



Managed Long Term Care Plan 2013 Member Satisfaction Survey Summary Report

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Section One: Introduction

A) BACKGROUND

Managed long-term care (MLTC) is a system that streamlines the delivery of long-term services to people who are chronically ill or disabled and who wish to stay in their homes and communities. These services, such as home care or adult day care, are provided through managed long-term care plans that are approved by the New York State Department of Health. The entire array of services to which an enrolled member is entitled can be received through the MLTC plan the member has chosen. As New York transforms its long-term care system to one that ensures care management for all, enrollment in a MLTC plan may be mandatory or voluntary, depending on individual circumstances.

Enrollment in a MLTC plan is mandatory for those who:

- Are dual eligible (eligible for both Medicaid and Medicare) and over 21 years of age and need community based long-term care services for more than 120 days.
- Reside in the counties of NYC, Nassau, Suffolk or Westchester.

Enrollment in MLTC plan is voluntary for those who:

- Are dual eligible and are 18 through 21 years of age and need community based long term care services for more than 120 days and assessed as nursing home eligible.
- Are non-dual eligible and over 18 years of age and are assessed as nursing home eligible.

Within New York Medicaid, there are three models of MLTC plans: 1) partially capitated MLTC plans, 2) Program of All-Inclusive Care for the Elderly (PACE) plans, and 3) Medicaid Advantage Plus (MAP) plans. Partial MLTC plans are capitated for providing care management, community-based long-term care services, and nursing home care. The PACE and MAP benefit packages also include inpatient and outpatient care.

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

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

At the national level, since 1998, the Centers for Medicare and Medicaid Services (CMS) has collected information on Medicare managed care enrollee consumer satisfaction and experience with health services through the Consumer Assessment of Health Providers and Systems (CAHPS) survey. This survey includes the following domains:

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

This survey has undergone periodic revisions; in the 2006 survey year for example, data collection was expanded to include satisfaction and experience of members enrolled in a Medicare Advantage Prescription Drug plan. CAHPS surveys are also collected for commercial and Medicaid managed care populations. (The NYSDOH administers a biennial Medicaid managed care survey which is largely based on CAHPS.)

IPRO has observed that while all NYS MLTC plans conduct internal annual member satisfaction surveys, each plan has developed their own individualized surveys. IPRO reviewed a sample of these surveys. Several of them addressed general satisfaction with plan services and covered courtesies and sensitivity, but specific questions relating to the quality of plan services, timeliness, and access to services were often not addressed. Therefore, IPRO, in conjunction with the NYSDOH, conducted the first member satisfaction survey of New York's MLTC population in 2008 and again in 2011. Survey results have been positive, with the majority of MLTC respondents very satisfied with their health plan, and most would recommend their plan to others.

The 2011 survey included members enrolled in the MLTC partially capitated, PACE, and Medicaid Advantage Plus (MAP) plans. The MLTC program has expanded steadily since 2011, due to mandatory enrollment for certain individuals in need of more than 120 days of community-based long term care services as described above. Given the mandatory enrollment and the increasing number of new MLTC plans in the last two years, a follow up survey was warranted to assess whether member satisfaction has been maintained and to compare satisfaction levels with service quality, access and timeliness reported in the 2011 survey. This is the third survey conducted by IPRO since the inception of the MLTC program and it is anticipated that this survey will be administered every other year going forward.

B) OBJECTIVES

In late 2012, IPRO and the NYSDOH developed a plan to evaluate MLTC member satisfaction with the services provided by their MLTC plan. Specific objectives were to assess whether:

- MLTC enrollees are satisfied with:
 - quality of health care services
 - access to primary health care services
 - timeliness of primary health care and long term care services
- There are differences in care and in satisfaction of care, between the three principal MLTC plan models (PACE, partially capitated and MAP plans) and between different age groups, reported state of health, race/ethnicity and primary language.
- There has been a change in members' perception of quality of care and overall satisfaction since the last satisfaction survey in 2011.

Section Two: Methodology

A) SURVEY INSTRUMENT

To achieve the objectives, a scannable survey instrument was created. To facilitate comparisons to the 2011 survey, the 2013 survey contained all of the questions from the 2011 survey, with the addition of: three (3) questions to address the timeliness and access (regular and urgent appointments) to audiology/hearing aid services/providers; one multi-faceted question to address the helpfulness of the plan regarding falls mitigation, medication compliance, and managing illness; and a question related to the members' level of contentment with their quality of life.

The survey was comprised of three sections. The first section addressed members' general experience with their managed long term care plan, which included questions on plan of care involvement, courtesy, and timeliness of responses with complaints and grievances, and whether or not the managed long term care plan would be recommended to others. The second section dealt with the quality of specific health care services, including both primary and long term care services, where members were asked to rate the quality of these services, whether covered by their plan or not. This section also addressed timeliness of some key long term care services and access to primary health care services. The third section contained general demographic questions (e.g. age, gender, race, education). This section also included questions pertaining to living arrangements and whether assistance was provided in completing the survey, as well as questions regarding the status of members' advance directives.

An English version was prepared and translated into Spanish, Russian, and Chinese and mailed to members based upon the primary language designations provided by the NYSDOH. An English version of the survey was included with every non-English (Spanish, Russian, Chinese) mailing. The initial mailing was distributed in February 2013.

B) SURVEY SAMPLE

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

- Continuously enrolled in a MLTC plan for a minimum of 6 months prior to August 31, 2012.
- MLTC plan enrollees from 29 plans/product lines. The breakdown by type of MLTC plan is as follows: PACE - 8; Partially Capitated - 14; MAP - 7.

The NYSDOH provided the enrollee file for the survey after sampling. A sample of 600 enrollees from each plan had been selected, plus the entire membership if the plan's enrollment was less than 600. The final sample was 9,959 enrollees.

Section Three: Results

A) RESPONSE RATES

Of the 9,959 surveys that were mailed, 613 were returned as undeliverable due to either mailing address issues or the member was deceased. This yielded an adjusted population of 9,346. A total of 2,522 surveys were completed, with an overall response rate of 27.0%. In 2011, 1,845 surveys were completed for a response rate of 32.1%.

Tables 1 and 2 display the response rates by plan type and by language. Non-English responses comprised 28.9% of all responses.

Table 3 displays survey responses by plan. Response rates differed by plan, ranging from 18.5 to 44.8%.

Table 1: Survey Responses by Plan Type

	Partially Capitated		PACE		MAP		TOTAL	
	N	%	N	%	N	%	N	%
Surveys mailed	6,953		1,661		1,345		9,959	
Less exclusions:	386	5.6%	139	8.4%	88	6.5%	613	6.2%
Address issues	360	5.2%	114	6.9%	79	5.9%	553	5.6%
Deceased	26	0.4%	25	1.5%	9	0.7%	60	0.6%
Adjusted Population	6,567		1,522		1,257		9,346	
Completed	1,662	25.3%	446	29.3%	414	32.9%	2,522	27.0%

Table 2: Language Responses by Plan Type

	Partially Capitated		PACE		MAP		TOTAL	
	N	Percent	N	Percent	N	Percent	N	Percent
English	1,063	64.0%	381	85.4%	349	84.3%	1,793	71.1%
Chinese	179	10.8%	28	6.3%	7	1.7%	214	8.5%
Russian	157	9.4%	14	3.1%	4	1.0%	175	6.9%
Spanish	263	15.8%	23	5.2%	54	13.0%	340	13.5%
Completed	1,662	25.3%	446	29.3%	414	32.9%	2,522	27.0%
Adjusted Population	6,567		1,522		1,257		9,346	

Table 3: Survey Responses by Plan

Health Plan	Adjusted Population	No. of Respondents	Percent
Partially Capitated			
Centerlight Healthcare Select	566	155	27.4%
Elant Choice	143	64	44.8%
ElderServe Health	567	116	20.5%
Fidelis Care at Home	372	102	27.4%
GuildNet	562	125	22.2%
HealthPlus	565	141	25.0%
HHH Choices	553	156	28.2%
HomeFirst	575	146	25.4%
Independence Care System	564	156	27.7%
Senior Health Partners	562	146	26.0%
Senior Network Health	303	84	27.7%
Total Aging In Place Program	102	21	20.6%
VNSNY CHOICE	553	124	22.4%
WellCare Advocate	580	126	21.7%
TOTAL	6,567	1,662	25.3%
PACE			
ArchCare Senior Life	152	34	22.4%
Catholic Health Life	76	19	25.0%
Centerlight Healthcare PACE	558	168	30.1%
Complete Senior Care	27	5	18.5%
Eddy Senior Care	83	35	42.2%
Independent Living for Seniors	215	60	27.9%
PACE CNY	342	103	30.1%
Total Senior Care	69	22	31.9%
TOTAL	1,522	446	29.3%
MAP			
Elderplan	494	157	31.8%
Fidelis MAP	77	25	32.5%
Guildnet Gold	314	91	29.0%
HealthPlus MAP	10	4	40.0%
HIP MAP	248	103	41.5%
VNSNY CHOICE MAP	77	23	29.9%
Wellcare Advocate Complete	37	11	29.7%
TOTAL	1,257	414	32.9%

B) RESPONDENT DEMOGRAPHICS

The demographic profiles of the 2011 and 2013 populations were very similar. Seventy-five percent of respondents in 2013 were female (75% in 2011), and 82% were 65 years of age or older (81% in 2011). Nearly half of respondents (2011: 47%; 2013: 48%) had at least a high school diploma.

English was the primary language for 52% of the 2013 respondents (57% in 2011), with Spanish as the next most common at 23% (21% in 2011), while the rest had a primary language of Chinese (2011: 12%; 2013: 12%), Russian (2011: 7%; 2013: 8%) and other (2011: 4%; 2013: 5%). Overall, the percentage of respondents that do not speak English as their primary language increased slightly since 2011 from 43% to 49%.

Twenty-five percent of respondents rated their current state of health as very poor/poor (29% in 2011), 43% rated their health as fair (43% in 2011), and 32% as very good/good (27% in 2011). Sixty percent of the respondents were “very much/quite a bit” content with their quality of life.

The vast majority of respondents live at home (2011: 95%; 2013: 97%), and half live alone (2011: 50%; 2013: 49%). Approximately, two-thirds of respondents reported that they received assistance in completing the survey (2011: 66%; 2013: 65%), mostly from family members (2011: 58%; 2013: 59%).

Survey demographic results can be found in **Appendix A**, Table A6.

C) PLAN EVALUATION/RATING OF HEALTH PLAN

Section 1 of the survey consisted of questions concerning members’ experience with their MLTC plan.

Full frequency distribution tables can be found in **Appendix A** (Tables A1-A6) while aggregate tables can be found in **Appendix B** (Tables B1-B22).

Table B1 compares responses from both survey years, which shows that the level of satisfaction among 2011 and 2013 respondents remained high. Other notable findings were as follows:

- Nine out of 10 said that they would recommend their plan to others (89%).
- Eighty-four percent rated their plan as excellent/good and 81% reported that their plan always/usually explained services clearly.
- In 2013, 84% of members rated their plan as excellent/good at helping them to manage their illnesses, such as high blood pressure or diabetes. This percentage was unchanged from the 2011 survey.
- Nine out of 10 respondents rated their plan as excellent/good at helping them to stay at home and not have to live in a nursing home. In addition, 87% reported that their plan has been excellent/good at helping them to take medications the way their doctor wants them to; 78% reported that their plan has been excellent/good at helping them to have fewer falls; and 72% reported that their plan has been excellent/good at helping when they were feeling sad and lonely. This demonstrates that the plans have been effective in providing members with self-management support and collaborating with members and their families to improve members’ health.
- The majority of members reported that that they were always/usually involved in decisions about their plan of care. However, it was a significantly lower percentage compared to 2011 (72% vs. 78%). In addition, 60% of members reported that family members (or caregivers) were always/usually involved in these decisions as well.
- About nine out of 10 respondents (88%) reported that someone from the health plan had asked to see all of the prescriptions and over-the-counter medicines they were taking, which is a positive indication of the plans’ efforts to help members manage their medications.
- A similar percentage of members reported that they called the plan with questions or for help in 2011 and 2013 (61% vs. 65%). Of these respondents:
 - 49% said that they always spoke with a person quickly;
 - 53% said their questions were answered quickly, significantly lower than in 2011 (61%);

- 61% said they were always able to understand the answers provided, significantly lower than in 2011 (68%);
- 84% said they were always treated with politeness and respect.
- A significantly higher percentage of members called the plan with a complaint or grievance in 2013 versus 2011 (37% vs. 29%). Of these respondents:
 - 44% said that the complaint was responded to in a timely manner;
 - 39% said that they were always satisfied with the response;
 - 74% said that they were always treated with politeness and respect.

Advance directives are considered an important component in the overall care of the long-term care population. Sixty-eight percent of the respondents reported that their health plan has talked to them about appointing someone, and 61% reported having a legal document appointing someone to make health care decisions on their behalf in the event that they are unable to do so. Of the latter, a large majority (77%) said that their health plan has retained a copy of the document.

D) QUALITY OF CARE

In Section 2A of the survey, members were asked to rate the quality of services and supplies they received. Frequency distributions for the 22 Quality of Care items can be found in Table A2.

Table B2 displays the rank ordered positive (excellent/good) ratings given by members pertaining to quality of care compared by survey year. Members' perception of the quality of the care they received has remained high in 2013. Other notable findings from this section include:

- Nine out of the 22 care providers listed had at least 80% of the respondents giving an excellent/good rating for quality in 2013 (compared to 14 out of 22 in 2011), including highly utilized services such as pharmacy services (90%), regular doctor (89%), home health aide (87%), medical supplies/equipment (86%), care manager (84%), visiting nurse (84%), eye care professional (81%), home health agency (81%) and foot doctor (80%).
- Social workers (76% vs. 82%) and physical therapists (75% vs. 82%) received significantly lower quality of care ratings compared to 2011.
- Speech therapists were least likely to receive positive ratings with regard to quality of care in 2013 with 56%.
- Of the highly utilized providers, dentists have the lowest percentage of positive ratings, and there was no improvement seen from the previous survey (2011: 72%; 2013: 70%).

E) TIMELINESS OF CARE

In Section 2B of the survey, members were asked to rate how often the services were on time or if they were able to see the provider at the scheduled time. Frequency distributions for the 16 items in this section can be found in Table A3. Table B3 displays the rank ordered positive (always/usually) ratings given by members compared by survey year.

While the majority of members perceived the timeliness of care to be always/usually on time, there was a decrease in the percentage of members giving a positive rating between 2011 and 2013, with the exception of speech therapists. While the decrease was not statistically significant for any of the service providers, it is a notable trend. A large majority of respondents reported that the care provided by highly utilized services such as home health aides (78%), pharmacy services (77%), medical supplies (70%), care managers (69%), visiting nurses (69%), and transportation to (69%) and from the doctor (67%) were always/usually timely. However, these results represented a slight decline over 2011.

Similar to the 2011 survey, social workers were least likely to receive a high rating for timeliness, out of all the highly utilized services. In fact, the proportion of respondents that gave a high rating for timeliness for social workers significantly decreased since 2011 from 64% to 57%.

Physical, occupational and speech therapists were also less likely to receive high ratings for timeliness; however, these services are much less utilized by members. The same result was observed in 2011.

F) ACCESS TO CARE

In Section 2C of the survey, members were asked to indicate how long they generally had to wait for routine and urgent appointments for frequently utilized providers. Tables A5 and A6 provide frequency distributions for these survey items.

Timely access to routine appointments was defined as obtaining an appointment with a provider within 30 days of contact date. Timely access to urgent appointments was defined as obtaining an appointment on the same day that the member needed care. Tables B4 and B5 display the rank ordered results for timely access to routine and urgent appointments compared by survey year.

Table B4 shows that for routine appointments respondents were more likely to have timely access to routine appointments with regular doctors (59%). Audiologists (52%), dentists (46%), foot doctors (45%) and eye care (43%) ranked lower in this regard.

Table B5 shows that less than half (45%) of the respondents were able to obtain an appointment on the same day with their regular doctor for urgent matters. Timely access to urgent appointments was even less likely for audiologists (30%), dentists (26%), foot doctors (26%) and eye care (22%).

Tables B4 and B5 show that respondents in 2011 and 2013 gave similar ratings with regard to timely access to routine or urgent (same day) appointments, and that the percentage of members who reported that access to care was timely has remained relatively low in both survey years, regardless of whether it was a routine or urgent appointment.

G) SUB-POPULATION COMPARISONS

Comparisons between a number of sub-populations were performed for selected survey items. These sub-populations included: plan type, age group, current health status of the member and race/ethnicity. The objective was to determine which subgroups of the long-term care population were most or least satisfied with the quality of service, timeliness of service and access to care for 2013, and whether there were any significant changes from 2011. Survey items were dichotomized and comparisons were performed using chi-square statistics.

Group comparison tables can be found in **Appendix B** and only significant comparisons have been noted as follows:

I. Comparison by Plan Type (Tables B6-B10)

Plan Rating

- PACE plan members were more likely to report that their family member or caregiver was usually involved in making decisions about their plan of care compared to partially capitated plan members (70% vs. 58%).
- MAP plan members were more likely than partially capitated plan members to call the plan with a question or for help (72% vs. 64%).
- MAP plan members were less likely to understand the answers given by the plan than partially capitated members (52% vs. 63%).
- The proportion of PACE plan members who reported that their questions were always answered quickly (66% vs. 51%) and/or that they were always able to understand the answers whenever they called the plan regarding queries (77% vs. 63%) was significantly lower in 2013 compared to 2011.
- MAP members were most likely to call the plan with a complaint or grievance (46%), followed by PACE (42%) and partially capitated (33%) members, respectively.
- A significantly higher proportion of respondents from PACE plans than from partially capitated and MAP plans reported that their health plan has been excellent/good at helping them to manage their illnesses (PACE: 90%; Partial Cap: 83%; MAP: 81%).
- PACE plans were more likely to speak about appointing a healthcare proxy (82%) to their members and it can be inferred that their members are therefore more likely to have advance directive documents (83%), as a result. In addition, approximately 9 out of every 10 PACE plan members reported that their health plan has a copy of these documents.

