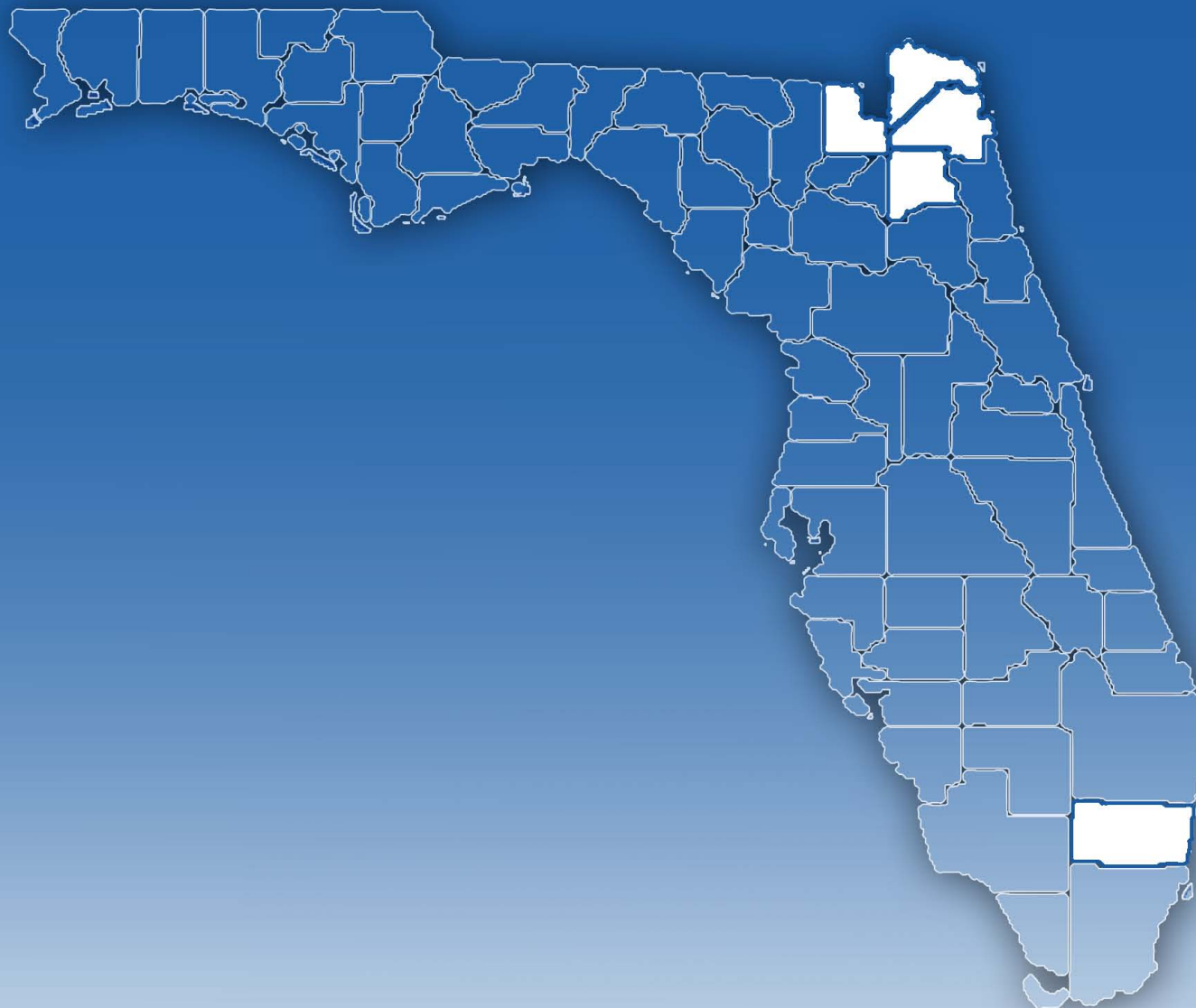




Evaluating Medicaid Reform In Florida

Medicaid Reform Enrollee Satisfaction: Year One Follow-Up Survey

Release Date: March 20, 2009





MEDICAID REFORM ENROLLEE SATISFACTION: YEAR 1 FOLLOW-UP SURVEY

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DELIVERABLE VII.D
MEDICAID REFORM ENROLLEE SATISFACTION:
YEAR 1 FOLLOW-UP SURVEY

EXECUTIVE SUMMARY

A key objective of Medicaid Reform in Florida includes the goal of making the delivery of medical care in Medicaid more closely comparable to the processes and approaches operative in the private sector. The private sector emphasizes managed care, as well as patient involvement, responsibility, and empowerment in a set of market processes. It is assumed that Medicaid service delivery will be improved by the presence of similar forces. Enrollee satisfaction is a key element in such consumer-oriented approaches to medical care decision-making. A second goal of the reform initiative is to improve Medicaid enrollees' satisfaction with their care and its management.

The degree to which these objectives are achieved is assessed in part by measuring the satisfaction levels of Florida's Medicaid enrollees before and during the demonstration, along with careful analysis of the sources of observed variation in those levels of satisfaction including variation within the demonstration (by county, plan, or enrollee attributes) and variation between Reform and the non-Reform components of Florida's Medicaid program.

The primary measures of enrollee satisfaction are obtained by means of telephone surveys, using an approach known as the Consumer Assessment of Healthcare Providers and Systems (CAHPS). The approach looks at many aspects of satisfaction. This report summarizes findings from the 2008 Year 1 Follow-Up survey and makes comparisons with the 2006 Benchmark Survey.

In 2008, Medicaid Reform enrollees' satisfaction with their health care experiences was generally high. The majority of enrollees in Broward and Duval Counties reported that:

- it was “not a problem” to get a doctor or a nurse they were happy with,
- they communicate well with their providers,
- they chose their health plan, and
- their overall plan satisfaction rating was at the highest level (9 or 10).

About 85 percent of respondents to the CAHPS surveys in Broward and Duval reported that it was not a problem to get an appointment with a personal doctor, and close to 50% said it was always easy to get an appointment with a specialist (asked only of those respondents who indicated they saw a specialist in the previous 6 months). With a few exceptions, there were no statistically significant differences in patient ratings and satisfaction between Broward and Duval Counties.

PSN and HMO enrollees in Broward and Duval rated their health care experiences similarly. However, individuals who qualified for Medicaid based on their Supplemental Social Security Income (SSI) eligibility provided lower ratings compared to enrollees who qualified for Medicaid based on other eligibility criteria.

Enrollees in Baker, Clay, and Nassau Counties rated their health care similarly to enrollees in the urban counties. Enrollees in these counties reported generally high levels of satisfaction. At the time

of the survey, about 57 percent of rural enrollees had heard of the Choice Counseling program, and 40 percent were aware of the Enhanced Benefits Account program.

A key element of the 2008 survey is the ability to make some comparisons with the 2006 benchmark findings and hence begin exploration of whether satisfaction among Reform enrollees is higher or lower than among other enrollees in Florida's Medicaid program. This report compares ratings between 2006 and 2008 along four dimensions: overall plan satisfaction, overall satisfaction with care, personal doctor rating, and specialist rating. The majority of these comparisons resulted in no statistically significant or observable differences, especially in Duval County. There are a few exceptions worth noting in Broward County:

- The percent rating their overall health care at the highest level (9 or 10) declined overall for Broward enrollees. However, the proportion giving their personal doctor the highest rating increased.
- Among individuals who qualified for Medicaid based on their SSI eligibility status, the percentage giving their overall plan satisfaction the highest rating declined from 53 percent to 46 percent in Broward County and from 56 percent to 53 percent in Duval County.

Caution must be made in making generalizations and conclusions regarding the impact of Reform on enrollee experiences. The data presented in this report represent a subset of the available information. Additional multivariate analyses are necessary to achieve a more complete understanding. In addition, only one year of follow-up data have been presented for Broward and Duval Counties and the follow-up survey for the rural counties has not yet been fielded. Additional years of data will allow for clearer identification of trends.

Within the context of a "satisfaction" type survey, it is important to note that when assessing patient transition from an unmanaged care environment to a managed care situation, it is highly probable that one would expect to see a "negative shift" in overall satisfaction. Along with that understanding is the belief that as a rule, "people don't like change." To further put the CAHPS survey findings in context for Medicaid's Reform population, it is important to remember that historically, patient satisfaction in the MediPass program has been high. Therefore, a normal expectation would be to see a decline in satisfaction levels when Medicaid patients move from the "unmanaged" MediPass program to the "managed" Reform demonstration.

INTRODUCTION

Florida's Medicaid Reform initiative is a reorganization of the structure and processes of health care delivery in a segment of the state's Medicaid program. It was undertaken as a demonstration project which began in Duval and Broward Counties, then extended to Baker, Clay, and Nassau Counties. Further expansion to other counties may occur with legislative approval. Comprehensive evaluation of the initiative includes examination of organizational processes, measurement of the fiscal impact, and review of several aspects of the Reform's impact on enrollees.

One overarching element of the state's action is to achieve a Medicaid program that more closely resembles the manner in which health care is delivered in the private sector. This includes an emphasis on enrollee decision-making in health plan selection, opportunities to obtain enhanced benefits by pursuing healthful behaviors, a higher level of managed care, more disease management and the like. As in the private sector, these attributes of the initiative serve to increase both the opportunities and the obligations of enrollees for making health care decisions that impact them. Individual health and health care decisions are predicated on a wide variety of motivations interacting with highly variable situations that are not fully understood. However, it is clear that patient or enrollee satisfaction with current and prior circumstances in their health care will influence future decisions.

In addition to the role of enrollee satisfaction as one part of understanding enrollee decision-making, Florida's Reform initiative includes as one of its specific objectives the improvement of Medicaid enrollees' satisfaction with the care and related services they receive as participants in this program.

Clear understanding of enrollee satisfaction is thus central to the processes of the demonstration itself as well as being a key element within any comprehensive evaluation of the Reform initiative. To achieve that understanding, enrollee satisfaction is measured at multiple points in time and for numerous participants in Florida's Medicaid program. These measures are accomplished primarily by surveys.

Over several months late in 2006, the UF evaluation team conducted Consumer Assessment of Healthcare Providers and Systems (CAHPS) –style surveys of Florida Medicaid enrollees in Broward and Duval Counties who were potentially eligible for inclusion in the Reform initiative and who would, over the course of several months, be transitioned into Reform. The key point here is that these enrollees were queried about their Medicaid experiences (and their satisfaction with those experiences) during the months immediately preceding the implementation of Reform. This is referred to as the “pre-Reform” or “Benchmark” Survey because it measures, at the latest possible time prior to the onset of Reform, satisfaction levels of Florida Medicaid enrollees who were to become participants in the demonstration. Hence, this survey captured a benchmark against which later survey findings can be compared.

A second survey was conducted in the first few months of 2008 to query enrollees in the Reform initiative about their experiences. This second survey is referred to as the Year 1 Follow-Up Survey. It captures the views of enrollees with reference to their experience of health care delivery as Medicaid Reform enrollees, as well as the pre-Reform or early Reform experiences of enrollees in Baker, Clay, and Nassau Counties. It is noted that Year 1 Follow-Up Survey respondents

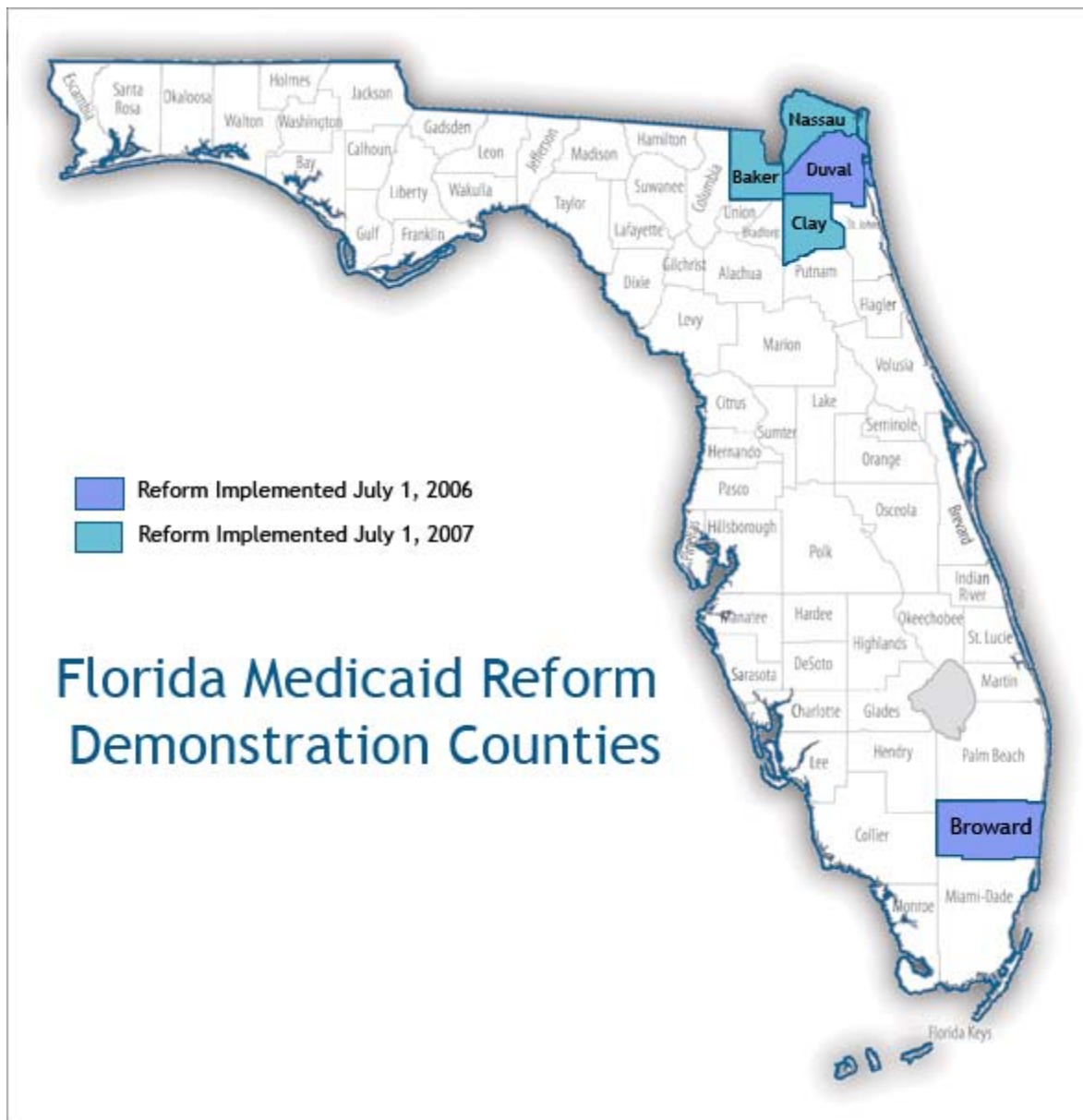
experienced the early months of Reform. A Year 2 Follow-Up Survey will be fielded January 15-April 15, 2009. That survey will measure the experiences of enrollees who are participating in Medicaid Reform that will by then be two years post implementation and should have reached a stable state of “normal” program operations.

METHODOLOGY

COUNTIES PARTICIPATING IN FLORIDA MEDICAID REFORM

Effective July 1, 2006, the Florida Agency for Health Care Administration (AHCA) implemented Medicaid Reform in Broward and Duval Counties. Broward County is located in the southeast section of Florida and includes the city of Fort Lauderdale. Duval County is located in the northeast section of Florida and includes the city of Jacksonville.

Beginning July 1, 2007, Reform was expanded to include three rural counties near Duval: Baker, Clay, and Nassau.



AHCA contracted with the University of Florida’s Department of Health Services Research, Management and Policy to conduct a five-year evaluation of the reforms, comprised of four separate, but at times overlapping, projects:

- an organizational analysis that describes the development of Medicaid Reform in Florida by focusing on the organizations that are integral to the restructuring process, such as health plans, AHCA, and AHCA fiscal agent;
- a fiscal analysis that focuses on the cost and financial implications of Reform;
- an analysis of the Low-Income Pool program; and
- an analysis of patient experiences and outcomes.

The overarching purpose of the last component is to measure changes to the enrollee experience and health status that may result from specific aspects of Medicaid Reform:

- health plan enrollment and coverage;
- ability to access health care;
- relationships between enrollees and providers;
- overall satisfaction and rating of providers and health plans;
- health care utilization;
- perception of the level of courtesy, respect, and helpfulness of office staff;
- ability to communicate with providers; and
- health status.

