

Report of Results

for

Mercy Care Adult Population
2024 (MY 2023) CAHPS® 5.1H Medicaid Member Experience Survey

Prepared for:

Mercy Care (June 4, 2024)

Prepared by:

Center for the Study of Services 1625 K Street NW, Suite 800 Washington, DC 20006



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INTRODUCTION

Introduced by the Agency for Healthcare Research and Quality (AHRQ) in the mid-1990s, the Consumer Assessment of Healthcare Providers and Systems (CAHPS) program encompasses the full range of standardized surveys that ask consumers to report on and evaluate their experiences with health care. These surveys cover topics that are important to consumers, such as accessibility of services and provider communication skills.

The National Committee for Quality Assurance (NCQA) uses the Health Plan CAHPS survey in its Health Plan Accreditation Program as part of the Healthcare Effectiveness Data and Information Set (HEDIS®). HEDIS measures health plan performance on important dimensions of care and service and is designed to provide purchasers and consumers with the information they need to reliably compare the performance of health care plans. The Health Plan CAHPS survey represents the member experience component of the HEDIS measurement set. The survey measures the member experience of care and gives a general indication of how well the health plan meets members' expectations. Surveyed members are asked to rate various aspects of the health plan based on their experience with the plan during the previous six months. In addition, the survey is used to collect data on some measures from the HEDIS Effectiveness of Care domain.

EXECUTIVE SUMMARY

In 2023, Aetna Better Health contracted with the Center for the Study of Services (CSS), an NCQA-certified survey vendor, to administer the CAHPS® 5.1H Adult Medicaid Survey. The purpose of the survey is to assess members' experience with their health plan and health care. The overall goal of the survey is to provide actionable performance feedback to help the plan improve the member experience.

CSS administered the Adult Medicaid version of the CAHPS Health Plan Survey on behalf of Mercy Care between February 13 and May 10, 2024.

The final survey sample for Mercy Care included 2,700 members. During the survey fielding period, 430 sample members completed the survey. After the final survey eligibility criteria were applied, the resulting NCQA response rate was 16.26%. (See the *Survey Response Rate* section on page 14 for the response rate formula used by NCQA.)

This *Executive Summary* focuses on key CAHPS performance metrics, including year-over-year changes in results and comparisons to relevant national multi-plan benchmarks. Unofficial estimates of NCQA's 2024 Health Plan Ratings (HPR), calculated by CSS, are provided for reference. Also identified are top organizational priorities for quality improvement based on CSS's *Key Driver Analysis*.

KEY SURVEY MEASURE RESULTS

This section provides a high-level overview of Mercy Care survey results compared to prior-year and national multi-plan benchmark rates. Table 1 highlights statistically significant improvements and declines in reported rates. Table 2 compares performance to national multi-plan benchmarks. Both tables are limited to reportable rating and composite measures (i.e., those that reached the minimum denominator of 100 or more valid responses required by NCQA). The comparisons are based on the rates of Mercy Care Adult sample members rating their experience favorably (i.e., 9 or 10 for the overall rating questions and *Usually* or *Always* for all other CAHPS measures).

Table 1. Mercy Care Adult Members: Statistically Significant Improvements or Declines in Performance Compared to 2023

Reportable* Rate IMPROVED	Reportable* Rate DECLINED
Plan not surveyed in 2023	Plan not surveyed in 2023

^{*} All CAHPS ratings and composites reached the reportable denominator of 100 responses and were eligible for inclusion in this summary. Effectiveness of Care measures were not considered.

Table 2. Mercy Care Adult Members: Statistically Significant Differences in Performance Compared to National Multi-Plan Benchmarks

Reportable* Rate ABOVE Benchmark	Reportable* Rate BELOW Benchmark								
Benchmark: 2024 CSS Adult Medicaid Average									
Getting Needed Care (86.04% vs. 80.58% [+5.46 points])									
Rating of Doctor (73.80% vs. 68.41% [+5.38 points])	No statistically simulficant differences as a managed to be used used.								
Rating of Health Care (63.45% vs. 56.78% [+6.67 points])	No statistically significant differences compared to benchmark								
Rating of Health Plan (69.25% vs. 59.15% [+10.1 points])									
Benchmark: 2023 (MY 2022) NCQA Quality Compass National Average (All Lines of Business)									
Getting Needed Care (86.04% vs. 80.99% [+5.05 points])									
Rating of Doctor (73.80% vs. 67.88% [+5.92 points])	No statistically significant differences as assessed to be achorable								
Rating of Health Care (63.45% vs. 55.65% [+7.8 points])	No statistically significant differences compared to benchmark								
Rating of Health Plan (69.25% vs. 61.24% [+8.01 points])									

^{*} All CAHPS ratings and composites reached the reportable denominator of 100 responses and were eligible for inclusion in this summary. Effectiveness of Care measures were not considered.

ESTIMATED NCQA 2024 HEALTH PLAN RATINGS

Estimated 2024 Health Plan ratings are provided in Table 3 below for all relevant measures regardless of measure denominator. Since the most recent NCQA benchmarks available to date are the prior-year (2023, or MY 2022) Quality Compass benchmarks, the official HPR ratings scheduled to be released in the fall of 2024 will likely diverge from these preliminary estimates.

Table 3. Mercy Care Adult Members: Estimated 2024 NCQA Health Plan Ratings

Estimated* 2024 NCQA Health Plan Rating | 大文文文 | Rating of Health Care, Rating of Health Plan | 大文文文 | Getting Needed Care, Getting Care Quickly, Rating of Doctor

^{*} Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024. Note: estimated star ratings are provided for all applicable CAHPS measures regardless of measure denominator. This summary excludes Effectiveness of Care measures.

QUALITY IMPROVEMENT PRIORITIES

CSS's Key Driver Analysis identifies the key member experience touch points that shape members' overall assessment of the health plan, as captured by the Rating of Health Plan question at the end of the survey. To the extent that the plan can improve these experiences, the overall rating of the plan will reflect these gains. Table 4 identifies the quality improvement opportunities that will result in the largest incremental gains in the Rating of Health Plan measure for Mercy Care.

Table 4. Mercy Care Adult Members: Top Priorities for Quality Improvement

Top Priorities for Quality Improvement

- 1. Improving health plan provider network (highly-rated specialists)
- 2. Improving health plan provider network (highly-rated personal doctors)
- 3. Improving member access to care (ease of getting needed care, tests, or treatment)
- 4. Improving member access to care (getting urgent care)

The remainder of this report examines these and other findings in more detail.

WHAT IS NEW IN 2024

NCQA POLICY UPDATES

NCQA retired the *Flu Vaccinations for Adults Ages 18-64 (FVA)* measure for 2024 (MY 2023). There were no other substantive changes to NCQA's 2024 (MY 2023) HEDIS/CAHPS questionnaires or survey administration protocols.

CSS REPORT UPDATES

CSS made the following updates to the 2024 CAHPS Results Report:

- The report structure and appearance have been modified to improve accessibility. Specific updates include a larger font size, a higher-contrast color palette, a simplified referencing scheme for charts and tables, and improved navigation.
- The Key Driver Model has been refreshed using the most recent industry data (see Key Driver Analysis section on page 59).
- The Health Plan Quality Improvement Resources section has been updated and expanded (see page 63).

ABOUT THIS REPORT

The key features of this 2024 CAHPS results report are highlighted below.

- CSS calculated survey results following the NCQA scoring guidelines outlined in *HEDIS 2024, Volume 3: Specifications for Survey Measures*. All measure results adhere to these scoring guidelines but are presented regardless of denominator.
- Unofficial estimates of NCQA's 2024 Health Plan Ratings (HPR stars) are provided in advance of their planned release by NCQA in the fall of 2024.
 The CSS-calculated HPR stars are based on the 2023 (MY 2022) Quality Compass national benchmarks and are reported regardless of the measure denominator. Since the most recent NCQA benchmarks available to date are the prior-year (2023, or MY 2022) Quality Compass benchmarks, the official HPR ratings scheduled to be released in the fall of 2024 will likely diverge from these preliminary estimates.
- Throughout the report, the 2024 Mercy Care survey results are compared to national multi-plan benchmark rates, represented by the 2024 CSS
 Adult Medicaid Average and the 2023 (MY 2022) NCQA Quality Compass Adult Medicaid National Average for All Lines of Business (LOBs). The 2024
 CSS Adult Medicaid Average was calculated by pooling survey responses across 20 Adult Medicaid plans surveyed and selected by CSS to represent
 the industry average. The 2023 (MY 2022) NCQA Quality Compass Adult Medicaid National Average (All LOBs) is made up of the Adult Medicaid plans
 that submitted data to NCQA in 2023.
- Executive Summary (page 5) provides a high-level overview of survey findings for Mercy Care. It highlights the areas where Mercy Care performs significantly above or below the aforementioned national multi-plan benchmarks. If prior-year survey results are available, any statistically significant improvements or declines in key survey measures are also noted. Top organizational priorities for quality improvement based on CSS's Key Driver Analysis are identified.
- Summary of Survey Results (page 21) presents the 2024 Mercy Care survey scores on key measures, including question summary rates, global proportions, and estimated HPR ratings; changes in rates and global proportion scores from the previous year (if applicable); and comparisons to relevant national multi-plan benchmarks. Statistically significant differences in scores are noted.
- Detailed Performance Charts (page 23) are provided for the overall rating questions, composite measures, and individual survey items representing the various CAHPS domains of care. The 2024 Mercy Care results are compared to the 2024 CSS Adult Medicaid Average on all measures. Where appropriate, the 2024 results are also compared to the 2023 (MY 2022) NCQA Quality Compass Adult Medicaid National Average (All LOBs) and performance percentiles. Where available, a three-year trend in scores is also shown.

- A section on the *Effectiveness of Care* measures (page 47) includes comparisons to prior-year results (if available) as well as to the 2024 CSS Adult Medicaid Average rates.
- Membership Profile and Analysis of Plan Ratings by Member Segment (page 49) compares the 2024 Mercy Care respondent profile to the relevant national multi-plan distribution(s) of demographic characteristics and utilization variables. Variation in the Rating of Health Plan measure by member segment is examined.
- Key Driver Analysis (page 59) identifies the touch points of member experience that are most strongly related to the overall Rating of Health Plan measure. The CSS Key Driver Model quantifies the contribution of each key driver to the overall Rating of Health Plan. The 2024 Mercy Care results on each key driver are compared to the best result among the 20 plans contributing to the 2024 CSS Adult Medicaid Average, yielding a measure of available room for improvement on each touch point. The result is weighted by the key driver's contribution to the overall Rating of Health Plan. Opportunities for improvement are prioritized based on the incremental gain in the Mercy Care Rating of Health Plan measure expected due to improved performance on the individual key drivers. A separate section of the report, Health Plan Quality Improvement Resources (page 63), provides some helpful resources for health plan quality managers.
- Appendices (starting on page 70) include:
 - Score calculation guidelines and methodology
 - A glossary of terms
 - A one-page Survey Results at a Glance summary
 - Detailed cross-tabulations of survey responses for every survey question, with additional tables summarizing performance on key survey measures
 - A copy of the survey instrument and supporting materials

SURVEY METHODOLOGY

SURVEY PROTOCOL AND TIMELINE

CSS administered the Adult Medicaid version of the 2024 CAHPS Health Plan Survey on behalf of Mercy Care in accordance with the NCQA methodology detailed in *HEDIS 2024, Volume 3: Specifications for Survey Measures* and *Quality Assurance Plan for HEDIS 2024 Survey Measures*. The survey can be administered using a mail-only or a mixed (mail with telephone follow-up) methodology. These standard survey protocols include two questionnaire mailings, each followed by a reminder postcard. Depending on the protocol chosen, non-respondents are either sent a third, final survey package (mail-only methodology) or contacted by telephone (mixed methodology).

Mercy Care elected to use an enhanced mixed methodology with email reminders to non-respondents in addition to the standard reminder mailings. An optional prenotification postcard was mailed to all sample members on February 13. Email invitations with a link to the online survey were sent to eligible members on February 13, February 16, and February 21. Members could complete the survey online by scanning a personalized QR code provided on the mailing materials.

The key milestones of the CAHPS data collection protocol are provided below:

- An initial survey package was mailed on February 16.
- An initial reminder/thank-you postcard was mailed on February 24.
- A replacement survey package was mailed on March 26.
- A second reminder/thank-you postcard was mailed on April 1.
- A telephone follow-up phase targeting non-respondents, with up to six telephone follow-up attempts at different times of the day and on different days of the week, started on March 29.
- Data collection closed on May 10.

Survey results were submitted to NCQA on May 24, 2024.

SURVEY MATERIALS

CSS designed all member-facing materials (see *Appendix D. Survey Materials*) for Aetna Better Health in accordance with the NCQA guidelines detailed in *HEDIS 2024, Volume 3: Specifications for Survey Measures* and *Quality Assurance Plan for HEDIS 2024 Survey Measures*. NCQA-approved text was used for all materials. Prior to being customized with the health plan name, logo, and other branding elements, all CSS-designed survey materials templates were approved by NCQA.

The survey instrument was the Adult Medicaid version of the Health Plan CAHPS 5.1H survey. In addition to English, all sample members received a copy of the survey in Spanish. The cover letter was also printed in both languages.

The outer envelope used for survey mailings was manufactured from blue paper stock and marked "RESPONSE NEEDED" or "FINAL REMINDER – PLEASE RESPOND!", depending on the mailing wave, to improve the likelihood of response. Each survey package included a postage-paid business reply envelope.

SAMPLE SELECTION

For the Adult Medicaid survey, sample-eligible members were those who were 18 years old or older as of December 31, 2023; were currently enrolled; had been continuously enrolled for six months (with no more than one enrollment break of 45 days or less); and whose primary coverage was through Medicaid.

Prior to sampling, CSS carefully inspected the member file(s) and noted any errors or irregularities found (such as incomplete contact information or subscriber numbers). Once the quality assurance process had been completed, CSS processed member addresses through the USPS National Change of Address (NCOA) service to ensure that the mailing addresses were up to date. The final sample was generated following the NCQA systematic sampling methodology, with no more than one member per household selected to receive the survey. CSS assigned each sampled member a unique identification number, which was used to track the member's progress, or survey disposition, throughout the data collection process.