Quality of Care

- PACE plan members were most likely to give a high rating to the quality of meals served at the day health center (PACE: 80%; Partial Cap: 65%; MAP: 53%), transportation services (PACE: 86%; Partial Cap: 77%; MAP: 69%) and nutritionists (PACE: 85%; Partial Cap: 73%; MAP: 65%).
- In addition, PACE plan members were also more likely than MAP members to give favorable quality of care ratings with regard to covering nurses (83% vs. 67%), physical therapists (84% vs. 63%), occupational therapists (78% vs. 53%), medical supplies and equipment (92% vs. 82%), audiologists (75% vs. 51%), day health center activities (82% vs. 55%) and nursing homes (77% vs. 40%).
- There was no statistical evidence that the quality of care ratings differed among members of the same plan type sub-population between survey years.

Timeliness of Care

- PACE plan members were most likely to give high ratings for timeliness of care to occupational therapists (PACE: 71%; Partial Cap: 51%; MAP: 39%) and social workers (PACE: 68%; Partial Cap: 55%; MAP: 45%).

- There was no statistical evidence that the timeliness of care ratings differed among members of the same plan type sub-population between survey years.

Access to Routine Appointments

- PACE plan members were more likely to report that they were able to obtain a routine appointment (within 1 month) with their regular doctor, than partially capitated members (70% vs. 56%).
- There was no statistical evidence that ratings for access to routine appointments differed among members of the same plan type sub-population between survey years.

Access to Urgent Appointments

- Partially capitated plan members were more likely to report that they were able to obtain an urgent appointment (same day) with their dentist than PACE members (28% vs. 15%).
- The proportion of PACE plan members who reported that they had timely (same day) access to their regular doctors for urgent appointments was significantly lower in 2013 than in 2011 (63% vs. 49%).

II. Comparison by Age Group⁺

Quality of Care

- Year-to-year comparison by age group showed that for physical therapists and social workers, 65+ year old members were less likely to respond positively regarding the quality of service in 2013 than in 2011.

Timeliness of Care

- No statistically significant differences emerged between and across age groups with regard to timeliness of services.

Access to Routine Appointments

- No statistically significant differences emerged between and across age groups with regard to access to routine appointments.

Access to Urgent Appointments

- No statistically significant differences emerged between and across age groups with regard to access to urgent appointments.

III. Comparison by Self-Reported Health Status (Tables B11-B14)

Quality of Care

- In 2013, respondents who were in good health rated 11 of the 22 quality of care items significantly higher than those who were in poor health, including the following highly utilized services such as dentists (80% vs. 66%), care managers (90% vs. 82%), home health aides (91% vs. 86%), social workers (84% vs. 72%), transportation services (83% vs. 75%), on-call nurses (83% vs. 74%) and foot doctors (87% vs. 77%). Respondents who were in good health also rated meals served (79% vs. 65%) and activities (84% vs. 70%) at the day health center more favorably than those who were in poor health.
- There was no statistical evidence that the quality of care ratings given by members differed among members of the same health status sub-population between survey years.

Timeliness of Care

- Respondents whose reported health status was good/very good rated the timeliness of care items in 2013 highly, which is similar to ratings of the same cohort in 2011.

⁺ Table(s) not presented in the Appendix.

- There was no statistical evidence that the timeliness of care ratings given by members differed by health status in 2013.

Access to Routine Appointments

- There were no significant differences in responses with regard to access to routine appointments by health status.

Access to Urgent Appointments

- There were no significant differences in responses with regard to access to urgent appointments by health status.

IV. Comparison by Race/Ethnicity (Tables B15-B18)

Quality of Care

- In 2013, white respondents were significantly more likely than non-white respondents to give high quality of care ratings to 9 out of the 22 quality of care items, including eye care (87% vs. 79%), visiting nurses (88% vs. 81%), physical therapists (83% vs. 70%), occupational therapists (80% vs. 66%), speech therapists (74% vs. 49%), medical supplies (90% vs. 84%), audiologists (76% vs. 57%), home delivered meals (79% vs. 53%) meals served at the day health center (78% vs. 66%). Ratings for occupational therapists and home delivered meal service were the only two items in the 2011 survey that differed according to race.
- Non-white respondents in 2013 were less likely to give high ratings for quality of care by social workers than respondents of the same cohort in 2011 (83% vs. 74%).

Timeliness of Care

- White respondents were significantly more likely to give more favorable ratings with regard to timeliness of care by visiting nurses (74% vs. 66%), occupational therapists (65% vs. 44%), home delivered meals (75% vs. 47%), transportation to day center (71% vs. 58%), transportation from day center (73% vs. 59%), transportation to the doctor (74% vs. 64%), transportation from the doctor (71% vs. 61%), audiologists (70% vs. 43%). In 2011, the rates for timeliness of care did not differ according to race.
- Non-white respondents in 2013 were less likely to give high ratings for timeliness of care by social workers than respondents of the same cohort in 2011 (64% vs. 52%).

Access to Routine Appointments

- White respondents were more likely to report that they were able to obtain a routine appointment with their regular doctor, dentist, eye care specialist, foot doctor and audiologist than non-whites. The same trend was observed in 2011.

Access to Urgent Appointments

- White respondents were significantly more likely to report that they were able to obtain an urgent appointment with their regular doctor than non-white respondents.
- In addition, non-white respondents in 2013 were significantly less likely to report that they had urgent same-day access to their regular doctor than respondents of the same cohort in 2011 (52% vs. 40%).

V. Comparison by Primary Language (Tables B19-B22)

Quality of Care

- In 2011, members whose primary language was English were more likely than Spanish speaking members to give a positive rating with regard to the quality of the following services: care managers, regular visiting nurse, occupational therapists, medical supplies/equipment, eye care, social workers, nutritionists, dentists and audiologists. In 2013, there was no disparity in the quality of ratings given by English and Spanish-speaking respondents observed.
- Members whose primary language was Other, were more likely than Spanish-speaking members to rate covering nurses (83% vs. 72%) and day center activities (86% vs. 65%) highly.
- Respondents whose primary language was English were less likely to give positive ratings in 2013 than 2011 for quality of care by visiting nurses (88% vs. 83%) and social workers (87% vs. 76%), as well as the quality of meals served at the day health centers (82% vs. 70%).

Timeliness of Care

- English-speaking respondents were more likely to rate the timeliness of physical therapists (English: 64% vs. Spanish: 49% vs. Other: 49%) and home delivered meals (English: 71% vs. Spanish: 50% vs. Other: 45%) than respondents whose primary language was not English.

Access to Routine Appointments

- Spanish-speaking respondents were less likely to report that they were able to obtain a routine appointment with regular doctors, dentists, eye care specialists and foot doctors than respondents who primarily spoke English or another language.

Access to Urgent Appointments

- There were no significant differences in responses by language spoken regarding access to urgent appointments.

H) MEMBER CHARACTERISTICS ASSOCIATED WITH CARE

In advance of performing the analyses, the survey items were split into domains. The first domain was composed of only one item: MLTC plan rating (1=Excellent/Good; 0=Poor/Fair). A logistic regression model was developed to assess whether each of the independent variables, while holding all other variables constant, were associated with members' perceptions of their plans. For Domains 2, 3, 4, 5 and 7, linear regression models were used to assess the relationship between mean composite domain scores, which is the average of all non-missing ratings/responses to each item in the domain, and the independent variables. The dependent variable is a mean composite score. For Domain 6, logistic regression analysis was conducted to determine which subgroups were more/less likely to have advance directives in place. The dependent variable was coded 1 if the members responded "yes" to at least one of the following items from the survey questions (0 otherwise):

- a) Q69 - someone from the health plan has talked to you about appointing someone to make decisions about your health if you are unable to do so,
- b) Q70 - you have a legal document appointing someone to make decisions about your health if you are unable to do so, and
- c) Q71 - the health plan has a copy of this document.

The following 8 independent variables (member characteristics) were used in each of the regression models:

- Plan type (Partially Capitated, PACE; MAP)
- Race/Ethnicity (White, Black, Hispanic, Asian, Other)
- Gender (Male, Female)
- Education (Up to some High School, High School +)
- Health Status (Very Good/Good, Very Poor/Poor/Fair)
- Living Situation (at home, alone; at home, with others; nursing home)
- Age (18-64, 65+)
- NYS Region (NYC, Rest of State)

Primary language spoken was excluded as an independent variable from the regression analyses because of its correlation with the race/ethnicity variable. Quality of life was also highly correlated with health status, therefore, excluded from the analyses.

Consideration was given to a regional independent variable (NYC, Rest of State); however, high correlations were observed with the other independent variables, notably with race/ethnicity, gender, education, health status and age. For example:

- The percentage of white respondents is greater in Rest of State than in NYC;
- The percentage of female respondents is greater in Rest of State than in NYC;
- The level of education of respondents is higher in NYC than Rest of State;
- The self-reported health status of respondents is higher/better in Rest of State than in NYC;
- There percentage of older member respondents is greater in Rest of State than in NYC.

Due the collinearity of region with the other independent variables, it was not included in the regression analyses.

Full results of the logistic and multiple linear regression models can be found in **Appendix C**. Only significant effects have been noted as follows:

Domain 1 [Logistic Regression]: MLTC Plan Rating

[Q13, where 1=Excellent/Good; 0=Poor/Fair]

In 2011, the health status of the respondent was the only factor that had a significant effect on plan rating, i.e. the odds of a positive plan rating were higher from respondents who were in good health than those who were in poor health. Table C1 shows that in 2013, health status, race and the level of education of the respondent are associated with plan rating, i.e.

- Whites have higher odds of giving a positive rating regarding their plan than Hispanics.
- Respondents with a high school education and above have lower odds of giving a positive rating regarding their plan than those that had a high school level education at most.
- Members who were in good health had 2.7 times greater odds of rating their plan highly than those who were in poor health.

Domain 2: [Multiple Linear Regression] Quality of Care

[Mean composite of: Q15, Q16, Q17, Q18, Q19a, Q20, Q21a, Q21b, Q22, Q25, Q26, Q31, Q33, where 4=Excellent; 3=Good; 2=Fair; 1=Poor]

Table C2 shows that race/ethnicity and health status had an effect on the quality of care score, after adjusting for all the independent variables:

- Blacks, Hispanics and Asians gave lower ratings for quality of care than White respondents as demonstrated by the negative coefficients from the regression, holding all other variables constant. However, the magnitude of the effect size was small. For example, relative to whites, blacks scored quality of care only .2 points lower (on a scale of 1-4).

- Members who are healthy gave higher quality of care ratings than members who are not healthy. The same trend was observed in the 2011 survey.

Domain 3: [Multiple Linear Regression] Timeliness of Care

[Mean composite of: Q35, Q36, Q37a, Q37b, Q38, Q41, Q43a, Q43b, Q43c, Q43d, Q44, Q45, where 4=Always; 3=Usually; 2=Sometimes; 1=Never]

In 2011, plan type was the only factor that had a significant effect on the timeliness scores, i.e. timeliness ratings were significantly higher for PACE members than partially capitated members. Table C3 shows that in 2013, race/ethnicity and living situation had a significant effect on the timeliness of care ratings, while plan type did not have a significant effect:

- Asians were more likely to give poor ratings with regard to timeliness of care than Whites.
- Respondents living at home with others gave lower ratings with regard to timeliness of care than those living at home on their own.

Domain 4: [Multiple Linear Regression] Access to Routine Appointments

[Mean composite of: Q47, Q48, Q49, Q50, Q51, where 3= Less than 1 month; 2=1-3 months; 1= Longer than 3 months]

In 2011, PACE members were more likely to report that they had timely access to routine appointments than partially capitated members. In addition, Asian respondents were less likely to report that they had timely access to routine appointments than White respondents. Table C4 shows that race/ethnicity and level of education were correlated with timely access to routine appointments in 2013:

- Whites (compared to any other race/ethnicity) and those who were at least high school educated, on average, were more likely to give higher ratings with regard to access to routine appointments.

Domain 5 [Multiple Linear Regression]: Access to Urgent Appointments

[Mean composite of: Q52, Q53, Q54, Q55, Q56, where 3=Same day; 2=1-3 days; 1= 4 days or longer]

In 2011, it was observed that access to urgent appointments was not dependent on plan type, race/ethnicity, gender, education, health status, living situation or the age of the respondent. Table C5 shows that in 2013, race/ethnicity and age were correlated with timely access to urgent appointments:

- Whites were most likely to rate timely access to urgent appointments highly than Blacks, Asians and Others.
- Respondents who were 65 years and older were more likely to rate access to urgent appointments highly compared to 18-64 year olds.

Domain 6 [Logistic Regression]: Advance Directives

[1=At least 1 of Q69, Q70, Q71; 0 otherwise]

In 2011, it was observed that only the health status of the respondent was associated with advance directives. Table C6 shows that in 2013, the advance directives domain is associated with other subgroups as well. In fact, the odds of having an advance directive in place are higher for the following groups:

- PACE plan members and MAP members, respectively, compared to partially capitated plan members.
- Whites compared to Hispanics and Asians.
- Females.
- Members in good health.
- Members in nursing homes, and those that live at home with others, respectively, compared to those that live at home alone.

Domain 7 [Multiple Linear Regression]: Plan Effectiveness

[Mean composite of: Q12a-Q12e, where 4=Excellent; 3=Good; 2=Fair; 1=Poor]

Table C7 shows that plan effectiveness is associated with race/ethnicity, level of education and the health status of the respondent:

- Whites were more likely to rate plan effectiveness positively than Blacks and Hispanics, respectively.
- Respondents that had up to some high school education and/or were in good health were also more likely to rate plan effectiveness more highly than members that had at least a high school education or those who were in poor health.

Section Four: Conclusions and Recommendations

Overall survey findings were favorable. The tables presented in this report indicate that the majority of MLTC respondents are evidently satisfied with their health plan, and most would recommend their plan to others, whether it be a partially capitated, PACE, or MAP plan. The majority of members rated the quality of MLTC services to be good or excellent, and the majority indicated that providers and services are always or usually on time. It continues to be encouraging to see high satisfaction rates for such critical long term care services as visiting nurses and home health aides.

Specific observations and recommendations are as follows:

- 1) IPRO observed that the percentage of members rating the quality of certain services as good or excellent, while relatively high, declined from the 2011 survey. Lower percentages were observed with critical, highly utilized services such as physical therapists (82% to 75%), social workers (82% to 76%), covering/on call nurses (80% to 77%), day center meals (78% to 70%), and day center activities (80% to 75%). The declines were prevalent across all plan types. As Tables B2 and B7 indicate, the majority of these drops were not statistically significant, but there is an observable trend. The drops observed with the quality of social worker and physical therapist services were statistically significant. Survey respondents continue to rate the quality of dental services lower than other highly utilized services, basically unchanged from 2011 survey results,.

Plans may want to conduct more in-depth member surveys focused on these services to determine if, in fact, quality issues exist and to determine the nature of these issues. These surveys can be used as baseline data to determine if performance improvement projects focusing on these services are warranted.

- 2) The timeliness of many critical services has declined from the 2011 survey results. This trend was observed with a number of services, as follows (Table B3):
 - a) Home health aides
 - b) Pharmacy services
 - c) Medical supplies
 - d) Care managers
 - e) Visiting nurses
 - f) Transportation
 - g) Meals
 - h) Social workers
 - i) Physical therapists

Plans may wish to investigate this, possibly through evaluating attendance and tardiness issues directly with their staff or by determining if any issues exist where these services may be subcontracted. A review of incidence reports and complaint and grievance logs (at plan and vendor levels) may be warranted.

Plans should also be determining if membership increases have resulted in inadequate staffing. As an example, plans should be monitoring care manager-to-member ratios.

- 3) A substantial percentage of respondents (across all plan types) reported that they are unable to schedule appointments with their regular doctor or PCP in a timely manner (within 30 days), and even higher percentages were reported for dentists, eye care, and foot doctors (Tables B4, B9). For urgent needs, a substantial number of respondents indicated that same day appointments are not possible with any of these providers (Tables B5, B10).

IPRO notes that outpatient services are not in the benefit package of the partially capitated plans. However, all plans may wish to investigate access issues through possibly interviewing providers to determine exactly how routine and urgent visits are handled. Plans may also choose to interview samples of members to obtain time intervals for routine and urgent appointments, for the purpose of providing outreach to certain providers.

- 4) PACE plan members were more likely to report that family members or caregivers were usually involved in making decisions about their plan of care compared to partially capitated members (70% versus 58%-Table B6). PACE plan members were also more likely to give favorable quality of care ratings with regard to a number of critical services, such as covering nurses, physical therapists, occupational therapists, day center activities, and nursing homes than any other plan type (Table B7). This could possibly be attributed, in some instances, to PACE plans providing most of these services directly (including SAAM assessments and care plan development) or through a closely affiliated company and therefore, may be in a better position to provide oversight of the quality of these services. It may, therefore, also be more feasible for the PACE plans to insure that family members are involved in care planning.

Partially capitated plans may subcontract to outside vendors for these services more often; therefore, providing quality and timeliness oversight may be more of a challenge. It is recommended that plans evaluate these services to see if any issues or problems exist with specific vendors by possibly reviewing incidence reports and complaint/grievance logs to target specific issues. Family members and caregivers of members enrolled in plans that subcontract any level of care plan development should be surveyed to help determine family and caregiver involvement with the members' care.

- 5) Overall, the number of respondents indicating that advance directive discussions have occurred, and the number of respondents indicating that advance directives are in place, has declined since 2011 (Table B1). PACE and MAP plans continue to exhibit higher rates of advance directive discussions and advance directive procurement than partially capitated plans (Tables A6, B6). Whites have higher advance directive rates than Hispanics and Asians (Table C6).

A number of partially capitated plans have been addressing this issue over the years by undertaking performance improvement projects which focus on advance directive education and procurement. Project interventions have included:

- a) *Increased social worker involvement (language and culture-specific where applicable)*
- b) *Language and culture-specific member education materials*
- c) *Advance directive discussions during SAAM assessment visits*
- d) *Increased staff education*

Advance directive procurement rates have improved with these interventions. IPRO recommends continued efforts in these areas. Language and culture-specific interventions, wherever possible, would appear to be a key to this undertaking.

