%	29 85%	112 82%	340 85%
Refused	22	1	3	2	1	6	9	5	17		16	2	1	6	16

Q51. IN THE LAST 6 MONTHS, HOW MUCH OF A PROBLEM WAS THE PAPERWORK FOR THE HEALTH PLAN

										Ti day			Overal Health	
			Age	of Rea	sponde	nt		Ge:	nder		ation			Good
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	84	8	14	23	10	9	20	20	64	53	24	5	25	58
Big problem	9 11%	- -	1 7%	5 22%	1 10%	1 11%	1 5%	1 5%	8 13%	5 9%	3 13%	- -	<del>-</del> -	9 16%
Small problem	18 21%	2 25%	2 14%	6 26%	2 20%	2 22%	4 20%	3 15%	15 23%	12 23%	6 25%	- -	8 32%	10 17%
Not a problem	57 68%	6 75%	11 79%	12 52%	7 70%	6 67%	15 75%	16 80%	41 64%	36 68%	15 63%	5 100%	17 68%	39 67%
Refused	24	1	5	2	1	6	9	6	18	16	4	1	6	18

Q52. OVERALL RATING OF RESPONDENT'S HEALTH PLAN

													Overal Health	1
					sponde				nder					Good
	Total						65+	Male	Female	High School or less	College	Grad+	Excellent Very Good	Poor
Base: Analyzed Respondents	543	64	84	84	99	86	121	154	387	357	133	34	138	403
Top 3 box	397	48	62	54	72	72	85	109	287	263	96	25	105	290
	73%	75%	74%	64%	73%	84%	70%	71%	74%	74%	72%	74%	76%	72%
10 Best possible	219 40%	25 39%	29 35%	25 30%	41 41%	44 51%	52 43%	49 32%	169 44%	160 45%	41 31%	11 32%	54 39%	163 40%
9	92 17%	9 14%	14 17%	14 17%	19 19%	15 17%	20 17%	28 18%	64 17%	55 15%	30 23%	6 18%	22 16%	70 17%
8	86 16%	14 22%	19 23%	15 18%	12 12%	13 15%	13 11%	32 21%	54 14%	48 13%	25 19%	8 24%	29 21%	57 14%
7	60 11%	6 9%	8 10%	14 17%	9 9%	7 8%	16 13%	21 14%	38 10%	39 11%	13 10%	6 18%	17 12%	43 11%
6	24 4%	3 5%	2 2%	3 4%	5 5%	3 3%	8 7%	7 5%	17 4%	18 5%	4 3%	2 6%	6 4%	18 4%
5	38 7%	5 8%	8 10%	7 8%	8 8%	3 3%	7 6%	11 7%	27 7%	23 6%	14 11%	- -	6 4%	32 8%
4	7 1%	2 3%	2 2%	1 1%	1 1%	<del>-</del>	1 1%	2 1%	5 1%	6 2%	1 1%	<u>-</u> -	1 1%	6 1%
3	7 1%	-	1 1%	2 2%	3 3%	<u>-</u>	1 1%	1 1%	6 2%	2 1%	3 2%	1 3%	1 1%	6 1%
Bottom 3 box	10	-	1	3	1	1	3	3	7	6	2	-	2	8
	2%	-	1%	4%	1%	1%	2%	2%	2%	2%	2%	-	1%	2%
2	3 1%	-	-	1 1%	1 1%	<u>-</u>	1 1%	1 1%	2 1%	2 1%	1 1%	<u>-</u> -	- -	3 1%
1	4 1%	- -	- -	1 1%	- -	1 1%	2 2%	1 1%	3 1%	3 1%	- -	- -	1 1%	3 1%

2003 CAHPS 3.0H

#### ADULT MEDICAID STATE OF COLORADO (302) MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

Q52. OVERALL RATING OF RESPONDENT'S HEALTH PLAN

														Overal Health	
			Age	of Res	sponde	nt		Ge	nder		Educ	ation 			Good
	Total	18-24	25-34	35-44	45-54	55-64	65+	Male	Female	_	School less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	543	64	84	84	99	86	121	154	387		357	133	34	138	403
0 Worst possible	3 1%	-	1 1%	1 1%	-	- -	 -	1 1%	2 1%		1	1 1%	- -	1 1%	2
Refused	19	1	2	4	-	2	9	3	15		11	6	1	5	13
Mean	8.3	8.4	8.2	7.9	8.3	8.9	8.3	8.2	8.4		8.4	8.1	8.4	8.4	8.3
Std Dev	2.0	1.8	2.0	2.2	2.0	1.6	2.0	1.9	2.0		2.0	2.0	1.6	1.8	2.1
Std Err	0.09	0.22	0.22	0.24	0.20	0.17	0.19	0.16	0.10	(	0.10	0.18	0.27	0.16	0.10