The Benchmark Survey was fielded during fall 2006, with the collection of pre-Reform survey data for Broward and Duval Counties, while the Year 1 Follow-Up Survey was conducted in the early months of 2008 using a modified version of the CAHPS 4.0 enrollee satisfaction questionnaire (Table 1):

TABLE 1: Annual Medicaid Enrollee Surveys Fielded from the beginning of Reform through Winter 2008			
<i>Timeline</i>	<i>County</i>	<i>Survey Conducted</i>	<i>Survey Instruments Used</i>
Fall/Winter 2006	Broward	“Benchmark” pre-Reform Survey	Modified CAHPS health plan survey version 3.0: <ul style="list-style-type: none"> • Adult MediPass • Adult non-MediPass • Child MediPass • Child non-MediPass
Fall/Winter 2006	Duval	“Benchmark” pre-Reform Survey	
Winter 2007/2008	Broward	Year 1 Follow-Up Survey	Modified CAHPS health plan survey version 4.0: <ul style="list-style-type: none"> • Adult Medicaid • Child Medicaid (<i>including Item Set for Children with Chronic Conditions</i>)
Winter 2007/2008	Duval	Year 1 Follow-Up Survey	
Winter 2007/2008	Baker	“Benchmark” pre-Reform Survey	
Winter 2007/2008	Clay	“Benchmark” pre-Reform Survey	
Winter 2007/2008	Nassau	“Benchmark” pre-Reform Survey	

A NOTE ON TERMINOLOGY: NAMING THE SURVEYS

In this report and other communications, the two surveys are identified as:

- The “Benchmark” (2006) Survey with 5,767 completed interviews, and
- The “Year 1 Follow-Up” (2008) Survey with 7,206 completed interviews.

We recognize the apparent contradiction between the labels and the dates. Fieldwork (interviewing) for surveys of this magnitude and complexity can require several months, as can the phased process of enrolling participants in the demonstration itself. The fieldwork for the Benchmark 2006 Survey took place in late 2006, after the Reform demonstration was formally established, but before Medicaid enrollees had transitioned into Reform and before they were actually receiving care within the demonstration. All subjects in the Benchmark 2006 Survey had been enrolled in Medicaid prior to Medicaid Reform. Their responses reflect their Medicaid experiences in a “pre-Reform” context.

The process of transitioning pre-Reform Medicaid enrollees who were eligible for participation in Reform began in September 2006, and was largely completed by early 2007. In order to capture information reflecting the views of demonstration enrollees after about one year’s experience, interviewing for the Year 1 Follow-Up Survey began in January 2008 and was completed in late March 2008. Responses of these survey participants reflect their Medicaid experiences within Reform, generally after about one year of that experience. In addition, this survey includes the pre-Reform experiences of enrollees in Baker, Clay, and Nassau Counties.

SAMPLING

The initial universe for the survey was determined in mid-December 2007, and was composed of all Medicaid recipients who, for six (6) consecutive months:

1. resided in Broward, Duval, Baker, Clay, or Nassau Counties;
2. were participating in one of the 26 Recipient Assistance Categories that qualify for Reform; and
3. participated in Reform during the time period of primary focus (June – November 2007).

The enrollee list generated from AHCA Member-Month and Recipient Eligibility files were randomized and used to create the survey sample. Details of the sampling methodology are provided in Appendix 1.

The resulting probability sample has the property that two individuals within the sampling frame for a given county and plan had an equal chance of being called on to respond to the survey if they both belonged to clusters of the same size. Two individuals within the same cluster would have zero probability of both being included into the sample. Assuming no nonresponse, the probability sample approximates a stratified randomized trial with individuals in the same strata sharing the same county, plan, and cluster size. Hence, the sample allows estimation for the following variables, and the calculation of sample errors for such estimates as:

All Florida Reform Counties (Broward, Duval, and Rurals)

- Demographics
 - All

- By County (Broward, Duval, Rurals)
 - Supplemental Security Income (SSI) vs. non-SSI³
 - Health Maintenance Organizations (HMOs) vs. Provider Service Networks (PSNs)
 - SSI vs. non-SSI within county
 - HMO vs. PSN within county
- Overall Satisfaction
 - All
 - By County (Broward, Duval, Rurals)
 - SSI vs. non-SSI
 - HMO vs. PSN
- Ratings
 - All
 - By County (Broward, Duval, Rurals)
 - SSI vs. non-SSI
 - HMO vs. PSN
- Reform Specific: Choice Counseling, Enhanced Benefits, Prescription Medicines
 - All
 - By County (Broward, Duval, Rurals)
- Supplemental Questions
 - All
 - By County (Broward, Duval, Rurals)
 - SSI vs. non-SSI
 - HMO vs. PSN

Table 2 shows the original and revised target samples by health plan vs. completed interviews. These targets were designed to allow for a wide range of comparisons across plan, across counties, and across time.

TABLE 2: Health Plan		Broward County			Duval County			Rural Counties		
		Original Target ¹	Revised Target	Actual Completes	Original Target ¹	Revised Target	Actual Completes	Original Target ¹	Revised Target	Actual Completes
MediPass (non-MPN)								315	371	378
PSNs	Access Health Solutions	315	326	271	315	315	329	315	315	319
	CMS	315	315	315	315	315	235			
	NetPass	315	320	322						
	Pediatric Associates	315	315	315						
	SFCCN	315	330	332						
	First Coast Advantage				315	331	335			
HMOs	Amerigroup	315	380	382						
	Vista dba Buena Vista	315	328	334						
	Vista Healthplan S. Florida	315	315	318						
	Total Health Choice	315	315	121						
	Health Ease	315	383	386	315	365	377			
	Humana	315	345	346						
	Preferred	315	315	176						
	StayWell	315	390	393	315	315	229			
United Health Care	315	336	334	315	345	359	315	315	300	
TOTAL		4,410	4,713	4,345	1,890	1,986	1,864	945	1,001	997
Plans Per County (Total Strata)		14			6			3		

SURVEY INSTRUMENTATION AND PROCEDURES

BENCHMARK 2006 SURVEY

During fall 2006, the UF Survey Research Center in the Bureau of Economic and Business Research (BEBR) administered four versions of the Benchmark 2006 Survey questionnaire in English and Spanish, and completed a total of 5,767 interviews:

- Adult MediPass,
- Adult non-MediPass,
- Child MediPass, and
- Child non-MediPass.

In the latter two survey versions, a proxy (parent, guardian, or other designated party) responded on behalf of underage children, where applicable.

The majority of items for the Benchmark 2006 Survey were drawn from CAHPS, health plan survey version 3.0. The CAHPS health plan survey is one of a family of standardized survey instruments used widely in the health care industry to assess enrollees' experiences and satisfaction with their health care.

¹ Initial stratum target was set as a consequence of power analysis. Some plans have so few enrollees that it becomes impossible to achieve the target. Targets are therefore revised during fieldwork, adding sample to strata representing larger plans, thus enhancing the reliability and validity of estimates.

The health plan survey was initially launched in 1997 by the CAHPS consortium (Harvard University, RTI, and RAND) with funding from the Agency for Health Care Quality and Research (AHRQ). The CAHPS health plan survey used in the Benchmark 2006 Survey was specifically designed for Medicaid beneficiaries to report on their:

- enrollment and coverage;
- ability to access care;
- relationships with their providers;
- overall satisfaction and rating of providers and health plans;
- health care utilization;
- perception of the level of courtesy, respect, and helpfulness of office staff;
- ability to communicate with their providers; and
- health status.

Respondents also provided information on their demographic characteristics (age, gender, educational attainment, and race/ethnicity).

At the request of AHCA staff, additional questions were added that specifically addressed experiences unique to Florida Medicaid and especially germane to the Medicaid Reform demonstration pilots (Broward and Duval Counties). These items pertained specifically to the enrollment and health plan selection process and travel time required to see a provider.

YEAR 1 FOLLOW-UP SURVEY

In 2007, a transition was made to the latest edition of the CAHPS health plan survey, version 4.0, which added the CAHPS Item Set for Children with Chronic Conditions module directly into the Child Medicaid Questionnaire. This supplemental set allows for the experiences of children with special health care needs to be compared with those of similar children in other health plans, and/or the general population of children in the same plan. The chronic condition set for children includes:

- A five-item screener that classifies children with chronic conditions during the analysis stage, and
- A set of supplemental questions to identify access to prescription medicines, access to specialized services, and family-centered care (i.e., having a personal doctor or nurse who knows the child, shared decision-making, getting needed information, and coordination of care and services).

Questions specific to Florida Medicaid and Reform were added to CAHPS version 4.0 in order to track availability and use of information, awareness and use of Choice Counselor services when selecting a health plan, and accrual and use of Enhanced Benefits Account credits.

There were singular challenges inherent in the transition from the earlier version of the CAHPS survey to version 4.0, where certain core questions were completely deleted or worded in a manner that would require different response categories (Appendix III). In order to review the experiences in Broward and Duval Counties from a temporal perspective, it became necessary to re-insert certain key questions into the 4.0 model.

Two versions of the Year 1 Follow-Up Surveys were administered in English and Spanish, and 7,206 interviews were completed for the five participating counties:

- Adult Medicaid, and
- Child Medicaid (including Item Set for Children with Chronic Conditions).

UNIVERSITY OF FLORIDA SURVEY RESEARCH CENTER AND WINCATI SOFTWARE

Details of how the survey was administered at the University of Florida Survey Research Center using the WinCati software are provided in Appendix 1.

WEIGHTING

Individuals who were called and who completed the survey were assigned sampling weights for analysis purposes. Details of the weighting methodology are provided in Appendix I.

ANALYTIC APPROACH

This report provides frequency distributions for key variables in the 2008 Year 1 Follow-Up Survey. Chi-square tests were used to detect statistically significant differences in ratings between enrollees in Broward and Duval Counties. Distributions for the rural counties are presented in aggregate and no comparisons were made across those counties.

The 2006 and 2008 surveys contain many variables that explore patient experiences and satisfaction with the health care system; literally hundreds of comparisons can be made along these dimensions across the two years. To obtain a snapshot of possible changes in patient experiences and satisfaction, we examined four ratings: overall satisfaction with health plan, overall satisfaction with care, personal doctor rating, and specialist rating for enrollees in Broward and Duval Counties.

These ratings allow the enrollee to rate each dimension along a 0 to 10 scale, with 0 representing the lowest rating and 10 representing the highest rating. Based on the approach used by AHRQ in its *National CAHPS Benchmarking Report*, the ratings were categorized into three groups, including level 1 (0-6), level 2 (7-8), and level 3 (9-10). The chi-square test was also used to identify differences in rating between 2006 and 2008.

It is important to place the differences observed across groups in some context and to reflect carefully on their meaning. Tests of statistical significance are part of that understanding. The term “statistical significance” implies that an observed difference is real, exists within a population, and is not due to chance. But these are large samples; sometimes small differences can be statistically significant. The practical and substantive importance of small differences may in fact be limited and open to interpretation.

The surveys provide opportunities to make literally hundreds of comparisons, assessing similarities/differences in satisfaction and related attributes by county (Broward and Duval at present, expanding to include the rural counties in a subsequent round); by plan type (PSN, HMO); by specific plan; by various enrollee demographic characteristics (age, race sex, etc.); and by enrollment circumstances or eligibility categories. Presented here is a snapshot of possible permutations with selected variables. Further analysis can include additional comparisons as well as multivariate analyses.

RESULTS

The findings and results are presented in three sections. Section 1 presents frequency distributions for Broward and Duval Counties from the first follow-up, 2008 post-Reform survey. Section 2 provides similar findings for the three rural counties, Baker, Clay, and Nassau, which serves as the Benchmark 2008 Survey for the expansion counties. Finally, Section 3 compares the pre-Reform survey results from 2006 to the 2008 post-reform follow-up survey (Broward and Duval Counties). Reported here are selected findings from a number of key variables.

SECTION 1: YEAR 1 FOLLOW-UP, 2008 POST-REFORM SURVEY: BROWARD AND DUVAL COUNTIES

DEMOGRAPHIC AND HEALTH STATUS CHARACTERISTICS

Self-reported health status is similar within the two counties (Table 3). A little over one-third of beneficiaries in both counties reported being in excellent health, about one-quarter are in very good health, and another quarter are in good health.

Medicaid Reform enrollees in most counties are children and young adults 20 years and younger. In Broward County about 56 percent are between the ages of 0 to 10 years, approximately 26 percent are between 11 and 20 years old, and 17 percent are between 21 and 64 years. The age distribution is fairly similar in Duval County: just over 50 percent are between 0 and 10 years, roughly 27 percent are between 11 and 20 years old, and about 21 percent are between 21 and 64 years. In both counties, a little over 1 percent of those in Reform are 65 years and older. In Broward County, 53 percent of enrollees are females; while in Duval 56 percent are females.

Most adult Medicaid Reform enrollees have at least a high-school diploma or a GED. In Broward County over 75 percent graduated from high school. Similarly, in Duval County 77 percent have at least a high-school diploma or GED.

A sizeable proportion of Medicaid Reform enrollees in Broward County are of Hispanic/Latino descent. In Broward County, 28 percent are Hispanic/Latino and over 12 percent of enrollees speak Spanish at home. In comparison, about 9 percent of enrollees in Duval County are Hispanic/Latino and about 3 percent of enrollees speak Spanish at home.

With respect to race, in Broward County, 52 percent of Reform enrollees are Black/African-American, about 28 percent are White, and 13 percent reported being of some other race. Among enrollees in Duval County, 62 percent are Black/African-American and approximately 27 percent are White.

In general, the distributions of these characteristics observed in the Year 1 Follow-Up (2008) Survey are similar to those observed in the Benchmark 2006 Survey. Both survey samples approximate the distributions of eligible enrollees as observed in the relevant administrative data.

Table 3	BROWARD COUNTY		DUVAL COUNTY	
DEMOGRAPHIC AND HEALTH STATUS CHARACTERISTICS	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)	
<i>(Weighted)</i>	N	%	N	%
<i>Self-Assessed Overall Health</i>				
Excellent	27979	35.65	18427	34.88
Very Good	18859	24.03	13295	25.17
Good	19534	24.89	12792	24.21
Fair	8702	11.09	6371	12.06
Poor	3406	4.34	1947	3.68
TOTAL	78480	100	52831	100
<i>Age</i>				
0 – 10 years	43871	55.87	26633	50.49
11– 20 years	20242	25.78	14329	27.16
21– 64 years	13356	17.01	11182	21.20
65 years or older	1060	1.35	607	1.15
TOTAL	78530	100	52750	100
<i>Gender</i>				
Male	36891	46.93	23208	43.99
Female	41725	53.07	29547	56.01
TOTAL	78616	100	52754	100
<i>Highest School Grade Completed (Adults)</i>				
8 th Grade or Less	4874	6.30	2194	4.21
Some High School, but Didn't Graduate	14033	18.14	9640	18.48
High School Graduate, or GED	28748	37.16	22276	42.71
Some College or 2-Year College Degree	19641	25.39	13909	26.67
4-Year College Graduate	7288	9.42	3102	5.95
More than 4-Year College Degree	2772	3.58	1032	1.98
TOTAL	77356	100	52153	100
<i>Hispanic or Latino Origin or Descent</i>				
Yes	21645	28.27	4517	8.69
No	54930	71.73	47462	91.31
TOTAL	76575	100	51979	100
<i>Race</i>				
White	21342	27.71	14100	26.81
Black or African-American	39671	51.51	32358	61.51
Asian	1440	1.87	800	1.52
Native Hawaiian or other Pacific Islander	282	0.37	16	0.03
American Indian or Alaska Native	354	0.46	312	0.59
Other	10214	13.26	2688	5.11
Multi-Race *	3717	4.83	2328	4.43
TOTAL	77021	100	52602	100
<i>* Respondents answered 'YES' to more than one race designation</i>				
<i>Primary Language Spoken at Home</i>				
English	63389	83.29	48871	94.63
Spanish	9656	12.69	1410	2.73
Some other language	3058	4.02	1361	2.64
TOTAL	76103	100	51642	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

EXPERIENCE WITH CARE

Getting Needed Care

Over 85 percent of enrollees in both counties had no problem finding a personal doctor or nurse. Enrollees from the two counties did not differ significantly in their ratings on their ability to get needed care (Table 4). Among enrollees needing access to specialty care, about 46 percent found it easy to get appointments with specialists. However, about 13 percent of beneficiaries in Broward County and 17 percent of beneficiaries in Duval said that it is never easy to get specialist appointments. Ratings on the ease in getting care, tests, and treatments were marginally statistically significantly different between Broward and Duval Counties, with respondents in Duval County indicating the more positive experience. Specifically, in Broward County about 52 percent of Medicaid Reform enrollees said it is always easy to get care, tests, or treatments, while in Duval County about 57 percent find that getting tests is always easy. Among those who experienced a delay getting health plan approval for care, about 49 percent in Broward County and 44 percent in Duval reported that this delay was a big problem.