- 6) There were some observed race/ethnicity and language differences with some ratings. White respondents were more likely than non-white respondents to give high quality of care ratings to a number of items, including eye care, visiting nurses, physical therapists, and medical supplies. White respondents were more likely to report that they were able to obtain routine and urgent appointments with their regular doctors, dentists, eye care specialists and foot doctors than non-whites. Timeliness with certain providers was also reported more favorably by whites than non whites (Tables B15-B18).

Spanish-speaking respondents were less likely to report that they were able to obtain a routine appointment in a timely manner with regular doctors and other providers than those whose primary language is English (Table B21).

It would appear that possibly cultural barriers associated with race, and language barriers, may be playing some role in not being satisfied with some services and with timely access to them.

This may be another area for plans to explore to determine if there is limited access to services across certain ethnical groups.

- 7) Table B1 indicates that the percentage of respondents indicating that they contacted the plan with questions or for help increased in 2013 (65% versus 61% in 2011). Moreover, the percentage of respondents indicating that they always spoke with a person quickly (49% versus 55% in 2011), had questions always answered quickly (53% versus 61% in 2011) and were always able to understand the answers (61% versus 68% in 2011) all declined. In addition, the percentage of members calling the plan with complaints/grievances (37% versus 29%) increased over 2011. The percentage indicating the complaints were responded to in a timely and satisfactory manner deteriorated (44% versus 53% in 2011).

It would appear as though plans may in some instances have inadequate staff coverage in addressing complaints/grievances. The increase in the number of complaints and grievances, and the percentage not being resolved to members' satisfaction, may be indicative of some quality of care, timeliness, and access issues mentioned in the report, as well as member services issues.

If not already initiated, it is recommended that plans audit a sample of complaints and grievances to determine any quality, timeliness, or access trends and if specific services or provider types are involved. Member services functions and automated call systems should be reviewed to determine if adequate staffing/call coverage exists and if staff has been properly trained.

Possibly increases in membership have resulted in some levels of inefficiency in these member services functions.

APPENDIX A: FREQUENCY TABLES

Table A1: MLTC Plan Evaluation

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 1: MLTC Plan Evaluation																			
1	MLTC plan explains services clearly																		
	Always	633	51.7	825	52.7	213	55.2	201	48.4	80	65.0	202	52.2	926	53.4	1,228	51.9		
	Usually	389	31.8	448	28.6	125	32.4	152	36.6	31	25.2	97	25.1	545	31.4	697	29.4		
	Sometimes	179	14.6	236	15.1	41	10.6	50	12.0	12	9.8	73	18.9	232	13.4	359	15.2		
	Never	23	1.9	57	3.6	7	1.8	12	2.9	0	0.0	15	3.9	30	1.7	84	3.5		
	TOTAL	1,224		1,566		386		415		123		387		1,733		2,368			
	<i>Don't know or not sure</i>	54		67		17		14		5		20		76		101			
2a	Are you involved in making decisions about plan of care?																		
	Always	626	51.3	719	46.7	212	54.1	188	45.6	75	60.0	199	51.4	913	52.5	1,106	47.3		
	Usually	306	25.1	382	24.8	107	27.3	124	30.1	29	23.2	79	20.4	442	25.4	585	25.0		
	Sometimes	213	17.4	269	17.5	55	14.0	70	17.0	19	15.2	70	18.1	287	16.5	409	17.5		
	Never	76	6.2	169	11.0	18	4.6	30	7.3	2	1.6	39	10.1	96	5.5	238	10.2		
	TOTAL	1,221		1,539		392		412		125		387		1,738		2,338			
	<i>Don't know or not sure</i>	52		87		12		21		3		20		67		128			
2b++	Is your family/caregiver involved in making decisions about plan of care?																		
	Always			642	41.3			199	48.2			180	45.7			1,021	43.3		
	Usually			255	16.4			91	22.0			58	14.7			404	17.1		
	Sometimes			300	19.3			68	16.5			74	18.8			442	18.7		
	Never			356	22.9			55	13.3			82	20.8			493	20.9		
	TOTAL			1,553				413				394				2,360			
	<i>Don't know or not sure</i>			72				21				12				105			
3	Called the plan with questions or help																		
	Yes	750	60.0	1020	63.6	259	64.4	276	63.7	73	62.4	294	72.4	1,082	61.2	1,590	65.1		
	No	500	40.0	583	36.4	143	35.6	157	36.3	44	37.6	112	27.6	687	38.8	852	34.9		
	TOTAL	1,250		1,603		402		433		117		406		1,769		2,442			
4♦	Speak with a person quickly?																		
	Always	383	52.8	485	49.9	154	61.1	143	53.6	45	62.5	120	41.8	582	55.4	748	49.0		
	Sometimes	322	44.4	423	43.6	91	36.1	117	43.8	26	36.1	148	51.6	439	41.8	688	45.1		
	Never	21	2.9	63	6.5	7	2.8	7	2.6	1	1.4	19	6.6	29	2.8	89	5.8		
	TOTAL	726		971		252		267		72		287		1,050		1,525			

Note: Percentages have been rounded and may not total to 100%.

♦ Items based on skip pattern

++ New question in 2013

Table A1: MLTC Plan Evaluation (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 1: MLTC Plan Evaluation																			
5a◆	Were questions answered quickly?																		
	Always	424	58.4	537	54.6	168	66.1	136	50.9	46	63.9	137	47.6	638	60.6	810	52.7		
	Sometimes	283	39.0	403	41.0	82	32.3	121	45.3	26	36.1	136	47.2	391	37.2	660	42.9		
	Never	19	2.6	43	4.4	4	1.6	10	3.7	0	0.0	15	5.2	23	2.2	68	4.4		
	TOTAL	726		983		254		267		72		288		1,052		1,538			
5b◆	Were you able to understand the answers?																		
	Always	469	65.0	617	63.0	191	76.7	167	62.5	48	65.8	148	51.9	708	67.8	932	60.9		
	Sometimes	243	33.7	347	35.4	56	22.5	97	36.3	25	34.2	127	44.6	324	31.0	571	37.3		
	Never	10	1.4	15	1.5	2	0.8	3	1.1	0	0.0	10	3.5	12	1.1	28	1.8		
	TOTAL	722		979		249		267		73		285		1,044		1,531			
6◆	Were you treated with politeness and respect?																		
	Always	612	85.4	830	84.5	225	88.6	225	83.3	68	94.4	232	81.4	905	86.8	1,287	83.7		
	Sometimes	95	13.2	135	13.7	26	10.2	43	15.9	4	5.6	51	17.9	125	12.0	229	14.9		
	Never	10	1.4	17	1.7	3	1.2	2	0.7	0	0.0	2	0.7	13	1.2	21	1.4		
	TOTAL	717		982		254		270		72		285		1,043		1,537			
7	Called the plan with a complaint/grievance																		
	Yes	346	28.2	526	33.0	129	32.3	180	41.9	26	21.5	182	45.6	501	28.7	888	36.7		
	No	879	71.8	1066	67.0	271	67.8	250	58.1	95	78.5	217	54.4	1245	71.3	1,533	63.3		
	TOTAL	1,225		1,592		400		430		121		399		1,746		2,421			
8◆	Responded to in a timely manner?																		
	Always	165	50.0	216	43.8	76	58.9	83	47.7	16	64.0	74	42.8	257	53.1	373	44.4		
	Sometimes	139	42.1	215	43.6	44	34.1	70	40.2	7	28.0	70	40.5	190	39.3	355	42.3		
	Never	26	7.9	62	12.6	9	7.0	21	12.1	2	8.0	29	16.8	37	7.6	112	13.3		
	TOTAL	330		493		129		174		25		173		484		840			

Note: Percentages have been rounded and may not total to 100%.
 ◆ Items based on skip pattern

Table A1: MLTC Plan Evaluation (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 1: MLTC Plan Evaluation																			
9◆	Were you satisfied with the response?																		
	Always	132	40.5	203	41.0	67	52.3	71	40.6	15	57.7	56	32.2	214	44.6	330	39.1		
	Sometimes	161	49.4	240	48.5	52	40.6	87	49.7	10	38.5	101	58.0	223	46.5	428	50.7		
	Never	33	10.1	52	10.5	9	7.0	17	9.7	1	3.8	17	9.8	43	9.0	86	10.2		
	TOTAL	326		495		128		175		26		174		480		844			
10◆	Were you treated with politeness and respect?																		
	Always	247	74.6	363	72.3	102	79.7	132	75.4	23	88.5	136	75.6	372	76.7	631	73.6		
	Sometimes	77	23.3	125	24.9	24	18.8	40	22.9	3	11.5	41	22.8	104	21.4	206	24.0		
	Never	7	2.1	14	2.8	2	1.6	3	1.7	0	0.0	3	1.7	9	1.9	20	2.3		
	TOTAL	331		502		128		175		26		180		485		857			
11	Has asked to see all of the prescriptions/over the counter medicines?																		
	Yes	960	83.8	1256	87.3	333	91.5	336	88.2	115	96.6	349	92.6	1408	86.5	1,941	88.3		
	No	185	16.2	183	12.7	31	8.5	45	11.8	4	3.4	28	7.4	220	13.5	256	11.7		
	TOTAL	1,145		1,439		364		381		119		377		1,628		2,197			
	<i>Not sure</i>	125		176		30		46		6		29		161		251			
12a++	Plan has helped you to have fewer falls																		
	Poor			61	6.0			13	4.2			23	8.7			97	6.1		
	Fair			170	16.8			36	11.5			45	17.0			251	15.8		
	Good			383	38.0			135	43.1			96	36.2			614	38.7		
	Excellent			395	39.1			129	41.2			101	38.1			625	39.4		
	TOTAL			1,009				313				265				1,587			
	<i>Not Applicable</i>			431				98				94				623			
12b++	Plan has helped you to take your medications the way your doctor wants you to																		
	Poor			54	4.1			9	2.3			14	4.2			77	3.8		
	Fair			131	10.0			25	6.3			36	10.7			192	9.4		
	Good			424	32.2			140	35.5			106	31.6			670	32.8		
	Excellent			706	53.7			220	55.8			179	53.4			1,105	54.1		
	TOTAL			1,315				394				335				2,044			
	<i>Not Applicable</i>			145				26				42				213			

Note: Percentages have been rounded and may not total to 100%.

◆ Items based on skip pattern

++ New question in 2013

Table A1: MLTC Plan Evaluation (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 1: MLTC Plan Evaluation																			
12c++	Plan has helped you to manage your illnesses																		
	Poor			68	5.4			8	2.1			17	5.2			93	4.7		
	Fair			149	11.9			30	7.9			45	13.8			224	11.4		
	Good			462	37.0			140	36.6			108	33.0			710	36.3		
	Excellent			570	45.6			204	53.4			157	48.0			931	47.5		
	TOTAL			1,249				382				327				1,958			
	<i>Not Applicable</i>			216				37				50				303			
12d++	Plan has helped you when feeling sad and lonely																		
	Poor			106	9.5			21	6.2			41	15.0			168	9.7		
	Fair			199	17.8			57	16.9			54	19.8			310	17.9		
	Good			394	35.2			134	39.6			87	31.9			615	35.5		
	Excellent			421	37.6			126	37.3			91	33.3			638	36.9		
	TOTAL			1,120				338				273				1,731			
	<i>Not Applicable</i>			329				79				97				505			
12e++	Plan has helped allow you to stay in your home																		
	Poor			59	5.1			10	2.8			16	5.4			85	4.7		
	Fair			76	6.6			13	3.7			17	5.7			106	5.9		
	Good			249	21.5			95	27.0			59	19.9			403	22.3		
	Excellent			773	66.8			234	66.5			204	68.9			1,211	67.1		
	TOTAL			1,157				352				296				1,805			
	<i>Not Applicable</i>			290				61				77				428			
13	How would you rate your plan																		
	Excellent	494	38.4	671	41.3	178	44.2	176	40.9	62	48.8	184	45.7	734	40.4	1,031	41.9		
	Good	583	45.3	688	42.3	184	45.7	193	44.9	47	37.0	159	39.5	814	44.8	1,040	42.3		
	Fair	184	14.3	229	14.1	36	8.9	53	12.3	15	11.8	54	13.4	235	12.9	336	13.7		
	Poor	25	1.9	37	2.3	5	1.2	8	1.9	3	2.4	6	1.5	33	1.8	51	2.1		
	TOTAL	1,286		1,625		403		430		127		403		1,816		2,458			
14	Would you recommend plan to others																		
	Yes	1,117	89.1	1,400	88.2	373	94.9	373	88.8	119	94.4	359	92.3	1,609	90.8	2,132	88.9		
	No	137	10.9	188	11.8	20	5.1	47	11.2	7	5.6	30	7.7	164	9.2	265	11.1		
	TOTAL	1,254		1,588		393		420		126		389		1,773		2,397			

Note: Percentages have been rounded and may not total to 100%.

◆ Items based on skip pattern

++ New question in 2013

Table A2: Quality of Care

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2A: Quality of Care Providers																			
15	Regular Doctor																		
	Poor	30	2.6	33	2.2	10	2.6	10	2.5	5	4.4	5	1.3	45	2.7	48	2.1		
	Fair	104	8.9	132	9.0	33	8.7	30	7.4	8	7.1	39	10.4	145	8.7	201	8.9		
	Good	418	35.7	506	34.5	149	39.1	165	40.7	36	31.9	115	30.7	603	36.2	786	35.0		
	Excellent	618	52.8	796	54.3	189	49.6	200	49.4	64	56.6	216	57.6	871	52.3	1,212	53.9		
	TOTAL	1,170		1,467		381		405		113		375		1,664		2,247			
	<i>Not Applicable</i>	59		72		7		16		4		13		70		101			
16	Dentist																		
	Poor	92	11.7	111	11.0	22	7.9	34	11.7	12	15.0	31	13.5	126	11.0	176	11.5		
	Fair	140	17.8	178	17.6	43	15.4	44	15.1	16	20.0	57	24.8	199	17.3	279	18.2		
	Good	326	41.4	400	39.6	136	48.6	132	45.4	26	32.5	73	31.7	488	42.5	605	39.5		
	Excellent	230	29.2	320	31.7	79	28.2	81	27.8	26	32.5	69	30.0	335	29.2	470	30.7		
	TOTAL	788		1009		280		291		80		230		1,148		1,530			
	<i>Not Applicable</i>	365		430		103		123		30		133		498		686			
17	Eye Care																		
	Poor	49	4.8	70	5.5	12	3.6	20	5.6	6	5.8	19	6.0	67	4.6	109	5.6		
	Fair	135	13.2	155	12.1	44	13.0	51	14.4	12	11.5	50	15.8	191	13.1	256	13.1		
	Good	398	39.0	527	41.2	148	43.8	143	40.3	36	34.6	102	32.2	582	39.8	772	39.6		
	Excellent	438	42.9	527	41.2	134	39.6	141	39.7	50	48.1	146	46.1	622	42.5	814	41.7		
	TOTAL	1,020		1,279		338		355		104		317		1,462		1,951			
	<i>Not Applicable</i>	185		222		56		66		14		64		255		352			
18	Foot Doctor																		
	Poor	49	5.6	72	6.6	14	5.1	18	6.5	4	4.3	35	12.7	67	5.4	125	7.6		
	Fair	113	12.8	127	11.7	25	9.1	45	16.2	9	9.8	28	10.2	147	11.8	200	12.2		
	Good	372	42.2	385	35.4	135	49.1	106	38.1	33	35.9	91	33.1	540	43.3	582	35.5		
	Excellent	347	39.4	503	46.3	101	36.7	109	39.2	46	50.0	121	44.0	494	39.6	733	44.7		
	TOTAL	881		1,087		275		278		92		275		1,248		1,640			
	<i>Not Applicable</i>	287		364		114		127		26		93		427		584			

Note: Percentages have been rounded and may not total to 100%.

Table A2: Quality of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2A: Quality of Care Providers																			
19a	Home Health Aide																		
	Poor	42	3.8	42	3.1	12	3.8	13	3.9	2	1.9	15	4.2	56	3.7	70	3.4		
	Fair	102	9.2	120	8.8	30	9.6	38	11.3	16	15.0	38	10.5	148	9.7	196	9.5		
	Good	361	32.6	382	28.1	127	40.6	125	37.1	27	25.2	104	28.8	515	33.7	611	29.7		
	Excellent	604	54.5	814	59.9	144	46.0	161	47.8	62	57.9	204	56.5	810	53.0	1,179	57.3		
	TOTAL	1,109		1,358		313		337		107		361		1,529		2,056			
	<i>Not Applicable</i>	107		141		77		78		13		14		197		233			
19b	Home Health Agency																		
	Poor	62	5.6	66	4.8	17	5.5	17	5.2	5	4.5	22	6.1	84	5.5	105	5.1		
	Fair	151	13.5	189	13.6	31	10.1	39	12.0	20	18.0	60	16.6	202	13.2	288	13.9		
	Good	423	37.9	492	35.5	148	48.1	146	44.9	33	29.7	122	33.8	604	39.3	760	36.7		
	Excellent	481	43.1	640	46.1	112	36.4	123	37.8	53	47.7	157	43.5	646	42.1	920	44.4		
	TOTAL	1,117		1,387		308		325		111		361		1,536		2,073			
	<i>Not Applicable</i>	100		123		83		87		9		12		192		222			
20	Care Manager																		
	Poor	49	4.3	62	4.5	12	3.3	14	3.8	0	0.0	13	3.7	61	3.8	89	4.2		
	Fair	112	9.9	164	11.8	24	6.6	36	9.8	12	10.4	43	12.2	148	9.2	243	11.5		
	Good	418	36.9	488	35.1	148	40.5	157	42.9	34	29.6	122	34.6	600	37.2	767	36.4		
	Excellent	553	48.9	675	48.6	181	49.6	159	43.4	69	60.0	175	49.6	803	49.8	1,009	47.9		
	TOTAL	1,132		1,389		365		366		115		353		1,612		2,108			
	<i>Not Applicable</i>	85		115		24		45		3		18		112		178			
21a	Regular Visiting Nurse																		
	Poor	45	4.0	60	4.2	12	3.5	12	3.3	5	4.3	31	8.8	62	3.9	103	4.8		
	Fair	131	11.6	167	11.8	18	5.3	34	9.4	14	12.2	43	12.2	163	10.3	244	11.4		
	Good	445	39.4	477	33.6	126	37.2	120	33.3	31	27.0	121	34.4	602	38.0	718	33.7		
	Excellent	508	45.0	716	50.4	183	54.0	194	53.9	65	56.5	157	44.6	756	47.8	1,067	50.0		
	TOTAL	1,129		1,420		339		360		115		352		1,583		2,132			
	<i>Not Applicable</i>	101		112		55		56		8		25		164		193			

Note: Percentages have been rounded and may not total to 100%.