The standard NCQA-prescribed sample size for Adult Medicaid plans is 1,350 members. NCQA's sampling methodology does not allow disenrolled members to be removed from the sample after the start of survey administration. Health plans that were unable to identify disenrollees prior to December 31, 2023, were advised to oversample (i.e., increase their sample size to compensate for members expected to leave their plan by the time the survey was fielded). Oversampling could also be used to obtain more completed surveys. Mercy Care requested to oversample by 100%. The final survey sample for Mercy Care included 2,700 members.

DATA CAPTURE

Returned questionnaires were recorded using optical scanning. If the scanning technology was unable to identify the specific response option selected with a predefined degree of certainty, trained data entry operators were employed to ensure that each such response was accurately recorded.

Computer Assisted Telephone Interviewing (CATI) technology was used to electronically capture survey responses obtained during telephone interviews. Members were able to complete the telephone interview in either English or Spanish. CATI supervisors maintained quality control by monitoring the telephone interviews and responses captured by interviewers in real time and by auditing recorded interviews. At least 10% of the interviews were monitored by supervisors.

Due to the multiple outreach attempts, multiple survey responses could be received from the same sample member. In those cases, only one survey response (the most complete survey) was included in the final analysis dataset.

SURVEY RESPONSE RATE

During the survey fielding period, 430 sample members completed the survey. After the final survey eligibility criteria were applied, the resulting NCQA response rate was 16.26%. Additional detail on sample member status (disposition) at the end of data collection is provided in Table 5 below.

Table 5. 2024 Mercy Care Adult Medicaid CAHPS Survey: Sample Member Dispositions and Response Rate

Sample Member Disposition	2024 Your	Organization	2024 CSS Adult Medicaid Average		
		nd Percent of	Percent of Total Initial		
	Initial	Sample	Sample		
Initial Sample	2,700	100.00%	100.00%		
Complete and Eligible –Mail	215	7.96%	7.23%		
Complete and Eligible – Phone*	123	4.56%	4.78%		
Complete and Eligible – Internet**	92	3.41%	2.36%		
Complete and Eligible – Total	430	15.93%	14.37%		
Eligible Population criteria not met	33	1.22%	1.49%		
Incomplete (but Eligible)	72	2.67%	2.98%		
Language barrier	7	0.26%	0.38%		
Mentally or physically incapacitated	14	0.52%	0.29%		
Deceased	2	0.07%	0.08%		
Refusal	54	2.00%	3.55%		
Nonresponse after maximum attempts	2,015	74.63%	75.13%		
Added to Do Not Call (DNC) list	73	2.70%	1.74%		
NCQA Response Rate***		16.26%	14.70%		

^{*} Applies to plans following mixed methodology.

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^{**} Any sample members who called and requested another survey were provided a unique login ID to complete the survey online. Members could also access the online survey by scanning a QR code from their mailed survey package or by clicking on the survey link in their email invitation.

^{***} NCQA response rate = Complete and Eligible Surveys/[Complete and Eligible + Incomplete (but Eligible) + Refusal + Nonresponse after maximum attempts + Added to Do Not Call (DNC)

Table 6 provides a more detailed breakdown of completed surveys by language, reflecting the language(s) in which the survey was offered. In addition to English, all sample members received a copy of the survey in Spanish. The cover letter was also printed in both languages. Members were able to complete the telephone interview in either English or Spanish.

Table 6. 2024 Mercy Care Adult Medicaid CAHPS Survey: Completed Surveys By Language

Complete and Eligible Surveys by	2024 Your Organization					
Language	Number	Percent				
Complete and Eligible – English	372	86.5%				
Complete and Eligible – Spanish	58	13.5%				
Complete and Eligible -Total	430	100.0%				

499300

SATISFACTION WITH THE EXPERIENCE OF CARE

PATIENT EXPERIENCE OF CARE MEASURES

This section includes all CAHPS measures for which NCQA calculates results, regardless of whether the measure is featured in NCQA's Health Plan Ratings. Measures that are reported in HPR (i.e., assigned a star rating) are marked with a star symbol (★) below. Any HPR scores that appear in this report were calculated by CSS and should be treated as unofficial.

GLOBAL RATING QUESTIONS

CAHPS Health Plan Survey (version 5.1H) includes four global rating questions that utilize a scale of 0 to 10, representing the lowest and highest possible ratings. Results are based on the proportion of members selecting one of the top two ratings (9 or 10) to align with NCQA's 2024 Health Plan Ratings Methodology. For convenience and trending, the proportion of respondents rating 8, 9, or 10 is also provided.

- * Rating of Personal Doctor (0 = worst personal doctor possible; 10 = best personal doctor possible) is included in HPR as part of the Satisfaction With Plan Physicians sub-composite.
- Rating of Specialist Seen Most Often (0 = worst specialist possible; 10 = best specialist possible) was retired from HPR in 2023 for the Medicaid product line.
- * Rating of All Health Care (0 = worst health care possible; 10 = best health care possible) is included in HPR as part of the Satisfaction With Plan and Plan Services sub-composite.
- * Rating of Health Plan (0 = worst health plan possible; 10 = best health plan possible) is included in HPR as part of the Satisfaction With Plan and Plan Services sub-composite.

CAHPS COMPOSITE MEASURES

This section focuses on **CAHPS composites**, which are distinct from HPR composites. NCQA calculates results for several CAHPS composite measures. CAHPS composites combine results from related survey questions into a single measure to summarize health plan performance in the areas listed below.

- Getting Needed Care combines two survey questions that address member access to care. Both questions use a Never, Sometimes, Usually, or Always response scale, with Always being the most favorable response. This measure is reported in HPR as part of the Getting Care HPR subcomposite. Results are based on the proportion of members answering the following questions as Usually or Always:
 - In the last 6 months, how often was it easy to get the care, tests, or treatment you needed?
 - In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?
- ★ Getting Care Quickly combines responses to two survey questions that address the timely availability of both urgent and check-up/routine care. The questions use a Never, Sometimes, Usually, or Always scale, with Always being the most favorable response. This measure is reported in HPR as part of the Getting Care HPR sub-composite. Results are based on the proportion of members selecting Usually or Always in response to the following questions:
 - In the last 6 months, when you needed care right away, how often did you get care as soon as you needed?
 - In the last 6 months, how often did you get an appointment for a check-up or routine care as soon as you needed?
- **Coordination of Care** is based on a single survey question, which uses a *Never*, *Sometimes*, *Usually*, or *Always* scale, with *Always* being the most favorable response. This measure was retired from HPR in 2023 for the Medicaid product line. Results are based on the proportion of members selecting *Usually* or *Always* in response to the question below:
 - In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?
- **How Well Doctors Communicate** combines responses to four survey questions that address physician communication. The questions use a *Never*, *Sometimes*, *Usually*, or *Always* scale, with *Always* being the most favorable response. Results are reported as the proportion of members answering the following questions as *Usually* or *Always*:
 - In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?
 - In the last 6 months, how often did your personal doctor listen carefully to you?

- In the last 6 months, how often did your personal doctor show respect for what you had to say?
- In the last 6 months, how often did your personal doctor spend enough time with you?
- **Customer Service** combines responses to two survey questions that ask about member experience with the health plan's customer service. The questions use a *Never*, *Sometimes*, *Usually*, or *Always* scale, with *Always* being the most favorable response. Results are reported as the proportion of members selecting *Usually* or *Always* in response to the following questions:
 - In the last 6 months, how often did your health plan's customer service staff give you the information or help you needed?
 - In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect?

CALCULATION AND REPORTING OF RESULTS

QUESTION SUMMARY RATES AND COMPOSITE GLOBAL PROPORTIONS

Question Summary Rates express the proportion of respondents selecting the desired response option(s) on a survey question. Examples include percent selecting *Usually* or *Always* or percent rating *9* or *10*.

Composite Global Proportions express the proportion of respondents selecting the desired response option(s) from a predefined set of two or more related questions on the survey. The proportions are calculated by first determining the relevant proportion for each survey question contributing to the composite and then averaging these proportions across all questions in the composite.

Throughout the report, all question summary rates and composite global proportions are rounded to two decimal places for display purposes (e.g., 0.23456 is displayed as 23.46%). However, all calculations involving rates and proportions, including statistical significance testing, are carried out prior to rounding. For more details on the calculations, please refer to *HEDIS 2024*, *Volume 3: Specifications for Survey Measures* or consult Appendix A.

SURVEY-WIDE 95% MARGIN OF ERROR AND CONFIDENCE INTERVALS FOR MEASURE RESULTS

A margin of error indicates the extent to which survey results reflect the experiences of the entire member population. When different samples from the same population are surveyed, some degree of variation in survey results should be expected. Results will vary more from sample to sample if the sample size is small. Larger samples are more representative of the population and will exhibit less sample-to-sample variation in results. Additionally,

the margin of error depends on the frequency of the reported response (e.g., the proportion of members answering *Yes*, *Usually* or *Always*, *9* or *10*, etc.) and will thus vary from one survey measure to the next. The closer the reported rate is to 50%, the wider the margin of error. As the observed rate moves away from 50% in either direction, the margin of error decreases. For convenience, using the most conservative assumptions about measure rates (i.e., 50%) and the total number of completed surveys (430), the survey-wide 95% margin of error for Mercy Care is estimated to be ±4.73%.

Measure-specific 95% confidence intervals (CI) provided in this report reflect measure rates and denominators observed in this survey sample. A 95% confidence interval around a measure rate indicates that if the same survey was fielded 100 times on different random samples drawn from the same member population, the true population rate would fall within that interval 95 of those times.

ESTIMATED NCQA HEALTH PLAN RATINGS (STAR RATINGS)

NCQA reports Health Plan Ratings to the public on a five-star scale, indicating how well a plan is performing compared to NCQA's Quality Compass national benchmarks (see NCQA's Health Plan Report Cards). Quality measures are organized in HPR by composite (such as *Patient Experience*) and subcomposite (such as *Getting Care, Satisfaction With Plan Physicians,* and *Satisfaction With Plan and Plan Services*). Note that in the context of HPR, the terms "composite" (e.g., *Patient Experience*) and "sub-composite" (*Getting Care, Satisfaction With Plan Physicians,* and *Satisfaction With Plan and Plan Services*) are used differently than in the realm of CAHPS. NCQA's HPR methodology refers to CAHPS composites as "individual measures." For example, the CAHPS composite measure *Getting Care Quickly* is included as an individual measure in the calculation of the HPR sub-composite *Getting Care* and in the HPR *Patient Experience* composite.

Following is the list of *Patient Experience* and *Effectiveness of Care* measures included in NCQA's 2024 Health Plan Ratings:

Table 7. Measures Reported in NCQA's 2024 Health Plan Ratings

HPR Measure	Individual Measures Included in HPR (Assigned a Star Rating)
Patient Experience	
Getting Care	Getting Needed Care (percent <i>Usually</i> or <i>Always</i>)
	Getting Care Quickly (percent <i>Usually</i> or <i>Always</i>)
Satisfaction With Plan Physicians	Rating of Personal Doctor (percent 9 or 10)
	Rating of Specialist Seen Most Often (percent 9 or 10) – Commercial ONLY
	Coordination of Care (percent <i>Usually</i> or <i>Always</i>) – Commercial ONLY

HPR Measure	Individual Measures Included in HPR (Assigned a Star Rating)
Satisfaction With Plan and Plan Services	Rating of Health Plan (percent 9 or 10) Rating of All Health Care (percent 9 or 10)
Effectiveness of Care	Medical Assistance With Smoking and Tobacco Use Cessation – Advising Smokers and Tobacco Users to Quit (percent <i>Sometimes, Usually,</i> or <i>Always</i>) – Medicaid ONLY

According to NCQA's 2024 HPR methodology, star ratings are assigned by comparing health plan performance on each reported measure to the current-year (2024, or MY 2023) Quality Compass National 10th, 33rd, 67th, and 90th Percentiles for All Lines of Business, subject to minimum denominator rules. For details, including measure denominator rules, refer to the measure list and methodology for each applicable Health Plan Ratings year as well as Appendix A of this report. Since the most recent NCQA benchmarks available to date are the prior-year (2023, or MY 2022) Quality Compass benchmarks, the official HPR ratings scheduled to be released in the fall of 2024 will likely diverge from these preliminary estimates. Any estimated star ratings that appear in this report were calculated by CSS and should be treated as unofficial.

NCQA MINIMUM DENOMINATOR SIZE

For a measure result to be reportable by NCQA, it needs to be based on at least 100 valid responses (measure denominator). The denominator for an individual question is the total number of valid responses to that question. The denominator for a composite is the average number of responses across all questions in the composite (note: composite denominators are rounded for display). If the rate denominator is less than 100, NCQA assigns a measure result of "NA." This report presents results for all measures, regardless of denominator size. Additional rules apply to official HPR measure denominators.

COMPARISONS TO NATIONAL MULTI-PLAN BENCHMARKS AND PRIOR-YEAR RESULTS

Throughout the report, the 2024 Mercy Care results are compared to the 2024 CSS Adult Medicaid Average as well as to the 2023 (MY 2022) NCQA Quality Compass Adult Medicaid National Average (All LOBs). The 2024 CSS Adult Medicaid Average was calculated by pooling survey responses across 20 Adult Medicaid plans surveyed and selected by CSS to represent the industry average. The 2023 (MY 2022) NCQA Quality Compass Adult Medicaid National Average (All LOBs) is made up of the Adult Medicaid plans that submitted data to NCQA in 2023.

If available, prior-year survey results are provided for comparison, and year-over-year changes in results are tested for statistical significance. All the statistical tests are conducted at a 95% confidence level (i.e., there is a 95% probability that the observed difference is real and not due to chance).

SUMMARY OF SURVEY RESULTS

Table 8 provides a high-level Mercy Care performance overview of key survey measures. It includes the overall ratings, composite global proportions, and summary rates for additional measures. Where applicable, changes in scores over time and comparisons to relevant national multi-plan benchmarks are reported and tested for statistical significance. While all reported rates are rounded for display, all comparisons are carried out prior to rounding.