Table 4	BROWARD COUNTY		DUVAL COUNTY		Tests of Significance ²	
	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)		F value	Pr>F
<i>(Weighted)</i>	N	%	N	%		
<i>Since you joined Medicaid how much of a problem, if any, was it to get a personal doctor or nurse you are happy with?</i>						
A big problem	3135	4.98	2315	5.60	0.50	0.6041
A small problem	5393	8.56	3908	9.46		
Not a problem	54442	86.46	35085	84.93		
TOTAL	62970	100	41308	100		
<i>In the last 6 months, how often was it easy to get appointments with specialists? *</i>						
Never	2531	12.61	2016	17.03	1.18	0.3154
Sometimes	4577	22.81	2307	19.49		
Usually	3743	18.65	2084	17.60		
Always	9216	45.93	5431	45.88		
TOTAL	20067	100	11838	100		
<i>In the last 6 months, how often was it easy to get the care, tests, or treatment you thought you needed through your health plan? **</i>						
Never	3151	10.05	1601	7.00	2.46	0.0612
Sometimes	5852	18.67	3568	15.60		
Usually	6109	19.50	4664	20.39		
Always	16226	51.78	13038	57.01		
TOTAL	31337	100	22871	100		
<i>How much of a problem, if any, did this delay in getting health plan approval cause you? ***</i>						
A big problem	4292	49.35	2145	43.81	0.50	0.6069
A small problem	2947	33.88	1824	37.25		
Not a problem	1458	16.77	927	18.93		
TOTAL	8697	100	4895	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those respondents who indicated they saw a specialist in the last 6 months

** Asked only of those respondents who indicated they needed care, tests, or treatment

*** Asked only of those respondents who reported that getting approval from a health plan for tests caused a delay

² The F-test addresses the null hypothesis that the distributions are the same in Broward and Duval. We use a significance level of 0.05; therefore, P-values (Pr>F) that are less than 0.05 lead to a rejection of the null hypothesis in favor of the alternative hypothesis, which is that the distributions are different in Broward and Duval.

There are no statistically significant differences between the two counties on enrollee ratings of their communication with their health care provider (Table 5). Overall, respondents view communication with their doctors favorably. Between 84 and 85 percent of enrollees feel that their personal doctor listens carefully to them and between 80 and 82 percent say that their doctor explains things in a way that is easy to understand. Eighty-seven percent said their doctor shows respect for what they had to say. A much lower percentage, but still most (68 to 70 percent) said that their doctor always spends enough time with them.

Table 5	BROWARD COUNTY		DUVAL COUNTY		Tests of Significance	
COMMUNICATING WITH PROVIDERS *	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)			
<i>(Weighted)</i>	N	%	N	%	F value	Pr>F
<i>In the last 6 months, how often did your personal doctor listen carefully to you?*</i>						
Never	835	1.46	564	1.46	0.15	0.9315
Sometimes	3493	6.12	2141	5.53		
Usually	4882	8.56	3202	8.27		
Always	47845	83.86	32793	84.74		
TOTAL	57055	100	38700	100		
<i>In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?*</i>						
Never	1425	2.49	844	2.18	0.44	0.7218
Sometimes	3846	6.73	2443	6.31		
Usually	6252	10.94	3780	9.76		
Always	45610	79.83	31659	81.75		
TOTAL	57134	100	38727	100		
<i>In the last 6 months, how often did your personal doctor show respect for what you had to say?*</i>						
Never	761	1.33	544	1.40	0.01	0.9981
Sometimes	2147	3.76	1487	3.84		
Usually	4335	7.60	2959	7.64		
Always	49781	87.30	33739	87.12		
TOTAL	57023	100	38728	100		
<i>In the last 6 months, how often did your personal doctor spend enough time with you?*</i>						
Never	1799	3.17	1625	4.21	1.21	0.3030
Sometimes	7476	13.18	4827	12.49		
Usually	8791	15.50	5112	13.23		
Always	38662	68.15	27079	70.07		
TOTAL	56728	100	38644	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Among those with a personal doctor or nurse

Among enrollees who filled a prescription, a lower percentage of Broward County beneficiaries (64 percent) relative to Duval County beneficiaries (70 percent) report that it was always easy to obtain prescription medications through their health plans (Table 6). Additionally, about equal percentages of enrollees in both counties filled a prescription and an equal percentage got help filling that prescription from their health plan, doctor's office, or clinic.

Table 6:	BROWARD COUNTY		DUVAL COUNTY		Tests of Significance	
PRESCRIPTION MEDICATIONS	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)		F value	Pr>F
<i>(Weighted)</i>	N	%	N	%		
<i>In the last 6 months, did you get or refill any prescription medicines?</i>						
Yes	40486	51.84	28193	53.30	0.55	0.4578
No	37607	48.16	24700	46.70		
TOTAL	78093	100	52893	100		
<i>In the last 6 months, how often was it easy to get prescription medicines through your health plan? *</i>						
Never	1643	4.10	460	1.64	5.26	0.0013
Sometimes	5904	14.71	4077	14.53		
Usually	6718	16.74	3829	13.65		
Always	25861	64.45	19683	70.17		
TOTAL	40125	100	28049	100		
<i>Did anyone from your health plan, doctor's office, or clinic help you get your prescription medicines? *</i>						
Yes	22033	55.69	15442	55.29	0.02	0.8747
No	17529	44.31	12485	44.71		
TOTAL	39562	100	27928	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those who filled a prescription

HEALTH INFORMATION: CHOICE COUNSELING AND THE ENHANCED BENEFITS ACCOUNT PROGRAM

Beneficiaries in Broward and Duval Counties are similar with respect to their use of information and knowledge of the Choice Counseling program (Table 7). Roughly 70 percent of beneficiaries in both counties sought information about their health plan before signing up for that plan.

Approximately 60 percent had heard of Choice Counseling. Between 49 and 53 percent of those who had heard of the program had utilized a Choice Counselor to assist them in selecting a plan.

Over 80 percent said that using Choice Counseling or another hotline number was not a problem. Enrollees in the two counties differ significantly on responding whether they chose their plan or were told which plan they were in. In Broward, 81 percent of beneficiaries reported choosing their plan, while in Duval 76 percent reported choosing their plan.

Table 7	BROWARD COUNTY		DUVAL COUNTY		Tests of Significance	
HEALTH INFORMATION AND CHOICE COUNSELING	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)			
<i>(Weighted)</i>	N	%	N	%	F value	Pr>F
<i>You can get information about plan services in writing, by telephone, on the Internet or in-person. Did you get (seek) any information about your health plan before you signed up or were assigned to a plan?</i>						
Yes	41435	68.84	29552	71.24	1.55	0.2134
No	18754	31.16	11930	28.76		
TOTAL	60189	100	41482	100		
<i>Have you heard that “Choice Counseling” is available to help Medicaid enrollees pick a health plan?</i>						
Yes	36856	60.93	26126	62.41	0.51	0.4755
No	23638	39.07	15736	37.59		
TOTAL	60495	100	41862	100		
<i>If YES, have you used a “Choice Counselor” either in person or on the phone to assist you in getting into a plan?*</i>						
Yes	19395	52.88	12637	48.7	2.23	0.1356
No	17284	47.12	13310	51.3		
TOTAL	36679	100	25948	100		
<i>How much of a problem, if any, was it to get the help you needed when you called the Choice Counseling or hotline number to sign up for the plan?</i>						
A big problem	1068	5.46	818	6.34	0.43	0.6484
A small problem	2429	12.43	1342	10.41		
Not a problem	16046	82.11	10740	83.25		
TOTAL	19543	100	12900	100		
<i>Did you choose your health plan or were you told which plan you were in?</i>						
I chose my plan	48637	80.9	31239	75.77	9.29	0.0023
I was told what plan I was in	11481	19.1	9990	24.23		
TOTAL	60117	100	41229	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Of those who had heard of Choice Counseling

There is a statistically significant difference between the two counties with respect to enrollee knowledge and use of the Enhanced Benefits Account program (Table 8). In Broward County, approximately 58 percent of enrollees had heard of the program compared to about 63 percent of enrollees in Duval County. Among those who had heard of the program, 59 percent in Broward and 65 percent of enrollees in Duval reportedly engaged in an activity to earn credit. Of those who earned credits, 42 percent in Broward and about 50 percent in Duval used their credits. Enrollees in the two counties are statistically similar on their views on whether participating in the program has improved their health. In Broward, 72 percent thought it improved their health compared to almost 75 percent in Duval.

Table 8	BROWARD COUNTY		DUVAL COUNTY		Tests of Significance	
ENHANCED BENEFITS ACCOUNT PROGRAM	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)			
<i>(Weighted)</i>	N	%	N	%	F value	Pr>F
<i>Have you heard about "Enhanced Benefits Accounts"?</i>						
Yes	40974	57.75	30046	63.02	7.14	0.0076
No	29976	42.25	17629	36.98		
TOTAL	70951	100	47676	100		
<i>Have you engaged in activity to earn "Enhanced Benefits Accounts"?</i> *						
Yes	22912	58.71	19139	65.03	5.93	0.0149
No	16117	41.29	10293	34.97		
TOTAL	39029	100	29432	100		
<i>If YES, did you redeem your incentive?</i> **						
Yes	9485	42.17	9335	49.84	5.07	0.0245
No	13010	57.83	9394	50.16		
TOTAL	22495	100	18729	100		
<i>Has participating in the programs improved your health in the last 6 months?</i>						
Yes	16195	72.39	13693	74.54	0.52	0.4703
No	6175	27.61	4677	25.46		
TOTAL	22370	100	18370	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those who had heard about the Enhanced Benefits Accounts program

** Asked only of those who engaged in an activity

OVERALL RATINGS: SATISFACTION WITH HEALTH CARE

Respondents were asked on a scale of 0 to 10 to rate various aspects of their health care experience, including overall plan satisfaction, overall satisfaction with care, personal doctor rating, and specialist rating (Table 9). Ratings between Broward and Duval Counties differed on 1 of the 4 measures. Close to 75 percent of Broward beneficiaries gave their personal doctor a rating of 9 or a 10 compared to 71 percent of Duval County enrollees. In addition, 7 percent of Broward enrollees gave their doctor a rating between 0 and 6, while almost 12 percent of Duval County beneficiaries gave their doctor this rating. The other ratings did not differ significantly. The percentage of enrollees in both counties rating their satisfaction with their plan and satisfaction with care a 9 or a 10 ranged between 57 to close to 60 percent. Approximately 63 percent of enrollees in both counties rated satisfaction with their specialist a 9 or a 10.

Table 9	BROWARD COUNTY		DUVAL COUNTY		Tests of Significance	
RATINGS BY COUNTY	Year 1 Follow-Up (2008)		Year 1 Follow-Up (2008)		F value	Pr>F
<i>(Weighted)</i>	N	%	N	%		
OVERALL PLAN SATISFACTION (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?</i>						
Level 1 (rating 0 – 6)	11716	16.70	8354	17.64	0.42	0.6602
Level 2 (rating 7 – 8)	18322	26.12	11705	24.71		
Level 3 (rating 9 – 10)	40113	57.18	27304	57.65		
TOTAL	70150	100	47363	100		
OVERALL SATISFACTION WITH CARE (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?</i>						
Level 1 (rating 0 – 6)	7786	12.19	5275	12.55	0.06	0.9401
Level 2 (rating 7 – 8)	18035	28.24	11650	27.72		
Level 3 (rating 9 – 10)	38033	59.56	25105	59.73		
TOTAL	63853	100	42030	100		
PERSONAL DOCTOR RATING (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?</i>						
Level 1 (rating 0 – 6)	4818	7.06	5412	11.85	6.51	0.0015
Level 2 (rating 7 – 8)	12368	18.12	7689	16.83		
Level 3 (rating 9 – 10)	51052	74.82	32573	71.32		
TOTAL	68238	100	45674	100		
SPECIALIST RATING (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?</i>						
Level 1 (rating 0 – 6)	3052	12.63	2149	15.59	1.27	0.2802
Level 2 (rating 7 – 8)	5824	24.11	2892	20.98		
Level 3 (rating 9 – 10)	15280	63.26	8741	63.42		
TOTAL	24156	100	13781	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

A key feature of Medicaid Reform is the emergence of two distinct kinds of managed care arrangements: PSNs and HMOs. Understanding whether the health care experiences of enrollees differ by managed care arrangement is an important consideration in understanding the impact of the changes to Medicaid on enrollees. However, in 2008, there were no statistically significant differences between how enrollees in PSNs and enrollees in HMOs rated their health care (Table 10).

Table 10	BROWARD & DUVAL COUNTIES Year 1 Follow-Up (2008)				Tests of Significance	
	PSN		HMO			
RATINGS: PSNs vs. HMOs	N	%	N	%	F value	Pr>F
(Weighted)						
OVERALL PLAN SATISFACTION (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?</i>						
Level 1 (rating 0 – 6)	5379	16.63	14691	17.25	0.11	0.8926
Level 2 (rating 7 – 8)	8280	25.60	21746	25.53		
Level 3 (rating 9 – 10)	18689	57.78	48728	57.22		
TOTAL	32348	100	85165	100		
OVERALL SATISFACTION WITH CARE (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?</i>						
Level 1 (rating 0 – 6)	3752	12.35	9309	12.33	0.26	0.7714
Level 2 (rating 7 – 8)	8260	27.19	21426	28.38		
Level 3 (rating 9 – 10)	18371	60.47	44767	59.29		
TOTAL	30382	100	75502	100		
PERSONAL DOCTOR RATING (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?</i>						
Level 1 (rating 0 – 6)	2366	7.58	7864	9.51	1.98	0.1377
Level 2 (rating 7 – 8)	5321	17.06	14735	17.82		
Level 3 (rating 9 – 10)	23512	75.36	60113	72.68		
TOTAL	31199	100	82713	100		
SPECIALIST RATING (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?</i>						
Level 1 (rating 0 – 6)	1678	13.35	3523	13.89	0.06	0.9411
Level 2 (rating 7 – 8)	2860	22.75	5856	23.09		
Level 3 (rating 9 – 10)	8035	63.90	15986	63.03		
TOTAL	12573	100	25365	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

Comparisons between SSI enrollees and non-SSI enrollees identify statistically significant differences in health care ratings across three of the four measures (Table 11). Relative to SSI enrollees, a greater proportion of non-SSI³ enrollees rated their overall plan satisfaction, overall satisfaction with care, and satisfaction with personal doctor a 9 or a 10. Ratings on specialist care were similar between the two groups. The differences in health care ratings are likely due to the poorer health status of beneficiaries with SSI eligibility.

Table 11	BROWARD & DUVAL COUNTIES Year 1 Follow-Up (2008)				Tests of Significance	
	SSI		Non-SSI		F value	Pr>F
RATINGS: SSI vs. non-SSI	N	%	N	%		
(Weighted)						
OVERALL PLAN SATISFACTION (0 – 10)						
<i>Using any number from 0–10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?</i>						
Level 1 (rating 0 – 6)	6144	26.20	13925	14.80	26.09	<0.0001
Level 2 (rating 7 – 8)	5901	25.16	24126	25.65		
Level 3 (rating 9 – 10)	11408	48.64	56009	59.55		
TOTAL	23453	100	94060	100		
OVERALL SATISFACTION WITH CARE (0 – 10)						
<i>Using any number from 0–10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?</i>						
Level 1 (rating 0 – 6)	4333	19.38	8727	10.45	26.80	<0.0001
Level 2 (rating 7 – 8)	6562	29.34	23123	27.69		
Level 3 (rating 9 – 10)	11469	51.28	51668	61.86		
TOTAL	22365	100	83519	100		
PERSONAL DOCTOR RATING (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?</i>						
Level 1 (rating 0 – 6)	2889	13.53	7341	7.93	9.10	0.0001
Level 2 (rating 7 – 8)	4001	18.74	16056	17.35		
Level 3 (rating 9 – 10)	14456	67.72	69169	74.72		
TOTAL	21346	100	92566	100		
SPECIALIST RATING (0 – 10)						
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?</i>						
Level 1 (rating 0 – 6)	2144	15.43	3057	12.72	1.01	0.3658
Level 2 (rating 7 – 8)	3076	22.14	5640	23.46		
Level 3 (rating 9 – 10)	8674	62.43	15346	63.83		
TOTAL	13894	100	24043	100		

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

³ Non-SSI enrollees are those who do not qualify for Medicaid based on whether they receive Social Security Income. This includes individuals who qualify for Medicaid based on being eligible for TANF, being a SOBRA child, or an Unemployed Parent. See Appendix II for more detail.

Key Findings: 2008, Year 1 Follow-Up – Broward and Duval Counties

- With a few exceptions, there were no significant differences in health care experiences between Reform enrollees in Broward and Duval Counties.
- For a vast majority of enrollees, getting a personal doctor or nurse with whom they were happy was ‘not a problem.’
- Almost half (46 percent) of respondents to the CAHPS surveys in Broward and Duval reported that it was always easy to get an appointment with a specialist.
- The majority of enrollees communicate well with their providers.
- Between 76 and 81 percent of enrollees reported choosing their health plan, and between 58 and 63 percent of enrollees had heard of the Enhanced Benefits Accounts program.
- Over 60 percent had heard of the Choice Counseling program.
- Over 70 percent of enrollees gave their personal doctor the highest rating (9 or 10).
- Around 57 percent rated their health plan at the highest level of satisfaction (9 or 10).
- Approximately 60 percent rated their overall satisfaction with care at the highest level (9 or 10).
- About 63 percent gave their specialty care the highest rating.
- There were no observable differences in experiences between enrollees in PSNs compared to enrollees in HMOs.
- Non-SSI enrollees tended to provide higher ratings of their health care compared to SSI enrollees.

**SECTION 2: BENCHMARK 2008 SURVEY: RURAL COUNTIES—BAKER, CLAY,
AND NASSAU COUNTIES**

DEMOGRAPHIC AND HEALTH STATUS CHARACTERISTICS

About 85 percent of Medicaid Reform beneficiaries in the three rural counties are in good, very good, or excellent health (Table 12 next page). Just fewer than 15 percent are in fair or poor health. Almost 81 percent are under the age of 20, and about 19 percent are adults between 21 and 64 years. Less than 1 percent are 65 years and older⁴. The gender distribution is equally divided: about 50 percent are male and 50 percent are female. About one-quarter of enrollees did not complete high-school or obtain a GED and about one-third had some college. A little over 10 percent of enrollees are of Hispanic or Latino descent although only about 3 percent use Spanish as the primary language at home. Fewer than 15 percent are Black or African-American, and just under 70 percent are White.