Q53. RATING OF RESPONDENT'S OVERALL HEALTH NOW

										_			Overa: Healtl	
			Age	of Re	sponde:	nt.		Ge	nder	Ес	lucation 			Good
	Total										ool Some College		Excellent Very Good	Fair
Base: Analyzed Respondents	559	65	86	88	99	87	129	157	400	366	139	35	143	416
Excellent (5)	48 9%	17 26%	11 13%	7 8%	5 5%	2 2%	6 5%	15 10%	33 8%	33 98	13 9%	2 6%	48 34%	-
Very Good (4)	95 17%	16 25%	25 29%	12 14%	10 10%	4 5%	26 20%	26 17%	69 17%	54 158	31 22%	6 17%	95 66%	-
Good (3)	159 28%	18 28%	28 33%	26 30%	23 23%	16 18%	47 36%	48 31%	111 28%	112 318	29 21%	9 26%	- -	159 38%
Fair (2)	158 28%	12 18%	13 15%	31 35%	33 33%	33 38%	35 27%	48 31%	109 27%	108 308	38 27%	9 26%	- -	158 38%
Poor (1)	99 18%	2 3%	9 10%	12 14%	28 28%	32 37%	15 12%	20 13%	78 20%	59 168	28 20%	9 26%	-	99 24%
Refused	3	-	-	-	-	1	1	-	2	2	-	_	-	-
Mean	2.7	3.5	3.2	2.7	2.3	2.0	2.8	2.8	2.7	2.7	2.7	2.5	4.3	2.1
Std Dev	1.2	1.2	1.2	1.1	1.1	1.0	1.0	1.2	1.2	1.2	1.3	1.2	0.5	0.8
Std Err	0.05	0.14	0.13	0.12	0.11	0.10	0.09	0.09	0.06	0.06	0.11	0.21	0.04	0.04

Q54. WHETHER EVER SMOKED AT LEAST 100 CIGARETTES IN ENTIRE LIFE

										_,			Overal Health	
			Age	of Re	sponde	nt		Ge	nder	Edu	cation 			Good
	Total	18-24				55-64 	65+ 	Male	Female	High School	l Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	542	64	86	85	96	79	127	151	390	356	135	35	141	399
Yes	252 46%	19 30%	38 44%	45 53%	52 54%	49 62%	48 38%	71 47%	180 46%	159 45%	71 53%	19 54%	53 38%	197 49%
No	290 54%	45 70%	48 56%	40 47%	44 46%	30 38%	79 62%	80 53%	210 54%	197 55%	64 47%	16 46%	88 62%	202 51%
Don't know	15	1	-	2	2	8	2	4	10	10	4	-	2	13
Refused	5	-	-	1	1	1	1	2	2	2	-	_	-	4

Q55. WHETHER NOW SMOKES EVERY DAY, SOME DAYS, OR NOT AT ALL

										TI 4			Overal Health	
		Age of Respondent						Ge	nder		cation 			Good
	Total	18-24	25-34	35-44	45-54	55-64	65+	Male	Female	High School or less	l Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	250	19	38	45	51	49	48	70	179	158	71	19	53	195
Every day	105 42%	6 32%	19 50%	27 60%	20 39%	21 43%	12 25%	30 43%	75 42%	69 44%	28 39%	7 37%	17 32%	88 45%
Some days	40 16%	4 21%	9 24%	7 16%	13 25%	3 6%	4 8%	11 16%	29 16%	28 18%	9 13%	2 11%	10 19%	30 15%
Not at all	103 41%	9 47%	10 26%	9 20%	18 35%	25 51%	32 67%	28 40%	74 41%	59 37%	34 48%	10 53%	26 49%	75 38%
Don't know	2 1%	- -	- -	2 4%	- -	- -	<del>-</del> -	1 1%	1 1%	2 1%	<del>-</del>	- -	- -	2 1%
Refused	7	_	_	1	2	1	1	3	3	3	_	_	=	6