Table 8. 2024 Mercy Care Adult Medicaid CAHPS Survey: Patient Experience Measures

	Your Organization							Benchmark Comparisons				Your
Abbreviated Measure Name and Reported Rate	2024		2023		2022		2024 CSS Adult Medicaid Average Rate Difference		2023 (MY 2022) NCQA Quality Compass National Average (All LOBs) Rate Difference		Organization's Estimated 2024 NCQA Health Plan (Star) Rating	
PATIENT EXPERIENCE	Rate	95% CI	(n)	Rate	Change	Rate	Change	Rate	Difference	Rate	Difference	****
												~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~
Getting Care		(: 1.00)	(2.22)					22 = 22/	5 - 103 (00.000/	f = 0=1 (MAMAM
Getting Needed Care (% A+U)	86.04%	(±4.22)	(260)	no data		no data		80.58%	[+5.46] ✓	80.99%		XXXXX
Getting Care Quickly (% A+U)	84.14%	(±4.82)	(221)	no data		no data		79.24%	[+4.90]	80.36%	[+3.78]	MANAM
Satisfaction With Plan Physicians												
Rating of Doctor (% 9+10)	73.80%	(±4.73)	(332)	no data		no data		68.41%	[+5.38] ✓	67.88%	[+5.92] ✓	***
Satisfaction With Plan and Plan Servi	ces											****
Rating of Health Plan (% 9+10)	69.25%	(±4.45)	(413)	no data		no data		59.15%	[+10.10] ✓	61.24%	[+8.01] ✓	****
Rating of Health Care (% 9+10)	63.45%	(±5.54)	(290)	no data		no data		56.78%	[+6.67] ✓	55.65%	[+7.80] ✓	****
ADDITIONAL MEASURES												
Coordination of Care (% A+U)	80.65%	(±5.68)	(186)	no data		no data		83.58%	[-2.93]	84.61%	[-3.96]	
Doctor Communication (% A+U)	93.94%	(±2.90)	(260)	no data		no data		92.65%	[+1.29]	92.49%	[+1.45]	
Customer Service (% A+U)	88.83%	(±4.55)	(184)	no data		no data		88.84%	[-0.00]	89.18%	[-0.35]	Not reported in
Rating of Health Care (% 8+9+10)	82.41%	(±4.38)	(290)	no data		no data		75.79%	[+6.62] 🗸	74.55%	[+7.86] ✓	•
Rating of Doctor (% 8+9+10)	85.84%	(±3.75)	(332)	no data		no data		83.01%	[+2.83]	82.40%	[+3.44]	NCQA Health
Rating of Specialist (% 8+9+10)	83.71%	(±4.87)	(221)	no data		no data		82.52%	[+1.19]	81.40%	[+2.31]	Plan Ratings
Rating of Specialist (% 9+10)	71.95%	(±5.92)	(221)	no data		no data		67.04%	[+4.91]	66.20%	[+5.75]	
Rating of Health Plan (% 8+9+10)	82.08%	(±3.70)	(413)	no data		no data		75.73%	[+6.35] 🗸	77.69%	[+4.39] ✓	

The 95% confidence interval (CI) and the number of valid responses (n, or measure denominator) are provided for the current-year measure rate only. Statistically significant differences between the current-year rate and the comparison rate are marked with a checkmark (\checkmark) symbol.

Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

"No data" indicates that the survey was not conducted or the result is not available for comparison.

DETAILED PERFORMANCE CHARTS

Detailed charts are provided for CAHPS composite global proportions and question summary rates. The charts have the following features:

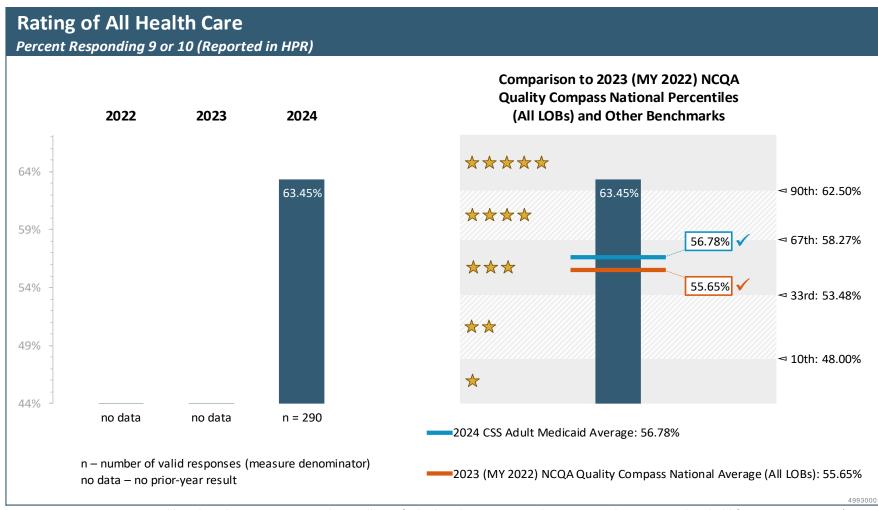
TREND IN RESULTS

- Survey results are trended over three consecutive years of data collection, if available. A result may not be available if the survey was not administered in a given year, or if the measure is new or not deemed appropriate for trending. In such cases, "no data" appears in place of the score.
- The number of valid responses (the NCQA-defined denominator, n) appears under each bar. If the number of responses is less than 100, "NA" appears next to the value of n, indicating that the result is not reportable by NCQA.
- Statistical comparisons are conducted between the current-year and each of the prior-year rates, if available. Differences in rates are tested for statistical significance at the 95% confidence level. While all reported rates are rounded for display, all comparisons are carried out prior to rounding. Statistically significant differences are marked with a checkmark (✓) symbol next to the comparison rate. For example, a checkmark appearing next to the 2023 rate denotes a statistically significant difference between the 2024 and 2023 rates.

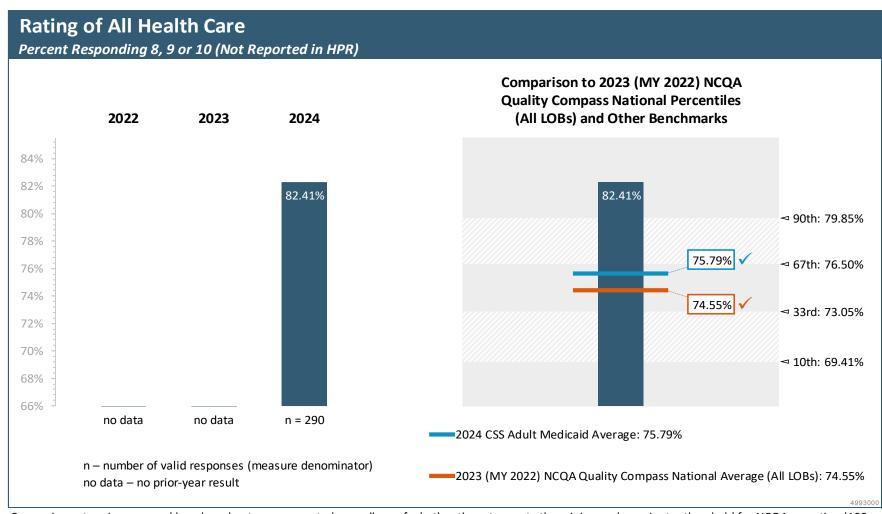
COMPARISON TO NATIONAL MULTI-PLAN BENCHMARKS AND 2023 (MY 2022) NCQA QUALITY COMPASS PERCENTILES

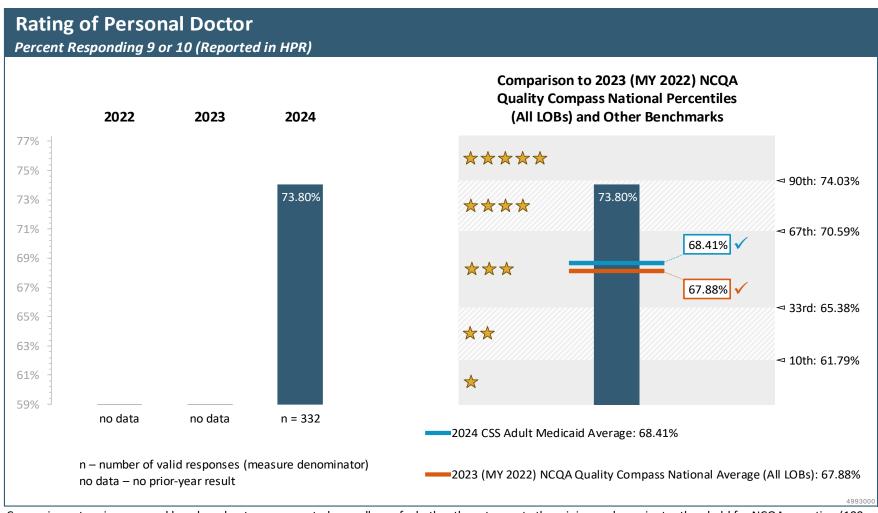
To help health plans evaluate their competitive performance on key CAHPS measures, CSS licensed the 2023 (MY 2022) NCQA Quality Compass CAHPS Benchmarks. This dataset includes question summary rates and global proportions corresponding to the national Quality Compass averages, as well as the national 10th, 33rd, 67th, and 90th health plan performance percentiles. CSS's License Agreement with NCQA authorizes CSS to provide this information to eligible client organizations for their internal use only. Public reporting of these results is not authorized under the terms of this Agreement.

- For CAHPS ratings and composites, the bar representing the 2024 measure result is juxtaposed against the 2023 (MY 2022) NCQA percentile distribution, providing an indication of competitive performance on the measure and, if applicable, the corresponding HPR (star) rating estimate.
- The horizontal lines displayed on the charts correspond to the 2024 CSS Adult Medicaid Average as well as the 2023 (MY 2022) NCQA Quality Compass Adult Medicaid National Average (All LOBs). While all reported rates are rounded for display, all comparisons are carried out prior to rounding. If the 2024 result is significantly different from any of these benchmark rates at the 95% confidence level, a checkmark (✓) appears next to the relevant result.

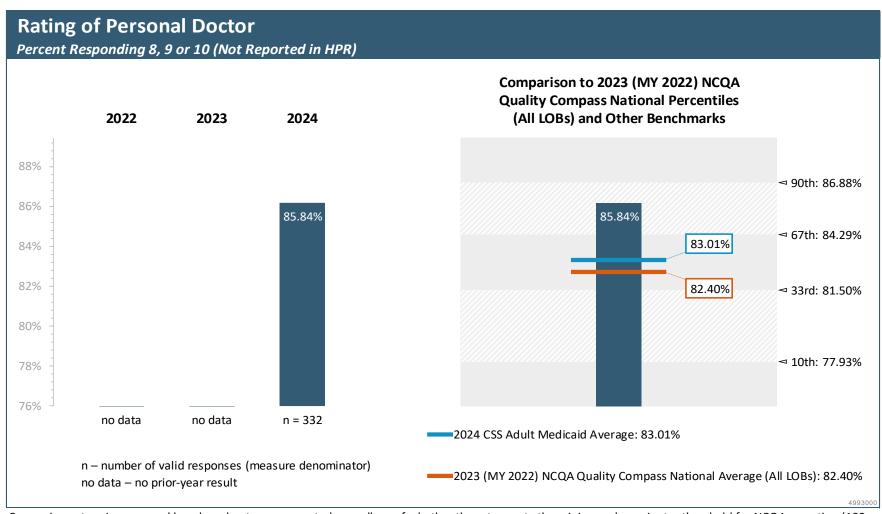


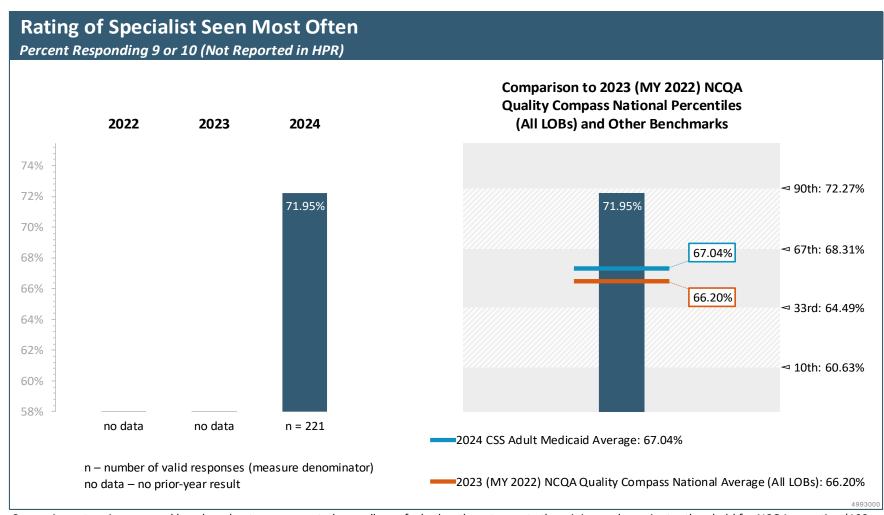
Comparisons to prior-year and benchmark rates are reported regardless of whether the rate meets the minimum denominator threshold for NCQA reporting (100 valid responses). Differences in rates were tested for statistical significance using a t-test for proportions at the 95% confidence level. Statistically significant differences between the current-year rate and the relevant comparison rate are marked with a checkmark (\checkmark) symbol next to the comparison rate. Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