⁴ These numbers may not sum to 100% due to rounding.

Table 12	RURAL COUNTIES	
DEMOGRAPHIC AND HEALTH STATUS CHARACTERISTICS	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
<i>Self-Assessed Overall Health</i>		
Excellent	3555	35.17
Very Good	2981	29.49
Good	2103	20.80
Fair	981	9.70
Poor	489	4.84
TOTAL	10109	100
<i>Age</i>		
0 – 10 years	5493	54.04
11– 20 years	2701	26.57
21– 64 years	1903	18.72
65 years or older	68	0.67
TOTAL	10166	100
<i>Gender</i>		
Male	5113	50.30
Female	5053	49.70
TOTAL	10166	100
<i>Highest School Grade Completed (Adults)</i>		
8 th Grade or Less	439	4.39
Some High School, but Didn't Graduate	2116	21.14
High School Graduate, or GED	4125	41.22
Some College or 2-Year College Degree	2596	25.94
4-Year College Graduate	515	5.15
More than 4-Year College Degree	217	2.16
TOTAL	10007	100
<i>Hispanic or Latino Origin or Descent</i>		
Yes	1047	10.52
No	8907	89.48
TOTAL	9953	100
<i>Race</i>		
White	6999	69.65
Black or African-American	1494	14.86
Asian	163	1.62
Native Hawaiian or other Pacific Islander	42	0.42
American Indian or Alaska Native	116	1.15
Other	653	6.49
Multi-Race *	584	5.81
TOTAL	10050	100
* Respondents answered 'YES' to more than one race designation		
<i>Primary Language Spoken at Home</i>		
English	9577	96.35
Spanish	287	2.89
Some other language	76	0.76
TOTAL	9940	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

EXPERIENCES WITH CARE

In the rural counties, about 84 percent of enrollees reported having no problems finding a personal doctor or nurse with whom they were happy (Table 13). Fifty-two percent of enrollees always have an easy time getting an appointment with a specialist. However, 32 percent reported that it was never or sometimes easy to get an appointment with a specialist. Among those needing care, tests, or treatment, 56 percent said it was always easy to get this care, while about 24 percent said it was sometimes or never easy. Of those who experienced a delay in getting health plan approval for tests and other forms of care, 54 percent said the delay caused a big problem and about 12 percent said the delay was not a problem.

Table 13	RURAL COUNTIES	
GETTING NEEDED CARE	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
<i>Since you joined Medicaid how much of a problem, if any, was it to get a personal doctor or nurse you are happy with?</i>		
A big problem	685	8.60
A small problem	627	7.87
Not a problem	6657	83.53
TOTAL	7969	100
<i>In the last 6 months, how often was it easy to get appointments with specialists?*</i>		
Never	266	12.09
Sometimes	435	19.74
Usually	350	15.89
Always	1151	52.28
TOTAL	2202	100
<i>In the last 6 months, how often was it easy to get the care, tests, or treatment you thought you needed through your health plan?***</i>		
Never	267	6.46
Sometimes	709	17.18
Usually	831	20.12
Always	2323	56.25
TOTAL	4130	100
<i>How much of a problem, if any, did this delay in getting health plan approval cause you?***</i>		
A big problem	379	54.45
A small problem	234	33.59
Not a problem	83	11.96
TOTAL	696	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those respondents who indicated they saw a specialist in the last 6 months

** Asked only of those respondents who indicated they needed care, tests, or treatment

*** Asked only of those respondents who reported getting approval from a health plan about whether their care, tests, or treatment caused a delay in receiving needed care.

Table 14 presents information on how well enrollees communicate with their providers. Among Medicaid Reform enrollees in the rural counties with a personal doctor, 80 percent said their provider always listens carefully to them and that the doctor always explains things in a way that was easy to understand. In addition, 83 percent of enrollees said the doctor always showed respect for what they had to say. Approximately 71 percent of survey respondents felt that their doctor always spent enough time with them.

Table 14	RURAL COUNTIES	
COMMUNICATING WITH PROVIDERS	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
<i>In the last 6 months, how often did your personal doctor listen carefully to you?*</i>		
Never	146	1.93
Sometimes	546	7.18
Usually	801	10.53
Always	6111	80.36
TOTAL	7604	100
<i>In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?*</i>		
Never	104	1.36
Sometimes	502	6.58
Usually	937	12.30
Always	6077	79.75
TOTAL	7619	100
<i>In the last 6 months, how often did your personal doctor show respect for what you had to say?*</i>		
Never	78	1.03
Sometimes	539	7.09
Usually	681	8.95
Always	6306	82.93
TOTAL	7603	100
<i>In the last 6 months, how often did your personal doctor spend enough time with you?*</i>		
Never	320	4.20
Sometimes	775	10.19
Usually	1140	14.98
Always	5376	70.64
TOTAL	7611	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Among those with a personal doctor or nurse

Within the last 6 months, 57 percent of Medicaid Reform enrollees in rural counties obtained a prescription medication (Table 15). Of those who filled a prescription, 71 percent said it was always easy to obtain the medicine through their health plan. Fifty-four percent got help from the health plan or doctor's office in filling that prescription.

Table 15	RURAL COUNTIES	
PRESCRIPTION MEDICATIONS	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
<i>In the last 6 months, did you get or refill any prescription medicines?</i>		
Yes	5778	57.30
No	4305	42.70
TOTAL	10083	100
<i>In the last 6 months, how often was it easy to get prescription medicines through your health plan? *</i>		
Never	150	2.62
Sometimes	701	12.21
Usually	808	14.07
Always	4082	71.11
TOTAL	5741	100
<i>Did anyone from your health plan, doctor's office, or clinic help you get your prescription medicines?*</i>		
Yes	3083	54.01
No	2625	45.99
TOTAL	5709	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those who filled a prescription

HEALTH INFORMATION AND ENHANCED BENEFITS ACCOUNT PROGRAM

Table 16 provides data on how Medicaid Reform enrollees receive information about their health plans. In the rural counties, about 63 percent of enrollees looked for information about their health plan before signing up for that plan. Questions were specifically asked about the Choice Counseling experiences. Almost 57 percent of enrollees had heard of the program. Of those who were aware of Choice Counseling, 43 percent used the program to assist in enrolling in a health plan. Of those who used Choice Counseling, about 78 percent said it was not a problem to get the help they needed. Close to 54 percent chose their health plan.

Table 16	RURAL COUNTIES	
HEALTH INFORMATION AND CHOICE COUNSELING	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
<i>You can get information about plan services in writing, by telephone, on the Internet or in-person. Did you get (seek) any information about your health plan before you signed up or were assigned to a plan?</i>		
Yes	5028	63.31
No	2914	36.69
TOTAL	7941	100
<i>Have you heard that "Choice Counseling" is available to help Medicaid enrollees pick a health plan?</i>		
Yes	4599	56.77
No	3502	43.23
TOTAL	8101	100
<i>If YES, have you used a "Choice Counselor" either in person or on the phone to assist you in getting into a plan? *</i>		
Yes	1966	43.27
No	2578	56.73
TOTAL	4544	100
<i>How much of a problem, if any was it to get the help you needed when you called the Choice Counseling or hotline number to sign up for the plan? **</i>		
A big problem	120	6.13
A small problem	302	15.37
Not a problem	1544	78.50
TOTAL	1966	100
<i>Did you choose your health plan or were you told which plan you were in?</i>		
I chose my plan	4154	53.80
I was told what plan I was in	3567	46.20
TOTAL	7721	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those who had heard of Choice Counseling

** Asked only of those who used Choice Counseling

At the time of the survey, about 40 percent of rural Medicaid Reform Enrollees had heard of the Enhanced Benefits Account (EBA) program (Table 17). Of those who had heard of the program, 43 percent had engaged in an activity to earn credit. Of those earners, 22 percent had redeemed an incentive, and 58 percent said that participating in the program improved their health over the past six months.

Table 17	RURAL COUNTIES	
ENHANCED BENEFITS ACCOUNT PROGRAM	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
<i>Have you heard about "Enhanced Benefits Accounts"?</i>		
Yes	3730	39.99
No	5597	60.01
TOTAL	9327	100
<i>Have you engaged in activity to earn "Enhanced Benefits Accounts"?</i> *		
Yes	1477	43.26
No	1937	56.74
TOTAL	3414	100
<i>If YES, did you redeem your incentive?</i> **		
Yes	325	22.12
No	1143	77.88
TOTAL	1468	100
<i>Has participating in the programs improved your health in the last 6 months?</i> **		
Yes	840	58.00
No	608	42.00
TOTAL	1449	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

* Asked only of those who had heard of EBA

** Asked of those who engaged in an activity

OVERALL RATINGS: SATISFACTION WITH HEALTH CARE

Beneficiaries were asked to rate from 0 to 10 various aspects of their health care (Table 18). Zero is the lowest possible rating, and 10 is the highest possible rating. In the rural counties, 51 percent of Medicaid Reform enrollees rated their overall satisfaction with their plan as a 9 or 10, 58 percent rated their overall satisfaction with care a 9 or 10, and close to 68 percent gave their personal doctor and their specialist a 9 or 10 rating.

Table 18	RURAL COUNTIES	
RATINGS	BENCHMARK (2008)	
<i>(Weighted)</i>	N	%
OVERALL PLAN SATISFACTION (0 – 10)		
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?</i>		
Level 1 (rating 0 – 6)	1724	18.89
Level 2 (rating 7 – 8)	2716	29.77
Level 3 (rating 9 – 10)	4684	51.34
TOTAL	9124	100
OVERALL SATISFACTION WITH CARE (0 – 10)		
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?</i>		
Level 1 (rating 0 – 6)	1179	13.92
Level 2 (rating 7 – 8)	2414	28.48
Level 3 (rating 9 – 10)	4882	57.60
TOTAL	8475	100
PERSONAL DOCTOR RATING (0 – 10)		
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?</i>		
Level 1 (rating 0 – 6)	918	10.38
Level 2 (rating 7 – 8)	1925	21.76
Level 3 (rating 9 – 10)	6002	67.86
TOTAL	8844	100
SPECIALIST RATING (0 – 10)		
<i>Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?</i>		
Level 1 (rating 0 – 6)	285	10.51
Level 2 (rating 7 – 8)	584	21.53
Level 3 (rating 9 – 10)	1842	67.95
TOTAL	2711	100

Source: CAHPS Enrollee Satisfaction Surveys, Year 1 Follow-Up (2008)

Key Findings: Benchmark (2008) Survey– Baker, Clay, and Nassau Counties

- Eighty-four percent said finding a personal doctor with whom they were happy was not a problem.
- Getting prescription drugs was not problematic for most people: 71 percent said it was always easy to get medicines through their health plans.
- Almost 57 percent had heard of the Choice Counseling program and 40 percent were aware of the Enhanced Benefits Accounts program.
- About 68 percent of enrollees gave their personal doctor and specialty care the highest rating (9 or 10).
- Percentage giving overall satisfaction with care the highest rating was about 58 percent.
- Percentage giving overall plan satisfaction the highest rating was 51 percent.

SECTION 3: 2006 VS. 2008 COMPARISONS: BROWARD AND DUVAL COUNTIES

DEMOGRAPHIC AND HEALTH STATUS CHARACTERISTICS

The samples across the two surveys do not differ in any appreciable way except for age (Table 19). In 2006, the respondents were slightly older: about 48 percent were between 0 and 10 years of age, compared to about 54 percent in 2008; and about 30 percent were between 11 and 20 years in 2006 compared to about 26 percent in 2008.

Table 19 DEMOGRAPHIC COMPARISONS: Benchmark 2006 vs. One-Year Follow-Up	BROWARD AND DUVAL COUNTIES				Tests of Significance	
	Benchmark Survey (2006)		One-Year Follow-Up (2008)			
	<i>(Weighted)</i>	N	%	N	%	F value
<i>Self-Assessed Overall Health</i>						
Excellent	49167	35.28	46405	35.34	1.11	0.3481
Very Good	35224	25.28	32154	24.49		
Good	32750	23.50	32326	24.62		
Fair	15444	11.08	15073	11.48		
Poor	6771	4.86	5353	4.08		
TOTAL	139356	100	131311	100		
<i>AGE</i>						
0 – 10 years	66388	47.60	70447	53.66	9.06	<0.0001
11– 20 years	41924	30.06	34552	26.32		
21– 64 years	28526	20.45	24595	18.73		
65 years or older	2638	1.89	1686	1.28		
TOTAL	139476	100	131280	100		
<i>GENDER</i>						
Male	64262	46.10	60098	45.75	0.08	0.7765
Female	75127	53.90	71272	54.25		
TOTAL	139389	100	131371	100		
<i>Highest School Grade Completed (Adults)</i>						
8 th Grade or Less	3141	10.40	2145	8.32	1.84	0.1009
Some High School, but Didn't Graduate	7318	24.23	6313	24.47		
High School Graduate, or GED	11539	38.21	9177	35.58		
Some College or 2-Year College Degree	6569	21.75	6261	24.27		
4-Year College Graduate	1122	3.71	1466	5.68		
More than 4-Year College Degree	510	1.69	431	1.67		
TOTAL	30198	100	25794	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Broward and Duval Counties differ in a variety of ways. Demographically, Broward County has a higher proportion of immigrants and people of Hispanic/Latino descent compared to Duval. In addition, Broward County has been the location of several other Medicaid demonstration pilot programs and its managed care penetration is higher than that of Duval County. Because of the unique characteristics of each county, changes in health care experiences may be different across the two counties. Therefore, comparisons of the ratings between 2006 and 2008 are provided separately for each county. This report also examines changes over time within eligibility categories (SSI and non-SSI³) and racial and ethnic groupings (White, Black, and Hispanic). We are particularly interested in variations in the SSI population, as this group represents some of the sickest Medicaid beneficiaries. In addition, an original goal of Medicaid Reform was to reduce disparities in health across racial and ethnic groups. Therefore, understanding whether shifts have occurred in the perceptions of health care for various racial or ethnic groups provides an initial assessment of the extent to which this goal is being achieved.

BROWARD COUNTY

Overall

In Broward County, for two of the four measures there were statistically significant differences in enrollee ratings between 2006 and 2008 (Table 20). The percentage of enrollees rating their overall satisfaction with care a 9 or a 10 declined by about 7 percentage points, from about 67 percent in 2006 to approximately 60 percent in 2008. However, the percentage rating their personal doctor a 9 or a 10 increased from about 70 percent in 2006 to close to 75 percent in 2008. The percentage distributions for ratings on overall plan satisfaction and specialist care rating remained statistically unchanged between 2006 and 2008.

Table 20 COMPARATIVE RATINGS: ALL Broward County Respondents <i>(Weighted)</i>	BROWARD COUNTY				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)		F value	Pr>F
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0–10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	12061	15.22	11716	16.70	1.15	0.3159
Level 2 (rating 7 – 8)	20673	26.08	18322	26.12		
Level 3 (rating 9 – 10)	46535	58.71	40113	57.18		
TOTAL	79269	100	70150	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0–10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	6868	10.76	7786	12.19	11.82	<0.0001
Level 2 (rating 7 – 8)	14439	22.61	18035	28.24		
Level 3 (rating 9 – 10)	42546	66.63	38033	59.56		
TOTAL	63853	100	63853	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	4903	7.49	4818	7.06	6.38	0.0017
Level 2 (rating 7 – 8)	14569	22.25	12368	18.12		
Level 3 (rating 9 – 10)	45994	70.26	51052	74.82		
TOTAL	65465	100	68238	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	3054	13.21	3052	12.63	0.22	0.8005
Level 2 (rating 7 – 8)	5793	25.05	5824	24.11		
Level 3 (rating 9 – 10)	14281	61.75	15280	63.26		
TOTAL	23128	100	24156	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Eligibility Status

SSI Population

Table 21 shows satisfaction ratings for individuals who qualify for Medicaid based on their disability status and who live in Broward County. Three out of four ratings showed statistically significant differences in consumer perceptions between 2006 and 2008. The percentage of individuals rating their satisfaction with their health plan a 9 or a 10 declined from about 53 percent in 2006 to 46 percent in 2008. Conversely, the proportion rating their health plan satisfaction a 0 or 6 increased by about 7 percentage points across the two years. Overall satisfaction with care also declined over the two year period. In 2006, about 56 percent rated their overall care a 9 or 10, compared to approximately 49 percent in 2008. The proportion giving 0 to 6 ratings for this dimension increased from 16 percent to 21 percent. Much of the variation in the personal doctor rating occurred with changes in the proportion rating 7 or 8 and 0 to 6. The percentage giving their doctor a 0 to 6 rating increased from close to 9 percent to just over 13 percent, while the proportion providing a rating of 7 or 8 declined by almost 4 percentage points. Specialist ratings between 2006 and 2008 were not statistically significantly different.