Table A2: Quality of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2A: Quality of Care Providers																			
21b	Covering/On Call Nurse																		
	Poor	52	6.7	76	8.1	7	2.6	12	4.2	5	6.0	32	13.9	64	5.7	120	8.2		
	Fair	119	15.3	140	14.9	30	11.2	37	13.0	10	12.0	43	18.7	159	14.1	220	15.1		
	Good	345	44.5	386	41.0	119	44.2	128	45.1	35	42.2	79	34.3	499	44.2	593	40.7		
	Excellent	260	33.5	340	36.1	113	42.0	107	37.7	33	39.8	76	33.0	406	36.0	523	35.9		
	TOTAL	776		942		269		284		83		230		1,128		1,456			
	<i>Not Applicable</i>	387		483		117		110		34		129		538		722			
22	Physical Therapist																		
	Poor	40	7.1	78	11.2	10	3.8	9	3.6	4	7.7	29	18.7	54	6.1	116	10.6		
	Fair	76	13.5	95	13.7	24	9.1	30	12.0	5	9.6	29	18.7	105	11.9	154	14.0		
	Good	226	40.1	254	36.6	111	41.9	98	39.2	19	36.5	50	32.3	356	40.4	402	36.6		
	Excellent	222	39.4	267	38.5	120	45.3	113	45.2	24	46.2	47	30.3	366	41.5	427	38.9		
	TOTAL	564		694		265		250		52		155		881		1,099			
	<i>Not Applicable</i>	577		731		121		159		57		214		755		1,104			
23	Occupational Therapist																		
	Poor	44	15.3	68	17.4	9	5.1	12	6.5	2	7.7	27	29.7	55	11.2	107	16.1		
	Fair	40	13.9	50	12.8	16	9.0	28	15.2	2	7.7	16	17.6	58	11.8	94	14.1		
	Good	117	40.6	152	38.9	71	40.1	66	35.9	10	38.5	25	27.5	198	40.3	243	36.5		
	Excellent	87	30.2	121	30.9	81	45.8	78	42.4	12	46.2	23	25.3	180	36.7	222	33.3		
	TOTAL	288		391		177		184		26		91		491		666			
	<i>Not Applicable</i>	799		980		198		220		78		264		1,075		1,464			
24	Speech Therapist																		
	Poor	39	26.4	57	26.5	6	12.2	14	21.5	2	15.4	24	50.0	47	22.4	95	29.0		
	Fair	22	14.9	35	16.3	3	6.1	11	16.9	1	7.7	5	10.4	26	12.4	51	15.5		
	Good	56	37.8	72	33.5	21	42.9	20	30.8	3	23.1	9	18.8	80	38.1	101	30.8		
	Excellent	31	20.9	51	23.7	19	38.8	20	30.8	7	53.8	10	20.8	57	27.1	81	24.7		
	TOTAL	148		215		49		65		13		48		210		328			
	<i>Not Applicable</i>	939		1,135		319		332		88		301		1,346		1,768			

Note: Percentages have been rounded and may not total to 100%.

Table A2: Quality of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2A: Quality of Care Providers																			
25	Social Worker																		
	Poor	55	7.3	81	9.1	11	3.2	21	5.8	5	6.8	30	13.1	71	6.1	132	8.9		
	Fair	110	14.7	146	16.3	19	5.5	46	12.6	7	9.6	32	14.0	136	11.6	224	15.1		
	Good	294	39.3	310	34.7	118	34.1	114	31.3	17	23.3	82	35.8	429	36.7	506	34.1		
	Excellent	290	38.7	356	39.9	198	57.2	183	50.3	44	60.3	85	37.1	532	45.5	624	42.0		
	TOTAL	749		893		346		364		73		229		1,168		1,486			
	<i>Not Applicable</i>	384		516		39		48		37		135		460		699			
26	Medical Supplies and Equipment																		
	Poor	43	4.6	53	4.5	7	2.0	9	2.5	7	7.2	17	5.6	57	4.2	79	4.3		
	Fair	102	10.9	122	10.3	17	5.0	20	5.6	7	7.2	38	12.5	126	9.2	180	9.8		
	Good	347	37.2	418	35.3	137	39.9	143	40.3	29	29.9	103	33.9	513	37.4	664	36.0		
	Excellent	441	47.3	592	50.0	182	53.1	183	51.5	54	55.7	146	48.0	677	49.3	921	49.9		
	TOTAL	933		1,185		343		355		97		304		1,373		1,844			
	<i>Not Applicable</i>	231		273		43		56		22		67		296		396			
27	Audiology / Hearing Aids																		
	Poor	48	18.1	62	17.7	12	10.1	15	11.9	4	13.3	28	34.1	64	15.5	105	18.8		
	Fair	37	14.0	63	18.0	23	19.3	16	12.7	1	3.3	12	14.6	61	14.7	91	16.3		
	Good	111	41.9	110	31.4	43	36.1	49	38.9	11	36.7	21	25.6	165	39.9	180	32.3		
	Excellent	69	26.0	115	32.9	41	34.5	46	36.5	14	46.7	21	25.6	124	30.0	182	32.6		
	TOTAL	265		350		119		126		30		82		414		558			
	<i>Not Applicable</i>	853		1,030		256		275		75		274		1,184		1,579			
28	Home Delivered Meals / Meals on Wheels																		
	Poor	35	16.5	71	25.9	6	8.2	6	8.2	8	27.6	16	27.1	49	15.6	93	22.9		
	Fair	27	12.7	27	9.9	7	9.6	11	15.1	2	6.9	7	11.9	36	11.5	45	11.1		
	Good	60	28.3	66	24.1	37	50.7	21	28.8	5	17.2	17	28.8	102	32.5	104	25.6		
	Excellent	90	42.5	110	40.1	23	31.5	35	47.9	14	48.3	19	32.2	127	40.4	164	40.4		
	TOTAL	212		274		73		73		29		59		314		406			
	<i>Not Applicable</i>	911		1,093		299		328		79		295		1,289		1,716			

Note: Percentages have been rounded and may not total to 100%.

Table A2: Quality of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2A: Quality of Care Providers																			
29	Meals served at Day Health Center																		
	Poor	31	13.1	60	19.2	15	4.7	14	4.7	5	26.3	21	34.4	51	8.9	95	14.1		
	Fair	36	15.2	51	16.3	38	11.9	46	15.4	1	5.3	8	13.1	75	13.1	105	15.6		
	Good	88	37.1	90	28.8	171	53.8	123	41.1	7	36.8	17	27.9	266	46.3	230	34.2		
	Excellent	82	34.6	112	35.8	94	29.6	116	38.8	6	31.6	15	24.6	182	31.7	243	36.1		
	TOTAL	237		313		318		299		19		61		574		673			
	<i>Not Applicable</i>	881		1,069		69		110		86		293		1,036		1,472			
30	Day Health Center Activities																		
	Poor	23	8.7	60	16.8	12	3.8	19	6.1	3	15.0	20	29.9	38	6.3	99	13.5		
	Fair	41	15.5	41	11.5	38	12.1	36	11.6	3	15.0	10	14.9	82	13.7	87	11.8		
	Good	104	39.2	125	34.9	145	46.2	132	42.6	5	25.0	15	22.4	254	42.4	272	37.0		
	Excellent	97	36.6	132	36.9	119	37.9	123	39.7	9	45.0	22	32.8	225	37.6	277	37.7		
	TOTAL	265		358		314		310		20		67		599		735			
	<i>Not Applicable</i>	853		1,028		69		99		84		288		1,006		1,415			
31	Transportation Services																		
	Poor	70	7.1	117	9.4	18	4.9	14	3.6	7	7.6	40	13.9	95	6.6	171	8.9		
	Fair	141	14.3	167	13.4	33	8.9	40	10.3	10	10.9	49	17.1	184	12.7	256	13.4		
	Good	353	35.8	424	34.1	140	37.7	147	38.0	26	28.3	105	36.6	519	35.8	676	35.3		
	Excellent	423	42.9	534	43.0	180	48.5	186	48.1	49	53.3	93	32.4	652	45.0	813	42.4		
	TOTAL	987		1,242		371		387		92		287		1,450		1,916			
	<i>Not Applicable</i>	210		246		23		31		28		88		261		365			
32	Nursing Home																		
	Poor	28	18.2	43	23.8	7	14.3	9	13.2	5	38.5	20	50.0	40	18.5	72	24.9		
	Fair	25	16.2	23	12.7	5	10.2	7	10.3	1	7.7	4	10.0	31	14.4	34	11.8		
	Good	53	34.4	53	29.3	17	34.7	21	30.9	1	7.7	9	22.5	71	32.9	83	28.7		
	Excellent	48	31.2	62	34.3	20	40.8	31	45.6	6	46.2	7	17.5	74	34.3	100	34.6		
	TOTAL	154		181		49		68		13		40		216		289			
	<i>Not Applicable</i>	935		1,167		316		324		88		306		1,339		1,797			

Note: Percentages have been rounded and may not total to 100%.

Table A2: Quality of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2A: Quality of Care Providers																			
33	Pharmacy Services																		
	Poor	21	2.0	41	3.1	8	2.2	10	2.6	2	1.8	7	2.1	31	2.0	58	2.9		
	Fair	99	9.5	90	6.8	15	4.1	24	6.2	10	9.0	33	10.0	124	8.2	147	7.2		
	Good	376	36.2	434	32.9	141	38.8	152	39.3	28	25.2	110	33.3	545	36.0	696	34.2		
	Excellent	544	52.3	753	57.1	199	54.8	201	51.9	71	64.0	180	54.5	814	53.8	1,134	55.7		
	TOTAL	1,040		1,318		363		387		111		330		1,514		2,035			
	<i>Not Applicable</i>	158		181		27		30		7		48		192		259			
34	Nutritionist																		
	Poor	32	8.6	62	13.2	13	5.4	10	3.5	1	2.6	23	21.9	46	7.0	95	11.1		
	Fair	65	17.4	63	13.5	19	7.9	32	11.3	5	13.2	14	13.3	89	13.6	109	12.7		
	Good	161	43.2	173	37.0	113	46.7	130	46.1	16	42.1	40	38.1	290	44.4	343	40.1		
	Excellent	115	30.8	170	36.3	97	40.1	110	39.0	16	42.1	28	26.7	228	34.9	308	36.0		
	TOTAL	373		468		242		282		38		105		653		855			
	<i>Not Applicable</i>	757		925		144		123		66		253		967		1,301			

Note: Percentages have been rounded and may not total to 100%.

Table A3: Timeliness of Care

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2B: Timeliness																			
35	Home Health Aide																		
	Always	585	60.1	757	60.2	142	45.8	140	43.9	50	50.0	204	63.8	777	56.2	1,101	58.0		
	Usually	189	19.4	233	18.5	102	32.9	106	33.2	23	23.0	45	14.1	314	22.7	384	20.2		
	Sometimes	117	12.0	147	11.7	47	15.2	55	17.2	15	15.0	33	10.3	179	12.9	235	12.4		
	Never	82	8.4	121	9.6	19	6.1	18	5.6	12	12.0	38	11.9	113	8.2	177	9.3		
	TOTAL	973		1,258		310		319		100		320		1,383		1,897			
	<i>Not Applicable</i>	175		209		79		87		18		47		272		343			
36	Care Manager / Case Manager																		
	Always	455	46.1	545	44.5	152	46.5	136	39.9	48	51.1	146	47.1	655	46.6	827	44.1		
	Usually	254	25.8	314	25.6	99	30.3	96	28.2	19	20.2	62	20.0	372	26.4	472	25.2		
	Sometimes	167	16.9	221	18.0	45	13.8	78	22.9	10	10.6	57	18.4	222	15.8	356	19.0		
	Never	110	11.2	145	11.8	31	9.5	31	9.1	17	18.1	45	14.5	158	11.2	221	11.8		
	TOTAL	986		1,225		327		341		94		310		1,407		1,876			
	<i>Not Applicable</i>	167		214		51		64		14		56		232		334			
37a	Regular Visiting Nurse																		
	Always	520	48.8	635	47.0	171	52.6	157	46.2	59	57.3	151	44.9	750	50.2	943	46.5		
	Usually	241	22.6	309	22.9	81	24.9	85	25.0	13	12.6	65	19.3	335	22.4	459	22.6		
	Sometimes	208	19.5	271	20.1	40	12.3	64	18.8	17	16.5	80	23.8	265	17.7	415	20.5		
	Never	96	9.0	136	10.1	33	10.2	34	10.0	14	13.6	40	11.9	143	9.6	210	10.4		
	TOTAL	1,065		1,351		325		340		103		336		1,493		2,027			
	<i>Not Applicable</i>	135		141		66		74		14		38		215		253			
37b	Covering/On Call Nurse																		
	Always	302	41.0	357	39.7	115	43.4	112	37.6	27	37.0	83	35.6	444	41.3	552	38.6		
	Usually	166	22.6	222	24.7	74	27.9	93	31.2	14	19.2	44	18.9	254	23.6	359	25.1		
	Sometimes	164	22.3	194	21.6	46	17.4	58	19.5	22	30.1	50	21.5	232	21.6	302	21.1		
	Never	104	14.1	126	14.0	30	11.3	35	11.7	10	13.7	56	24.0	144	13.4	217	15.2		
	TOTAL	736		899		265		298		73		233		1,074		1,430			
	<i>Not Applicable</i>	425		528		119		117		35		130		579		775			

Note: Percentages have been rounded and may not total to 100%.

Table A3: Timeliness of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2B: Timeliness																			
38	Physical Therapist																		
	Always	171	37.3	194	34.5	92	41.8	89	43.4	13	40.6	33	28.7	276	38.8	316	35.8		
	Usually	102	22.2	115	20.4	61	27.7	49	23.9	2	6.3	21	18.3	165	23.2	185	21.0		
	Sometimes	98	21.4	135	24.0	39	17.7	36	17.6	10	31.3	24	20.9	147	20.7	195	22.1		
	Never	88	19.2	119	21.1	28	12.7	31	15.1	7	21.9	37	32.2	123	17.3	187	21.2		
	TOTAL	459		563		220		205		32		115		711		883			
	<i>Not Applicable</i>	656		828		163		202		72		238		891		1,268			
39	Occupational Therapist																		
	Always	81	33.1	93	28.2	52	36.1	70	49.6	8	44.4	18	22.8	141	34.6	181	32.9		
	Usually	46	18.8	74	22.4	40	27.8	30	21.3	1	5.6	13	16.5	87	21.4	117	21.3		
	Sometimes	42	17.1	63	19.1	23	16.0	20	14.2	6	33.3	9	11.4	71	17.4	92	16.7		
	Never	76	31.0	100	30.3	29	20.1	21	14.9	3	16.7	39	49.4	108	26.5	160	29.1		
	TOTAL	245		330		144		141		18		79		407		550			
	<i>Not Applicable</i>	848		1,042		230		263		82		266		1,160		1,571			
40	Speech Therapist																		
	Always	41	30.6	59	26.0	6	18.2	23	40.4	4	36.4	15	26.3	51	28.7	97	28.4		
	Usually	18	13.4	54	23.8	3	9.1	11	19.3	0	0.0	5	8.8	21	11.8	70	20.5		
	Sometimes	19	14.2	26	11.5	4	12.1	8	14.0	4	36.4	6	10.5	27	15.2	40	11.7		
	Never	56	41.8	88	38.8	20	60.6	15	26.3	3	27.3	31	54.4	79	44.4	134	39.3		
	TOTAL	134		227		33		57		11		57		178		341			
	<i>Not Applicable</i>	954		1,127		337		344		90		291		1,381		1,762			
41	Social Worker																		
	Always	248	37.3	281	35.3	178	55.3	161	49.7	30	47.6	51	27.9	456	43.5	493	37.9		
	Usually	138	20.8	156	19.6	69	21.4	59	18.2	10	15.9	31	16.9	217	20.7	246	18.9		
	Sometimes	181	27.3	204	25.7	42	13.0	64	19.8	10	15.9	54	29.5	233	22.2	322	24.7		
	Never	97	14.6	154	19.4	33	10.2	40	12.3	13	20.6	47	25.7	143	13.6	241	18.5		
	TOTAL	664		795		322		324		63		183		1,049		1,302			
	<i>Not Applicable</i>	464		608		63		82		40		161		567		851			

Note: Percentages have been rounded and may not total to 100%.