Q56. LENGTH OF TIME SINCE RESPONDENT QUIT SMOKING CIGARETTES

										D4			Overal Health	
			Age	of Rea	sponde	nt		Ge	nder	Eauc	ation 			Good
	Total	18-24	25-34 	35-44	45-54	55-64 	65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	99	9	10	9	18	24	29	28	70	56	33	10	24	73
6 months or less	7 7%	2 22%	1 10%	1 11%	2 11%	1 4%	- -	2 7%	5 7%	2 4%	4 12%	1 10%	1 4%	6 8%
More than 6 months	90 91%	7 78%	9 90%	8 89%	15 83%	23 96%	28 97%	26 93%	63 90%	53 95%	28 85%	9 90%	23 96%	65 89%
Don't know	2 2%	-	- -	-	1 6%	-	1 3%	<u>-</u>	2 3%	1 2%	1 3%	- -	- -	2 3%
Refused	11	_	_	1	2	2	4	3	7	6	1	_	2	8

Q57. IN THE LAST 6 MONTHS, NUMBER OF VISITS ON WHICH A DOCTOR OR OTHER HEALTH PROVIDER IN YOUR PLAN ADVISED RESPONDENT TO QUIT SMOKING

													Overal Health	
			Age	of Re	sponde	nt		Ge	nder	Educ	ation 			Good
	Total	18-24							 Female	High School or less		Grad+	Excellent Very Good	Fair
Base: Analyzed Respondents	142	12	29	32	32	23	14	40	102	93	38	9	27	115
None	59 42%	6 50%	11 38%	13 41%	10 31%	9 39%	10 71%	23 58%	36 35%	45 48%	8 21%	4 44%	15 56%	44 38%
1 visit (1)	23 16%	1 8%	7 24%	5 16%	4 13%	5 22%	1 7%	3 8%	20 20%	14 15%	8 21%	1 11%	4 15%	19 17%
2 to 4 visits (3)	32 23%	2 17%	7 24%	8 25%	7 22%	6 26%	2 14%	8 20%	24 24%	17 18%	12 32%	3 33%	6 22%	26 23%
5 to 9 visits (7)	12 8%	2 17%	3 10%	1 3%	5 16%	1 4%	<u>-</u>	2 5%	10 10%	7 8%	5 13%	- -	1 4%	11 10%
10 or more visits (12)	16 11%	1 8%	1 3%	5 16%	6 19%	2 9%	1 7%	4 10%	12 12%	10 11%	5 13%	1 11%	1 4%	15 13%
Had no visits in last 6 months	3	-	-	3	-	-	-	1	2	2	1	-	1	2
Refused	18	_	-	1	5	4	6	5	12	10	3	1	2	15
Mean	2.8	2.8	2.1	3.0	4.1	2.3	1.4	2.2	3.0	2.5	3.7	2.4	1.5	3.1
Std Dev	3.9	3.9	2.9	4.2	4.5	3.5	3.2	3.8	3.9	3.8	3.9	3.8	2.7	4.0
Std Err	0.32	1.14	0.54	0.75	0.80	0.73	0.87	0.59	0.39	0.40	0.64	1.28	0.52	0.38

Q58. NUMBER OF VISITS ON WHICH MEDICATION WAS RECOMMENDED OR DISCUSSED TO ASSIST RESPONDENT WITH QUITTING SMOKING

													Overal Health	
			Age	of Re	sponde:	nt		Ge:	nder	Educ	ation 			Good
	Total	18-24	25-34 	35-44						High School or less		Grad+		
Base: Analyzed Respondents	141	11	29	32	33	22	14	42	99	93	37	9	27	114
None (0)	109 77%	9 82%	27 93%	22 69%	22 67%	17 77%	12 86%	30 71%	79 80%	73 78%	25 68%	9 100%	22 81%	87 76%
1 visit (1)	10 7%	- -	1 3%	1 3%	5 15%	1 5%	2 14%	3 7%	7 7%	5 5%	5 14%	- -	2 7%	8 7%
2 to 4 visits (3)	11 8%	1 9%	- -	6 19%	1 3%	3 14%	- -	4 10%	7 7%	7 8%	4 11%	- -	1 4%	10 9%
5 to 9 visits (7)	7 5%	1 9%	1 3%	3 9%	2 6%	- -	- -	2 5%	5 5%	5 5%	2 5%	- -	2 7%	5 4%
10 or more visits (12)	4 3%	- -	- -	- -	3 9%	1 5%	- -	3 7%	1 1%	3 3%	1 3%	- -	- -	4 4%
Had no visits in last 6 months	5	1	-	3	-	1	-	-	5	3	2	-	1	4
Refused	17	-	-	1	4	4	6	4	12	9	3	1	2	14
Mean	1.0	0.9	0.3	1.3	1.8	1.0	0.1	1.5	0.8	1.0	1.2	0.0	0.7	1.1
Std Dev	2.5	2.2	1.3	2.2	3.7	2.7	0.4	3.4	2.0	2.6	2.5	0.0	1.9	2.6
Std Err	0.21	0.67	0.24	0.39	0.65	0.57	0.10	0.52	0.20	0.27	0.42	0.00	0.37	0.25