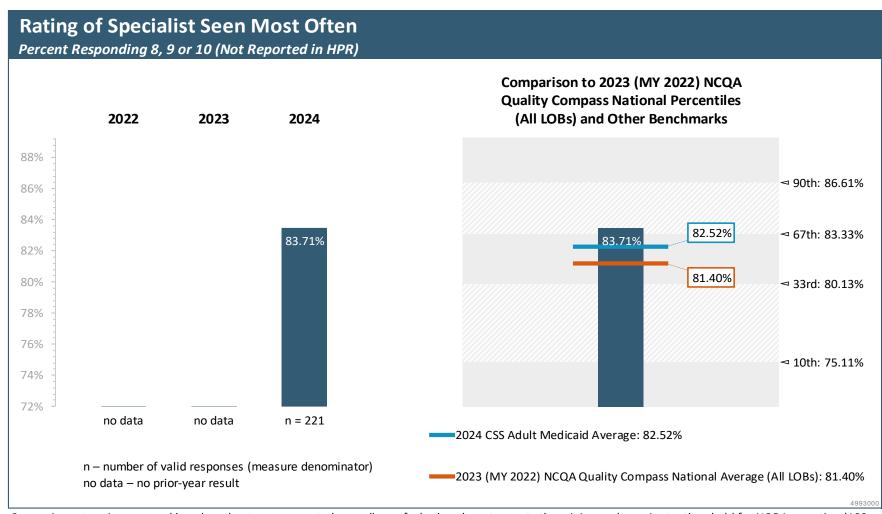


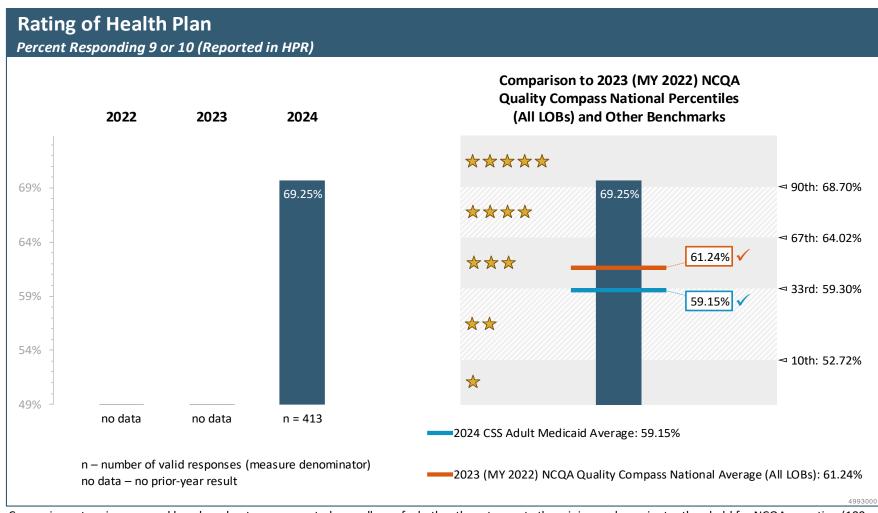


Comparisons to prior-year and benchmark rates are reported regardless of whether the rate meets the minimum denominator threshold for NCQA reporting (100 valid responses). Differences in rates were tested for statistical significance using a t-test for proportions at the 95% confidence level. Statistically significant differences between the current-year rate and the relevant comparison rate are marked with a checkmark (\checkmark) symbol next to the comparison rate. Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

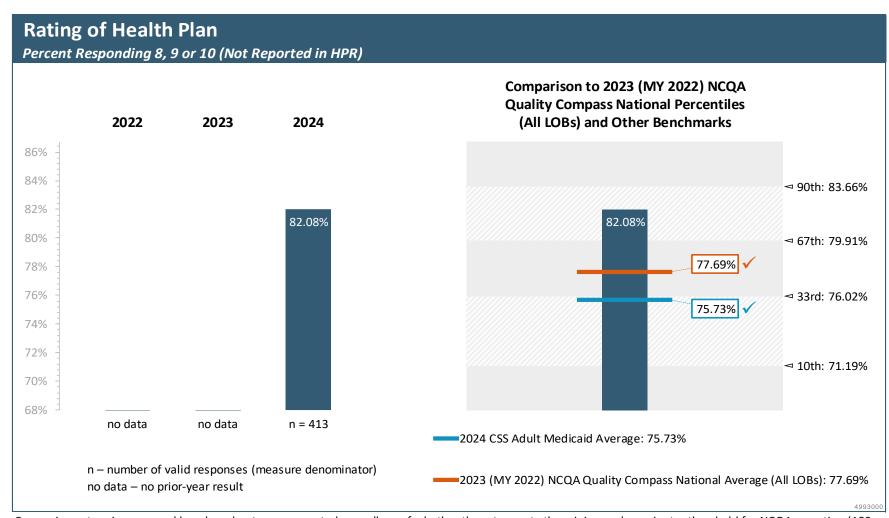


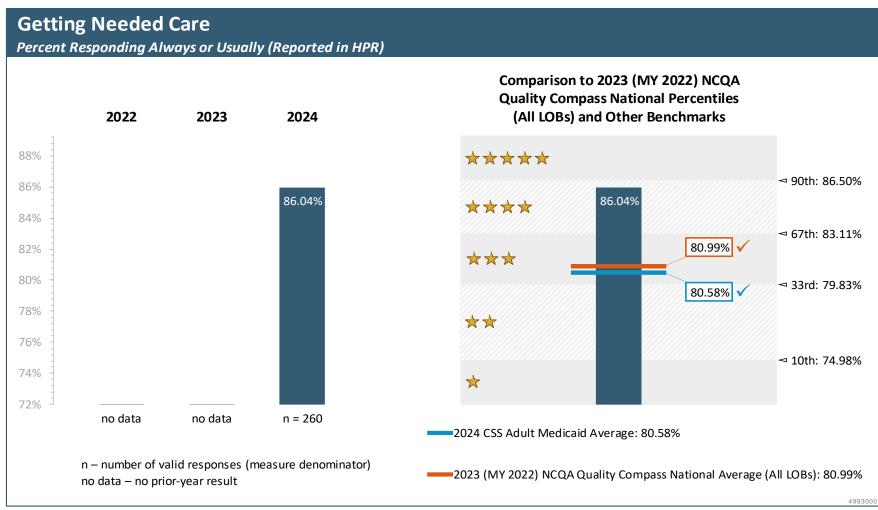






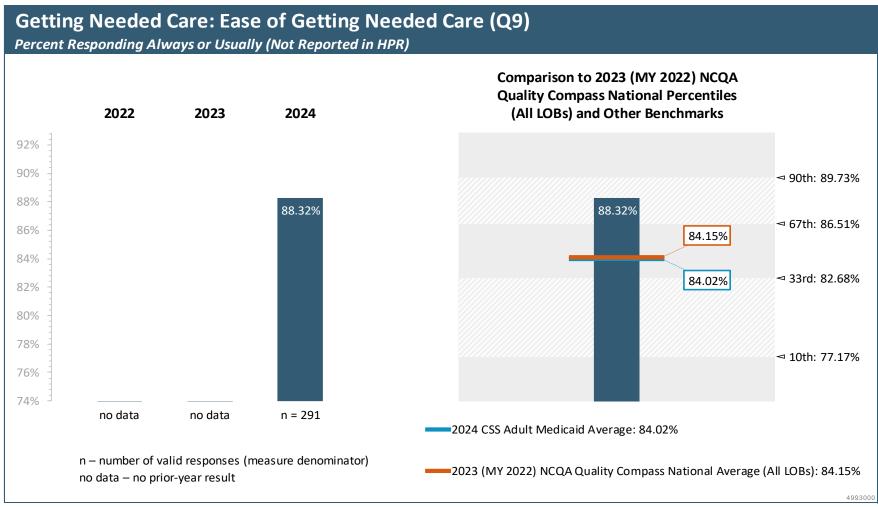
Comparisons to prior-year and benchmark rates are reported regardless of whether the rate meets the minimum denominator threshold for NCQA reporting (100 valid responses). Differences in rates were tested for statistical significance using a t-test for proportions at the 95% confidence level. Statistically significant differences between the current-year rate and the relevant comparison rate are marked with a checkmark (\checkmark) symbol next to the comparison rate. Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

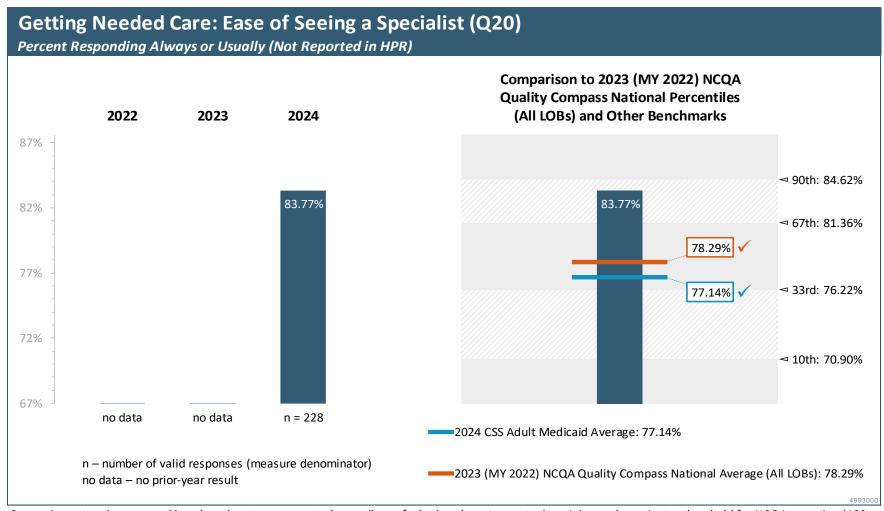


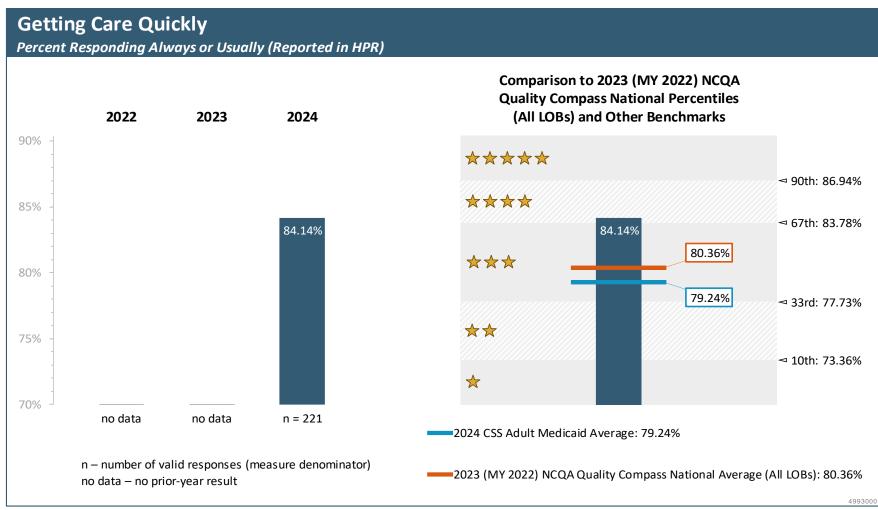


Comparisons to prior-year and benchmark rates are reported regardless of whether the rate meets the minimum denominator threshold for NCQA reporting (100 valid responses). Differences in rates were tested for statistical significance using a *t*-test for proportions at the 95% confidence level. Statistically significant differences between the current-year rate and the relevant comparison rate are marked with a checkmark () symbol next to the comparison rate.

Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

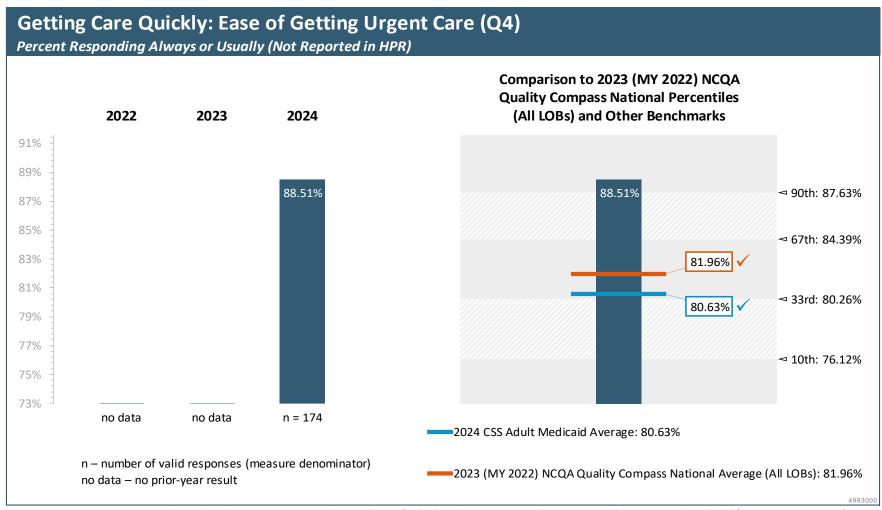


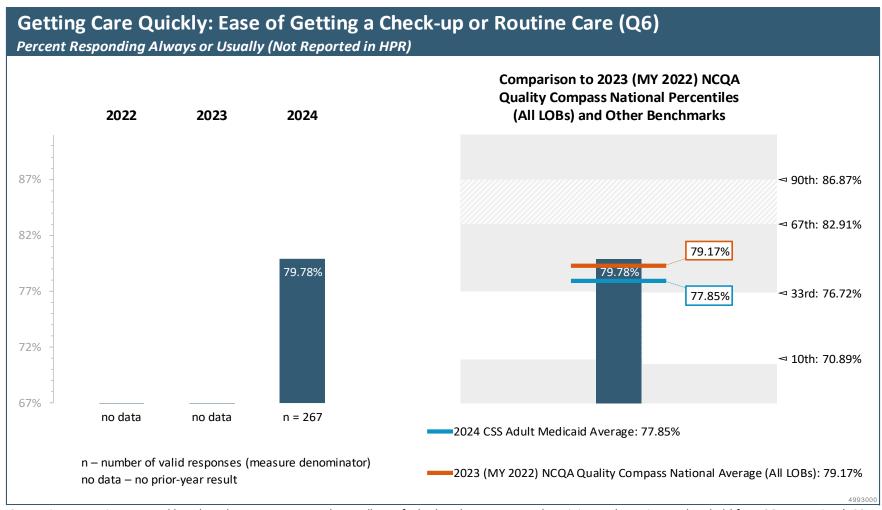


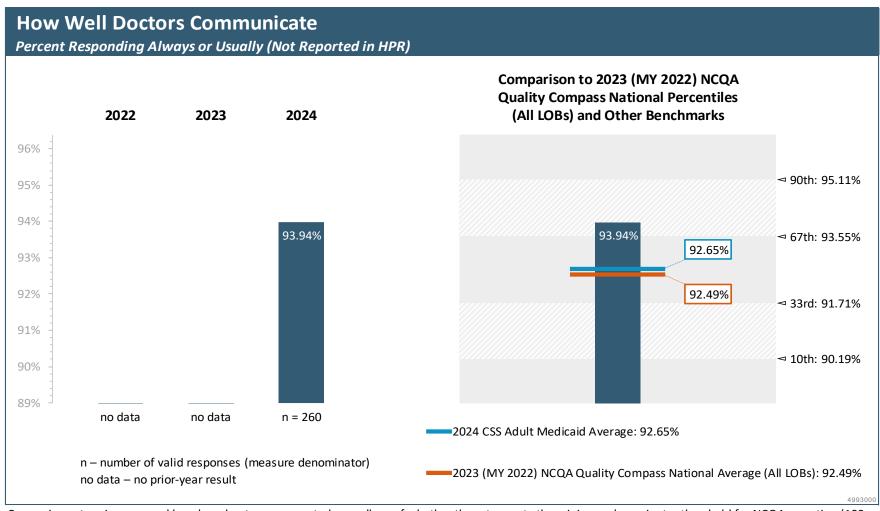


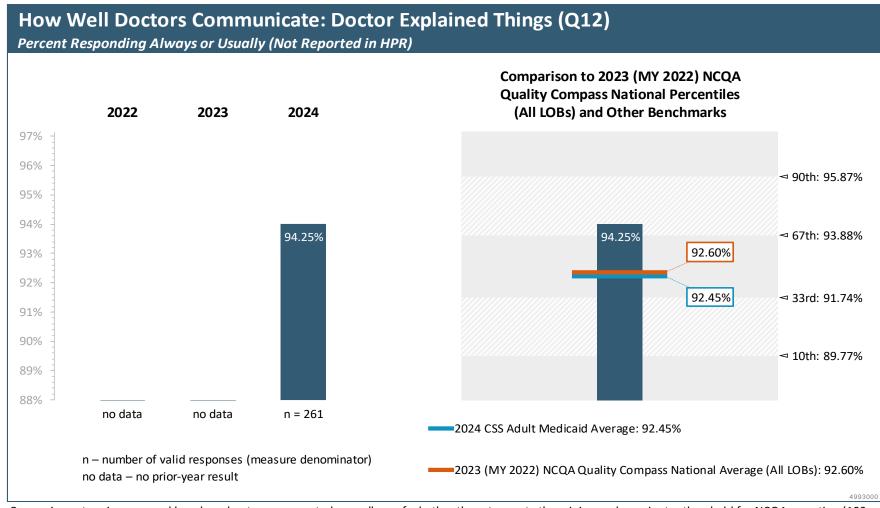
Comparisons to prior-year and benchmark rates are reported regardless of whether the rate meets the minimum denominator threshold for NCQA reporting (100 valid responses). Differences in rates were tested for statistical significance using a *t*-test for proportions at the 95% confidence level. Statistically significant differences between the current-year rate and the relevant comparison rate are marked with a checkmark () symbol next to the comparison rate.

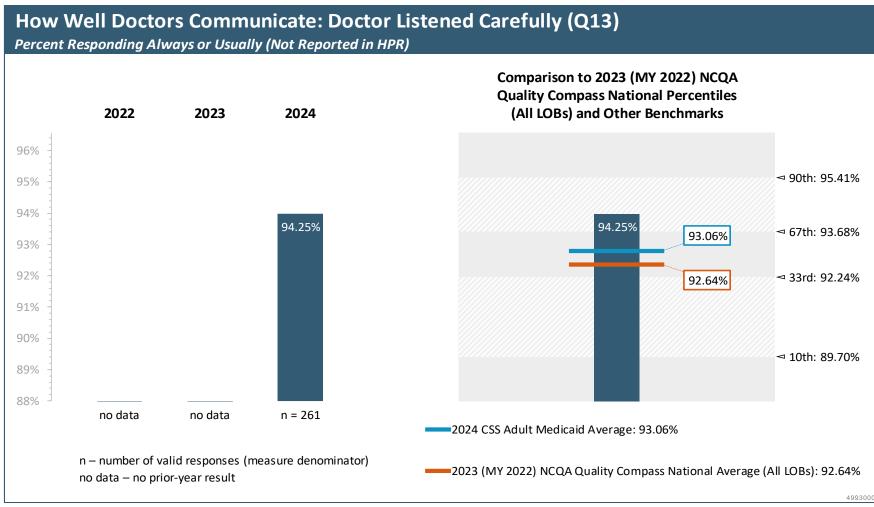
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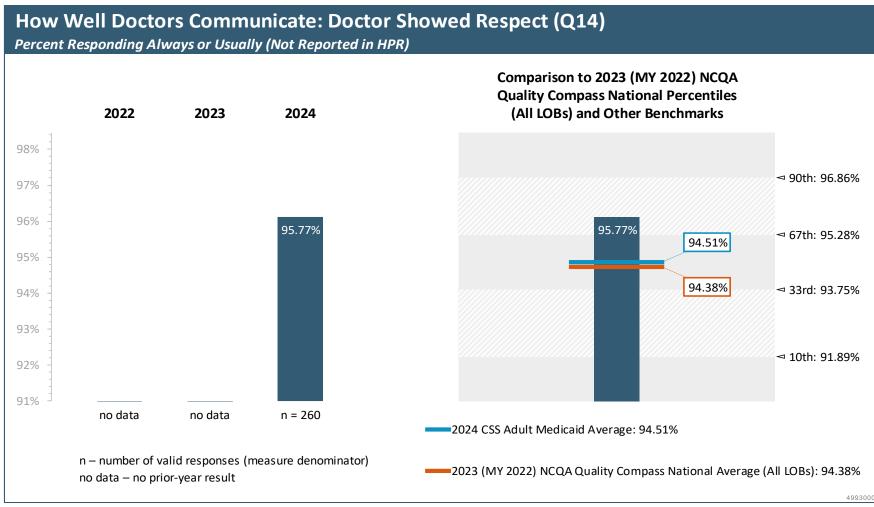


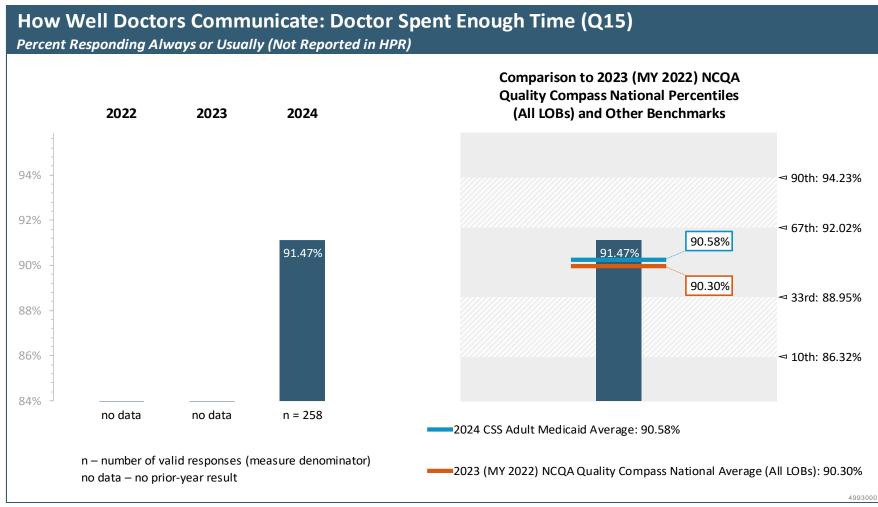


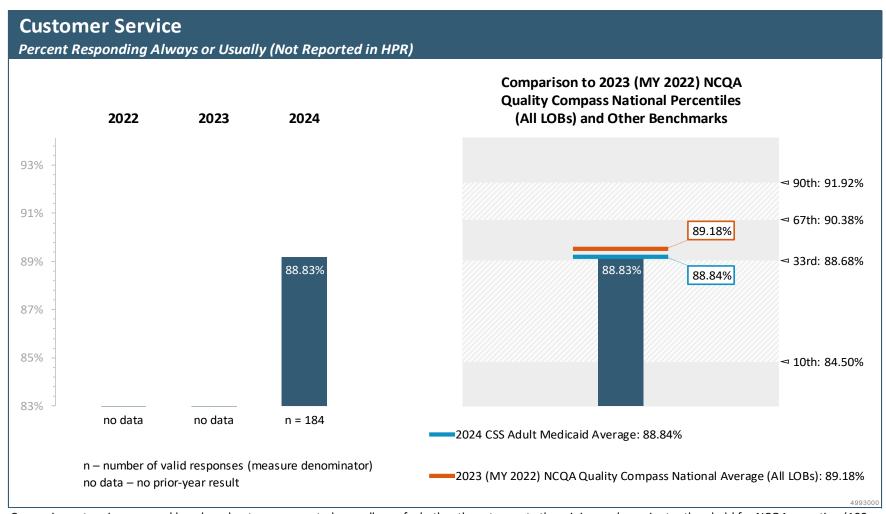


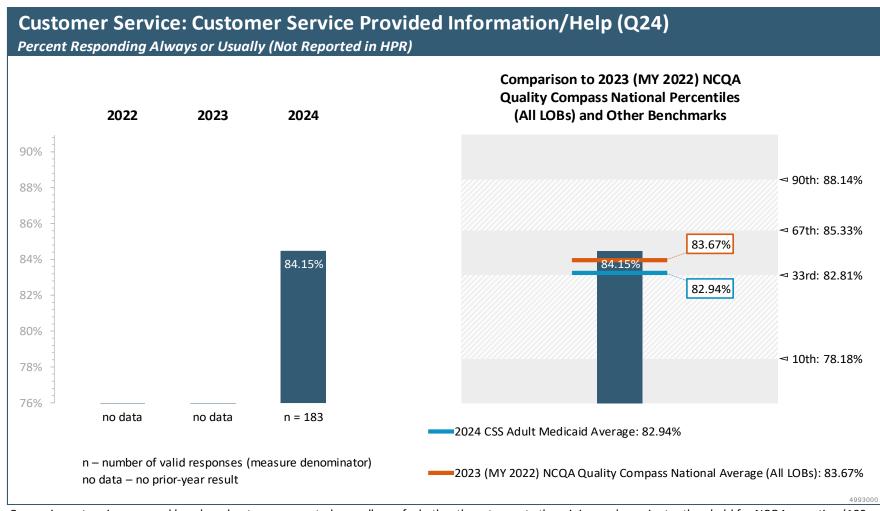


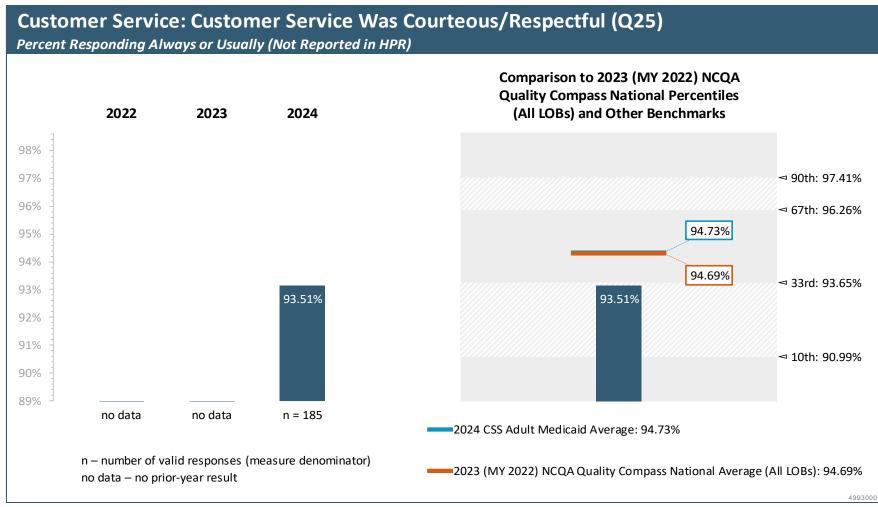


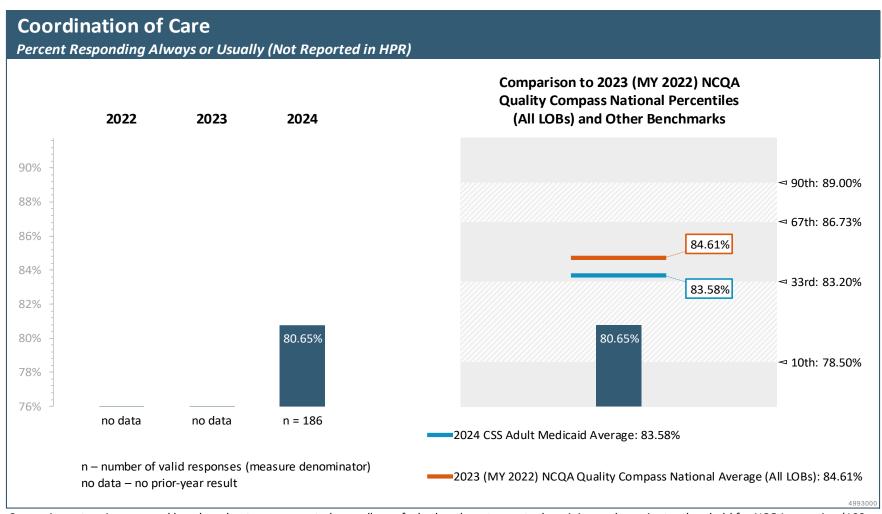












EFFECTIVENESS OF CARE

The Effectiveness of Care domain applies to adult health plan members only and includes the Medical Assistance With Smoking and Tobacco Use Cessation (MSC) measure. Measure results are calculated based on two years of data collection using rolling average methodology. A brief description of each component of the MSC measure, as it appears in HEDIS 2024, Volume 3: Specifications for Survey Measures, is provided below. Please refer to Volume 3 for additional information.

MEDICAL ASSISTANCE WITH SMOKING AND TOBACCO USE CESSATION (MSC)

The following components of this measure assess different facets of providing medical assistance with smoking and tobacco use cessation:

- ★ Advising Smokers and Tobacco Users to Quit A rolling average rate represents the percentage of current smokers or tobacco users who received advice to quit during the measurement year.
- **Discussing Cessation Medications** A rolling average rate represents the percentage of current smokers or tobacco users who discussed or were recommended cessation medications during the measurement year.
- **Discussing Cessation Strategies** A rolling average rate represents the percentage of current smokers or tobacco users who discussed or were provided cessation methods or strategies during the measurement year.

CALCULATION AND REPORTING OF RESULTS

The rolling average method relies on two consecutive years of data collection to obtain a denominator sufficient to calculate measure results. Rolling average results are calculated using data reported for the current year and, when available, data reported for the prior year. NCQA calculates and reports rolling average rates according to the following rules:

- For a health plan with two consecutive years of reported data, the rate is calculated if the rolling average denominator is 100 or more. If the rolling average denominator is less than 100, NCQA reports the measure result as "NA."
- If the plan did not report results in the prior year but reports results for the current year, the rate is calculated if the current-year denominator is 100 or more. If the current year denominator is less than 100, NCQA reports the measure result as "NA."