Table A3: Timeliness of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2B: Timeliness																			
42	Home Delivered Meals / Meals on Wheels																		
	Always	99	44.6	129	42.2	29	40.3	44	56.4	17	60.7	27	38.6	145	45.0	200	44.1		
	Usually	52	23.4	57	18.6	14	19.4	10	12.8	2	7.1	8	11.4	68	21.1	75	16.5		
	Sometimes	21	9.5	28	9.2	12	16.7	8	10.3	4	14.3	6	8.6	37	11.5	42	9.3		
	Never	50	22.5	92	30.1	17	23.6	16	20.5	5	17.9	29	41.4	72	22.4	137	30.2		
	TOTAL	222		306		72		78		28		70		322		454			
	<i>Not Applicable</i>	878		1,065		304		327		78		281		1,260		1,673			
43a	Transportation TO Day Center																		
	Always	164	43.9	189	43.1	151	52.2	148	48.7	14	50.0	42	41.2	329	47.6	379	44.9		
	Usually	64	17.1	82	18.7	80	27.7	62	20.4	3	10.7	12	11.8	147	21.3	156	18.5		
	Sometimes	74	19.8	68	15.5	33	11.4	55	18.1	7	25.0	15	14.7	114	16.5	138	16.3		
	Never	72	19.3	100	22.8	25	8.7	39	12.8	4	14.3	33	32.4	101	14.6	172	20.4		
	TOTAL	374		439		289		304		28		102		691		845			
	<i>Not Applicable</i>	657		932		98		105		63		250		818		1,287			
43b	Transportation FROM Day Center																		
	Always	122	42.2	156	43.6	145	50.3	144	47.5	10	50.0	32	39.5	277	46.4	332	44.7		
	Usually	48	16.6	74	20.7	82	28.5	71	23.4	2	10.0	6	7.4	132	22.1	151	20.4		
	Sometimes	57	19.7	43	12.0	34	11.8	48	15.8	6	30.0	11	13.6	97	16.2	102	13.7		
	Never	62	21.5	85	23.7	27	9.4	40	13.2	2	10.0	32	39.5	91	15.2	157	21.2		
	TOTAL	289		358		288		303		20		81		597		742			
	<i>Not Applicable</i>	698		972		96		107		69		258		863		1,337			
43c	Transportation TO the doctor																		
	Always	425	47.6	536	46.7	178	51.4	180	48.6	38	49.4	114	45.8	641	48.7	830	47.0		
	Usually	200	22.4	246	21.4	90	26.0	83	22.4	14	18.2	51	20.5	304	23.1	380	21.5		
	Sometimes	150	16.8	230	20.1	49	14.2	73	19.7	15	19.5	41	16.5	214	16.3	344	19.5		
	Never	117	13.1	135	11.8	29	8.4	34	9.2	10	13.0	43	17.3	156	11.9	212	12.0		
	TOTAL	892		1,147		346		370		77		249		1,315		1,766			
	<i>Not Applicable</i>	253		306		43		47		35		102		331		455			

Note: Percentages have been rounded and may not total to 100%.

Table A3: Timeliness of Care (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2B: Timeliness																			
43d	Transportation FROM the doctor																		
	Always	400	44.5	518	46.1	170	49.3	170	46.4	34	45.3	112	44.4	604	45.8	800	45.9		
	Usually	193	21.5	239	21.3	93	27.0	80	21.9	14	18.7	47	18.7	300	22.8	366	21.0		
	Sometimes	177	19.7	235	20.9	50	14.5	81	22.1	17	22.7	46	18.3	244	18.5	362	20.8		
	Never	128	14.3	132	11.7	32	9.3	35	9.6	10	13.3	47	18.7	170	12.9	214	12.3		
	TOTAL	898		1,124		345		366		75		252		1,318		1,742			
	<i>Not Applicable</i>	243		290		41		47		33		99		317		436			
44	Medical Supplies and Equipment																		
	Always	431	48.8	486	45.9	170	54.7	157	45.5	47	57.3	128	52.7	648	50.8	771	46.8		
	Usually	187	21.2	243	22.9	81	26.0	85	24.6	11	13.4	45	18.5	279	21.9	373	22.6		
	Sometimes	152	17.2	200	18.9	30	9.6	63	18.3	13	15.9	36	14.8	195	15.3	299	18.2		
	Never	113	12.8	130	12.3	30	9.6	40	11.6	11	13.4	34	14.0	154	12.1	204	12.4		
	TOTAL	883		1,059		311		345		82		243		1,276		1,647			
	<i>Not Applicable</i>	271		336		71		63		31		101		373		500			
45	Pharmacy Services																		
	Always	562	57.5	713	57.0	202	57.1	201	52.9	64	64.0	192	64.9	828	57.9	1,106	57.4		
	Usually	208	21.3	257	20.6	90	25.4	83	21.8	16	16.0	39	13.2	314	21.9	379	19.7		
	Sometimes	100	10.2	126	10.1	31	8.8	52	13.7	10	10.0	28	9.5	141	9.9	206	10.7		
	Never	107	11.0	154	12.3	31	8.8	44	11.6	10	10.0	37	12.5	148	10.3	235	12.2		
	TOTAL	977		1,250		354		380		100		296		1,431		1,926			
	<i>Not Applicable</i>	199		213		26		32		15		66		240		311			
46++	Audiology/Hearing Aids																		
	Always			117	35.1			44	36.1			27	38.6			188	35.8		
	Usually			76	22.8			35	28.7			8	11.4			119	22.7		
	Sometimes			64	19.2			24	19.7			10	14.3			98	18.7		
	Never			76	22.8			19	15.6			25	35.7			120	22.9		
	TOTAL			333				122				70				525			
	<i>Not Applicable</i>			1,040				279				275				1,594			

Note: Percentages have been rounded and may not total to 100%.

++ New question in 2013

Table A4: Access to Care (Routine Appointments)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2C: Access to Care - Routine Appointment																			
47	Regular Doctor																		
	Less than 1 month	571	53.8	786	56.0	235	74.6	239	69.7	62	58.5	209	58.4	868	58.5	1,234	58.7		
	1 to 3 months	376	35.4	462	32.9	64	20.3	76	22.2	34	32.1	117	32.7	474	32.0	655	31.1		
	Longer than 3 months	115	10.8	155	11.0	16	5.1	28	8.2	10	9.4	32	8.9	141	9.5	215	10.2		
	TOTAL	1,062		1,403		315		343		106		358		1,483		2,104			
	<i>Not Applicable</i>	116		131		73		74		9		21		198		226			
48	Dentist																		
	Less than 1 month	261	41.3	394	47.4	109	49.3	97	42.4	38	60.3	79	45.7	408	44.5	570	46.2		
	1 to 3 months	151	23.9	177	21.3	63	28.5	78	34.1	10	15.9	38	22.0	224	24.5	293	23.7		
	Longer than 3 months	220	34.8	261	31.4	49	22.2	54	23.6	15	23.8	56	32.4	284	31.0	371	30.1		
	TOTAL	632		832		221		229		63		173		916		1,234			
	<i>Not Applicable</i>	502		611		162		186		45		183		709		980			
49	Eye Care																		
	Less than 1 month	337	39.4	472	43.2	123	48.4	126	44.7	40	46.0	109	40.1	500	41.8	707	42.9		
	1 to 3 months	209	24.4	258	23.6	72	28.3	81	28.7	25	28.7	80	29.4	306	25.6	419	25.4		
	Longer than 3 months	309	36.1	363	33.2	59	23.2	75	26.6	22	25.3	83	30.5	390	32.6	521	31.6		
	TOTAL	855		1,093		254		282		87		272		1,196		1,647			
	<i>Not Applicable</i>	316		379		130		133		28		101		474		613			
50	Foot Doctor																		
	Less than 1 month	307	40.8	422	45.3	114	54.8	107	48.0	39	47.6	95	40.4	460	44.1	624	44.9		
	1 to 3 months	265	35.2	308	33.0	59	28.4	67	30.0	26	31.7	74	31.5	350	33.6	449	32.3		
	Longer than 3 months	181	24.0	202	21.7	35	16.8	49	22.0	17	20.7	66	28.1	233	22.3	317	22.8		
	TOTAL	753		932		208		223		82		235		1,043		1,390			
	<i>Not Applicable</i>	399		524		179		192		36		134		614		850			
51++	Audiology/Hearing Aids																		
	Less than 1 month			156	54.0			49	43.4			33	55.9			238	51.6		
	1 to 3 months			54	18.7			30	26.5			12	20.3			96	20.8		
	Longer than 3 months			79	27.3			34	30.1			14	23.7			127	27.5		
	TOTAL			289				113				59				461			
	<i>Not Applicable</i>			1,098				288				292				1,678			

Note: Percentages have been rounded and may not total to 100%.

++ New question in 2013

Table A5: Access to Care (Urgent Appointments)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 2D: Access to Care - Urgent Appointment																			
52	Regular Doctor																		
	Same day	409	47.7	522	46.4	181	62.6	157	48.5	39	44.3	118	38.4	629	51.0	797	45.4		
	1 to 3 days	311	36.3	389	34.6	92	31.8	129	39.8	39	44.3	111	36.2	442	35.8	629	35.8		
	4 days or longer	137	16.0	213	19.0	16	5.5	38	11.7	10	11.4	78	25.4	163	13.2	329	18.7		
	TOTAL	857		1,124		289		324		88		307		1,234		1,755			
	<i>Not Applicable</i>	324		374		97		92		29		66		450		532			
53	Dentist																		
	Same day	129	28.5	173	28.3	21	13.3	25	14.5	17	37.8	39	28.9	167	25.5	237	25.8		
	1 to 3 days	157	34.7	214	35.0	78	49.4	77	44.5	22	48.9	41	30.4	257	39.2	332	36.1		
	4 days or longer	167	36.9	225	36.8	59	37.3	71	41.0	6	13.3	55	40.7	232	35.4	351	38.2		
	TOTAL	453		612		158		173		45		135		656		920			
	<i>Not Applicable</i>	691		796		218		230		65		213		974		1,239			
54	Eye Care																		
	Same day	157	25.9	196	24.9	30	16.9	26	13.0	19	27.9	44	21.3	206	24.2	266	22.3		
	1 to 3 days	206	33.9	260	33.0	82	46.1	70	35.0	27	39.7	62	30.0	315	36.9	392	32.8		
	4 days or longer	244	40.2	332	42.1	66	37.1	104	52.0	22	32.4	101	48.8	332	38.9	537	44.9		
	TOTAL	607		788		178		200		68		207		853		1,195			
	<i>Not Applicable</i>	559		664		201		207		47		159		807		1,030			
55	Foot Doctor																		
	Same day	130	24.4	185	26.7	26	16.3	37	22.7	20	28.2	45	24.5	176	23.1	267	25.7		
	1 to 3 days	198	37.2	242	35.0	77	48.1	44	27.0	31	43.7	58	31.5	306	40.1	344	33.1		
	4 days or longer	204	38.3	265	38.3	57	35.6	82	50.3	20	28.2	81	44.0	281	36.8	428	41.2		
	TOTAL	532		692		160		163		71		184		763		1,039			
	<i>Not Applicable</i>	618		732		222		245		42		179		882		1,156			
56++	Audiology/Hearing Aids																		
	Same day			78	32.9			15	19.5			18	34.6			111	30.3		
	1 to 3 days			69	29.1			24	31.2			12	23.1			105	28.7		
	4 days or longer			90	38.0			38	49.4			22	42.3			150	41.0		
	TOTAL			237				77				52				366			
	<i>Not Applicable</i>			1,150				324				299				1,773			

Note: Percentages have been rounded and may not total to 100%.

++ New question in 2013

Table A6: About You

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 3: About You																			
57++	Content with Quality of Life																		
	Not at all			84	5.3			18	4.2			28	7.0			130	5.4		
	A little bit			142	9.0			43	9.9			40	10.0			225	9.3		
	Somewhat			410	25.9			101	23.3			110	27.5			621	25.7		
	Quite a bit			502	31.7			146	33.7			95	23.8			743	30.7		
	Very much			447	28.2			125	28.9			127	31.8			699	28.9		
	TOTAL			1,585				433				400				2,418			
58	Rate your current state of health																		
	Very poor	101	8.0	93	5.8	15	3.7	11	2.5	5	3.9	26	6.4	121	6.7	130	5.3		
	Poor	302	23.8	325	20.2	76	18.9	66	15.1	29	22.8	85	21.0	407	22.6	476	19.4		
	Fair	558	44.0	725	45.0	160	39.8	166	38.0	58	45.7	174	43.0	776	43.2	1065	43.4		
	Good	263	20.7	384	23.8	130	32.3	157	35.9	23	18.1	97	24.0	416	23.1	638	26.0		
	Very good	45	3.5	84	5.2	21	5.2	37	8.5	12	9.4	23	5.7	78	4.3	144	5.9		
	TOTAL	1,269		1,611		402		437		127		405		1,798		2,453			
59	What is your gender																		
	Male	332	26.1	423	26.4	89	22.2	108	24.8	31	24.8	78	19.3	452	25.1	609	24.9		
	Female	940	73.9	1,181	73.6	312	77.8	328	75.2	94	75.2	326	80.7	1,346	74.9	1,835	75.1		
	TOTAL	1,272		1,604		401		436		125		404		1,798		2,444			
60	What is your age																		
	18-44	40	3.1	44	2.7	0	0.0	0	0.0	3	2.4	9	2.2	43	2.4	53	2.1		
	45-64	260	20.4	292	18.0	26	6.5	21	4.8	14	11.2	70	17.1	300	16.7	383	15.5		
	65-74	245	19.2	333	20.5	87	21.7	86	19.6	48	38.4	80	19.6	380	21.1	499	20.2		
	75-84	413	32.4	511	31.5	139	34.7	154	35.2	34	27.2	140	34.2	586	32.6	805	32.6		
	over 85	316	24.8	443	27.3	149	37.2	177	40.4	26	20.8	110	26.9	491	27.3	730	29.6		
	TOTAL	1,274		1,623		401		438		125		409		1,800		2,470			

Note: Percentages have been rounded and may not total to 100%.

++ New question in 2013

Table A6: About You (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 3: About You																			
61a	Are you Hispanic/Latino origin																		
	Yes	390	32.2	498	32.0	34	8.7	65	15.4	40	33.9	132	34.6	464	26.9	695	29.4		
	No	822	67.8	1,058	68.0	359	91.3	358	84.6	78	66.1	250	65.4	1,259	73.1	1,666	70.6		
	TOTAL	1,212		1,556		393		423		118		382		1,723		2,361			
61b+	What is your race																		
	American Indian or Alaskan Native	38	3.3	25	1.9	8	2.0	6	1.5	9	8	8	2.4	55	3.4	39	1.9		
	Asian	176	15.5	283	21.3	70	17.9	65	15.9	1	1	20	6.1	247	15.1	368	17.8		
	Black or African American	266	23.4	303	22.8	61	15.6	69	16.9	29	25	157	47.6	356	21.7	529	25.6		
	Native Hawaiian or Pacific Islander	7	0.6	5	0.4	1	0.3	0	0.0	1	1	2	0.6	9	0.5	7	0.3		
	White	541	47.7	661	49.7	250	63.9	264	64.7	71	62	127	38.5	862	52.6	1,052	50.9		
	Other	156	13.7	73	5.5	16	4.1	10	2.5	13	11.4	28	8.5	185	11.3	111	5.4		
	TOTAL	1,135		1,330		391		408		114		330		1,640		2,068			
62	Primary language spoken at home																		
	English	636	51.1	698	43.1	287	71.2	308	69.8	86	68.8	262	65.0	1009	56.9	1,268	51.5		
	Spanish	307	24.7	411	25.4	29	7.2	52	11.8	33	26.4	110	27.3	369	20.8	573	23.3		
	Russian	102	8.2	188	11.6	17	4.2	14	3.2	1	0.8	5	1.2	120	6.8	207	8.4		
	Chinese	147	11.8	239	14.8	57	14.1	56	12.7	0	0.0	11	2.7	204	11.5	306	12.4		
	Other	53	4.3	84	5.2	13	3.2	11	2.5	5	4.0	15	3.7	71	4.0	110	4.5		
	TOTAL	1,245		1,620		403		441		125		403		1,773		2,464			
63	Education level completed																		
	8th grade or less	442	36.0	537	34.2	119	30.3	136	31.6	43	35.2	152	38.1	604	34.7	825	34.4		
	Some high school, did not graduate	221	18.0	262	16.7	75	19.1	67	15.6	27	22.1	94	23.6	323	18.5	423	17.6		
	High school graduate or GED	286	23.3	334	21.3	121	30.8	117	27.2	31	25.4	86	21.6	438	25.1	537	22.4		
	Some college or 2 year degree	156	12.7	196	12.5	39	9.9	47	10.9	14	11.5	46	11.5	209	12.0	289	12.1		
	4 year college graduate	74	6.0	147	9.4	22	5.6	31	7.2	4	3.3	14	3.5	100	5.7	192	8.0		
	More than 4 year college degree	48	3.9	92	5.9	17	4.3	32	7.4	3	2.5	7	1.8	68	3.9	131	5.5		
	TOTAL	1,227		1,568		393		430		122		399		1,742		2,397			

Note: Percentages have been rounded and may not total to 100%.

+ Member can check all that apply

Table A6: About You (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 3: About You																			
64	Where do you live																		
	At home	1,239	96.5	1,574	98.1	359	90.0	389	90.9	123	98.4	396	98.3	1,721	95.2	2,359	96.8		
	Nursing home	45	3.5	31	1.9	40	10.0	39	9.1	2	1.6	7	1.7	87	4.8	77	3.2		
	TOTAL	1,284		1,605		399		428		125		403		1,808		2,436			
65♦	Do you live																		
	Alone	584	48.1	728	47.8	189	53.7	197	52.0	73	60.3	192	50.3	846	50.1	1,117	48.9		
	With a family member or friend	582	47.9	709	46.6	148	42.0	141	37.2	44	36.4	174	45.5	774	45.9	1,024	44.8		
	With other than a family member or friend	49	4.0	86	5.6	15	4.3	41	10.8	4	3.3	16	4.2	68	4.0	143	6.3		
	TOTAL	1,215		1,523		352		379		121		382		1,688		2,284			
66	Did someone help you complete this survey																		
	Yes	832	65.4	1,001	62.8	283	69.7	309	70.9	75	60.0	274	69.2	1,190	66.0	1,584	65.3		
	No	441	34.6	592	37.2	123	30.3	127	29.1	50	40.0	122	30.8	614	34.0	841	34.7		
	TOTAL	1,273		1,593		406		436		125		396		1,804		2,425			
67♦+	Who helped you																		
	Family member	485	58.3	564	56.3	169	59.7	189	61.2	41	54.7	173	63.1	695	58.4	926	58.5		
	Friend	102	12.3	86	8.6	39	13.8	33	10.7	2	2.7	21	7.7	143	12.0	140	8.8		
	Home Care Aide	155	18.6	217	21.7	9	3.2	18	5.8	19	25.3	62	22.6	183	15.4	297	18.8		
	Care Manager or Visiting Nurse	56	6.7	35	3.5	24	8.5	10	3.2	4	5.3	2	0.7	84	7.1	47	3.0		
	Other	119	14.3	95	9.5	62	21.9	64	20.7	12	16.0	17	6.2	193	16.2	176	11.1		
	TOTAL	832		1,001		283		309		75		274		1,190		1,584			
68♦+	How did this person help you																		
	Read the questions to me	502	60.3	543	54.2	154	54.4	185	59.9	47	62.7	167	60.9	703	59.1	895	56.5		
	Wrote down the answers that I gave	391	47.0	423	42.3	129	45.6	144	46.6	36	48.0	123	44.9	556	46.7	690	43.6		
	Answered the questions for me	201	24.2	241	24.1	102	36.0	104	33.7	16	21.3	58	21.2	319	26.8	403	25.4		
	Translated into my language	121	14.5	137	13.7	45	15.9	25	8.1	7	9.3	31	11.3	173	14.5	193	12.2		
	Helped in some other way	79	9.5	72	7.2	18	6.4	13	4.2	4	5.3	20	7.3	101	8.5	105	6.6		
	TOTAL	832		1,001		283		309		75		274		1,190		1,584			

Note: Percentages have been rounded and may not total to 100%.