Q59. NUMBER OF VISITS ON WHICH DOCTOR OR HEALTH PROVIDER RECOMMENDED OR DISCUSSED METHODS
AND STRATEGIES (OTHER THAN MEDITATION) TO ASSIST RESPONDENT WITH QUITTING SMOKING

														Overal Health	
			Age	of Re	sponde:	nt		Ge	nder		Educa	ation 			Good
	Total	18-24										Some College	_	Excellent Very Good	
Base: Analyzed Respondents	141	11	29	32	33	22	14	42	99		93	37	9	27	114
None (0)	96 68%	8 73%	26 90%	18 56%	19 58%	14 64%	11 79%	27 64%	69 70%		67 72%	21 57%	6 67%	21 78%	75 66%
1 visit (1)	16 11%	- -	2 7%	2 6%	7 21%	3 14%	2 14%	2 5%	14 14%		11 12%	3 8%	2 22%	1 4%	15 13%
2 to 4 visits (3)	18 13%	1 9%	1 3%	10 31%	3 9%	2 9%	1 7%	8 19%	10 10%		8 9%	9 24%	1 11%	4 15%	14 12%
5 to 9 visits (7)	4 3%	1 9%	- -	2 6%	- -	1 5%	- -	1 2%	3 3%		2 2%	2 5%	- -	1 4%	3 3%
10 or more visits (12)	7 5%	1 9%	- -	- -	4 12%	2 9%	- -	4 10%	3 3%		5 5%	2 5%	- -	- -	7 6%
Had no visits in last 6 months	5	1	-	3	-	1	-	-	5		3	2	-	1	4
Refused	17	-	_	1	4	4	6	4	12		9	3	1	2	14
Mean	1.3	2.0	0.2	1.4	1.9	1.8	0.4	1.9	1.0		1.2	1.8	0.6	0.7	1.4
Std Dev	2.9	4.0	0.6	2.0	3.9	3.7	0.8	3.6	2.4		2.9	3.1	1.0	1.7	3.1
Std Err	0.24	1.20	0.11	0.35	0.68	0.79	0.23	0.56	0.24	C	.30	0.51	0.34	0.32	0.29

Q60. RESPONDENT'S AGE NOW

										-1			Overal Health	
			Age	of Re	sponde:	nt		Ge:	nder		ation 			Good
	Total	18-24							 Female	High School or less	College	Grad+	Excellent Very Good	Poor
Base: Analyzed Respondents	556	65	86	88	99	88	130	156	398	365	138	35	141	413
18 to 24 (21)	65 12%	65 100%	- -	- -	- -	-	- -	18 12%	47 12%	45 12%	18 13%	- -	33 23%	32 8%
25 to 34 (29.5)	86 15%	<u>-</u>	86 100%	<u>-</u>	- -	- -	<u>-</u>	25 16%	61 15%	51 14%	28 20%	5 14%	36 26%	50 12%
35 to 44 (39.5)	88 16%	- -	- -	88 100%	- -	- -	- -	24 15%	63 16%	51 14%	32 23%	4 11%	19 13%	69 17%
45 to 54 (49.5)	99 18%	- -	- -	- -	99 100%	- -	- -	28 18%	71 18%	64 18%	26 19%	7 20%	15 11%	84 20%
55 to 64 (59.5)	88 16%	- -	- -	- -	- -	88 100%	- -	28 18%	59 15%	63 17%	18 13%	4 11%	6 4%	81 20%
65 to 74 (69.5)	84 15%	- -	- -	- -	- -	- -	84 65%	24 15%	60 15%	57 16%	11 8%	8 23%	19 13%	64 15%
75 or older (78)	46 8%	- -	- -	- -	- -	- -	46 35%	9 6%	37 9%	34 9%	5 4%	7 20%	13 9%	33 8%
Refused	6	-	_	-	-	-	-	1	4	3	1	_	2	3
Mean	48.5	21.0	29.5	39.5	49.5	59.5	72.5	48.0	48.6	49.3	43.3	56.9	42.1	50.5
Std Dev	17.8	0.0	0.0	0.0	0.0	0.0	4.1	17.3	18.0	18.1	15.8	16.9	19.7	16.6
Std Err	0.75	0.00	0.00	0.00	0.00	0.00	0.36	1.38	0.90	0.95	1.34	2.86	1.66	0.81