Table 21 COMPARATIVE RATINGS: Broward County SSI Respondents (Weighted)	BROWARD COUNTY SSI Respondents				Tests of Significance F value Pr>F	
	Benchmark (2006)		Year 1 Follow-Up (2008)			
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	2970	20.70	3993	27.97	6.69	0.0013
Level 2 (rating 7 – 8)	3718	25.91	3750	26.27		
Level 3 (rating 9 – 10)	7662	53.39	6532	45.76		
TOTAL	14350	100	14275	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	1948	16.31	2859	20.92	4.62	0.0099
Level 2 (rating 7 – 8)	3256	27.27	4156	30.40		
Level 3 (rating 9 – 10)	6734	56.41	6654	48.68		
TOTAL	11937	100	13669	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	1136	9.43	1714	13.25	2.89	0.0556
Level 2 (rating 7 – 8)	2831	23.49	2552	19.74		
Level 3 (rating 9 – 10)	8086	67.09	8665	67.01		
TOTAL	12053	100	12930	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	889	11.29	1290	14.01	1.05	0.3503
Level 2 (rating 7 – 8)	1902	24.15	1993	21.64		
Level 3 (rating 9 – 10)	5086	64.56	5927	64.35		
TOTAL	7878	100	9210	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Non-SSI Population

For the non-SSI population in Broward County, statistically significant differences between ratings for 2006 and 2008 occurred for 2 out of the 4 ratings (Table 22). The proportion rating their overall satisfaction with care a 9 or a 10 declined about 6 and a half percentage points between 2006 and 2008, while the percentage giving their overall satisfaction with care a 7 or an 8 increased by roughly 6 percentage points. Similar to the overall Medicaid enrollee population in Broward County, the percentage giving their personal doctor the highest ratings increased from about 71 percent in 2006 to close to 77 percent in 2008. There were no statistically significant differences for overall plan satisfaction nor specialist rating.

Table 22: COMPARATIVE RATINGS: Broward County non-SSI Respondents (Weighted)	BROWARD COUNTY non-SSI Respondents				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)		F value	Pr>F
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	9091	14.00	7723	13.82	0.01	0.9855
Level 2 (rating 7 – 8)	16955	26.12	14572	26.08		
Level 3 (rating 9 – 10)	38873	59.88	33580	60.10		
TOTAL	64919	100	55875	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	4921	9.48	4926	9.82	8.33	0.0002
Level 2 (rating 7 – 8)	11183	21.54	13879	27.66		
Level 3 (rating 9 – 10)	35812	68.98	31378	62.53		
TOTAL	51916	100	50184	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	3767	7.05	3104	5.61	6.9	0.001
Level 2 (rating 7 – 8)	11738	21.98	9816	17.75		
Level 3 (rating 9 – 10)	37907	70.97	42387	76.64		
TOTAL	53412	100	55307	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	2165	14.20	1762	11.79	0.66	0.5176
Level 2 (rating 7 – 8)	3891	25.51	3831	25.63		
Level 3 (rating 9 – 10)	9194	60.29	9353	62.58		
TOTAL	15250	100	14946	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Race/Ethnicity

Black

For Black respondents in Broward County, only one rating had a statistically significant difference between 2006 and 2008 (Table 23). Among these beneficiaries, the percent giving their overall satisfaction with care a 9 or a 10 declined by about 10 points between 2006 and 2008 and the proportion giving a 7 or an 8 increased by about 8 points.

Table 23 COMPARATIVE RATINGS: Broward County, Race = Black <i>(Weighted)</i>	BROWARD COUNTY, Race = Black				Tests of Significance F value Pr>F	
	Benchmark (2006)		Year 1 Follow-Up (2008)			
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	5883	14.44	5776	16.51	1.01	0.3653
Level 2 (rating 7 – 8)	10276	25.22	8909	25.46		
Level 3 (rating 9 – 10)	24580	60.34	20307	58.03		
TOTAL	40739	100	34992	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	3382	10.55	3924	12.34	10.96	<0.0001
Level 2 (rating 7 – 8)	6817	21.27	9464	29.77		
Level 3 (rating 9 – 10)	21847	68.17	18400	57.88		
TOTAL	32047	100	31787	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	2576	7.90	2516	7.41	0.93	0.3938
Level 2 (rating 7 – 8)	6590	20.21	6106	17.98		
Level 3 (rating 9 – 10)	23441	71.89	25335	74.61		
TOTAL	32607	100	33957	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	1534	15.79	1435	13.23	0.73	0.4806
Level 2 (rating 7 – 8)	2019	20.78	2584	23.82		
Level 3 (rating 9 – 10)	6165	63.43	6832	62.96		
TOTAL	9719	100	10851	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Hispanic

The proportion of Hispanic Medicaid enrollees in Broward County rating their doctor a 9 or a 10 increased from 72 percent in 2006 to almost 81 percent in 2008, while the proportion providing a 7 or 8 rating declined by roughly 7 percentage points (Table 24). Other differences between the two years were not statistically significant.

Table 24	BROWARD COUNTY, Ethnicity = Hispanic				Tests of Significance	
COMPARATIVE RATINGS: Broward County, Ethnicity = Hispanic	Benchmark (2006)		Year 1 Follow-Up (2008)			
<i>(Weighted)</i>	N	%	N	%	F value	Pr>F
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	2610	12.12	2285	11.87	0.07	0.9299
Level 2 (rating 7 – 8)	5178	24.04	4503	23.39		
Level 3 (rating 9 – 10)	13745	63.83	12467	64.75		
TOTAL	21533	100	19255	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	1366	7.79	1546	8.65	0.74	0.4768
Level 2 (rating 7 – 8)	3835	21.87	4309	24.09		
Level 3 (rating 9 – 10)	12337	70.34	12028	67.26		
TOTAL	17538	100	17882	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	1088	5.94	777	4.10	7.99	0.0003
Level 2 (rating 7 – 8)	3994	21.81	2827	14.92		
Level 3 (rating 9 – 10)	13230	72.25	15343	80.98		
TOTAL	18311	100	18947	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	779	10.80	759	10.45	0.15	0.8599
Level 2 (rating 7 – 8)	1689	23.40	1578	21.72		
Level 3 (rating 9 – 10)	4749	65.80	4928	67.84		
TOTAL	7217	100	7264	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

White

Similar to Hispanic beneficiaries, the proportion of White Medicaid Reform enrollees in Broward County that rated their personal doctor a 9 or a 10 increased to about 75 percent in 2008 compared to 69 percent in 2006 (Table 25). Conversely, the proportion giving their personal doctor a 7 or an 8 declined from roughly 24 percent to 18 percent over the two-year period. There were no statistically significant differences for the other ratings among White beneficiaries.

Table 25	BROWARD COUNTY, Race = White				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)			
	COMPARATIVE RATINGS: Broward County, Race = White					
(Weighted)	N	%	N	%	F value	Pr>F
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	3748	15.69	3417	17.87	0.89	0.4119
Level 2 (rating 7 – 8)	6360	26.61	4987	26.08		
Level 3 (rating 9 – 10)	13788	57.70	10715	56.04		
TOTAL	23897	100	19120	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	1940	9.87	2119	11.81	1.23	0.2913
Level 2 (rating 7 – 8)	4793	24.37	4575	25.50		
Level 3 (rating 9 – 10)	12930	65.76	11246	62.69		
TOTAL	19662	100	17940	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	1414	6.89	1252	6.79	4.24	0.0145
Level 2 (rating 7 – 8)	4995	24.36	3404	18.45		
Level 3 (rating 9 – 10)	14100	68.75	13791	74.76		
TOTAL	20509	100	18447	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	1049	11.57	1004	13.06	0.41	0.6657
Level 2 (rating 7 – 8)	2455	27.07	1910	24.83		
Level 3 (rating 9 – 10)	5564	61.35	4778	62.12		
TOTAL	9068	100	7691	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

DUVAL COUNTY

Overall

For Duval County, there was a statistically significant change in one of the four measures (Table 26). Similar to Broward County, overall satisfaction with care declined from about 66 percent in 2006 to close to 60 percent in 2008. There were no statistically significant differences in ratings across the two years for overall plan satisfaction, personal doctor rating, or specialist rating.

Table 26 COMPARATIVE RATINGS: ALL Duval County Respondents (Weighted)	DUVAL COUNTY				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)		F value	Pr>F
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	9922	17.89	8354	17.64	0.02	0.9835
Level 2 (rating 7 – 8)	13802	24.88	11705	24.71		
Level 3 (rating 9 – 10)	31744	57.23	27304	57.65		
TOTAL	55468	100	47363	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	4670	10.61	5275	12.55	3.64	0.0263
Level 2 (rating 7 – 8)	10109	22.97	11650	27.72		
Level 3 (rating 9 – 10)	29228	66.42	25105	59.73		
TOTAL	44007	100	42030	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	4482	10.43	5412	11.85	1.09	0.3379
Level 2 (rating 7 – 8)	8373	19.48	7689	16.83		
Level 3 (rating 9 – 10)	30136	70.10	32573	71.32		
TOTAL	42991	100	45674	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	1922	13.28	2149	15.59	2.07	0.1260
Level 2 (rating 7 – 8)	4125	28.49	2892	20.98		
Level 3 (rating 9 – 10)	8431	58.23	8741	63.42		
TOTAL	14477	100	13781	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Eligibility Status

SSI

There were no statistically significant differences in ratings among beneficiaries with SSI in Duval County (Table 27).

Table 27 COMPARATIVE RATINGS: Duval County SSI Respondents	DUVAL COUNTY SSI Respondents				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)			
(Weighted)	N	%	N	%	F value	Pr>F
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	2465	21.65	2151	23.44	0.20	0.8163
Level 2 (rating 7 – 8)	2556	22.45	2151	23.44		
Level 3 (rating 9 – 10)	6367	55.91	4875	53.12		
TOTAL	11389	100	9177	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	1347	14.24	1474	16.95	0.47	0.6227
Level 2 (rating 7 – 8)	2514	26.57	2406	27.67		
Level 3 (rating 9 – 10)	5601	59.19	4815	55.38		
TOTAL	9462	100	8695	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	1183	12.76	1175	13.96	0.07	0.9368
Level 2 (rating 7 – 8)	1651	17.82	1449	17.22		
Level 3 (rating 9 – 10)	6430	69.41	5791	68.82		
TOTAL	9264	100	8416	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	684	12.86	854	18.22	0.80	0.4502
Level 2 (rating 7 – 8)	1242	23.35	1083	23.12		
Level 3 (rating 9 – 10)	3394	63.80	2747	58.65		
TOTAL	5320	100	4684	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Non-SSI

Among the non-SSI group in Duval County, there were statistically significant differences for one out of the four ratings (Table 28). The percentage of individuals rating their overall satisfaction with care a 9 or a 10 decreased from about 68.4 percent to 61 percent, while the percentage providing a 7 or 8 rating increased from approximately 22 percent to 28 percent. There were no statistically significant differences for the other ratings.

Table 28	DUVAL COUNTY non-SSI Respondents				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)			
COMPARATIVE RATINGS: Duval County non-SSI Respondents					F value	Pr>F
(Weighted)	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	7457	16.92	6203	16.24	0.10	0.9083
Level 2 (rating 7 – 8)	11246	25.51	9554	25.02		
Level 3 (rating 9 – 10)	25377	57.57	22429	58.74		
TOTAL	44079	100	38185	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	3322	9.62	3801	11.40	3.42	0.0326
Level 2 (rating 7 – 8)	7595	21.99	9244	27.73		
Level 3 (rating 9 – 10)	23627	68.40	20290	60.87		
TOTAL	34545	100	33335	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	3300	9.78	4237	11.37	1.13	0.3237
Level 2 (rating 7 – 8)	6722	19.93	6240	16.75		
Level 3 (rating 9 – 10)	23705	70.29	26782	71.88		
TOTAL	33727	100	37259	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	1238	13.52	1295	14.24	2.66	0.0703
Level 2 (rating 7 – 8)	2883	31.48	1809	19.88		
Level 3 (rating 9 – 10)	5036	55.00	5993	65.88		
TOTAL	9157	100	9097	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Race/Ethnicity

Black

The percentage of Black Medicaid beneficiaries in Duval County that rated their overall satisfaction with care a 9 or a 10 decreased from about 69 percent in 2006 to about 60 percent in 2008 (Table 29). The percentage giving a 7 or an 8 rating increased from about 22 percent to 27 percent. There were no statistically significant differences ratings for the other measures across the 2 years.

Table 29 COMPARATIVE RATINGS: Duval County, Race = Black <i>(Weighted)</i>	DUVAL COUNTY, Race = Black				Tests of Significance F value Pr>F	
	Benchmark (2006)		Year 1 Follow-Up (2008)			
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	5160	15.55	5388	18.64	0.80	0.448
Level 2 (rating 7 – 8)	7432	22.40	6423	22.22		
Level 3 (rating 9 – 10)	20589	62.05	17095	59.14		
TOTAL	33181	100	28906	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	2473	9.48	3068	12.54	3.12	0.0441
Level 2 (rating 7 – 8)	5695	21.84	6653	27.20		
Level 3 (rating 9 – 10)	17908	68.68	14737	60.25		
TOTAL	26075	100	24458	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	2433	9.96	3476	12.54	0.73	0.4811
Level 2 (rating 7 – 8)	3987	16.32	4751	17.14		
Level 3 (rating 9 – 10)	18012	73.73	19487	70.31		
TOTAL	24431	100	27715	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	1032	14.21	1015	13.87	0.90	0.4065
Level 2 (rating 7 – 8)	2073	28.54	1551	21.19		
Level 3 (rating 9 – 10)	4157	57.24	4753	64.93		
TOTAL	7261	100	7320	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Hispanic

Among Hispanic beneficiaries in Duval County, there were marginally statistically significant differences in the ratings of overall health care between 2006 and 2008 (Table 30). In 2006, about 72 percent of beneficiaries gave their overall ratings a 9 or 10 compared to roughly 57 percent in 2008. The proportion who gave their overall care a 7 or an 8 increased from 15 percent to almost 32 percent.

Table 30	DUVAL COUNTY, Ethnicity = Hispanic				Tests of Significance	
COMPARATIVE RATINGS: Duval County, Ethnicity = Hispanic	Benchmark (2006)		Year 1 Follow-Up (2008)			
<i>(Weighted)</i>	N	%	N	%	F value	Pr>F
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	774	15.96	428	10.86	0.78	0.4574
Level 2 (rating 7 – 8)	995	20.52	1049	26.62		
Level 3 (rating 9 – 10)	3080	63.52	2462	62.52		
TOTAL	4849	100	3938	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	501	12.42	419	11.15	2.73	0.0651
Level 2 (rating 7 – 8)	612	15.18	1191	31.71		
Level 3 (rating 9 – 10)	2918	72.39	2146	57.14		
TOTAL	4031	100	3756	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	373	9.85	417	10.91	0.12	0.8837
Level 2 (rating 7 – 8)	624	16.48	530	13.87		
Level 3 (rating 9 – 10)	2789	73.67	2874	75.22		
TOTAL	3785	100	3821	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	116	8.99	125	9.20	0.26	0.7687
Level 2 (rating 7 – 8)	345	26.80	257	18.95		
Level 3 (rating 9 – 10)	825	64.21	976	71.85		
TOTAL	1286	100	1359	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

White

For White beneficiaries in Duval County, the percentage rating their personal doctor a 9 or a 10 increased from 64 percent to 71 percent and the percent providing a rating of 7 or an 8 declined from 26 percent to 17 percent (Table 31). The specialty care rating also changed over the two-year period. The proportion rating their specialist 0 to 6 increased from roughly 9 percent in 2006 to 19 percent in 2008, while the percentage giving a rating of a 7 or an 8 declined by about 9 percentage points.

Table 31: COMPARATIVE RATINGS: Duval County, Race = White (Weighted)	DUVAL COUNTY, Race = White				Tests of Significance	
	Benchmark (2006)		Year 1 Follow-Up (2008)		F value	Pr>F
	N	%	N	%		
Overall Plan Satisfaction (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best plan possible, what number would you use to rate your health plan?						
Level 1 (rating 0 – 6)	3448	20.18	2051	15.97	0.98	0.3760
Level 2 (rating 7 – 8)	5046	29.53	3893	30.32		
Level 3 (rating 9 – 10)	8592	50.29	6898	53.71		
TOTAL	17087	100	12842	100		
Overall Satisfaction with Care (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best health care possible, what number would you use to rate your health care in the last 6 months?						
Level 1 (rating 0 – 6)	1643	11.83	1437	11.60	0.30	0.7384
Level 2 (rating 7 – 8)	3636	26.19	3612	29.17		
Level 3 (rating 9 – 10)	8602	61.97	7336	59.23		
TOTAL	13880	100	12385	100		
Personal Doctor Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?						
Level 1 (rating 0 – 6)	1424	9.97	1520	12.20	3.60	0.0272
Level 2 (rating 7 – 8)	3695	25.87	2062	16.55		
Level 3 (rating 9 – 10)	9164	64.16	8877	71.25		
TOTAL	14283	100	12459	100		
Specialist Rating (0 – 10) – Using any number from 0 – 10, where 0 is the worst and 10 is the best specialist possible, what number would you use to rate your specialist?						
Level 1 (rating 0 – 6)	495	8.66	916	19.35	3.47	0.0313
Level 2 (rating 7 – 8)	1699	29.75	989	20.90		
Level 3 (rating 9 – 10)	3517	61.59	2827	59.75		
TOTAL	5711	100	4732	100		

Source: CAHPS Enrollee Satisfaction Surveys, Benchmark (2006) and Year 1 Follow-Up (2008)

Key Findings: 2006 vs. 2008 Comparisons—Broward and Duval Counties

Broward County

- The percentage rating their overall health care at the highest level declined for the overall population and across the population subgroups.
- However, for the overall population and among the non-SSI group, Hispanic individuals, and White individuals, the proportion giving their personal doctor the highest rating increased.
- For the SSI group only, the percentage giving overall plan satisfaction the highest rating declined.
- There was no change in specialty care ratings for the overall population and across any of the population sub-groups.