A plan that does not report an MSC result for the current year is assigned a result of "NR" by NCQA. Note that, as with all other measures, CSS reports the plan's MSC rates regardless of whether the plan reports them to NCQA or achieves the minimum denominator of 100 valid responses required for NCQA reporting.

Table 9 provides a summary of Mercy Care *MSC* measure results. Comparisons to prior-year rates (if available) as well as to the 2024 CSS Adult Medicaid Average rates with statistical significance tests are included.

Table 9. 2024 Mercy Care Adult Medicaid CAHPS Survey: Medical Assistance With Smoking Cessation Measure Results

			Υ	our Organ	nization				Benchmark (Compariso	ons	Your	
Medical Assistance With Smoking and Tobacco Use Cessation (MSC) (% A+U+S)	and Tobacco Use Cessation (MSC) 20 (% A+U+S)		2024 202		023	2022		2024 CSS Adult Medicaid Average		2023 (MY 2022) NCQA Quality Compass National Average (All LOBs)		Organization's Estimated 2024 NCQA Health Plan (Star)	
	Rate	95% CI	(n)	Rate	Change	Rate	Change	Rate	Difference	Rate	Difference	Rating	
Advising Smokers to Quit	72.60%	(±10.23)	(73)	no data		no data		73.19%	[-0.59]	72.78%	[-0.18]	★★★☆☆	
Discussing Cessation Meds	43.84%	(±11.38)	(73)	no data		no data		48.87%	[-5.03]	51.16%	[-7.32]	Not reported in	
Discussing Cessation Strategies	39.73%	(±11.23)	(73)	no data		no data		44.48%	[-4.75]	45.43%	[-5.70]	NCQA Health Plan Ratings	

The 95% confidence interval (CI) and the number of valid responses (n, or measure denominator) are provided for the current-year measure rate only. Statistically significant differences between the current-year rate and the comparison rate are marked with a checkmark (\checkmark) symbol.

Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

"No data" indicates that the survey was not conducted or the result is not available for comparison.

MEMBERSHIP PROFILE AND ANALYSIS OF PLAN RATINGS BY MEMBER SEGMENT

This section of the report presents a detailed profile of the Mercy Care membership, including demographics, self-reported health status, and responses to survey questions that assess utilization of health care services.

A health plan's membership mix is shaped by multiple factors, most of which are beyond the scope of the CAHPS survey. These include benefit design, geography, availability of health plan choices, and member self-selection into products that best meet their needs. CSS's analysis of industry data suggests that there is considerable variation in member demographic makeup and utilization patterns across plans. To the extent that various member segments have distinct health care needs, utilization patterns, expectations, and experiences, as well as attitudes and perceptions, their assessments of the same product, provider, or service will likely differ.

Certain member characteristics (e.g., health status) appear to be directly related to differences in health care needs and utilization levels. For example, some plans have predominantly healthy members, whose interactions with care providers and the plan tend to be limited. By contrast, other plans serve populations with higher rates of illness. These members tend to have more frequent encounters with the health care system and, as a result, may become more experienced users of health plans. The ways in which members use the plan, the frequency of their interactions with providers and staff, and their overall level of familiarity with how the plan works may affect ratings.

In addition to health care needs and utilization patterns, demographic characteristics have been shown to influence survey responses. For example, all else being equal, older respondents and members of certain ethnic groups tend to rate their health care providers and plans more positively. By contrast, more educated members rate more critically, regardless of age or ethnicity.

While the interplay between these membership variables (often referred to as the plan's "case mix") and health plan ratings is complex, health plan ratings clearly vary across demographic groups and user segments. Understanding the plan's case mix can help managers gain insight into possible sources of this variation.

The charts on the following pages show how the *Rating of Health Plan* (percent responding 9 or 10) measure varies by the member subgroup of Mercy Care compared to the relevant national multi-plan benchmark distribution(s). Each demographic or utilization subgroup is represented by a "bubble" on the chart. The label above the bubble and the percentage in square brackets below it identify the subgroup and its size. The area of the bubble visually represents the size of the subgroup. Unless a member belongs to more than one subgroup (e.g., race category), subgroup sizes should add up to 100%. Note that these charts only include members who answered the relevant demographic/utilization question on the survey **and** provided a valid response to the *Rating of Health Plan* question. For this reason, the reported subgroup sizes may differ slightly from the proportions reported in the crosstabulations.

HEALTH STATUS AND DEMOGRAPHICS

The following characteristics are profiled in this section:

- Health status
- Gender
- Age
- Race
- Ethnicity (Hispanic or Latino)
- Education level

All Respondents		Q29. R	Q29. Rating of Overall Health			Q30. Rating of Overall Mental or Emotional Health			
Organization	All Respondents [100.0%]	Very Excellent good [11.4%] [19.2	d Good	Poor [7.5%]	Excellent [17.8%]	Very good [23.4%]	Good [29.0%]	Fair [24.1%]	Poor
Your Or	RHP (% 9 or 10) 69.2%	76.6% 73.49	71.1% 62.7%	61.3%	79.5% 75.0%	68.1%	65.7%	[5.8%] • 37.5%	
Average	All Respondents [100.0%]	Excellent Very [12.9%] good [23.5	Good Fair	Poor [5.3%]	Excellent [20.4%]	Very good [22.4%]	Good [30.8%]	Fair [20.3%]	Poor
2024 C35 Adult Medicald Average	RHP (% 9 or 10) 59.1%	61.89	% 56.3% 52.5%	48.9%	73.1%	64.0%	56.9%	50.4%	[6.1%] • 34.9%

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

	All Respondents	Q36. G	iender			C	(35. Age			
Organization	All Respondents [100.0%]	Male [38.5%]	Female [61.5%]	18 to 24 [13.1%]	25 to 34 [17.0%]	35 to 44 [17.7%]	45 to 54 [15.3%]	55 to 64 [18.7%]	65 to 74 [11.3%]	75 or older [6.9%]
Your Org	RHP (% 9 or 10) 69.2%	65.6%	72.1%	64.2%	60.9%	68.1%	69.4%	73.7%	76.1%	78.6%
Average	All Respondents [100.0%]	Male [40.5%]	Female [59.5%]	18 to 24 [12.4%]	25 to 34 [17.7%]	35 to 44 [17.5%]	45 to 54 [16.8%]	55 to 64 [28.9%]	65 to 74 [4.7%]	75 or older [1.9%] • 72.9%
Average	RHP (% 9 or 10) 59.1%	57.4%	60.5%	53.3%	52.0%	55.7%	60.4%	65.1%	68.9%	72.9%

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

All Respondents	Q39. Race	Q38. Hispanic or Latino Origin/Descent
All Respondents [100.0%] RHP (% 9 or 10) 69.2%	Native Hawaiian or Pacific American	Hispanic /Latino [45.2%] 75.8% Not Hispanic /Latino [54.8%]
All Respondents [100.0%] RHP (% 9 or 10) 59.1%	Black or African- White American [56.3%] [29.8%] Asian [6.0%] [1.0%] [3.7%] 58.1% 60.2% Asian [6.0%] 55.3% 55.3% 51.1%	Hispanic /Latino [23.8%]

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

	All Respondents			Q37. Educa	ation Level		
Your Organization	All Respondents [100.0%] RHP (% 9 or 10) 69.2%	8th grade or less [8.3%] • 78.8%	Some HS, did not graduate [12.5%] — 76.0%	HS grad. or GED [34.0%] 72.1%	Some college/2-yr. degree [33.0%]	4-year college degree [8.3%]	More than 4-yr. college degree [4.0%] • 31.3%
Average	All Respondents [100.0%] RHP (% 9 or 10) 59.1%	8th grade or less [5.9%] • 72.4%	Some HS, did not graduate [13.7%]	HS grad. or GED [39.1%] 60.6%	Some college/ 2-yr. degree [28.0%]	4-year college degree [8.6%]	More than 4-yr. college degree [4.6%] 48.7%

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

USE OF SERVICES

The following utilization measures are included in this section:

- Type of care received
- Frequency of visits
- Care received from personal doctor
- Specialty and other non-primary care

	All Respondents	Q3. Required Urgent Care	Q5. Made Appointment(s) for Check-up or Routine Care	Q7. Visits to Doctor's Office or Clinic
Your Organization	All Respondents [100.0%] RHP (% 9 or 10) 69.2%	Yes No [42.8%] [57.2%] 70.9% 68.4%	Yes No [66.5%] [33.5%] 69.8% 66.7%	None 1 time 2 [9.2%] 4 [12.2%] 10+ [29.4%] [12.2%] [16.2%]
Average	All Respondents [100.0%] RHP (% 9 or 10) 59.1%	Yes No [35.2%] [64.8%] 59.8% 58.8%	Yes [60.1%] No [39.9%] 62.6% 53.6%	None [35.3%] 1 time 2 3 4 5 to 9 10+ [5.7%] [16.1%] [14.7%] [11.0%] [6.8%] [10.4%] [5.7%] 63.0% 59.4% 61.5% 62.0% 60.0% 64.8%

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

	All Respondents	Q10. Has Personal Doctor		Q	11. Visits t	o Personal	Doctor		
Your Organization	All Respondents [100.0%] RHP (% 9 or 10) 69.2%	Yes [80.2%] No [19.8%] 72.0% 58.0%	[18.8%] [2	1 time 24.8%] 73.1%	2 [21.0%] 63.6%	3 [16.2%] • 80.4%	4 [7.0%] • 72.7%	5 to 9 [10.5%] • 72.7%	10+ [1.6%] • 80.0%
Average	All Respondents [100.0%] RHP (% 9 or 10) 59.1%	Yes [79.3%] No [20.7%] 62.6% 46.4%	None [23.4%] [2	1 time 25.8%] 64.3%	2 [21.5%] 62.0%	3 [12.1%] • 63.8%	4 [6.1%] • 63.0%	5 to 9 [8.4%] 63.1%	10+ [2.6%] • 76.9%

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

	All Respondents	Q16. Visited Providers Besides Personal Doctor	Q19. Made Specialist Appointment(s)	Q21. Number of Specialists Seen
9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	All Respondents [100.0%] RHP (% 9 or 10) 69.2%	Yes No [73.0%] [27.0%] 72.4% 70.1%	Yes No [54.0%] [46.0%] 71.9% 65.4%	1 2 None [39.5%] [28.2%] 3 [5.5%] 5+ [1.8%]
Average	All Respondents [100.0%] RHP (% 9 or 10) 59.1%	Yes No [61.3%] [38.7%] 62.2% 66.3%	Yes No [43.1%] [56.9%] 61.7% 57.1%	1 2 3 4 5+ [44.2%] [28.3%] [13.9%] [5.0%] [5.5%] None [3.1%] 63.6% 61.6% 60.9% 61.5% 58.3% 40.3%

[&]quot;All Respondents [100%]" are members who answered both the relevant profile question and the RHP question. Bubble size, shown as [%], represents category frequency. The rate under each bubble is the proportion of category members answering the RHP question as 9 or 10. Results are reported for categories with 5 or more respondents.

KEY DRIVER ANALYSIS

OBJECTIVES

CSS's Key Driver Analysis (KDA) highlights some of the key differences between high- and low-rated health plans at the industry level. The principal objectives of the KDA are:

- To isolate a set of plan attributes, or key drivers, that distinguish high-rated plans from low-rated plans
- To highlight industry best practices on the key driver measures
- To compare the current performance of Mercy Care to industry best practices in these areas
- To estimate the impact of improving performance on these measures on the Rating of Health Plan measure

TECHNICAL APPROACH

Industry-level analysis, which uses health plans as units of analysis, has several important advantages compared to the alternative approach, which focuses on member experiences within a single plan. Certain plan attributes are strongly related to member satisfaction at the industry level. However, these relationships may be missed if we focus on only one plan at a time. For example, it has been shown that plans that are rated highly on measures of access and availability of care tend to have high overall ratings. Conversely, poor access scores are associated with low overall plan scores. This relationship is clear when ratings are compared *across* plans. However, within a specific plan, member experiences may not be sufficiently varied to reveal the underlying relationship. For example, if all plan members report poor access to care, access measures may show a misleadingly low correlation with the overall rating of the plan. As a result, the plan may underestimate the role of access in member experience and miss a critical opportunity for improvement.

In addition, expressing every CAHPS survey variable as a plan-level rate yields a complete and rich information set on each plan. This effectively eliminates any "gaps" in respondent-level data from a single plan caused by survey skip patterns and allows every response to be used in the analysis.

Finally, in addition to the standard CAHPS performance measures, other sources of differences between health plans can be explored, increasing the explanatory power of the model and allowing for a more precise estimation of the individual key driver effects. These include experience rates, which are based on responses to the CAHPS screener questions. Screeners establish whether a member had a particular type of experience or interaction with

the plan (e.g., contacted customer service, submitted a claim, etc.). CSS's analysis shows that these experience indicators explain a significant portion of the plan's overall rating score. Additional components of the overall score include utilization rates and demographic characteristics of the plan's membership, which are addressed in more detail in the *Member Profile and Analysis of Plan Ratings by Member Segment* section of this report. Clearly, from the plan's perspective, some of these factors are more actionable than others. However, to yield an accurate model of member experience, the analysis must consider all of its measurable aspects.

The 2024 CSS *Key Driver Model* was developed based on survey results of 275 Medicaid plans surveyed by CSS in 2023 and 2024. CSS performed a regression analysis of health plan ratings to identify sources of variation in overall scores across the industry, using individual health plans as units of analysis. Regression analysis quantifies the relationship between plan attributes (predictors) and the global *Rating of Health Plan* score, controlling for interdependencies among the predictors and other factors that may influence ratings (e.g., member demographics, utilization patterns, etc.). Predictors were chosen carefully to yield a model that is both meaningful and actionable from the health plan's point of view.

All of the plan variables, including potential drivers of member experience (i.e., variables that the plan may consider actionable) and control variables (member demographics, health status, utilization rates, product type, and year of data collection), were entered into the regression model, and the independent contribution of each variable was estimated. As in the past, CSS excluded *Rating of All Health Care* from the list of predictors, both because of its high correlation with *Rating of Health Plan* and the availability of other survey questions addressing specific member experience touch points. If included, the *Rating of All Health Care* measure would account for a large portion of the variance and confound coefficient estimates for the other variables in the model.