♦ Items based on skip pattern

+ Member can check all that apply

Table A6: About You (continued)

Item	Description	All respondents		Partial Cap 2011		Partial Cap 2013		PACE 2011		PACE 2013		MAP 2011		MAP 2013		Statewide 2011		Statewide 2013	
		N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%	N	%
Section 3: About You																			
69	Has health plan talked to you about appointing someone to make decisions about your health if you are unable to do so?																		
	Yes	712	66.4	861	64.0	310	84	317	81.5	80	71	245	69.6	1,102	71	1,423	68.2		
	No	361	33.6	485	36.0	58	16	72	18.5	33	29	107	30.4	452	29	664	31.8		
	TOTAL	1,073		1,346		368		389		113		352		1,554		2,087			
	<i>Not sure</i>	169		262		30		46		10		49		209		357			
70	Do you have a legal document appointing someone to make decisions about your health care if you are unable to do so?																		
	Yes	645	59.2	759	54.7	334	89.5	326	82.5	86	72.9	226	62.3	1,065	67.4	1,311	61.1		
	No	444	40.8	628	45.3	39	10.5	69	17.5	32	27.1	137	37.7	515	32.6	834	38.9		
	TOTAL	1,089		1,387		373		395		118		363		1,580		2,145			
	<i>Not sure</i>	186		220		29		42		7		42		222		304			
71♦	Does the health plan have a copy of this document?																		
	Yes	349	72.4	394	73.9	250	91.9	246	91.4	33	62.3	100	64.9	632	78.3	740	77.4		
	No	133	27.6	139	26.1	22	8.1	23	8.6	20	37.7	54	35.1	175	21.7	216	22.6		
	TOTAL	482		533		272		269		53		154		807		956			
	<i>Not sure</i>	163		226		62		57		33		72		258		355			

Note: Percentages have been rounded and may not total to 100%.

♦ Items based on skip pattern

APPENDIX B: AGGREGATE TABLES

Table B1: Plan Evaluation – Comparison by Survey Year

		2011		2013		2011 vs. 2013
Item	Description	Denom*	Percent	Denom*	Percent	
Section 1: MLTC Plan Evaluation						
1	Plan always/usually explained services clearly	1,733	84.9	2,368	81.3	-
2a	Always/Usually involved in decisions about plan of care	1,738	78.0	2,338	72.3	▼
2b++	Family member or caregiver always/usually involved in making decisions about plan of care			2,360	60.4	
3	Called plan with question or for help	1,769	61.2	2,442	65.1	-
4◆	Always spoke with a person quickly	1,050	55.4	1,525	49.0	-
5a◆	Questions always answered quickly	1,052	60.6	1,538	52.7	▼
5b◆	Always able to understand the answers	1,044	67.8	1,531	60.9	▼
6◆	Always treated with politeness and respect	1,043	86.8	1,537	83.7	-
7	Called plan with a complaint or grievance	1,746	28.7	2,421	36.7	▲
8◆	Complaint was always responded to in a timely manner	484	53.1	840	44.4	-
9◆	Always satisfied with response	480	44.6	844	39.1	-
10◆	Always treated with politeness and respect	485	76.7	857	73.6	-
11	Plan asked to see prescription/over the counter medicines	1,628	86.5	2,197	88.3	-
12a++	Plan has been excellent/good at helping me to have fewer falls			1,587	78.1	
12b++	Plan has been excellent/good at helping me to take my medications the way my doctor wants			2,044	86.8	
12c++	Plan has been excellent/good at helping me to manage my illnesses			1,958	83.8	
12d++	Plan has been excellent/good at helping me when I'm feeling sad and lonely			1,731	72.4	
12e++	Plan has been excellent/good at helping to allow me to stay in my home			1,805	89.4	
13	Rated plan as good or excellent	1,816	85.2	2,458	84.3	-
14	Would recommend the plan	1,773	90.8	2,397	88.9	-
69	Health plan has talked about appointing someone to make health care decisions	1,554	70.9	2,087	68.2	-
70	Has a legal document appointing someone to make health care decisions	1,580	67.4	2,145	61.1	-
71◆	Health plan has a copy of this legal document	807	78.3	956	77.4	-

* Denominator excludes not applicable responses. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude *Not Applicable* responses.

◆ Items based on skip pattern

++ New question in 2013

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

- Not statistically significant

Table B2: Quality of Care – Comparison by Survey Year

		2011		2013		2011 vs. 2013
Item	Description	Denom*	Percent	Denom*	Percent	
Section 2A: Quality of Care Providers (Excellent/Good)						
33	Pharmacy Services	1,514	89.8	2,035	89.9	-
15	Regular doctor	1,664	88.6	2,247	88.9	-
19a	Home Health Aide, Personal Care Aide	1,529	86.7	2,056	87.1	-
26	Medical Supplies and Equipment	1,373	86.7	1,844	86.0	-
20	Care Manager/Case Manager	1,612	87.0	2,108	84.3	-
21a	Regular Visiting Nurse/Registered Nurse	1,583	85.8	2,132	83.7	-
17	Eye Care	1,462	82.4	1,951	81.3	-
19b	Home Health Agency, Personal Care Agency	1,536	81.4	2,073	81.0	-
18	Foot Doctor	1,248	82.9	1,640	80.2	-
31	Transportation Services	1,450	80.8	1,916	77.7	-
21b	Covering/On-call nurse	1,128	80.2	1,456	76.7	-
34	Nutritionist	653	79.3	855	76.1	-
25	Social Worker	1,168	82.3	1,486	76.0	▼
22	Physical Therapist	881	82.0	1,099	75.4	▼
30	Day Health Center Activities	599	80.0	735	74.7	-
29	Meals served at the Day Health Center	574	78.0	673	70.3	-
16	Dentist	1,148	71.7	1,530	70.3	-
23	Occupational Therapist	491	77.0	666	69.8	-
28	Home Delivered Meals/Meals on Wheels	314	72.9	406	66.0	-
27	Audiology/Hearing Aids	414	69.8	558	64.9	-
32	Nursing Home	216	67.1	289	63.3	-
24	Speech Therapist	210	65.2	328	55.5	-

* Denominator excludes not applicable responses. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude *Not Applicable* responses.

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

- Not statistically significant

Table B3: Timeliness of Care – Comparison by Survey Year

		2011		2013		2011 vs. 2013
Item	Description	Denom*	Percent	Denom*	Percent	
Section 2B: Timeliness (Always/Usually)						
35	Home Health Aide, Personal Care Aide	1,383	78.9	1,897	78.3	-
45	Pharmacy Services	1,431	79.8	1,926	77.1	-
44	Medical Supplies and Equipment	1,276	72.6	1,647	69.5	-
36	Care Manager/Case Manager	1,407	73.0	1,876	69.2	-
37a	Regular Visiting Nurse/Registered Nurse	1,493	72.6	2,027	69.2	-
43c	Transportation: TO the doctor	1,315	71.9	1,766	68.5	-
43d	Transportation: FROM the doctor	1,318	68.6	1,742	66.9	-
43b	Transportation: FROM Day Center	597	68.5	742	65.1	-
37b	Covering/On-call nurse	1,074	65.0	1,430	63.7	-
43a	Transportation: TO Day Center	691	68.9	845	63.3	-
42	Home Delivered Meals/Meals on Wheels	322	66.1	454	60.6	-
46++	Audiology/Hearing Aids			525	58.5	
41	Social Worker	1,049	64.2	1,302	56.8	▼
38	Physical Therapist	711	62.0	883	56.7	-
39	Occupational Therapist	407	56.0	550	54.2	-
40	Speech Therapist	178	40.4	341	49.0	-

* Denominator excludes not applicable responses. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude *Not Applicable* responses.

++ New question in 2013

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

- Not statistically significant

Table B4: Timely Access to Routine Appointments (Less than 1 month) – Comparison by Survey Year

		2011		2013		2011 vs. 2013
Item	Description	Denom*	Percent	Denom*	Percent	
Section 2C: Access to Care - Routine Appointments (Less than 1 month)						
47	Regular doctor	1,483	58.5	2,104	58.7	-
51++	Audiology/Hearing Aids			461	51.6	
48	Dentist	916	44.5	1,234	46.2	-
50	Foot Doctor	1,043	44.1	1,390	44.9	-
49	Eye Care	1,196	41.8	1,647	42.9	-

* Denominator excludes not applicable responses. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude *Not Applicable* responses.

++ New question in 2013

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

- Not statistically significant

Table B5: Timely Access to Urgent Appointments (Same day) – Comparison by Survey Year

		2011		2013		2011 vs. 2013
Item	Description	Denom*	Percent	Denom*	Percent	
Section 2D: Access to Care - Urgent Appointments (Same day)						
52	Regular doctor	1,234	51.0	1,755	45.4	-
56++	Audiology/Hearing Aids			366	30.3	
53	Dentist	656	25.5	920	25.8	-
55	Foot Doctor	763	23.1	1,039	25.7	-
54	Eye Care	853	24.2	1,195	22.3	-

* Denominator excludes not applicable responses. Total responses to each survey item varied; percentages were calculated on the number of responses for each item, and exclude *Not Applicable* responses.

++ New question in 2013

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 ($p < .001$)

- Not statistically significant

Table B6: Plan Evaluation – Comparison by Plan Type

Item	Description	Partial Cap	Partial Cap	2011 vs. 2013	PACE	PACE	2011 vs. 2013	MAP	MAP	2011 vs. 2013	PACE vs. Partial Cap vs. MAP		
		2011 (N=1,307)	2013 (N=1,662)		2011 (N=409)	2013 (N=446)		2011 (N=129)	2013 (N=414)		2011 P-value	2013 P-value	DIFF.
Section 1: MLTC Plan Evaluation		%	%		%	%		%	%				
1	Plan always/usually explained services clearly	83.5	81.3	-	87.6	85.1	-	90.2	77.3	-	-	-	
2a	Always/Usually involved in decisions about plan of care	76.3	71.5	-	81.4	75.7	-	83.2	71.8	-	-	-	
2b++	Family member or caregiver always/usually involved in making decisions about plan of care		57.8			70.2			60.4	-		<0.001	PACE>Partial Cap
3	Called plan with question or for help	60.0	63.6	-	64.4	63.7	-	62.4	72.4	-	-	<0.001	MAP>Partial Cap
4♦	Always spoke with a person quickly	52.8	50.0	-	61.1	53.6	-	62.5	41.8	-	-	-	
5a♦	Questions always answered quickly	58.4	54.6	-	66.1	50.9	▼	63.9	47.6	-	-	-	
5b♦	Always able to understand the answers	65.0	63.0	-	76.7	62.5	▼	65.8	51.9	-	-	<0.001	Partial Cap>MAP
6♦	Always treated with politeness and respect	85.4	84.5	-	88.6	83.3	-	94.4	81.4	-	-	-	
7	Called plan with a complaint or grievance	28.2	33.0	-	32.3	41.9	-	21.5	45.6	▲	-	<0.001	MAP>PACE>Partial Cap
8♦	Complaint was always responded to in a timely manner	50.0	43.8	-	58.9	47.7	-	64.0	42.8	-	-	-	
9♦	Always satisfied with response	40.5	41.0	-	52.3	40.6	-	57.7	32.2	-	-	-	
10♦	Always treated with politeness and respect	74.6	72.3	-	79.7	75.4	-	88.5	75.6	-	-	-	
11	Plan asked to see prescription/over the counter medicines	83.8	87.3	-	91.5	88.2	-	96.6	92.6	-	<0.001	-	

- ♦ Items based on skip pattern
- ++ New question in 2013
- ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)
- Not statistically significant

Table B6: Plan Evaluation – Comparison by Plan Type (continued)

		Partial Cap 2011	Partial Cap 2013	2011 vs. 2013	PACE 2011	PACE 2013	2011 vs. 2013	MAP 2011	MAP 2013	2011 vs. 2013	PACE vs. Partial Cap vs. MAP		
Item	Description	(N=1,307)	(N=1,662)		(N=409)	(N=446)		(N=129)	(N=414)		2011 P-value	2013 P-value	DIFF.
Section 1: MLTC Plan Evaluation		%	%		%	%		%	%				
12a++	Plan has been excellent/good at helping me to have fewer falls		77.1			84.3			74.3			-	
12b++	Plan has been excellent/good at helping me to take my medications the way my doctor wants me to		85.9			91.4			85.1			-	
12c++	Plan has been excellent/good at helping me to manage my illnesses		82.6			90.1			81.0			<0.001	PACE>Partial Cap, MAP
12d++	Plan has been excellent/good at helping me when I'm feeling sad and lonely		72.8			76.9			65.2			-	
12e++	Plan has been excellent/good at helping to allow me to stay in my home		88.3			93.5			88.9			-	
13	Rated plan as good or excellent	83.7	83.6	-	89.9	85.8	-	85.8	85.1	-	-	-	
14	Would recommend the plan	89.1	88.2	-	94.9	88.8	-	94.4	92.3	-	<0.001	-	
69	Health plan has talked about appointing someone to make health care decisions	66.4	64.0	-	84.2	81.5	-	70.8	69.6	-	<0.001	<0.001	PACE>Partial Cap, MAP
70	Has a legal document appointing someone to make health care decisions	59.2	54.7	-	89.5	82.5	-	72.9	62.3	-	<0.001	<0.001	PACE>Partial Cap, MAP
71♦	Health plan has a copy of this legal document	72.4	73.9	-	91.9	91.4	-	62.3	64.9	-	<0.001	<0.001	PACE>Partial Cap, MAP

- ♦ Items based on skip pattern
- ++ New question in 2013
- ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)
- Not statistically significant

Table B7: Quality of Care – Comparison by Plan Type

		Partial Cap 2011	Partial Cap 2013	2011 vs. 2013	PACE 2011	PACE 2013	2011 vs. 2013	MAP 2011	MAP 2013	2011 vs. 2013	PACE vs. Partial Cap vs. MAP		
Item	Description	(N=1,307)	(N=1,662)		(N=409)	(N=446)		(N=129)	(N=414)		2011 P-value	2013 P-value	DIFF.
Section 2A: Quality of Care Providers (Excellent/Good)		%	%		%	%		%	%				
15	Regular doctor	88.5	88.8	-	88.7	90.1	-	88.5	88.3	-	-	-	
16	Dentist	70.6	71.4	-	76.8	73.2	-	65.0	61.7	-	-	-	
17	Eye Care	81.9	82.4	-	83.4	80.0	-	82.7	78.2	-	-	-	
18	Foot Doctor	81.6	81.7	-	85.8	77.3	-	85.9	77.1	-	-	-	
19a	Home Health Aide, Personal Care Aide	87.0	88.1	-	86.6	84.9	-	83.1	85.3	-	-	-	
19b	Home Health Agency, Personal Care Agency	81.0	81.6	-	84.4	82.8	-	77.5	77.3	-	-	-	
20	Care Manager/Case Manager	85.8	83.7	-	90.1	86.3	-	89.6	84.1	-	-	-	
21a	Regular Visiting Nurse/Registered Nurse	84.4	84.0	-	91.2	87.2	-	83.5	79.0	-	-	-	
21b	Covering/On-call nurse	78.0	77.1	-	86.2	82.8	-	82.0	67.4	-	-	<0.001	PACE>MAP
22	Physical Therapist	79.5	75.1	-	87.2	84.4	-	82.7	62.6	-	-	<0.001	PACE>MAP
23	Occupational Therapist	70.8	69.8	-	85.9	78.3	-	84.7	52.8	-	<0.001	<0.001	PACE>MAP
24	Speech Therapist	58.7	57.2	-	81.7	61.5	-	N/A	39.6	-	-	-	
25	Social Worker	78.0	74.6	-	91.3	81.6	▼	83.6	72.9	-	<0.001	-	
26	Medical Supplies and Equipment	84.5	85.2	-	93.0	91.8	-	85.6	81.9	-	<0.001	<0.001	PACE>MAP
27	Audiology/Hearing Aids	67.9	64.3	-	70.6	75.4	-	83.3	51.2	-	-	<0.001	PACE>MAP
28	Home Delivered Meals/Meals on Wheels	70.8	64.2	-	82.2	76.7	-	65.5	61.0	-	-	-	
29	Meals served at the Day Health Center	71.7	64.5	-	83.4	79.9	-	N/A	52.5	-	-	<0.001	PACE>Partial Cap, MAP
30	Day Health Center Activities	75.8	71.8	-	84.1	82.3	-	70.0	55.2	-	-	<0.001	PACE>MAP
31	Transportation Services	78.7	77.1	-	86.2	86.1	-	81.6	69.0	-	-	<0.001	PACE>Partial Cap, MAP
32	Nursing Home	65.6	63.5	-	75.5	76.5	-	N/A	40.0	-	-	<0.001	PACE>MAP
33	Pharmacy Services	88.5	90.1	-	93.6	91.2	-	89.2	87.9	-	-	-	
34	Nutritionist	74.0	73.3	-	86.8	85.1	-	84.2	64.8	-	<0.001	<0.001	PACE>Partial Cap, MAP

- Not statistically significant
- ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)
- N/A Represents items with fewer than 20 responses.