June, 2003 Q61. RESPONDENT'S GENDER

										n.i.			Overall Health		
			Age	of Rea	sponde:	nt		Gei	nder	Eauc	ation 		Good		
	Total	18-24					65+ 	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyzed Respondents	559	65	86	87	99	87	130	157	402	367	138	35	143	414	
Male	157 28%	18 28%	25 29%	24 28%	28 28%	28 32%	33 25%	157 100%	- -	98 27%	37 27%	17 49%	41 29%	116 28%	
Female	402 72%	47 72%	61 71%	63 72%	71 72%	59 68%	97 75%	- -	402 100%	269 73%	101 73%	18 51%	102 71%	298 72%	
Refused/Multiple Responses	3	-	-	1	-	1	-	-	-	1	1	-	-	2	

Multiple Responses Accepted

Q62. HIGHEST GRADE OR LEVEL OF SCHOOL COMPLETED BY RESPONDENT

											Education			Overall Health	
			Age	of Rea	sponde	nt		Ge:	nder						Good
	Total	18-24 							Female	_	School less	Some College	_	Excellent Very Good	Fair Poor
Base: Analyzed Respondents	542	63	84	87	97	85	122	152	388		368	139	35	139	401
8th grade or less	88 16%	2 3%	4 5%	6 7%	11 11%	20 24%	42 34%	24 16%	64 16%		88 24%	- -	- -	21 15%	66 16%
Some high school, but did not graduate	107 20%	10 16%	12 14%	14 16%	31 32%	14 16%	26 21%	20 13%	86 22%		107 29%	<del>-</del> -	- -	19 14%	87 22%
High school graduate or GED	173 32%	33 52%	35 42%	31 36%	22 23%	29 34%	23 19%	54 36%	119 31%		173 47%	- -	- -	47 34%	126 31%
Some college or 2- year degree	139 26%	18 29%	28 33%	32 37%	26 27%	18 21%	16 13%	37 24%	101 26%		-	139 100%	- -	44 32%	95 24%
4-year college graduate	19 4%	- -	5 6%	2 2%	5 5%	1 1%	6 5%	9 6%	10 3%		-	- -	19 54%	3 2%	16 4%
More than 4-year college degree	16 3%	-	- -	2 2%	2 2%	3 4%	9 7%	8 5%	8 2%		-	<del>-</del> -	16 46%	5 4%	11 3%
Refused	20	2	2	1	2	3	8	5	14		_	_	_	4	15

Q63. WHETHER THE RESPONDENT IS OF HISPANIC OR LATINO ORIGIN OR DESCENT

													Overall Health		
			Age	of Re	sponde	nt		Ge	nder		ation		Good		
	Total	18-24	25-34	35-44	45-54	55-64 	65+	Male	Female	High School or less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyzed Respondents	544	63	84	83	96	88	126	152	390	355	139	35	140	403	
Hispanic or Latino	186 34%	27 43%	23 27%	26 31%	36 38%	30 34%	41 33%	38 25%	147 38%	143 40%	31 22%	3 9%	44 31%	141 35%	
Not Hispanic or Latino	358 66%	36 57%	61 73%	57 69%	60 63%	58 66%	85 67%	114 75%	243 62%	212 60%	108 78%	32 91%	96 69%	262 65%	
Refused	18	2	2	5	3	-	4	5	12	13	-	-	3	13	