INDUSTRY KEY DRIVER MODEL

The table below lists five key drivers of Medicaid member experience in order of importance, from highest to lowest, based on their relative contribution to the *Rating of Health Plan* measure. These variables have statistically significant coefficients in the regression model (*p*-value < 0.05). Performance on these variables, together with the control variables, explains 72% of the variation in the *Rating of Health Plan* results among Medicaid plans. Note that this ordering reflects the strength of the overall relationship between each key driver and the *Rating of Health Plan* measure *at the industry level*. It does not consider how Mercy Care is currently performing on these measures. Improvement targets identified specifically for Mercy Care, which consider both the strength of each key driver and the current level of performance, are presented graphically in the next section.

Medicaid member ratings of the plan are strongly related to having access to highly rated providers (Q18 and Q22). More generally, access to needed care, tests, and treatment (Q9), including urgent (Q4) and specialty (Q19) care, are all significant drivers of member experience.

Table 10. CSS Industry Model of Key Drivers of Medicaid Member Experience

Key Driver	Interpretation
Q22. Rating of Specialist Seen Most Often (percent 9 or 10)	The higher the proportion of members rating their specialist as $\it 9$ or $\it 10$, the higher the overall plan score
Q9. Ease of getting needed care, tests, or treatment (percent <i>Usually</i> or <i>Always</i>)	The higher the proportion of plan members reporting that the necessary care, tests, or treatment were easy to get, the higher the overall plan score
Q4. Got an appointment for urgent care as soon as needed (percent <i>Usually</i> or <i>Always</i>)	The higher the proportion of plan members reporting they received urgently needed care as soon as needed, the higher the overall plan score
Q19. Made specialist appointments (percent <i>Yes</i>)	The higher the proportion of plan members who made specialist appointments, the higher the overall plan score
Q18. Rating of Personal Doctor (percent 9 or 10)	The higher the proportion of members rating their personal doctor as 9 or 10, the higher the overall plan score

OPPORTUNITIES FOR HEALTH PLAN QUALITY IMPROVEMENT

Specific improvement opportunities for Mercy Care are presented in Table 11. The ordering of the key drivers reflects both the strength of each key driver at the industry level and how well Mercy Care is currently performing on each measure. The middle column compares how Mercy Care is performing relative to the "best practice" rate on each key driver. CSS defined the best practice rate as the best result among the 20 plans contributing to the 2024 CSS Adult Medicaid Average. Room for improvement, represented by the length of the blue arrows, is the difference between the current level of Mercy Care performance and the best practice rate. The bar on the right displays the incremental gain in the overall *Rating of Health Plan* measure that Mercy Care could achieve if it performed on par with the best practice plan on each of the key driver measures. Each bar represents room for improvement on the key driver weighted by its contribution to the *Rating of Health Plan* measure.

Table 11. 2024 Mercy Care Adult Medicaid CAHPS Survey: Key Areas and Priorities for Improvement

Current Key Driver Performance		Room for Improvement on Key Driver	Overall Improvement Opportunity
Your Organization's 2024 Rate		Percentage Point Difference Between Current Key Driver Rate and Best Practice Rate*	Expected Percentage Point Improvement in Rating of Health Plan (percent 9 or 10) if Key Driver Performs at Best Practice Level
Q22. Rating of Specialist Seen Most Often (percent 9 or 10)	71.95%	+6.93%	+0.89%
Q18. Rating of Personal Doctor (percent 9 or 10)	73.80%	+1.91% -> 75.70%	+0.84%
Q9. Ease of getting needed care, tests, or treatment (percent <i>Usually</i> or <i>Always</i>)	88.32%	+0.57% ➤ 88.89%	+0.15%
Q4. Got an appointment for urgent care as soon as needed (percent <i>Usually</i> or <i>Always</i>)	88.51%	+0.04% 88.54%	+0.01%
Q19. Made specialist appointments (percent <i>Yes</i>)	53.99%	Performing at or above Best Practice Rate level 53.99%	None

^{*} Best result among all plans included in the 2024 CSS Adult Medicaid Average

4993000

HEALTH PLAN QUALITY IMPROVEMENT RESOURCES

CSS's *Key Driver Analysis* identified improvement opportunities and priorities for Mercy Care. This section, which lists some helpful publicly available quality improvement resources, is included as a guide to assist plan managers in their efforts. Inclusion of these sources should not be construed as an endorsement of any programs or activities. Some of these resources may be more applicable to your organization than others, especially because many of the cited interventions are intended to be implemented at the practice or provider level. For a useful introduction to quality improvement (QI), refer to the Agency for Healthcare Research and Quality's (AHRQ) *CAHPS Ambulatory Care Improvement Guide*, Section 4: Ways to Approach the Quality Improvement Process, which includes descriptions of QI strategies in health delivery systems.

IMPROVING MEMBER ACCESS TO CARE

Removing barriers to care is central to improving the health care experience of plan members. The following resources suggest ways to improve patient access to care, tests, and treatment.

Same-Day Appointment Scheduling

- In Section 6 of its guide, AHRQ recommends a method of scheduling that leaves a part of each physician's day open for same-day appointments, rather than a traditional scheduling model that books appointments weeks or months in advance. Because the method does not differentiate between urgent and routine care, patients with non-urgent concerns are able to schedule appointments sooner than under traditional scheduling methods. For more information, see Strategy 6A: Open Access Scheduling for Routine and Urgent Appointments.
- An article from *Healthcare Dive*, "Same-day Scheduling Can Improve Patient Satisfaction and Your Bottom Line," describes the benefits and challenges of implementing same-day scheduling as well as some short case studies.
- An article in *Patient Engagement HIT* titled "Exploring Open Access Scheduling in Patient Access to Care" explains that the greatest challenge to implementing same-day appointments is clearing the backlog.

Implement Process Improvements to Streamline Patient Flow

- Delays experienced by patients while waiting for care, tests, or treatment can be minimized through a variety of mechanisms. For example, reallocating tasks such as physical exams and ordering x-rays to physician assistants and nurse practitioners frees up physicians' time to attend to more pressing patient concerns. The exact form of these improvements will vary widely by practice. See AHRQ's <u>Improving Patient Flow and Reducing Emergency Department Crowding: A Guide for Hospitals</u> to help plan and implement patient flow improvement strategies.
- **VIDEO** A webinar on YouTube from the Virginia Mason Institute, "Fundamentals for Improving Flow in the Ambulatory Setting," demonstrates how Virginia Mason Franciscan Health approached this process in their facility.

Patient-Centered Medical Homes (PCMH)

- For AHRQ's resources detailing transitioning a practice to a patient-centered medical home model, see <u>Patient Centered Medical Home (PCMH)</u>: <u>Transforming the Organization and Delivery of Primary Care</u>, as well as links to additional resources at <u>Defining the PCMH</u>.
- **VIDEO** "Quality Improvement and Patient Centered Medical Home (PCMH) for Clinical Leaders & Their Care Teams: A System-Based Approach" is a webinar from the National Association of Community Health Centers featuring presenters from The Joint Commission and the National Committee for Quality Assurance speaking about quality improvement as it relates to patient-centered medical homes (watch on YouTube).
- For more background on the patient-centered medical home model of care and health equity, see "<u>Defining and Measuring the Patient-Centered Medical Home</u>" and "<u>The Patient-Centered Medical Home</u>: A <u>Path Toward Health Equity?</u>"

Alternative Access Centers

- A brief from the Robert Wood Johnson Foundation, "The Value Proposition of Retail Clinics," highlights the growing capacity of retail clinics and telemedicine to meet patient medical needs, particularly in rural and underserved communities and for patients with acute but non-serious conditions who need care quickly.
- "<u>Personalized Telehealth in the Future: A Global Research Agenda</u>," an article in the NIH's National Library of Medicine, describes how providing patients with alternatives like telehealth to access health care, rather than the traditional doctor's office or hospital, lowers barriers to care.

- An article in *Patient Engagement HIT*, "Retail Health Clinics Are Key on the Path to Health Equity," concludes that retail health clinics and virtual care improve health equity by providing greater access to care.
- In its data brief "<u>Urgent Care Center and Retail Health Clinic Utilization Among Adults: United States, 2019</u>," the National Center for Health Statistics provides statistics on utilization by sex, race, age, and education level.

Telehealth Solutions to Pandemic-Related Issues

- The COVID-19 pandemic has accelerated the usage and acceptance of telehealth by providers and patients alike. An article in *The Lancet* details "Opportunities and Challenges for Telehealth Within, and Beyond, a Pandemic."
- Telehealth also can be implemented to solve deferral of care issues brought about by the pandemic (see "Consumer Reported Care Deferrals Due to the COVID-19 Pandemic, and the Role and Potential of Telemedicine: Cross-Sectional Analysis").
- Telemedicine was underutilized until the pandemic, when changes to regulations and payment policies permitted its rapid growth. Telemedicine improves access and equity, though barriers remain (see "The State of Telehealth Before and After the COVID-19 Pandemic").
- **VIDEO** The webinar "Telehealth and Its Emergence During the Pandemic" discusses "how people, processes, regulation, and technology work together to support a successful telehealth transformation... potentially improving access, quality and costs."
- **PODCAST** "AMA Moving Medicine: What Physicians Need to Know About Telehealth" describes how, post-pandemic, telehealth is key to the future of digitally enabled care, which integrates in-person and virtual care in a clinically appropriate manner.

IMPROVING HEALTH PLAN PROVIDER NETWORK

These resources concentrate on improving the physician-patient relationship, with a focus on communication. Implementing the solutions proposed here may result in improved patient ratings of doctors.

Improve Physician Communication

• Seminars and workshops for physicians serve as a resource for physicians to learn and practice patient-centered communication techniques. For general recommendations, see AHRQ's ambulatory care improvement guide, Strategy 6G: Training to Advance Physicians' Communication Skills.

- An article in *Physicians Practice* shares "Nine Ways to Improve Your Patient Communications." Click through the slides at the top of the page to read information on each strategy.
- Similarly, a *HealthStream* blog post shares "10 Ways to Encourage Better Physician Communication" using the RELATE (Reassure, Explain, Listen, Answer questions, Take action, and Express appreciation) model.
- Much of patient dissatisfaction stems from a failure of effective physician communication. For a review of the literature on doctor-patient communication, see "<u>Doctor-Patient Communication</u>: A <u>Review</u>."

Help Patients Communicate

- Patients who can effectively communicate their needs tend to have higher satisfaction with their care. AHRQ recommends four interventions that prepare patients to better communicate with their providers, including record sharing, writing down talking points prior to visits, and "coached care" programs. See Strategy 61: Shared Decisionmaking and Strategy 6H: Tools to Help Patients Communicate Their Needs in the improvement guide.
- **TOOL** The Robert Wood Johnson Foundation provides a <u>sample discharge preparation/care transition document</u> that health care providers can distribute to patients before or during visits.
- **TOOL** The National Institutes of Health offers five <u>worksheets</u> to help patients choose a new health care provider and talk to their provider about family health history, medications, life changes, and health or other concerns.
- **TOOL** AHRQ provides tips for patients to become more engaged in their health care before, during, and after the appointment. A two-page PDF file can be downloaded from the linked page.
- **TOOL** AHRQ also provides a Question Builder tool that patients can use to customize a list of questions for their appointments. The tool is available for <u>printing online</u> and in a <u>downloadable app</u> in the Apple App Store and Google Play.

Build Physician-Patient Relationships

• A positive physician-patient relationship may correlate with better health care outcomes. "3 Key Traits of a Positive Patient-Provider Relationship" describes three essential elements: empathy, communication, and shared decision-making.

- AHRQ describes the SHARE Approach to shared decision-making and provides links to SHARE Approach resources on their website.
- Cultural competence is increasingly important to the physician-patient relationship. Tips and resources are available at The SHARE Approach Taking
 Steps Toward Cultural Competence: A Fact Sheet.

Improve Referral Communication

- The coordination of care between primary and specialist providers can be a challenge and may affect patient perceptions of their specialist care.

 Improving coordination of care and case management can increase patient satisfaction with specialists. In "Communication Lays the Groundwork for Successful Physician Referral Strategies," the Medical Group Management Association gives tips for building relationships with specialists.
- AHRQ's Health Literacy Universal Precautions Toolkit, 3rd Edition includes a section on making the referral process easier for patients.
- High-functioning referral networks are critical for positive patient outcomes and require communication, measurement, and monitoring (see "Optimizing Physician Referrals: A Key to Successful Population Health Management").
- A survey of Veterans Health Administration specialists found that the use of referral templates was seen as helpful in improving the quality of referrals; service agreements and e-consults were less so (see "Tools to Improve Referrals From Primary Care to Specialty Care").

IMPROVING CUSTOMER SERVICE AND HEALTH PLAN-RELATED INFORMATION

It is important that health plan information is both easily available and useful to members. As representatives of the plan, customer service staff must ensure that members have confidence and trust in their ability to address their questions and concerns. The following resources contain recommendations for improving customer service.

Develop Customer Service Standards

• To improve customer service, the Agency for Healthcare Research and Quality suggests first articulating which aspects of customer service are most important to the plan. After developing these standards, monitor performance and promote accountability among staff. For more information, see Strategy 6Q: Standards for Customer Service in AHRQ's ambulatory care improvement guide.

Iterative Improvement for Member Services

• The RAND paper "Improving Performance for Health Plan Customer Service: A Case Study of a Successful CAHPS Quality Improvement Intervention" details a case study in which a health plan used additional surveys to supplement CAHPS results and thoroughly assess member dissatisfaction with customer service. Throughout the process, plan leadership continually examined and adjusted improvement goals. The intervention resulted in a reduction of wait time for customer service calls and increased member satisfaction with customer service, as measured on the CAHPS survey.

Implement Service Recovery Procedures

- When members have a complaint, service recovery programs support customer service personnel in identifying and remedying the problem. While
 complaints may be inevitable, proper handling of complaints can reassure patients and restore loyalty to the health plan. For more information, see
 AHRQ's ambulatory care improvement guide Strategy 6P: Service Recovery Programs.
- An article in *Forbes*, "Service Recovery in Healthcare: Effective Strategies to Retain Unsatisfied Patients," defines service recovery and describes effective strategies to implement it in your practice.
- **VIDEO** Service Recovery in Health Care, a four-part training series, was developed as part of a grant from the Health Resources & Services Administration (HRSA). The videos total one hour and focus on why service recovery matters, eight steps for front-line staff, tips for de-escalation, and embedding service recovery into everyday practice.