Table B8: Timeliness of Care – Comparison by Plan Type

Item	Description	Partial Cap	Partial Cap	2011 vs. 2013	PACE	PACE	2011 vs. 2013	MAP	MAP	2011 vs. 2013	PACE vs. Partial Cap vs. MAP		
		2011 (N=1,307)	2013 (N=1,662)		2011 (N=409)	2013 (N=446)		2011 (N=129)	2013 (N=414)		2011 P-value	2013 P-value	DIFF.
Section 2B: Timeliness (Always/Usually)		%	%		%	%		%	%				
35	Home Health Aide, Personal Care Aide	79.5	78.7	-	78.7	77.1	-	73.0	77.8	-	-	-	
36	Care Manager/Case Manager	71.9	70.1	-	76.8	68.0	-	71.3	67.1	-	-	-	
37a	Regular Visiting Nurse/Registered Nurse	71.4	69.9	-	77.5	71.2	-	69.9	64.3	-	-	-	
37b	Covering/On-call nurse	63.6	64.4	-	71.3	68.8	-	56.2	54.5	-	-	<0.001	PACE>MAP
38	Physical Therapist	59.5	54.9	-	69.5	67.3	-	46.9	47.0	-	-	<0.001	PACE>MAP
39	Occupational Therapist	51.9	50.6	-	63.9	70.9	-	N/A	39.2	-	-	<0.001	PACE>Partial Cap, MAP
40	Speech Therapist	44.0	49.8	-	27.3	59.7	-	N/A	35.1	-	-	-	
41	Social Worker	58.1	55.0	-	76.7	67.9	-	63.5	44.8	-	<0.001	<0.001	PACE>Partial Cap, MAP
42	Home Delivered Meals/Meals on Wheels	68.0	60.8	-	59.7	69.2	-	67.8	50.0	-	-	-	
43a	Transportation: TO Day Center	61.0	61.7	-	79.9	69.1	-	60.7	52.9	-	<0.001	-	
43b	Transportation: FROM Day Center	58.8	64.3	-	78.8	71.0	-	60.0	46.9	-	<0.001	<0.001	PACE>MAP
43c	Transportation: TO the doctor	70.0	68.2	-	77.4	71.1	-	67.6	66.3	-	-	-	
43d	Transportation: FROM the doctor	66.0	67.4	-	76.3	68.3	-	64.0	63.1	-	-	-	
44	Medical Supplies and Equipment	70.0	68.8	-	80.7	70.1	-	70.7	71.2	-	<0.001	-	
45	Pharmacy Services	78.8	77.6	-	82.5	74.7	-	80.0	78.0	-	-	-	
46++	Audiology/Hearing Aids		58.0			64.8			50.0				

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

N/A Represents items with fewer than 20 responses.

Table B9: Timely Access to Routine Appointments (within 1 month) – Comparison by Plan Type

		Partial Cap 2011	Partial Cap 2013	2011 vs. 2013	PACE 2011	PACE 2013	2011 vs. 2013	MAP 2011	MAP 2013	2011 vs. 2013	PACE vs. Partial Cap vs. MAP		
Item	Description	(N=1,307)	(N=1,662)		(N=409)	(N=446)		(N=129)	(N=414)		2011 P-value	2013 P-value	DIFF.
Section 2C: Access to Care - Routine Appointments (Less than 1 month)		%	%	2013	%	%	2013	%	%	2013			
47	Regular doctor	53.8	56.0	-	74.6	69.7	-	58.5	58.4	-	<0.001	<0.001	PACE>Partial Cap
48	Dentist	41.3	47.4	-	49.3	42.4	-	60.3	45.7	-	-	-	
49	Eye Care	39.4	43.2	-	48.4	44.7	-	46.0	40.1	-	-	-	
50	Foot Doctor	40.8	45.3	-	54.8	48.0	-	47.6	40.4	-	<0.001	-	
51++	Audiology/Hearing Aids		54.0			43.4			55.9			-	

++ New question in 2013
 - Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B10: Timely Access to Urgent Appointments (Same Day) – Comparison by Plan Type

		Partial Cap 2011	Partial Cap 2013	2011 vs. 2013	PACE 2011	PACE 2013	2011 vs. 2013	MAP 2011	MAP 2013	2011 vs. 2013	PACE vs. Partial Cap vs. MAP		
Item	Description	(N=1,307)	(N=1,662)		(N=409)	(N=446)		(N=129)	(N=414)		2011 P-value	2013 P-value	DIFF.
Section 2D: Access to Care - Urgent Appointments (Same day)		%	%	2013	%	%	2013	%	%	2013			
52	Regular doctor	47.7	46.4	-	62.6	48.5	▼	44.3	38.4	-	<0.001	-	
53	Dentist	28.5	28.3	-	13.3	14.5	-	37.8	28.9	-	<0.001	<0.001	Partial Cap>PACE
54	Eye Care	25.9	24.9	-	16.9	13.0	-	27.9	21.3	-	-	-	
55	Foot Doctor	24.4	26.7	-	16.3	22.7	-	28.2	24.5	-	-	-	
56++	Audiology/Hearing Aids		32.9			19.5			34.6			-	

++ New question in 2013
 - Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B11: Quality of Care – Comparison by Current Health Status

Item	Description	Good/Very Good 2011 (N=494)	Good/Very Good 2013 (N=778)	2011 vs. 2013	Very Poor/Poor/ Fair 2011 (N =1,304)	Very Poor/Poor/ Fair 2013 (N=1,663)	2011 vs. 2013	Good/Very Good vs. Very Poor/Poor/Fair	
		%	%		%	%		2011 P-value	2013 P-value
Section 2A: Quality of Care Providers (Excellent/Good)									
15	Regular doctor	94.0	91.3	-	86.5	88.0	-	<0.001	-
16	Dentist	81.8	80.3	-	67.9	65.6	-	<0.001	<0.001
17	Eye Care	87.1	85.9	-	80.8	79.5	-	-	<0.001
18	Foot Doctor	89.6	87.1	-	80.5	76.8	-	<0.001	<0.001
19a	Home Health Aide, Personal Care Aide	87.6	91.0	-	86.0	85.4	-	-	<0.001
19b	Home Health Agency, Personal Care Agency	84.6	85.0	-	80.3	79.4	-	-	-
20	Care Manager/Case Manager	92.2	89.5	-	84.9	82.3	-	<0.001	<0.001
21a	Regular Visiting Nurse/Registered Nurse	90.8	87.1	-	83.7	82.5	-	<0.001	-
21b	Covering/On-call nurse	87.7	83.1	-	77.5	74.2	-	<0.001	<0.001
22	Physical Therapist	89.1	80.6	-	78.9	73.2	-	<0.001	-
23	Occupational Therapist	87.2	77.8	-	71.9	66.8	-	<0.001	-
24	Speech Therapist	78.8	64.0	-	60.3	51.7	-	-	-
25	Social Worker	89.9	83.5	-	79.0	72.2	-	<0.001	<0.001
26	Medical Supplies and Equipment	91.7	90.9	-	84.6	84.1	-	<0.001	<0.001
27	Audiology/Hearing Aids	79.5	73.4	-	65.1	61.4	-	-	-
28	Home Delivered Meals/Meals on Wheels	79.8	74.1	-	69.7	63.0	-	-	-
29	Meals served at the Day Health Center	86.3	79.4	-	73.4	65.1	-	<0.001	<0.001
30	Day Health Center Activities	85.8	83.9	-	76.4	69.9	-	-	<0.001
31	Transportation Services	86.4	83.3	-	78.8	75.3	-	<0.001	<0.001
32	Nursing Home	77.4	73.0	-	62.4	60.3	-	-	-
33	Pharmacy Services	95.2	92.2	-	87.8	88.9	-	<0.001	-
34	Nutritionist	87.9	70.3	-	75.6	86.3	-	<0.001	<0.001

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B12: Timeliness of Care – Comparison by Current Health Status

Item	Description	Good/Very Good 2011	Good/Very Good 2013	2011 vs. 2013	Very Poor/Poor/Fair 2011	Very Poor/Poor/Fair 2013	2011 vs. 2013	Good/Very Good vs. Very Poor/Poor/Fair	
		(N=494)	(N=778)		(N =1,304)	(N=1,663)		2011 P-value	2013 P-value
Section 2B: Timeliness (Always/Usually)		%	%		%	%			
35	Home Health Aide, Personal Care Aide	77.3	78.4	-	79.3	78.4	-	-	-
36	Care Manager/Case Manager	73.3	68.4	-	72.7	69.9	-	-	-
37a	Regular Visiting Nurse/Registered Nurse	74.9	70.0	-	71.9	68.9	-	-	-
37b	Covering/On-call nurse	70.0	63.1	-	63.0	64.0	-	-	-
38	Physical Therapist	64.9	61.9	-	60.7	53.8	-	-	-
39	Occupational Therapist	58.7	55.0	-	54.0	53.3	-	-	-
40	Speech Therapist	43.6	52.8	-	39.2	46.3	-	-	-
41	Social Worker	67.4	59.5	-	62.6	55.4	-	-	-
42	Home Delivered Meals/Meals on Wheels	68.2	66.5	-	65.6	57.6	-	-	-
43a	Transportation: TO Day Center	69.5	63.9	-	68.2	62.9	-	-	-
43b	Transportation: FROM Day Center	67.3	65.4	-	68.9	64.8	-	-	-
43c	Transportation: TO the doctor	73.3	66.7	-	71.4	69.6	-	-	-
43d	Transportation: FROM the doctor	70.8	64.6	-	68.0	68.2	-	-	-
44	Medical Supplies and Equipment	74.8	67.4	-	71.8	70.8	-	-	-
45	Pharmacy Services	81.5	73.7	-	79.1	78.9	-	-	-
46++	Audiology/Hearing Aids	▲	59.4	▼	▲	58.0	-	▲	-

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B13: Timely Access to Routine Appointments (within 1 month) – Comparison by Current Health Status

		Good/Very Good 2011 (N=494)	Good/Very Good 2013 (N=778)	2011 vs. 2013	Very Poor/Poor/ Fair 2011 (N =1,304)	Very Poor/Poor/ Fair 2013 (N=1,663)	2011 vs. 2013	Good/Very Good vs. Very Poor/Poor/Fair	
Item	Description	%	%		%	%		2011 P-value	2013 P-value
Section 2C: Access to Care - Routine Appointments (Less than 1 month)									
47	Regular doctor	62.1	58.67	-	57.2	59.5	-	-	-
48	Dentist	46.9	45.6	-	43.6	47.9	-	-	-
49	Eye Care	44.3	42.28	-	40.6	45.0	-	-	-
50	Foot Doctor	49.5	44.14	-	42.2	47.2	-	-	-
51++	Audiology/Hearing Aids		51.81			51.9	-		-

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B14: Timely Access to Urgent Appointments (same day) – Comparison by Current Health Status

		Good/Very Good 2011 (N=494)	Good/Very Good 2013 (N=778)	2011 vs. 2013	Very Poor/Poor/ Fair 2011 (N =1,304)	Very Poor/Poor/ Fair 2013 (N=1,663)	2011 vs. 2013	Good/Very Good vs. Very Poor/Poor/Fair	
Item	Description	%	%		%	%		2011 P-value	2013 P-value
Section 2D: Access to Care - Urgent Appointments (Same day)									
52	Regular doctor	52.8	46.17		49.8	44.7	-	n.s.	-
53	Dentist	21.8	27.63		26.7	24.7	-	n.s.	-
54	Eye Care	25.9	21.78		23.4	22.4	-	n.s.	-
55	Foot Doctor	22.3	27.07		23.1	25.2	-	n.s.	-
56++	Audiology/Hearing Aids		24.43			32.6			-

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B15: Quality of Care – Comparison by Race

Item	Description	White 2011	White 2013	2011 vs. 2013	Non- White 2011	Non- White 2013	2011 vs. 2013	White vs. Non- White	
		(N =828)	(N =1,033)		(N =812)	(N =917)		2011 P-value	2013 P-value
Section 2A: Quality of Care Providers (Excellent/Good)		%	%		%	%			
15	Regular doctor	89.6	91.5	-	89.1	87.4	-	-	-
16	Dentist	76.0	73.9	-	70.7	69.2	-	-	-
17	Eye Care	84.0	86.6	-	83.1	79.2	-	-	<0.001
18	Foot Doctor	85.7	82.7	-	82.4	80.2	-	-	-
19a	Home Health Aide, Personal Care Aide	89.0	89.2	-	85.6	85.4	-	-	-
19b	Home Health Agency, Personal Care Agency	81.8	84.3	-	81.2	78.8	-	-	-
20	Care Manager/Case Manager	87.4	86.3	-	88.3	84.1	-	-	-
21a	Regular Visiting Nurse/Registered Nurse	87.2	87.9	-	86.0	81.1	-	-	<0.001
21b	Covering/On-call nurse	82.4	81.7	-	80.7	75.6	-	-	-
22	Physical Therapist	86.8	83.2	-	79.6	70.3	-	-	<0.001
23	Occupational Therapist	85.4	79.5	-	71.0	65.7	-	<0.001	<0.001
24	Speech Therapist	74.4	74.1	-	63.8	48.9	-	-	<0.001
25	Social Worker	85.0	79.9	-	82.7	74.2	▼	-	-
26	Medical Supplies and Equipment	88.5	90.4	-	86.4	83.7	-	-	<0.001
27	Audiology/Hearing Aids	76.6	76.1	-	64.2	56.8	-	-	<0.001
28	Home Delivered Meals/Meals on Wheels	82.0	78.7	-	62.8	53.1	-	<0.001	<0.001
29	Meals served at the Day Health Center	81.4	78.3	-	74.7	65.5	-	-	<0.001
30	Day Health Center Activities	81.3	80.9	-	79.1	73.7	-	-	-
31	Transportation Services	84.3	81.7	-	77.5	77.3	-	-	-
32	Nursing Home	68.9	75.8	-	65.9	53.8	-	-	-
33	Pharmacy Services	91.5	92.2	-	88.7	88.7	-	-	-
34	Nutritionist	84.9	81.8	-	76.4	75.1	-	-	-

- Not statistically significant
▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B16: Timeliness of Care – Comparison by Race

		White 2011	White 2013	2011 vs. 2013	Non- White 2011	Non- White 2013	2011 vs. 2013	White vs. Non- White	
Item	Description	(N =828)	(N =1,033)		(N =812)	(N =917)		2011 P-value	2013 P-value
Section 2B: Timeliness (Always/Usually)		%	%		%	%			
35	Home Health Aide, Personal Care Aide	80.5	79.3	-	77.4	79.7	-	-	-
36	Care Manager/Case Manager	73.7	72.6	-	72.9	66.4	-	-	-
37a	Regular Visiting Nurse/Registered Nurse	74.4	73.6	-	72.3	65.7	-	-	<0.001
37b	Covering/On-call nurse	67.5	66.4	-	63.6	62.6	-	-	-
38	Physical Therapist	66.1	60.4	-	58.6	54.8	-	-	-
39	Occupational Therapist	59.3	65.1	-	56.6	44.3	-	-	<0.001
40	Speech Therapist	40.0	58.0	-	45.4	40.3	-	-	-
41	Social Worker	64.5	60.7	-	64.2	52.4	▼	-	-
42	Home Delivered Meals/Meals on Wheels	72.1	74.6	-	61.4	47.2	-	-	<0.001
43a	Transportation: TO Day Center	74.8	70.9	-	65.4	57.5	-	-	<0.001
43b	Transportation: FROM Day Center	72.8	72.7	-	66.0	59.2	-	-	<0.001
43c	Transportation: TO the doctor	73.6	73.6	-	69.3	63.8	-	-	<0.001
43d	Transportation: FROM the doctor	69.1	71.2	-	67.0	60.9	-	-	<0.001
44	Medical Supplies and Equipment	74.2	73.3	-	72.3	66.6	-	-	-
45	Pharmacy Services	81.1	80.3	-	78.6	73.1	-	-	-
46++	Audiology/Hearing Aids		69.6			42.9			<0.001

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B17: Timely Access to Routine Appointments (within 1 month) – Comparison by Race

		White 2011	White 2013	2011 vs. 2013	Non- White 2011	Non- White 2013	2011 vs. 2013	White vs. Non- White	
Item	Description	(N =828)	(N =1,033)		(N =812)	(N =917)		2011 P-value	2013 P-value
Section 2C: Access to Care - Routine Appointments (Less than 1 month)		%	%		%	%			
47	Regular doctor	68.8	67.4	-	51.0	55.8	-	<0.001	<0.001
48	Dentist	54.4	55.6	-	35.9	44.0	-	<0.001	<0.001
49	Eye Care	49.4	53.4	-	35.8	38.3	-	<0.001	<0.001
50	Foot Doctor	50.0	53.8	-	38.3	40.5	-	<0.001	<0.001
51++	Audiology/Hearing Aids		55.5			48.5			-

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B18: Timely Access to Urgent Appointments (same day) – Comparison by Race

		White 2011	White 2013	2011 vs. 2013	Non- White 2011	Non- White 2013	2011 vs. 2013	White vs. Non- White	
Item	Description	(N =828)	(N =1,033)		(N =812)	(N =917)		2011 P-value	2013 P-value
Section 2D: Access to Care - Urgent Appointments (Same day)		%	%		%	%			
52	Regular doctor	50.8	49.4	-	51.8	39.5	▼	-	<0.001
53	Dentist	23.1	25.9	-	25.8	22.8	-	-	-
54	Eye Care	23.9	23.7	-	24.2	18.2	-	-	-
55	Foot Doctor	22.2	25.7	-	25.2	25.3	-	-	-
56++	Audiology/Hearing Aids		25.8			36.6			-

++ New question in 2013

- Not statistically significant

▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B19: Quality of Care – Comparison by Primary Language Spoken