Duval County

- With a few exceptions, ratings did not change between 2006 and 2008.
- The percentage rating their overall health care at the highest level declined for the overall population and for non-SSI individuals and Black beneficiaries.
- Among White beneficiaries the percentage giving their personal doctor the highest rating increased.
- Also among White beneficiaries, the percentage giving their specialist the lowest rating increased.

SUMMARY AND CONCLUSIONS

In general, Medicaid Reform beneficiaries tended to rate their health care experiences positively and to have a generally high level of satisfaction with their health care. Enrollees report:

- being able to find a personal doctor they are happy with,
- that they communicate well with their providers, and
- that they were able to choose their health plan.

In addition, a sizeable portion of enrollees across all 5 counties are aware of two key elements of Reform: Choice Counseling and the Enhanced Benefits Account program.

There were relatively few differences observed in ratings between 2006 and 2008, especially in Duval County. The differences that are statistically significant appear to indicate some decline in overall satisfaction with care. However, in Broward County between 2006 and 2008, this decline is accompanied by an increase in satisfaction with a personal physician. Further analysis may reveal whether this decline in the perception of overall care and improvement in ratings of personal physicians can be attributed to the change in managed care arrangements associated with Reform.

Caution must be made in making generalizations and conclusions on the true impact of Reform on enrollee experiences. The data presented in this report represent only a subset of the variables that can be analyzed, and there are additional analytic permutations that can be performed. In addition, only one year of follow-up data have been presented for Broward and Duval Counties, and the follow-up survey for the rural counties has not yet been fielded. Additional years of data will allow for clearer identification of trends and more definitive conclusions.

Within the context of a “satisfaction” type survey, it is important to note that when assessing patient transition from an unmanaged care environment to a managed care situation, it is highly probable that one would expect to see a “negative shift” in overall satisfaction. Along with that understanding is the belief that as a rule, “people don’t like change.” To further put the CAHPS survey findings in context for Medicaid’s Reform population, it is important to remember that historically, patient satisfaction in the MediPass program has been high. Therefore, a normal expectation would be to see a decline in satisfaction levels when Medicaid patients move from the “unmanaged” MediPass program to the “managed” Reform demonstration.

APPENDICES

APPENDIX I: METHODOLOGY

SAMPLING

The AHCA Member-Month and Recipient Eligibility files were used to extract the requisite demographic information for qualifying beneficiaries. The resulting list was cross-referenced with AHCA's Structured Query Language (SQL) server Eligibility files, which track monthly enrollment in Reform. Enrollment data were used to identify recipients enrolled in Reform during the period August – November 2007.

The recipients' PCP_ID (Primary Care Provider ID) was extracted from the Member-Month file in order to identify relevant Reform and non-Reform provider information.

The dataset from AHCA included Medicaid identifier, enrollee name, demographics, geographic location, recipient assistance category, and health plan enrollment indicators. The sample design provides for a capacity to make comparisons among health plans and within plans over time (during the course of the demonstration).

The universe of potential respondents was then modified to consist only of enrollees in households with a valid phone number as determined by a contracted commercial service (GENESYS). A household was identified as a unique phone number, and persons sharing this phone number were presumed to reside in the same household. Persons in the same plan and household define what we will henceforth term a *cluster*.

Plan members were randomly sampled using probability sampling. Within a county and plan, individuals were assigned uniform random numbers between 0 and 1, independently of one another. One individual per cluster was selected to represent that cluster; the selected individual corresponded to the lowest random number. This led to individuals within clusters having an equal chance of representing the cluster. For example, if a cluster had 4 persons, the probability that a given individual within that cluster would be selected to represent it would be 0.25.

Next, within a county and plan, clusters were ordered from lowest to highest in terms of the random number corresponding to the selected individual. For example, a cluster corresponding to a selected individual with random number 0.23 would be listed before a cluster with selected individual having random number 0.36.

Finally, within a county and plan, n clusters were called in order of their ranking (from lowest to highest) from the list, and the selected individual was then either surveyed or listed as a nonresponder.

UNIVERSITY OF FLORIDA SURVEY RESEARCH CENTER AND WINCATI SOFTWARE

The BEBR Survey Research Center is located in a secure office building in downtown Gainesville, FL, and has 75 interviewing stations. Since fall 1999, the lab primarily uses the Sawtooth Technologies WinCati software in conjunction with the questionnaire authoring system Ci3.

WinCati is a sample management program based on the Sybase database engine. It operates in client/server mode so that stations make queries to the database rather than passing active cases to work stations. This system centralizes the survey databases, minimizing data loss, and making system backups and system administration more efficient.

WinCati uses the American Association of Public Opinion Research (AAPOR) disposition coding scheme. Interviewers are required to leave notes explaining the outcome of each attempt. This detail on the attempt history helps the next interviewer complete an interview, or more properly code the disposition of the call. Accurate disposition codes are vital to the calculation of response rates.

The supervising portion of the WinCati program provides a wide range of reporting capabilities. Without going into a specific survey, administrators can look into the logon status of the current shift, and it will show them a list of interviewers currently logged on, which survey is being used, station, data collection or practice mode, interviewer identification number, and logon history. Before opening a survey, supervisors and administrators can also check the times zones for every area code; make changes to a "Never Call" list, barring the program from calling certain telephone numbers; schedule times and surveys for a database backup; check/edit online monitoring settings; and assign interviewer properties.

WinCati also provides a dynamic, interactive way to monitor interviewers with Super View. Super View is a program that allows supervisors to bring up on their monitor a mirror image of what is happening on the interviewer's monitor. This allows supervisors to see what answers are being recorded, and whether interviewers are reading the questions as they appear. When dealing with specific surveys, administrators can directly access and edit the sample, specifications, and questionnaire, or run a full suite of reports and data analysis.

WEIGHTING

All statistical analyses were done using the SURVEY procedures in SAS version 9.1 or AHRQ analogs of these procedures; these procedures appropriately account for the weighting of individuals when computing point estimates as well as standard errors or confidence bands.

The weight, W_i , for individual i was computed as:

$$W_i = W_{1i}W_{2i} ,$$

where

$$W_{1i} = 1/P_{\text{called},i} ;$$

$P_{\text{called},i}$ is the probability that the individual was called, which is empirically determined as the number of people in the individual's stratum (same county, plan, and cluster size) who were called divided by the number of people in the stratum.

$$W_{2i} = 1/P_{\text{respond},i} ;$$

$P_{\text{respond},i}$ is the probability that the individual responded to the call given that the individual was called. This probability was estimated using logistic regression based on data from all individuals called from all plans and counties. The logistic regression model used was:

$$\text{Logit}[P(\text{respond} | \text{called})] = \text{county}^* \text{nplan } \beta_0 + \text{adult } \beta_1 + \text{race } \beta_2 + \text{gender } \beta_3 + \text{cluster size } \beta_4 ;$$

where β_0 is a 19-dimensional vector of parameters representing stratum; β_1 is a 1-dimensional vector of parameters representing adult or child; β_2 is a 6-dimensional vector of parameters representing race category; β_3 is a 2-dimensional vector of parameters representing male, female, or unknown; and β_4 is a 1-dimensional vector of parameters representing cluster size.

The 2006 data were re-weighted to more accurately reflect the sampling and survey procedures utilized at that time. The new weighting procedure for 2006 essentially mirrors the 2008 approach described above except for one key issue. For the 2006 data, $P_{\text{called},i}$ is based on county, plan, and cluster size and **not** on adult status.

APPENDIX II: AHCA ELIGIBILITY ASSISTANCE CATEGORIES

Eligibility Category *	Code	SSI/ non-SSI	Assistance Category Code Description
SSI	MS	SSI	SSI Medicaid (Eligibility for Medicaid & usually SSI cash assistance determined by SSA Emergency MICs and retroactive Medicaid coverage on FLORIDA Medicaid)
SOBRA CHILD	MM C	non-SSI	MEDS for Children Born after 9/30/83
SOBRA CHILD	MM I		MEDS for Infants Under One
TANF	MA R		Low-Income Families (LIF) Medicaid (Deprived Child)
TANF	ME C		Extended Medicaid Due to Child Support
TANF	ME I		Transitional Medicaid Due to Caretaker Earned Income
TANF	MN		Presumptively Eligible Newborn Medicaid (PEN)
TANF	MO D		“AFDC” Failed Due to Deemed Income Medicaid
TANF	MO S		“AFDC” Failed Due to Sibling Income Medicaid
TANF	MO Y		LIF Medicaid for Age 18 – 21 Deprived Children
Unemployed Parent & PMA	MA U		Low-Income Families (LIF) Medicaid (Unemployed Parent)
Unemployed Parent & PMA	MP C		PMA for Children Under 21 in an Intact Family
SOBRA CHILD OVER PVRTY	MM C		MEDS for Children Born after 9/30/83
SOBRA CHILD OVER PVRTY	MM I		MEDS for Infants Under One

* Represents all eligibility categories for one-year follow-up survey respondents

**APPENDIX III: YEAR 1 FOLLOW-UP SURVEY INSTRUMENT TRANSITION FROM
CAHPS VERSION 3.0 TO 4.0**

Getting the care they need (a big problem, a small problem, not a problem)

Survey Question	Variable Number	Did the question wording/ response structure change?
In the last 6 months, how much of a problem, if any, was it to see a specialist that you needed to see?	A12	<p><i>Wording of question changed</i></p> <p>FROM: “how much of a problem, if any, was it to see a specialist”</p> <p>TO: “how often was it easy to get appointments with specialists”</p> <p><i>Answer choices changed</i></p> <p>FROM: a big problem, a small problem, not a problem</p> <p>TO: never, sometimes, usually, always</p>
In the last 6 months, how much of a problem, if any, was it to get the care, tests, or treatment you or your doctor believed was necessary?	A13	<p><i>Wording of question changed</i></p> <p>FROM: “how much of a problem, if any, was it to get the care, tests, or treatment you or your doctor believed was necessary”</p> <p>TO: “how often was it easy to get the care, tests, or treatment you thought you needed through your health plan”</p> <p><i>Answer choices changed</i></p> <p>FROM: a big problem, a small problem, not a problem</p> <p>TO: never, sometimes, usually, always</p>

Getting help from customer service (a big problem, a small problem, not a problem)

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 or the Medicaid office?	A5	<p><i>Wording of question changed</i></p> <p>FROM: “how much of a problem, if any, was it to get the help you needed when you called your health plan’s customer service”</p> <p>TO: “how often did your health plan’s customer service give you the information or help you needed”</p> <p><i>Answer choices changed</i></p> <p>FROM: a big problem, a small problem, not a problem</p> <p>TO: never, sometimes, usually, always</p>
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Getting care quickly without long waits (never, sometimes, usually, always)

<p>In the last 6 months, when you needed care right away for an illness, injury, or condition, how often did you get care as soon as you wanted?</p>	<p>B72</p>	<p><i>Wording of question changed</i> FROM: “as soon as you wanted” TO: “as soon as you thought you needed”</p>
<p>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?</p>	<p>B73</p>	<p><i>Wording of question changed</i> FROM: “as soon as you wanted” TO: “as soon as you thought you needed”</p>

ADULT

LAST SURVEY DISPOSITION REPORTS

Florida Pilot Counties: Broward and Duval
Expansion Counties: Baker, Clay, and Nassau

Code	CAHPS Adult 07	NetPass Broward	Access Health Solutions Broward	Amerigroup Broward	BuenaVista Broward	HealthEase Broward	Humana Broward	Preferred Broward	StayWell Broward	United Health Care Broward	SFCCN Broward
1100	Complete	157	60	147	74	141	151	56	149	158	147
1200	Partial Complete	0	0	1	0	0	0	0	0	1	1
2110	Strong Refusal	22	9	22	12	24	21	6	18	13	10
2120	Soft Refusal	129	68	110	48	108	106	48	114	127	130
2210	Respondent Never Available	10	7	3	7	9	2	4	6	4	8
2221	Answering Machine, No Message	94	41	95	58	109	115	48	127	122	89
2222	Answering Machine, Message	16	10	19	9	21	18	7	25	18	15
2310	Deceased	7	2	3	4	1	4	0	1	6	3
2320	Physically/Mentally Unable	40	20	26	19	21	28	10	21	29	32
2330	Language Unable	21	9	12	7	13	13	5	11	18	11
2340	Miscellaneous Unable	4	1	2	0	2	1	2	0	0	3
3120	Busy	21	10	9	11	16	12	2	24	11	11
3130	No Answer	84	41	99	45	94	77	39	89	86	81
3150	Technical Phone Problems	7	5	2	3	4	7	3	9	5	6
4200	Fax/Data Line	32	9	16	7	16	18	3	10	15	13
4310	Non-Working Number	83	46	91	49	114	69	33	109	77	79
4320	Disconnected Number	155	110	169	98	199	159	54	189	127	160
4410	Number Changed	4	2	1	1	1	4	1	4	2	3
4420	Cell Phone	0	0	0	0	0	0	0	0	0	0
4510	Business/Gov/Other Organization	13	6	16	8	14	10	5	13	4	13
4520	Institution	2	1	4	0	2	1	0	0	0	1
4530	Group Quarters	2	0	1	0	0	0	1	1	1	0
4700	No one there with first/last name	137	80	136	90	196	144	49	183	125	158
4701	Not in Medicaid/MediPass	1	4	6	4	5	1	4	2	1	1
4702	In Medicaid/MediPass, under 18	0	0	1	0	0	0	0	0	0	1
5100	Callback, Respondent Not Selected	11	1	10	4	16	15	7	21	40	18
5200	Callback, Respondent Selected	6	1	3	1	5	5	1	4	14	6
TOTAL		1058	543	1004	559	1131	981	388	1130	1004	1000

Code	CAHPS Adult 07	Total Health Choice Broward	Vista South Broward	Access Health Solutions Duval	HealthEase Duval	United HealthCare Duval	Staywell Duval	Shands/Jax First Coast Advantage	MediPass Rural	Access Health Solutions Rural	United Health Care Rural	TOTAL
1100	Complete	45	50	94	147	156	47	158	138	57	69	2201
1200	Partial Complete	0	0	0	0	2	0	1	0	0	1	7
2110	Strong Refusal	2	6	8	22	18	9	8	21	3	6	260
2120	Soft Refusal	21	29	66	103	108	30	82	79	19	28	1553
2210	Respondent Never Available	0	0	5	10	7	5	2	9	2	0	100
2221	Answering Machine, No Message	17	30	75	141	145	37	58	80	23	29	1533
2222	Answering Machine, Message	3	7	8	28	22	9	15	20	4	1	275
2310	Deceased	2	1	2	5	3	0	1	2	0	1	48
2320	Physically/Mentally Unable	10	9	13	21	20	12	23	60	10	7	431
2330	Language Unable	4	7	15	25	19	5	9	3	1	1	209
2340	Miscellaneous Unable	0	1	2	3	1	0	1	2	3	2	30
3120	Busy	4	7	23	25	20	8	21	18	3	6	262
3130	No Answer	21	33	59	87	88	34	60	78	24	26	1245
3150	Technical Phone Problems	3	1	3	7	7	3	8	8	3	6	100
4200	Fax/Data Line	2	2	13	7	6	2	9	9	3	2	194
4310	Non-Working Number	37	29	70	111	79	41	89	100	28	16	1350
4320	Disconnected Number	40	57	196	286	208	90	173	133	31	34	2668
4410	Number Changed	1	1	3	4	4	2	5	3	0	0	46
4420	Cell Phone	0	0	0	0	0	0	0	0	0	0	0
4510	Business/Gov/Other Organization	8	2	11	10	9	4	8	13	0	6	173
4520	Institution	0	0	0	1	1	0	1	1	1	0	16
4530	Group Quarters	1	0	0	1	0	0	0	1	1	1	11
4700	No one there with first/last name	45	43	122	119	112	58	80	153	41	39	2110
4701	Not in Medicaid/MediPass	3	1	5	4	4	2	5	0	0	1	54
4702	In Medicaid/MediPass, under 18	0	0	0	1	1	0	0	0	0	0	4
5100	Callback, Respondent Not Selected	1	1	1	27	14	3	13	18	7	1	229
5200	Callback, Respondent Selected	1	2	0	10	0	0	2	8	2	2	73
TOTAL		271	319	794	1205	1054	401	832	957	266	285	15182

APPENDIX V: LAST SURVEY DISPOSITION REPORTS – CHILD

CHILD

LAST SURVEY DISPOSITION REPORTS

*Florida Pilot Counties: Broward and Duval
Expansion Counties: Baker, Clay, and Nassau*