Q64. RESPONDENT'S RACE

June, 2003

										T 4	ation		Overall Health		
			Age	of Re	sponde:	nt		Ge	nder	 Eauc			Good		
	Total	18-24 					65+ 	Male	Female	School less	Some College	College Grad+	Excellent Very Good	Fair Poor	
Base: Analyzed Respondents	527	58	78	87	96	80	124	152	373	346	134	35	131	394	
White	330 63%	33 57%	59 76%	58 67%	54 56%	52 65%	73 59%	102 67%	228 61%	199 58%	98 73%	28 80%	82 63%	248 63%	
Black or African- American	32 6%	7 12%	3 4%	7 8%	5 5%	5 6%	5 4%	5 3%	26 7%	16 5%	12 9%	3 9%	8 6%	24 6%	
Asian	45 9%	-	3 4%	2 2%	7 7%	8 10%	25 20%	19 13%	26 7%	35 10%	5 4%	3 9%	17 13%	27 7%	
American Indian or Alaska Native	27 5%	1 2%	1 1%	6 7%	10 10%	6 8%	2 2%	6 4%	21 6%	15 4%	11 8%	- -	3 2%	24 6%	
Other	118 22%	21 36%	16 21%	20 23%	24 25%	13 16%	22 18%	21 14%	96 26%	91 26%	23 17%	1 3%	27 21%	90 23%	
Refused	35	7	8	1	3	8	6	5	29	22	5	_	12	22	

Multiple Responses Accepted

June, 2003 O65. LANGUAGE MAINLY SPOKEN AT HOME

Overall Health Education Age of Respondent Gender Good ----- High School Some College Excellent Fair Total 18-24 25-34 35-44 45-54 55-64 65+ Male Female or less College Grad+ Very Good Poor Base: Analyzed 368 139 143 557 64 85 88 99 88 129 156 399 35 412 Respondents English 441 61 82 85 90 67 54 113 326 289 124 21 110 330 79% 95% 96% 97% 91% 76% 42% 72% 79% 89% 60% 77% 80% 82% Spanish 36 2 1 1 3 6 21 7 29 31 1 1 11 25 7% 6% 3% 1% 1% 3% 16% 4% 7% 8% 1% 3% 8% 6% Other 80 1 2 2 15 48 14 13 22 57 6 54 36 44 14% 2% 2% 2% 6% 17% 42% 23% 11% 13% 10% 37% 15% 14% Refused 5 1 1 1 1 3 4 \_ \_

June, 2003

#### 2003 CAHPS 3.0H ADULT MEDICAID STATE OF COLORADO (302) MEDICAID'S PRIMARY CARE PHYSICIAN PROGRAM

Q66. WHETHER SOMEONE ELSE HELPED COMPLETE SURVEY

(MAIL SURVEY ONLY)

Overall
Health

Age of Respondent

Gender

Total 18-24 25-34 35-44 45-54 55-64 65+ Male Female or less College Grad+ Very Good Poor

Poor Total 18-24 25-34 70 82 78 126 140 332 319 109 31 122 351 aspondents

Base: Analyzed 351 Respondents 9 29% 190 20 25 21 17 25 82 75 114 151 20 50 139 Yes 47% 18% 40% 38% 40% 30% 21% 32% 65% 54% 34% 41% 40% 168 72 212 284 32 38 49 65 53 65 218 89 22 22 71% No 60% 62% 60% 70% 79% 68% 35% 46% 66% 53% 82% 59% 60% 5 2 1 - -Refused 7 2 1 - 1 - 2 1 6

Q67. HOW THAT PERSON HELPED

(MAIL SURVEY ONLY)

Health Education Gender -----Age of Respondent ----- High School Some College Excellent Fair Total 18-24 25-34 35-44 45-54 55-64 65+ Male Female or less College Grad+ Very Good Poor Base: Analyzed 190 20 25 21 17 25 82 75 114 151 9 50 139 Respondents Read the questions 5 8 70 2 22 62 85 11 11 11 39 30 54 10 45% 25% 52% 65% 44% 48% 47% 46% 50% 22% 44% 45% 32% 40% Wrote down the 73 4 7 7 4 9 42 24 49 55 11 3 18 55 answers 38% 20% 28% 33% 24% 36% 51% 32% 43% 36% 55% 33% 36% 40%

Multiple Responses Accepted

64

34%

52

25

13%

7

27%

14

70%

3

15%

2

13

52%

2

4

16%

1

8%

8

38%

2

10%

5

24%

4

24%

3

18%

12%

1

9

36%

7

28%

20%

16

38

46%

7%

2

20%

25

33%

19

25%

8

11%

1

39

34%

33

29%

17

15%

5

53

39

26%

14%

2

35%

6

30%

4

20%

5%

1

6

67%

1

11%

Answered the

Translated the

questions into own

Helped in some other

questions

language

Refused

way

June, 2003

Overall

20

14

28%

7

14%

40%

44

32%

38

18

13%

6

27%