Item	Description	E	E	2011 vs. 2013	S	S	2011 vs. 2013	O	O	2011 vs. 2013	English vs. Spanish vs. Other			
		(N =1,009)	(N =1,268)		(N =369)	(N =573)		(N =395)	(N =623)		2011 P-value	DIFF.	2013 P-value	DIFF.
Section 2A: Quality of Care Providers		%	%		%	%		%	%					
15	Regular doctor	90.2	88.6	-	83.2	87.2	-	89.7	91.1	-	-	-	-	-
16	Dentist	79.0	73.4	-	63.5	66.2	-	64.3	67.0	-	<0.001	E>S,O	-	-
17	Eye Care	85.3	82.6	-	74.6	77.7	-	83.4	82.4	-	<0.001	E>S	-	-
18	Foot Doctor	85.8	81.2	-	78.0	77.0	-	82.0	80.7	-	-	-	-	-
19a	Home Health Aide, Personal Care Aide	87.3	86.0	-	84.5	86.7	-	88.2	89.7	-	-	-	-	-
19b	Home Health Agency, Personal Care Agency	81.0	79.7	-	80.0	79.3	-	83.0	86.2	-	-	-	-	-
20	Care Manager/Case Manager	88.9	84.8	-	80.8	82.0	-	88.5	85.5	-	<0.001	E>S	-	-
21a	Regular Visiting Nurse/Registered Nurse	88.3	82.8	▼	78.8	81.0	-	86.1	88.2	-	<0.001	E>S	-	-
21b	Covering/On-call nurse	82.0	76.8	-	72.6	71.9	-	84.0	83.4	-	-	-	<0.001	O>S
22	Physical Therapist	83.8	76.6	-	71.1	69.8	-	84.9	78.5	-	-	-	-	-
23	Occupational Therapist	80.1	69.6	-	62.2	64.4	-	82.7	76.5	-	<0.001	E>S	-	-
24	Speech Therapist	65.8	48.4	-	52.0	55.0	-	82.9	70.7	-	-	-	-	-
25	Social Worker	86.7	75.7	▼	70.7	72.1	-	82.2	80.7	-	<0.001	E>S	-	-
26	Medical Supplies and Equipment	90.2	87.4	-	76.8	83.3	-	84.6	86.1	-	<0.001	E>S	-	-
27	Audiology/Hearing Aids	77.8	66.0	-	51.6	61.5	-	62.2	67.2	-	<0.001	E>S	-	-
28	Home Delivered Meals/Meals on Wheels	76.9	67.2	-	55.8	55.4	-	79.4	77.1	-	-	-	-	-
29	Meals served at the Day Health Center	81.5	70.2	▼	66.7	61.7	-	75.0	78.1	-	-	-	-	-
30	Day Health Center Activities	80.2	74.4	-	65.9	64.9	-	88.9	85.5	-	<0.001	O>S	<0.001	O>S
31	Transportation Services	84.7	79.6	-	76.6	73.7	-	75.5	77.8	-	<0.001	E>O	-	-
32	Nursing Home	63.8	59.3	-	56.5	64.2	-	93.8	80.4	-	<0.001	O>S	-	-
33	Pharmacy Services	92.0	89.4	-	84.7	89.0	-	89.7	91.7	-	-	-	-	-
34	Nutritionist	84.3	77.1	-	64.7	69.4	-	78.6	83.9	-	<0.001	E>S	-	-

E=English; S=Spanish; O=Other
 - Not statistically significant
 ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B20: Timeliness of Care – Comparison by Primary Language Spoken

Item	Description	E	E	2011 vs. 2013	S	S	2011 vs. 2013	O	O	2011 vs. 2013	English vs. Spanish vs. Other			
		2011	2013		2011	2013		2011	2013		2011	DIFF.	2013	DIFF.
Section 2B: Timeliness (Always/Usually)		(N =1,009)	(N =1,268)		(N =369)	(N =573)		(N =395)	(N =623)		P-value		P-value	
		%	%		%	%		%	%					
35	Home Health Aide, Personal Care Aide	79.1	80.4	-	76.7	75.4	-	81.1	77.4	-	-	-	-	-
36	Care Manager/Case Manager	72.2	71.5	-	72.6	69.3	-	76.1	66.1	-	-	-	-	-
37a	Regular Visiting Nurse/Registered Nurse	72.8	71.8	-	69.8	66.5	-	76.3	68.5	-	-	-	-	-
37b	Covering/On-call nurse	65.8	66.9	-	61.7	61.7	-	65.3	61.1	-	-	-	-	-
38	Physical Therapist	62.5	64.0	-	53.2	48.8	-	67.3	48.5	▼	-	-	<0.001	E>S,O
39	Occupational Therapist	55.6	62.0	-	44.3	45.9	-	69.8	44.4	-	-	-	-	-
40	Speech Therapist	30.3	53.9	▲	42.3	46.5	-	77.8	42.2	-	<0.001	O>E	-	-
41	Social Worker	65.6	58.8	-	61.0	56.8	-	64.7	54.0	-	-	-	-	-
42	Home Delivered Meals/Meals on Wheels	69.3	70.6	-	50.9	49.5	-	67.7	45.2	-	-	-	<0.001	E>S,O
43a	Transportation: TO Day Center	74.3	66.5	-	60.0	57.4	-	62.2	62.0	-	-	-	-	-
43b	Transportation: FROM Day Center	72.9	68.0	-	60.2	58.3	-	63.2	64.3	-	-	-	-	-
43c	Transportation: TO the doctor	74.2	71.4	-	72.0	68.0	-	65.2	63.7	-	-	-	-	-
43d	Transportation: FROM the doctor	70.4	68.2	-	70.5	68.4	-	62.5	63.4	-	-	-	-	-
44	Medical Supplies and Equipment	77.1	72.3	-	69.5	69.1	-	63.6	64.4	-	<0.001	E>O	-	-
45	Pharmacy Services	81.3	77.3	-	80.4	79.2	-	75.9	75.3	-	-	-	-	-
46++	Audiology/Hearing Aids		62.6	-		61.2	-		46.2	-			-	-

E=English; S=Spanish; O=Other
 - Not statistically significant
 ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B21: Timely Access to Routine Appointments (within 1 month) – Comparison by Primary Language Spoken

		E	E	2011 vs. 2013	S	S	2011 vs. 2013	O	O	2011 vs. 2013	English vs. Spanish vs. Other			
Item	Description	2011 (N =1,009)	2013 (N =1,268)		2011 (N =369)	2013 (N =573)		2011 (N =395)	2013 (N =623)		2011 P-value	DIFF.	2013 P-value	DIFF.
Section 2C: Access to Care - Routine Appointments (Less than 1 month)		%	%		%	%		%	%					
47	Regular doctor	63.4	61.3	-	47.5	49.6	-	57.0	62.9	-	<0.001	E>S	<0.001	E,O>S
48	Dentist	49.9	51.0	-	34.8	35.9	-	40.4	47.8	-	<0.001	E>S	<0.001	E>S
49	Eye Care	45.9	48.1	-	32.9	31.2	-	41.2	45.6	-	-	-	<0.001	E,O>S
50	Foot Doctor	47.9	49.4	-	37.4	34.3	-	41.4	46.4	-	-	-	<0.001	E>S
51++	Audiology/Hearing Aids		55.5	-		45.8	-		48.4	-			-	-

- E=English; S=Spanish; O=Other
- ++ New question in 2013
- E=English; S=Spanish; O=Other
- Not statistically significant
- ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

Table B22: Timely Access to Urgent Appointments (same day) – Comparison by Primary Language Spoken

		E	E	2011 vs. 2013	S	S	2011 vs. 2013	O	O	2011 vs. 2013	English vs. Spanish vs. Other			
Item	Description	2011 (N =1,009)	2013 (N =1,268)		2011 (N =369)	2013 (N =573)		2011 (N =395)	2013 (N =623)		2011 P-value	DIFF.	2013 P-value	DIFF.
Section 2D: Access to Care - Urgent Appointments (Same day)		%	%		%	%		%	%					
52	Regular doctor	48.2	40.6	-	54.2	48.6	-	55.3	51.95	-	-	-	-	-
53	Dentist	22.2	24.5	-	35.8	30.8	-	25.34	23.56	-	-	-	-	-
54	Eye Care	24.0	20.7	-	30.8	26.7	-	18.99	21.12	-	-	-	-	-
55	Foot Doctor	20.7	26.1	-	28.9	30.1	-	23.57	19.66	-	-	-	-	-
56++	Audiology/Hearing Aids		32.9	-		31.9	-		20.0	-			-	-

- E=English; S=Spanish; O=Other
- ++ New question in 2013
- E=English; S=Spanish; O=Other
- Not statistically significant
- ▲/▼ Represents a significantly higher/lower rate in 2013 versus 2011 (p < .001)

APPENDIX C: MULTIPLE REGRESSION RESULTS

Table C1: Logistic Regression on Domain 1 – Plan Rating (N=2,110)

Variables		2013		Reference
		Odds Ratio	P	
Plan Type	PACE	1.04	-	Partially Capitated
	MAP	1.13	-	Partially Capitated
Race/ Ethnicity	Black	0.80	-	White
	Hispanic	0.66	0.05	White
	Asian	0.69	-	White
	Other	0.78	-	White
Gender	Female	0.96	-	Male
Education	High School+	0.65	0.01	Up to some High School
Health	Good/Very good	2.75	0.0001	Very poor/Poor/Fair
Living Situation	At home, with others	1.26	-	At home, alone
	Nursing home	0.96	-	At home, alone
Age	65+ yrs old	1.00	-	18-64 yrs old

C-statistic = 0.633

Plan rating: 1=Excellent/Good; 0=Fair/Poor

Table C2: Multiple Linear Regression on Domain 2 – Quality of Care (N=2,137)

Variables		2013			Reference
		B	Std. Error	P	
Plan Type	PACE	-0.047	0.036	-	Partially Capitated
	MAP	-0.046	0.037	-	Partially Capitated
Race/ Ethnicity	Black	-0.201	0.039	0.0001	White
	Hispanic	-0.194	0.036	0.0001	White
	Asian	-0.234	0.043	0.0001	White
	Other	-0.168	0.122	-	White
Gender	Female	0.026	0.031	-	Male
Education	High School+	-0.041	0.029	-	Up to some High School
Health Status	Good/Very good	0.198	0.028	0.0001	Very poor/Poor/Fair
Living Situation	At home, with others	0.033	0.027	-	At home, alone
	Nursing home	-0.041	0.076	-	At home, alone
Age	65+ yrs old	-0.001	0.035	-	18-64 yrs old

Adjusted R²=0.0403

Quality of Care ratings: 1=Poor, 2=Fair, 3=Good, 4=Excellent

Table C3: Multiple Linear Regression on Domain 3 – Timeliness of Care (N=2,088)

Variables		2013			Reference
		B	Std. Error	P	
Plan Type	PACE	0.033	0.051	-	Partially Capitated
	MAP	-0.091	0.053	-	Partially Capitated
Race/ Ethnicity	Black	-0.024	0.056	-	White
	Hispanic	-0.025	0.052	-	White
	Asian	-0.167	0.062	0.01	White
	Other	0.004	0.177	-	White
Gender	Female	0.066	0.044	-	Male
Education	High School+	-0.021	0.041	-	Up to some High School
Health Status	Good/Very good	0.026	0.040	-	Very poor/Poor/Fair
Living Situation	At home, with others	-0.087	0.038	0.05	At home, alone
	Nursing home	-0.156	0.113	-	At home, alone
Age	65+ yrs old	-0.021	0.051	-	18-64 yrs old

Adjusted R² = 0.006

Timeliness ratings: 1=Never, 2=Sometimes, 3=Usually, 4=Always

Table C4: Multiple Linear Regression on Domain 4 – Access to Routine Appointments (N=1,990)

Variables		2013			Reference
		B	Std. Error	P	
Plan Type	PACE	0.023	0.042	-	Partially Capitated
	MAP	0.054	0.042	-	Partially Capitated
Race/ Ethnicity	Black	-0.192	0.044	0.0001	White
	Hispanic	-0.287	0.041	0.0001	White
	Asian	-0.165	0.050	0.01	White
	Other	-0.331	0.138	0.05	White
Gender	Female	0.061	0.035	-	Male
Education	High School+	0.068	0.033	0.05	Up to some High School
Health Status	Good/Very good	0.008	0.032	-	Very poor/Poor/Fair
Living Situation	At home, with others	-0.009	0.031	-	At home, alone
	Nursing home	-0.074	0.093	-	At home, alone
Age	65+ yrs old	0.022	0.040	-	18-64 yrs old

Adjusted R² = 0.037

Access to Routine Appointment ratings: 3=Less than 1 month, 2=1-3 months, 1=Longer than 3 months

Table C5: Multiple Linear Regression on Domain 5 – Access to Urgent Appointments (N=1,704)

Variables		2013			Reference
		B	Std.	P	
Plan Type	PACE	-0.020	0.045	-	Partially Capitated
	MAP	-0.066	0.045	-	Partially Capitated
Race/ Ethnicity	Black	-0.225	0.049	0.0001	White
	Hispanic	-0.082	0.046	-	White
	Asian	-0.182	0.057	0.01	White
	Other	-0.428	0.147	0.01	White
Gender	Female	0.006	0.039	-	Male
Education	High School+	-0.026	0.037	-	Up to some High School
Health Status	Good/Very good	-0.003	0.036	-	Very poor/Poor/Fair
Living Situation	At home, with others	0.017	0.033	-	At home, alone
	Nursing home	-0.126	0.098	-	At home, alone
Age	65+ yrs old	0.100	0.044	0.05	18-64 yrs old

Adjusted R² = 0.0192

Access to Urgent Appointment Ratings: 3=Same day, 2=1-3 days, 1=4 days or longer

Table C6: Logistic Regression on Domain 6 - Advance Directives (N=2,040)

Variables		2013		Reference
		Odds Ratio	P	
Plan Type	PACE	3.25	0.0001	Partially Capitated
	MAP	1.42	0.05	Partially Capitated
Race/ Ethnicity	Black	0.76	-	White
	Hispanic	0.71	0.05	White
	Asian	0.37	0.0001	White
	Other	1.19	-	White
Gender	Female	1.50	0.001	Male
Education	High School+	1.09	-	Up to some High School
Health Status	Good/Very good	1.36	0.05	Very poor/Poor/Fair
Living Situation	At home, with others	1.49	0.001	At home, alone
	Nursing home	3.29	0.05	At home, alone
Age	65+ yrs old	1.19	-	18-64 yrs old

C-statistic = 0.673

Advanced directives: 1=At least one "Yes" among Q69, Q70 and Q71.

Table C7: Multiple Linear Regression on Domain 7 – Plan Effectiveness (N=1,740)

Variables		2013			Reference
		B	Std. Error	P	
Plan Type	PACE	0.022	0.044	-	Partially Capitated
	MAP	0.009	0.047	-	Partially Capitated
Race/ Ethnicity	Black	-0.143	0.049	0.01	White
	Hispanic	-0.161	0.047	0.001	White
	Asian	-0.090	0.054	-	White
	Other	-0.010	0.155	-	White
Gender	Female	-0.012	0.039	-	Male
Education	High School+	-0.086	0.037	0.05	Up to some High School
Health Status	Good/Very good	0.225	0.036	0.001	Very poor/Poor/Fair
Living Situation	At home, with others	-0.019	0.034	-	At home, alone
	Nursing home	-0.160	0.092	-	At home, alone
Age	65+ yrs old	-0.052	0.045	-	18-64 yrs old

Adjusted R² = 0.0272

Plan Effectiveness: 4=Excellent; 3=Good; 2=Fair; 1=Poor

APPENDIX D: SURVEY TOOL

2. Your Care Providers

A) Quality of your Care Providers

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

Note that we are asking you to rate the quality of these services or supplies. Timeliness questions (how quickly you receive these services) follow.

In some plans, the care manager (20) and the visiting nurse (21a) may be the same person. If they are, rate the person under BOTH Care Manager and Visiting Nurse.

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

	1	2	3	4	5
15. Your regular doctor					
16. Dentist					
17. Eye Care (Having your eyes checked and getting glasses or contact lenses)					
18. Foot Doctor					
19a. Home Health AIDE, Personal Care AIDE (aide that comes to your house to take care of you)					
19b. Home Health AGENCY, Personal Care AGENCY (company that your home health aide works for)					
20. Care Manager / Case Manager (person who prepares your plan of care)					
21a. Regular Visiting Nurse / Registered Nurse (comes to your house for regular visits)					

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

B) Timeliness

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

In some plans, the care manager (36) and the visiting nurse (37a) may be the same person. If they are, rate the person under BOTH Care Manager and Visiting Nurse.

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

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

C) Access

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

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

	NOT APPLICABLE	LONGER THAN 3 MONTHS	1 TO 3 MONTHS	LESS THAN 1 MONTH
47. Your regular doctor	1	2	3	4
48. Dentist	1	2	3	4
49. Eye Care (Having your eyes checked and getting glasses or contact lenses)	1	2	3	4
50. Foot Doctor	1	2	3	4
51. Audiology / Hearing Aids	1	2	3	4
In the last 6 months, when you needed care RIGHT AWAY, how long did you usually have to wait between trying to get care and actually seeing providers?				
	NOT APPLICABLE	4 DAYS OR LONGER	1 TO 3 DAYS	SAME DAY
52. Your regular doctor	1	2	3	4
53. Dentist	1	2	3	4
54. Eye Care (Having your eyes checked and getting glasses or contact lenses)	1	2	3	4
55. Foot Doctor	1	2	3	4
56. Audiology / Hearing Aids	1	2	3	4

3. About You

57. I am content with the quality of my life right now.

- ① Not at all
- ② A little bit
- ③ Somewhat
- ④ Quite a bit
- ⑤ Very much

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

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

59. What is your gender?

- ① Male
- ② Female

60. What is your age?

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

61a. Are you of Hispanic or Latino origin or descent?

- ① Yes
- ② No

61b. What is your race (MARK ALL THAT APPLY)

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

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

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

63. Education level completed?

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

64. Where do you live?

- ① At home
- ② Nursing home (skip to #66)

65. Do you live?

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

66. Did someone help you to complete this survey?

- ① Yes
- ② No (skip to #69)

67. Who helped you (MARK ALL THAT APPLY)

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

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

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

69. Has anyone from the health plan talked to you about appointing someone to make decisions about your health if you are unable to do so?

- ① Yes
- ② No
- ③ Not sure

70. Do you have a legal document appointing someone to make decisions about your health care if you are unable to do so?

- ① Yes
- ② No ====> End
- ③ Not sure ====> End

71. Does the health plan have a copy of this document?

- ① Yes
- ② No
- ③ Not sure

Thank you for participating in this survey

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