Code	CAHPS Child 07	CMS Broward	NetPass Broward	Access Health Solutions Broward	Pediatric Associates Broward	Amerigroup Broward	BuenaVista Broward	HealthEase Broward	Humana Broward
1100	Complete	315	165	211	315	235	260	245	195
1200	Partial Complete	0	0	0	1	0	1	0	1
2110	Strong Refusal	41	11	16	25	14	20	14	16
2120	Soft Refusal	134	70	97	142	83	93	86	77
2210	Respondent Never Available	0	4	2	6	2	5	1	2
2221	Answering Machine, No Message	227	109	151	211	141	115	129	128
2222	Answering Machine, Message	41	13	16	29	13	20	23	11
2310	Deceased	1	1	0	0	1	0	1	0
2320	Physically/Mentally Unable	0	0	1	2	1	0	0	0
2330	Language Unable	21	13	9	15	14	11	12	12
2340	Miscellaneous Unable	1	2	3	3	3	2	3	4
3120	Busy	22	9	21	19	18	12	13	10
3130	No Answer	192	67	114	134	107	124	66	76
3150	Technical Phone Problems	12	4	5	10	4	10	8	1
4200	Fax/Data Line	30	15	15	33	19	13	14	20
4310	Non-Working Number	132	65	102	160	101	102	138	85
4320	Disconnected Number	272	131	210	266	208	180	225	154
4410	Number Changed	5	2	3	3	2	5	7	0
4420	Cell Phone	0	0	0	0	0	0	0	0
4510	Business/Gov/Other Organization	10	9	13	25	16	10	15	9
4520	Institution	0	0	0	0	0	0	0	0
4530	Group Quarters	0	0	0	1	0	0	0	0
4700	No child there with first/last name	166	91	178	199	144	124	181	99
4701	Child not in Medicaid/MediPass	3	6	6	5	6	2	2	3
4702	Child in Medicaid/MediPass, parent under 18	0	0	1	2	1	1	0	0
4703	Child in Medicaid/MediPass, child over 21	0	1	1	2	1	2	3	2
4704	Child in Medicaid/MediPass, Responsible for own health care	1	1	1	2	1	4	2	3
5100	Callback, Respondent Not Selected	9	1	7	17	10	10	3	3
5200	Callback, Respondent Selected	6	1	2	13	0	7	3	0
TOTAL		1641	791	1185	1640	1145	1133	1194	911

Code	CAHPS Child 07	Preferred Broward	StayWell Broward	United Health Care Broward	SFCCN Broward	Total Health Choice Broward	Vista South Broward	CMS Duval	Access Health Solutions Duval
1100	Complete	120	244	176	185	76	268	235	235
1200	Partial Complete	0	0	0	0	0	1	0	0
2110	Strong Refusal	10	15	9	12	5	19	28	11
2120	Soft Refusal	44	96	52	97	37	120	66	90
2210	Respondent Never Available	4	4	3	4	2	6	3	3
2221	Answering Machine, No Message	61	127	117	104	45	184	146	143
2222	Answering Machine, Message	11	19	12	17	7	28	19	29
2310	Deceased	0	0	0	0	0	0	0	0
2320	Physically/Mentally Unable	0	1	0	0	1	0	0	1
2330	Language Unable	6	17	6	9	5	13	2	13
2340	Miscellaneous Unable	2	4	1	2	1	3	0	3
3120	Busy	5	8	6	20	2	16	28	23
3130	No Answer	50	72	69	72	32	168	86	125
3150	Technical Phone Problems	3	9	5	3	1	6	2	9
4200	Fax/Data Line	9	18	13	16	3	24	5	7
4310	Non-Working Number	51	117	54	79	51	105	95	142
4320	Disconnected Number	122	227	106	186	79	205	205	308
4410	Number Changed	2	0	1	4	3	5	7	6
4420	Cell Phone	0	0	0	0	0	0	0	0
4510	Business/Gov/Other Organization	4	29	6	15	5	14	12	13
4520	Institution	0	1	0	0	0	1	0	1
4530	Group Quarters	0	0	0	1	0	0	0	0
4700	No child there with first/last name	73	154	85	125	72	120	81	120
4701	Child not in Medicaid/MediPass	5	3	1	5	5	5	2	3
4702	Child in Medicaid/MediPass, parent under 18	0	0	1	0	2	3	0	1
4703	Child in Medicaid/MediPass, child over 21	2	0	1	1	0	1	1	1
4704	Child in Medicaid/MediPass, Responsible for own health care	1	1	0	0	1	2	1	1
5100	Callback, Respondent Not Selected	2	4	2	9	1	16	2	15
5200	Callback, Respondent Selected	0	2	2	4	3	9	0	12
TOTAL		587	1172	728	970	439	1342	1026	1315

Code	CAHPS Child 07	HealthEase Duval	United HealthCare Duval	Staywell Duval	Shands/Jax First Coast Advantage	MediPass Rural	Access Health Solutions Rural	United Health Care Rural	TOTAL
1100	Complete	230	203	182	177	240	262	231	5005
1200	Partial Complete	2	0	0	0	0	2	0	8
2110	Strong Refusal	11	11	10	6	13	19	21	357
2120	Soft Refusal	64	62	66	52	72	95	52	1847
2210	Respondent Never Available	9	7	3	3	3	7	0	83
2221	Answering Machine, No Message	118	116	108	82	97	125	101	2885
2222	Answering Machine, Message	19	19	15	13	13	25	6	418
2310	Deceased	0	0	0	0	0	0	0	4
2320	Physically/Mentally Unable	0	0	0	0	1	0	1	9
2330	Language Unable	7	8	6	4	1	4	1	209
2340	Miscellaneous Unable	3	2	1	3	2	5	0	53
3120	Busy	27	21	21	15	14	8	10	348
3130	No Answer	73	64	62	66	72	88	53	2032
3150	Technical Phone Problems	3	4	5	2	10	13	10	139
4200	Fax/Data Line	8	8	2	5	10	17	5	309
4310	Non-Working Number	122	96	88	76	104	75	59	2199
4320	Disconnected Number	239	197	187	206	127	137	85	4262
4410	Number Changed	5	3	5	4	2	5	1	80
4420	Cell Phone	0	0	0	0	0	0	0	0
4510	Business/Gov/Other Organization	13	2	11	8	9	13	7	268
4520	Institution	1	0	0	0	0	0	0	4
4530	Group Quarters	0	0	0	1	0	1	0	4
4700	No child there with first/last name	88	77	86	49	100	84	74	2570
4701	Child not in Medicaid/MediPass	4	3	2	3	0	0	0	74
4702	Child in Medicaid/MediPass, parent under 18	2	0	0	0	2	0	0	16
4703	Child in Medicaid/MediPass, child over 21	2	2	2	1	1	2	2	31
4704	Child in Medicaid/MediPass, Responsible for own health care	2	5	2	2	6	3	2	44
5100	Callback, Respondent Not Selected	15	7	2	1	5	35	3	179
5200	Callback, Respondent Selected	4	4	0	1	1	9	4	87
TOTAL		1071	921	866	780	905	1034	728	23524

CAHPS[®] Health Plan Survey 4.0

Adult Medicaid Questionnaire

[English Version]

INTRODUCTION

Hello, my name is _____, and I'm calling from the University of Florida.

We are conducting research sponsored by the Florida Agency for Health Care Administration concerning customer satisfaction with their health plans in Florida.

May I please speak with [RESPONDENT NAME]?

Your phone number was selected at random from a list of members provided by the Florida Agency for Health Care Administration.

All your answers are completely confidential, and you do not have to answer any question you do not wish to answer. In order to conduct telephone research, we maintain your name and number for study participation. No identifying information is linked with the data sent to the Florida Agency for Health Care Administration. The survey takes about 15 – 20 minutes to complete.

May we proceed?

1. Our records show that you are now in {INSERT HEALTH PLAN NAME}. Is that right?

¹ Yes → If Yes, Go to Question 3

² No

⁻⁸ Don't know

⁻⁹ Refused/Not Available

2. What is the name of your health plan? (Please print)

3. How many months or years in a row have you been in this health plan?

¹ Less than 6 months

² At least 6 months but less than 1 year

³ At least 1 year but less than 2 years

⁴ At least 2 years but less than 5 years

⁵ 5 or more years

YOUR HEALTH CARE IN THE LAST 6 MONTHS

These questions ask about your health care. Do not include care you got when you stayed overnight in a hospital. Also, please do not include dental care visits.

4. In the last 6 months, did you call a doctor's office or clinic during regular office hours to get help or advice for yourself?

¹ Yes

² No → If No, Go to Question 6

⁻⁸ Don't know

⁻⁹ Refused/Not Available

5. In the last 6 months, when you called during regular office hours, how often did you get the help or advice you needed?

¹ Never

² Sometimes

³ Usually

⁴ Always

6. 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?

¹ Yes

- No → If No, Go to Question 8
- 8(Don't know
- 9(Refused/Not Available

7. In the last 6 months, when you needed care right away, how often did you get care as soon as you thought you needed?

- Never
- Sometimes
- Usually
- Always

8. In the last 6 months, not counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic?

- Yes
- No → If No, Go to Question 10
- 8(Don't know
- 9(Refused/Not Available

9. In the last 6 months, not counting the times you needed care right away, how often did you get an appointment for your health care at a doctor's office or clinic as soon as you thought you needed?

- Never
- Sometimes
- Usually
- Always

10. In the last 6 months, how many times did you go to an emergency room to get care for yourself?

- None
- 1
- 2
- 3
- 4
- 5 to 9
- 10 or more

11. In the last 6 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

- None
- 1
- 2
- 3
- 4
- 5 to 9
- 10 or more

12. In the last 6 months, how often were you taken to the exam room within 15 minutes of your appointment?

- Never
- Sometimes
- Usually
- Always

13. In the last 6 months, how often did office staff at a doctor's office or clinic treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

14. In the last 6 months, how often were office staff at a doctor's office or clinic as helpful as you thought they should be?

- Never
- Sometimes
- Usually
- Always

15. 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

16. 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?

- 0 Worst health care possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health care possible

YOUR PERSONAL DOCTOR

17. A personal doctor is the one you would see if you need a checkup, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
- No → If No, Go to Question 26
- 8 (Don't know
- 9 (Refused/Not Available

18. In the last 6 months, how many times did you visit your personal doctor to get care for yourself?

- 0 (None (If None, Go to Question 25
- 1
- 2
- 3
- 4
- 5 to 9
- 10 or more

19. Did you have the same personal doctor or health care provider before you joined this health plan?

- Yes → If Yes, Go to Question 21

- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

20. Since you joined your health plan, how much of a problem, if any, was it to get a personal doctor or health care provider you are happy with?

- ¹ A big problem
- ² A small problem
- ³ Not a problem

21. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

22. In the last 6 months, how often did your personal doctor listen carefully to you?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

23. In the last 6 months, how often did your personal doctor show respect for what you had to say?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

24. In the last 6 months, how often did your personal doctor spend enough time with you?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

25. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

- ⁰ 0 Worst personal doctor possible

- 1 1
- 2 2
- 3 3
- 4 4
- 5 5
- 6 6
- 7 7
- 8 8
- 9 9
- 10 10 Best personal doctor possible

GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do not include dental visits or care you received when you stayed overnight in a hospital.

26. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 6 months, did you try to make any appointments to see a specialist?

- 1 Yes
- 2 No → **If No, Go to Question 29**
- 8 (Don't know
- 9 (Refused/Not Available

27. In the last 6 months, how often was it easy to get appointments with specialists?

- 1 (Never
- 2 Sometimes
- 3 Usually
- 4 Always

28. How many specialists have you seen in the last 6 months?

- 0 None → **If None, Go to Question 30**
- 1 1 specialist
- 2 2
- 3 3
- 4 4
- 5 5 or more specialists

29. 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 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

SELECTING YOUR HEALTH PLAN

The next questions ask about your experience enrolling in a health plan.

30. In Florida, the state pays for health plans to care for Medicaid enrollees. In the past year, all Medicaid beneficiaries in your county had to enroll in a health plan.

Did you choose your health plan or were you told which plan you were in?

- I chose my plan.
- I was told which plan I was in.
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

31. You can get information about plan services in writing, by telephone, on the Internet or in-person.

Did you get (seek) any information about your health plan before you signed up or were assigned to a plan?

- Yes
- No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

32. (Choice counselors provide information about available health plans through the mail, by internet, by telephone and in face-to-face meetings.)

Have you heard that **Choice Counseling** is available to help Medicaid enrollees pick a health plan?

- ¹ Yes
- ² No → If No, Go to Question 35
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

33. If yes, have you used a **Choice Counselor** either in person or on the phone to assist you in getting into a plan?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

34. How much of a problem, if any was it to get the help you needed when you called the **Choice Counseling** or *hotline number* to sign up for the health plan.

- ¹ A big problem
- ² A small problem
- ³ Not a problem

35. Do you recall getting a brochure or mailing on the different plan options before you signed up?

- ¹ Yes
- ² No → If No, Go to Question 38
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

36. Did the brochure provide useful information before you signed up?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

36a. How useful was the information provided in the brochure?

- ¹ Very useful
- ² Somewhat useful
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

37. How much of the information you were given before you signed up was correct?

- ¹ All of it
- ² Most of it
- ³ Some of it
- ⁴ None of it

YOUR HEALTH PLAN

Now that you have selected or been put in a health plan, we would like to ask about your experience getting care within that plan.

38. In the last 6 months, did you try to get any kind of care, tests, or treatment through your health plan?

- ¹ Yes
- ² No → **If No, Go to Question 41**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

39. In the last 6 months, did you have to get prior approval from your health plan before getting needed care?

- ¹ Yes
- ² No → **If No, Go to Question 40**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

39A. If YES, did this request for health plan approval cause a delay in getting the care you needed?

- ¹ Yes
- ² No → **If No, Go to Question 40**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

39B. If YES, how much of a problem, if any, did this delay in getting health plan approval cause you?

- A big problem
- A small problem
- Not a problem

40. In the last 6 months, how often was it easy to get the care, tests, or treatment you thought you needed through your health plan?

- Never
- Sometimes
- Usually
- Always

41. In the last 6 months, did you look for any information about how your health plan works in written material or on the Internet?

- Yes
- No → If No, Go to Question 43

-8(Don't know

-9(Refused/Not Available

42. 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

43. In the last 6 months, did you try to get information or help from your health plan's customer service?

- Yes
- No → If No, Go to Question 46

-8 Don't know

-9 Refused/Not Available

44. In the last 6 months, how often did your health plan's customer service give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always

45. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

46. In the last 6 months, did your health plan give you any forms to fill out?

- 1 Yes
- 2 No → If No, Go to Question 48
- 8(Don't know
- 9(Refused/Not Available

47. In the last 6 months, how often were the forms from your health plan easy to fill out?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

48. 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?

- 0 Worst health plan possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health plan possible

49. Would you recommend your health plan to your family or friends?

- 1 Definitely yes
- 2 Probably yes
- 3 Probably not
- 4 Definitely not

50. How would you rate the number of doctors you had to choose from?

- ¹ Excellent
- ² Very Good
- ³ Good
- ⁴ Fair
- ⁵ Poor
- ⁶ No experience

51. If you wanted to change your health plan, do you know how to change to another plan?

- ¹ Yes
- ² No → If No, Go to Question 53
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

52. In the last 6 months, has a health care provider or your health plan denied you any care, tests or treatment covered by your plan?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

53. (The grievance system is a process for asking the health plan to look at a decision that could have a negative effect on your health.)

In the last 6 months, did your health plan give you information about using their grievance system?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

54. Does your health plan offer services not covered by Medicaid?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

UNIQUE FEATURES OF FLORIDA MEDICAID
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55. “Enhanced Benefit Accounts” let Medicaid enrollees earn credits for healthy behaviors like getting regular check-ups or joining an exercise program. The credits can be used to buy health-related supplies, like aspirin and vitamins.

Have you heard about “Enhanced Benefit Accounts”?

- ¹ Yes
- ² No → **If No, Go to Question 59**
- ⁻⁸ Don’t know
- ⁻⁹ Refused/Not Available

56. Have you engaged in activity to earn Enhanced Benefit credits?

- ¹ Yes
- ² No → **If No, Go to Question 59**
- ⁻⁸ Don’t know
- ⁻⁹ Refused/Not Available

57. If yes, did you redeem your incentive?

- ¹ Yes
- ² No
- ⁻⁸ Don’t know
- ⁻⁹ Refused/Not Available

58. Has participating in the programs improved your health in the last 6 months?

- ¹ Yes
- ² No
- ⁻⁸ Don’t know
- ⁻⁹ Refused/Not Available

59. Have you heard that Medicaid enrollees can opt out of Medicaid and you can get help paying for your child’s health insurance through your job?

- ¹ (Yes
- ² (No
- ⁻⁸ (Don’t Know
- ⁻⁹ (Refused/Not Available

PRESCRIPTION MEDICINES

60. In the last 6 months, did you get or refill any prescription medicines?

- 1(Yes
2 No → If No, Go to Question 63
-8 Don't know
-9 Refused/Not Available

61. In the last 6 months, how often was it easy to get prescription medicines through your health plan?

- 1 Never
2 Sometimes
3 Usually
4 Always

62. Did anyone from your health plan, doctor's office, or clinic help you get your prescription medicines?

- 1 Yes
2 No
-8 Don't know
-9 Refused/Not Available

ABOUT YOU

63. In general, how would you rate your overall health?

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

64. In the past 6 months, have you seen a doctor or other health provider 3 or more times for the same condition or problem?

- 1 Yes
2 No → If No, Go to Question 66
-8 Don't know
-9 Refused/Not Available

65. Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy or menopause.

¹ Yes

² No

⁻⁸ Don't know

⁻⁹ Refused/Not Available

66. Do you now need or take medicine prescribed by a doctor? Do not **include birth control**.

¹ Yes

² No → If No, Go to Question 68

⁻⁸ Don't know

⁻⁹ Refused/Not Available

67. Is this medicine to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.

¹ Yes

² No

⁻⁸ Don't know

⁻⁹ Refused/Not Available

68. What is your age?

¹ 18 to 24

² 25 to 34

³ 35 to 44

⁴ 45 to 54

⁵ 55 to 64

⁶ 65 to 74

⁷ 75 or older

69. Are you male or female?

¹ Male

² Female

70. What is the highest grade or level of school that you have completed?

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

71. Are you of Hispanic or Latino origin or descent?

- 1 Yes, Hispanic or Latino
- 2 No, Not Hispanic or Latino
- 8 Don't know
- 9 Refused/Not Available

72. What is your race? Please mark one or more.

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

73. What language do you mainly speak at home?

- 1 English
- 2 Spanish
- 3 Some other language

THANK YOU

CAHPS[®] Health Plan Survey 4.0

Child Medicaid Questionnaire

[English Version]

INTRODUCTION

Hello, my name is _____, and I'm calling from the University of Florida.

We are conducting research sponsored by the Florida Agency for Health Care Administration concerning customer satisfaction with their health plans in Florida.

May I please speak with the parent or guardian of [RESPONDENT NAME]?

Your child's name was selected at random from a list of members provided by [HEALTH PLAN NAME].

All your answers are completely confidential, and you do not have to answer any question you do not wish to answer. In order to conduct telephone research, we maintain your name and number for study participation. No identifying information is linked with the data sent to the Florida Agency for Health Care Administration. The survey takes about 15 – 20 minutes to complete.

May we proceed?

Please answer the questions for [CHILD'S NAME]. Please do not answer for any other children.

1. **Our records show that your child is in {Health Plan Name}. Is that right?**

- ¹ Yes **→ If Yes, Go to Question 3**
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

2. **What is the name of your child's health plan?** _____

YOUR CHILD'S HEALTH CARE IN THE LAST 6 MONTHS
--

These questions ask about your child's health care. Do not include care your child got when he or she stayed overnight in a hospital. Do not include the times your child went for dental care visits.

3. **In the last 6 months, did your child have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?**

- ¹ Yes
- ² No **→ If No, Go to Question 5**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

4. **In the last 6 months, when your child needed care right away for an illness, injury, or condition, how often did your child get care as soon as you thought he or she needed?**

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

5. **In the last 6 months, when you called during regular office hours, how often did you get the help or advice you needed for your child?**

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

6. **In the last 6 months, not counting the times your child needed care right away, did you make any appointments for your child's health care at a doctor's office or clinic?**

- ¹ Yes
- ² No **→ If No, Go to Question 8**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

7. In the last 6 months, not counting times your child needed care right away, how often did you get an appointment for health care at a doctor's office or clinic as soon as you thought your child needed?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

8. In the last 6 months, not counting times your child went to an emergency room, how many times did he or she go to a doctor's office or clinic to get health care?

- 0 None → If None, Go to Question CC8
- 1
- 2
- 3
- 4
- 5 5 to 9
- 6 10 or more

9. In the last 6 months, how often was your child taken to the exam room within 15 minutes of his or her appointment?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

10. In the last 6 months, how often did office staff at your child's doctor's office or clinic treat you and your child with courtesy and respect?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

11. In the last 6 months, how often were office staff at your child's doctor's office or clinic as helpful as you thought they should be?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

CC1. In the last 6 months, how often did you have your questions answered by your child's doctors or other health providers?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

CC2. Choices for your child's treatment or health care can include choices about medicine, surgery, or other treatment. In the last 6 months, did your child's doctor or other health provider tell you there was more than one choice for your child's treatment or health care?

- ¹ Yes
- ² No → If No, Go to Question 12
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC3. In the last 6 months, did your child's doctor or other health provider talk with you about the pros and cons of each choice for your child's treatment or health care?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC4. In the last 6 months, when there was more than one choice for your child's treatment or health care, did your child's doctor or other health provider ask you which choice was best for your child?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

12. 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 child's health care in the last 6 months?

- ⁰ 0 Worst health care possible
- ¹ 1
- ² 2
- ³ 3
- ⁴ 4
- ⁵ 5
- ⁶ 6
- ⁷ 7
- ⁸ 8
- ⁹ 9
- ¹⁰ 10 Best health care possible

SPECIALIZED SERVICES

CC5. Special medical equipment or devices include a walker, wheelchair, nebulizer, feeding tubes, or oxygen equipment. In the last 6 months, did you get or try to get any special medical equipment or devices for your child?

- ¹ Yes
- ² No → If No, Go to Question CC8
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC6. In the last 6 months, how often was it easy to get special medical equipment or devices for your child?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

CC7. Did anyone from your child's health plan, doctor's office, or clinic help you get special medical equipment or devices for your child?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC8. In the last 6 months, did you get or try to get special therapy such as physical, occupational, or speech therapy for your child?

- ¹ Yes
- ² No → If No, Go to Question CC11
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC9. In the last 6 months, how often was it easy to get this therapy for your child?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

CC10. Did anyone from your child's health plan, doctor's office, or clinic help you get this therapy for your child?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC11. In the last 6 months, did you get or try to get treatment or counseling for your child for an emotional, developmental, or behavioral problem?

- ¹ Yes
- ² No → If No, Go to Question CC14
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC12. In the last 6 months, how often was it easy to get this treatment or counseling for your child?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

CC13. Did anyone from your child's health plan, doctor's office, or clinic help you get this treatment or counseling for your child?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC14. In the last 6 months, did your child get care from more than one kind of health care provider or use more than one kind of health care service?

- ¹ Yes
- ² No → **If No, Go to Question 13**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC15. In the last 6 months, did anyone from your child's health plan, doctor's office, or clinic help coordinate your child's care among these different providers or services?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

YOUR CHILD'S PERSONAL DOCTOR

13. A personal doctor is the one your child would see if he or she needs a checkup or gets sick or hurt. Does your child have a personal doctor?

- ¹ Yes
- ² No → **If No, Go to Question CC19**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

14. Since you joined your health plan, how much of a problem, if any, was it to get a personal doctor or nurse for your child you are happy with?

- ¹ A big problem
- ² A small problem
- ³ Not a problem

15. In the last 6 months, how many times did your child visit his or her personal doctor for care?

- ⁰ None → **If None, Go to Question 23**
- ¹ 1
- ² 2
- ³ 3
- ⁴ 4
- ⁵ 5 to 9
- ⁶ 10 or more

16. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy to understand?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

17. In the last 6 months, how often did your child's personal doctor listen carefully to you?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

18. In the last 6 months, how often did your child's personal doctor show respect for what you had to say?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

19. Is your child able to talk with doctors about his or her health care?

- ¹ Yes
- ² No ➔ **If No, Go to Question 21**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

20. In the last 6 months, how often did your child's personal doctor explain things in a way that was easy for your child to understand?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

21. In the last 6 months, how often did your child's personal doctor spend enough time with your child?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

22. In the last 6 months, did your child's personal doctor talk with you about how your child is feeling, growing, or behaving?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your child's personal doctor?

- 0 Worst personal doctor possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best personal doctor possible

CC16. Does your child have any medical, behavioral, or other health conditions that have lasted for more than 3 months?

- 1 Yes
- 2 No → If No, Go to Question 24
- 8 Don't know
- 9 Refused/Not Available

CC17. Does your child's personal doctor understand how these medical, behavioral, or other health conditions affect your child's day-to-day life?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Refused/Not Available

CC18. Does your child's personal doctor understand how your child's medical, behavioral, or other health conditions affect your family's day-to-day life?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Refused/Not Available

GETTING HEALTH CARE FROM A SPECIALIST

When you answer the next questions, do not include dental visits or care your child got when he or she stayed overnight in a hospital.

24. Specialists are doctors, such as surgeons, heart , allergy, skin, and other doctors who specialize in one area of health care. In the last 6 months, did you try to make any appointments for your child to see a specialist?

- ¹ Yes
- ² No → **If No, Go to Question 26**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

25. In the last 6 months, how often was it easy to get appointments for your child with specialists?

- ¹ Never
- ² Sometimes
- ³ Usually
- ⁴ Always

26. How many specialists has your child seen in the last 6 months?

- ⁰ None → **If None, Go to Question 28**
- ¹ 1 specialist
- ² 2
- ³ 3
- ⁴ 4
- ⁵ 5 or more specialists

27. We want to know your rating of the specialist your child saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate your child's specialist?

- ⁰ 0 Worst specialist possible
- ¹ 1
- ² 2
- ³ 3
- ⁴ 4
- ⁵ 5
- ⁶ 6
- ⁷ 7
- ⁸ 8
- ⁹ 9
- ¹⁰ 10 Best specialist possible

SELECTING YOUR CHILD'S HEALTH PLAN

The next questions ask about your experience enrolling your child in a health plan.

28. In Florida, the state pays for health plans to care for Medicaid enrollees. In the past year, all Medicaid beneficiaries in your county had to enroll in a health plan.

Is your child covered by a health plan like this?

- ¹ Yes
- ² No → **If No Go to Question 35**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

INTERVIEWER NOTE:

Repeat Q#1 statement.

“Our records show your child is in {Health Plan Name}.”

29. Did you choose your child's health plan or were you told which plan your child was in?

- ¹ I chose my child's plan.
- ² I was told which plan my child was in.

30. You can get information about your child's health plan services in writing, by telephone, on the Internet, or in-person - did you get (seek) any information about your child's health plan before you signed him or her up for it?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

31. (*Choice counselors provide information about available health plans through the mail, by internet, by telephone and in face-to-face meetings.*)

Have you heard that choice counseling is available to help Medicaid enrollees pick a health plan?

- ¹ Yes
- ² No → If No, Go to Question 35
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

32. If yes, have you used a Choice Counselor either on the phone or in person?

- ¹ Yes
- ² No → If No, Go to Question 35
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

33. Did the Choice Counselor provide useful information?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

34. How much of a problem, if any, was it to get the help you needed when you used Choice Counseling or another *hotline number* to sign your child up for the health plan.

- ¹ A big problem
- ² A small problem
- ³ Not a problem

35. Do you recall getting a brochure or mailing on the different plan options before you signed your child up?

- ¹ Yes
- ² No → If No, Go to Question 38
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

36. Did the brochure provide useful information before you signed him/her up?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

37. How much of the information you were given before you signed your child up was correct?

- ¹ All of it
- ² Most of it
- ³ Some of it
- ⁴ None of it

YOUR CHILD'S HEALTH PLAN

Now that your child's health plan has been selected, we would like to ask about your experience getting care within that plan.

38. In the last 6 months, did you try to get any kind of care, tests, or treatment for your child?

- ¹ Yes
- ² No → **If No, Go to Question 41**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

39. In the last 6 months, did you have to get prior approval from your child's health plan before getting needed care for your child?

- ¹ Yes
- ² No → **If No, Go to Question 40**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

39A. If YES, did this request for health plan approval cause a delay in getting the care your child needed?

- ¹ Yes
- ² No → **If No, Go to Question 40**
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

39B. If YES, how much of a problem, if any, did this delay in getting health plan approval cause your child?

- ¹ A big problem
- ² A small problem
- ³ Not a problem

40. In the last 6 months, how often was it easy to get the care, tests, or treatment you thought your child needed?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

41. In the last 6 months, did you try to get information or help from customer service at your child's health plan?

- 1 Yes
- 2 No → If No, Go to Question 44
- 8 Don't know
- 9 Refused/Not Available

42. In the last 6 months, how often did customer service at your child's health plan give you the information or help you needed?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

43. In the last 6 months, how often did customer service staff at your child's health plan treat you with courtesy and respect?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

44. In the last 6 months, did your child's health plan give you any forms to fill out?

- 1 Yes
- 2 No → If No, Go to Question 46
- 8(Don't know
- 9(Refused/Not Available

45. In the last 6 months, how often were the forms from your child's health plan easy to fill out?

- 1 Never
- 2 Sometimes
- 3 Usually
- 4 Always

46. 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 child's health plan?

- 0 Worst health plan possible
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 Best health plan possible

UNIQUE FEATURES OF FLORIDA MEDICAID

47. "Enhanced Benefits Accounts" let Medicaid enrollees earn credits for healthy behaviors like getting regular check-ups or joining an exercise program. The credits can be used to buy health-related supplies, like aspirin and vitamins.

Have you heard about "Enhanced Benefit Accounts"?

- 1 Yes
- 2 No → If No, Go to Question 51
- 8 Don't know
- 9 Refused/Not Available

48. Has your child engaged in activity to earn Enhanced Benefit credits?

- 1 Yes
- 2 No → If No, Go to Question 51
- 8 Don't know
- 9 Refused/Not Available

49. If yes, did you spend the credits that your child earned?

- 1 Yes
- 2 No
- 8 Don't know
- 9 Refused/Not Available

50. Has participation in this program improved your child's health in the last 6 months?

- 1 Yes
- 2 No
- 8 Don't Know
- 9 Refused/Not Available

51. Have you heard that Medicaid enrollees can opt out of Medicaid and you can get help paying for your child's health insurance through your job?

- 1 (Yes
- 2 (No
- 8(Don't Know
- 9(Refused/Not Available

PRESCRIPTION MEDICINES

CC19. In the last 6 months, did you get or refill any prescription medicines for your child?

- Yes
- No → If No, Go to Question 52
- 8 Don't know
- 9 Refused/Not Available

CC20. In the last 6 months, how often was it easy to get prescription medicines for your child through his or her health plan?

- Never
- Sometimes
- Usually
- Always

CC21. Did anyone from your child's health plan, doctor's office, or clinic help you get your child's prescription medicines?

- Yes
- No
- 8 Don't know
- 9 Refused/Not Available

ABOUT YOUR CHILD AND YOU

52. In general, how would you rate your child's overall health?

- Excellent
- Very Good
- Good
- Fair
- Poor

CC22. Does your child currently need or use medicine prescribed by a doctor (other than vitamins)?

- ¹ Yes
- ² No → If No, Go to Question CC25
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC23. Is this because of any medical, behavioral, or other health condition?

- ¹ Yes
- ² No → If No, Go to Question CC25
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC24. Is this a condition that has lasted or is expected to last for at least 12 months?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC25. Does your child need or use more medical care, more mental health services, or more educational services than is usual for most children of the same age?

- ¹ Yes
- ² No → If No, Go to Question CC28
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC26. Is this because of any medical, behavioral, or other health condition?

- ¹ Yes
- ² No → If No, Go to Question CC28
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC27. Is this a condition that has lasted or is expected to last for at least 12 months?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC28. Is your child limited or prevented in any way in his or her ability to do the things most children of the same age can do?

- ¹ Yes
- ² No → If No, Go to Question CC31
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC29. Is this because of any medical, behavioral, or other health condition?

- ¹ Yes
- ² No → If No, Go to Question CC31
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC30. Is this a condition that has lasted or is expected to last for at least 12 months?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC31. Does your child need or get special therapy such as physical, occupational, or speech therapy?

- ¹ Yes
- ² No → If No, Go to Question CC34
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC32. Is this because of any medical, behavioral, or other health condition?

- ¹ Yes
- ² No → If No, Go to Question CC34
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC33. Is this a condition that has lasted or is expected to last for at least 12 months?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC34. Does your child have any kind of emotional, developmental, or behavioral problem for which he or she needs or gets treatment or counseling?

- ¹ Yes
- ² No → If No, Go to Question 53
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

CC35. Has this problem lasted or is it expected to last for at least 12 months?

- ¹ Yes
- ² No
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

53. What is your child's age?

- ¹ Less than 1 year old

_____ YEARS OLD (*write in*)

54. Is your child male or female?

- Male
- Female

55. Is your child of Hispanic or Latino origin or descent?

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

56. What is your child's race? Please mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other

57. What is your age?

- Under 18
- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

58. Are you male or female?

- Male
- Female

59. What is the highest grade or level of school that you have completed?

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

60. How are you related to the child?

- ¹ Mother or father
- ² Grandparent
- ³ Aunt or uncle
- ⁴ Older sibling
- ⁵ Other relative
- ⁶ Legal guardian

61. What language do you mainly speak at home?

- ¹ English
- ² Spanish
- ³ Creole
- ⁴ Other (please specify)
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

62. What language does your child mainly speak at home?

- ¹ English
- ² Spanish
- ³ Creole
- ⁴ Other (please specify)
- ⁵ Child is non-verbal
- ⁻⁸ Don't know
- ⁻⁹ Refused/Not Available

THANK YOU