Make Plan Information Accessible to All Members

- A Health Research and Educational Trust study found that demographic characteristics, including education, age, gender, and income, significantly impacted the use of an internet-based decision tool. The tool provided cost information as well as a health and wellness assessment. The study suggests that effort beyond internet-based tools is necessary to reach certain demographics. For further information, see "Who Values Information From a Health Plan Internet-Based Decision Tool and Why: A Demographic and Utilization Analysis."
- The article "The Critical Role of Web Accessibility in Health Information Access, Understanding, and Use" addresses the importance of website accessibility for older adults and persons with disabilities to obtain, understand, and use health information.
- The Centers for Medicare & Medicaid Services (CMS) provides information on communication accessibility planning for individuals who are <u>blind or have low vision</u>, those who are <u>deaf or hard-of-hearing</u>, and those with <u>limited English proficiency</u>.

Increase Access to Trusted Health Information

- Many people look to their health plan for information not only on how the health plan works but also on resources to help them improve their health, particularly when dealing with chronic illnesses. Improved access to trusted health information has been shown to lead to improved outcomes (see "Health Information Technology Continues to Show Positive Effect on Medical Outcomes: Systematic Review").
- The James Madison University Library's <u>Consumer Health</u> microsite includes sub-pages with links to reliable sources of health information, information for teens and young adults, and information about medications and supplements, among others.

Evaluate the Organization's Health Literacy Programs

- The CDC has developed guidance on <u>evaluating an organization's health literacy program</u>, including recommended sources of communication and health literacy measures.
- The CDC's National Prevention Information Network also offers <u>health communication language and literacy tools</u> to create health materials in plain language to reduce health disparities.
- HHS has a strong focus on health literacy in its Healthy People 2030 initiative, with six objectives related to the topic. See information on these goals and the updated definitions of personal and organizational health literacy at Health Literacy webpages.

Improve Patient Health Literacy

- <u>Health literacy resources</u> assembled by the Office of Disease Prevention and Health Promotion outline steps to improve health literacy, which may help patients to better absorb the information they obtain from written materials or the internet.
- AHRQ also has developed its own health literacy toolkit to support physicians, the <u>Health Literacy Universal Precautions Toolkit, 3rd Edition</u>.
- The companion <u>Guide to Implementing the AHRQ Health Literacy Universal Precautions Toolkit</u> presents advice based on the experiences of 12 primary-care practices that implemented the Toolkit.

APPENDIX A. SCORING METHODOLOGY AND GLOSSARY

NCQA CALCULATION GUIDELINES FOR RATING AND COMPOSITE GLOBAL PROPORTIONS

NCQA's HEDIS 2024, Volume 3: Specifications for Survey Measures contains detailed guidelines for calculating survey results. These guidelines include:

- Criteria for including a survey in the results calculation. A questionnaire must have the final disposition code of *Complete and Valid Survey* to be included in the calculation of plan-level scores.
- Rules for handling appropriately answered questions (i.e., questions that comply with survey skip-pattern instructions).
- Rules for handling inappropriately answered questions (e.g., unanswered questions, multiple-mark questions, questions that should have been skipped, and questions within a skip pattern of an inappropriately answered or skipped gate item).
- Denominator reporting thresholds. Health plans must achieve a denominator of at least 100 responses to obtain a reportable result. If the denominator for a particular survey result calculation is less than 100, NCQA assigns a measure result of "NA."
- Rules for calculating denominators for questions and composites. The denominator for a question is equal to the total number of responses to that question. The denominator for a composite is the average number of responses across all questions in the composite.
- Rules for handling changes in the definition of the submission entity (for example, if a health plan changes how it reports CAHPS results from one year to the next).

COMPOSITE GLOBAL PROPORTIONS

Global proportions are the average proportions of respondents who gave the plan a favorable rating on each question in a composite. The steps involved in calculating the composite global proportion are:

Step 1

For each question in a composite, determine the proportion of respondents selecting the reported response option(s).

Step 2

Calculate the average proportion across all the questions in the composite as illustrated in Table 12 below. These are the composite global proportions. All questions in a composite are weighted equally, regardless of how many members responded.

Table 12. Example of Calculating a Composite Global Proportion

Response option	Question 4	Question 6	Global Proportion
Never or Sometimes	1 / 5 = 0.20	1 / 4 = 0.25	(0.20 + 0.25) / 2 = 0.2250
Usually	2 / 5 = 0.40	1 / 4 = 0.25	(0.40 + 0.25) / 2 = 0.3250
Always	2 / 5 = 0.40	2 / 4 = 0.50	(0.40 + 0.50) / 2 = 0.4500
Usually or Always	4 / 5 = 0.80	3 / 4 = 0.75	(0.80 + 0.75) / 2 = 0.7750

Therefore, 80% and 75% of members respectively provided favorable responses to the *Getting Care Quickly* questions 4 and 6. Averaging these two proportions yields the global proportion score of 77.5% for the *Getting Care Quickly* composite.

NCQA HEALTH PLAN RATINGS METHODOLOGY

NCQA's Health Plan Report Cards rate health plans based on their combined HEDIS® and CAHPS® scores and NCQA Accreditation status. NCQA evaluates health plans on the quality of care patients receive, how happy patients are with their care, and health plans' efforts to keep improving. Accredited plans earn an overall star rating (on a five-star scale) as well as measure-level, HPR composite-level, and HPR sub-composite-level star ratings. Note that HPR uses the terms "composite" and "sub-composite" to refer to groupings of individual measures. HPR composites (e.g., *Patient Experience*) are different from CAHPS composites (e.g., *Getting Care Quickly*).

The list of measures included in NCQA's 2024 Health Plan Ratings is provided in the *Estimated NCQA Health Plan Ratings* (Star Ratings) section (see Table 7 on page 19). Below are the steps to assign star ratings to applicable measures.

ASSIGNMENT OF STAR RATINGS

Step 1

Compare reported rates to the current-year National Percentiles for All Lines of Business. For any reports CSS issues **prior** to NCQA releasing the current-year benchmarks (usually in September), HPR scores are estimated based on the prior-year benchmarks. The reports CSS issues **after** NCQA releases the current-year benchmarks use these updated benchmarks. The reported rate is translated into a measure rating score – the 1-5 score derived by comparing the plan's reported rate to the current-year national 10th, 33rd, 67th, and 90th percentiles for All Lines of Business, unless the measure has a trending concern.

Step 2

Assign individual measure star ratings. The individual measure rating score (ultimately reported as a star rating) is calculated as follows:

- 5 stars: a plan that is in the top one-tenth (decile) of all plans
- 4 stars: a plan that is in the top one-third of plans, but not in the top decile
- 3 stars: a plan in the middle one-third of all plans
- 2 stars: a plan that is in the bottom one-third of plans, but not in the bottom decile

• 1 star: a plan that is in the bottom decile of plans

Step 3

Assign domain (HPR "composite") and sub-domain (HPR "sub-composite") star ratings. Measure rating scores for the *Patient Experience* domain and its three sub-domains (*Getting Care*, *Satisfaction With Plan Physicians*, and *Satisfaction With Plan Services*) are calculated using the formula:

Domain or Sub-Domain Measure Rating Score = ∑ (Measure Rating * Measure Weight) / ∑ Weights

All CAHPS measures have a weight of 1.5.

For example, if a plan earns 3 stars on *Getting Needed Care* and 4 stars on *Getting Care Quickly*, the plan's *Getting Care* sub-domain score is calculated as (3 * 1.5 + 4 * 1.5) / (1.5 + 1.5) = 3.5 stars.

SMALL DENOMINATORS

To be included in HPR scoring, individual *Patient Experience* (CAHPS) measures must achieve a reportable denominator of at least 100 valid responses. *Effectiveness of Care* measures must achieve at least 30 valid responses. An HPR composite or sub-composite star rating is calculated only if at least half of all individual measures comprising the composite or sub-composite have reportable denominators. (Note: CSS ignores individual measure denominators in calculating estimated HPR stars.)

GLOSSARY OF TERMS

Best Practice

CAHPS Surveys

Attributes Areas of health plan performance and member experience assessed with the CAHPS survey.

Benchmark A reference score (e.g., the NCQA National Average rate, the CSS multi-plan average, or the plan's own prior-year rate) against which performance on the measure is assessed.

The result of the top-performing plan on a given measure among all plans included in a reference distribution (e.g., the plans included in the calculation of the CSS multi-plan average).

Consumer Assessment of Healthcare Providers and Systems (CAHPS) is a series of surveys designed to collect consumer feedback on their health care experiences. The CAHPS 5.1H Health Plan Survey asks members to report on their experiences with access to appointments and care through their health plan, communication with doctors available through the plan, and customer service. The Commercial plan version asks about member experiences in the previous twelve months, whereas the Medicaid version refers to the previous six months. The Medicaid version is available for adults and children; the Commercial version is for adults only. The Adult survey is intended for respondents who are 18 and older; the Child survey asks parents or guardians about the experiences of children 17 and younger. Health plans report survey results as part of HEDIS data collection. NCQA uses survey results to create national benchmarks for care and to report health plan performance to consumers. Health plans might also collect CAHPS survey data for internal quality improvement purposes.

Composite measures combine results from related survey questions into a single score to summarize health plan performance in a specific area of care or service. The set of applicable composites varies slightly by survey version.

A confidence interval (CI) is a range of values that is likely to contain the value of an unknown population parameter (e.g., mean or proportion). Since it is usually impossible to measure entire populations, these parameters are estimated using samples. Parameter estimates are subject to random sampling error. A confidence interval places a margin of error around the sample estimate to help us understand how wrong the estimate might be. A narrower CI indicates a more precise estimate, while a wider CI indicates a less precise estimate. For example, suppose the proportion of sample members rating their plan as 9 or 10 is 52%. A 95% confidence interval for the proportion was computed to be [49%, 55%], or 52 (±3%). This means that we are 95% confident that the proportion of the plan population that would rate it as 9 or 10 is between 49% and 55%.

Confidence Interval

Composite Measures

Confidence Level

A confidence level is associated with tests of statistical significance of observed differences in survey scores. It is expressed as a percentage and represents how often the observed difference (e.g., between the plan's current-year rate and the relevant benchmark rate) is real and not simply due to chance. A 95% confidence level associated with a statistical test means that if repeated samples were surveyed, in 95 out of 100 samples the observed measure score would be truly different from the comparison score.

Correlation

A degree of association between two variables, or attributes, typically measured by the *Pearson correlation coefficient*. The coefficient value of 1 indicates a strong positive relationship; -1 indicates a strong negative relationship; zero indicates no relationship at all.

Denominator (*n*, or Usable Responses)

Number of valid (appropriately answered) responses available to calculate a measure result. Examples of inappropriately answered questions include ambiguously marked answers, multiple marks when a single answer choice is expected, and responses that violate survey skip patterns. The denominator for an individual question is the total number of valid responses to that question. The denominator for a composite is the average number of responses across all questions in the composite. If the denominator is less than the NCQA-required minimum of 100 responses, NCQA assigns a measure result of "NA."

Disposition

The final status given to a member record in the survey sample at the end of the study (e.g., completed survey, refusal, non-response, etc.).

Eligible Population

Members who are eligible to participate in the survey based on the following NCQA criteria:

- Current enrollment (as of the date the sample frame is generated). Some members may no longer be enrolled by the time they complete the survey. They become ineligible and will be excluded from survey results based on their responses to the first two questions on the survey, which confirm membership.
- Continuous enrollment (twelve months for Commercial and six months for Medicaid, with no more than one enrollment break of 45 days or less).
- Member age (18 years old or older for the Adult survey and 17 years old or younger for the Child survey as of December 31 of the measurement year).

Primary coverage (through Medicaid or a commercial product line for Medicaid and Commercial surveys, respectively).

Global Proportions

Applies to composite measures. The proportion of respondents selecting the favorable response(s) (e.g., *Usually* or *Always*) averaged across the questions that make up the composite.

Health Plan Ratings (HPR)

NCQA rates health plans in three categories: private/commercial plans in which people enroll through work or on their own; plans that serve Medicare beneficiaries in the Medicare Advantage program (not supplemental plans); and plans that serve Medicaid beneficiaries. NCQA ratings are based on three types of quality measures: measures of clinical quality from NCQA's Healthcare Effectiveness Data and Information Set (HEDIS); measures of patient experience using the Consumer Assessment of Healthcare Providers and Systems (CAHPS); and results from NCQA's review of a health plan's health quality processes (NCQA Accreditation). NCQA rates health plans that choose to report measures publicly.

The overall rating is the weighted average of a plan's HEDIS and CAHPS measure ratings, plus Accreditation bonus points (if the plan is Accredited by NCQA), rounded to the nearest half point and displayed as stars. The overall rating is based on performance on dozens of measures of care and is calculated on a 0-5 (5 is highest) scale in half points. Performance includes three subcategories (also scored 0-5 in half points):

- Patient Experience: Patient-reported experience of care, including experience with doctors, services, and customer service (measures in the Patient Experience category).
- Rates for Clinical Measures: The proportion of eligible members who received preventive services (prevention measures) and the proportion of eligible members who received recommended care for certain conditions (treatment measures).
- NCQA Health Plan Accreditation: For a plan with an Accredited or Provisional status, 0.5 bonus points are added to the overall rating before being rounded to the nearest half point and displayed as stars. A plan with an Interim status receives 0.15 bonus points added to the overall rating before being rounded to the nearest half point and displayed as stars.

HEDIS

The Healthcare Effectiveness Data and Information Set (HEDIS) is a set of performance measures in the managed care industry, developed and maintained by NCQA. HEDIS was designed to allow consumers to compare health plan performance to other plans and to national or regional benchmarks as well as to track year-to-year performance. HEDIS is one component

of NCQA's accreditation process, although some plans submit HEDIS data without seeking accreditation. CAHPS measures are a subset of HEDIS.

Key Drivers

Key Drivers are plan attributes that have been shown to be closely related to members' overall assessment of the plan. Performance on these attributes predicts how the plan is rated overall and when viewed from the industry perspective, helps to distinguish highly rated plans from poorly performing plans.

NCQA

The National Committee for Quality Assurance (NCQA) is an independent non-profit organization that works to improve health care quality through the administration of evidence-based standards, measures, programs, and accreditation. NCQA manages voluntary accreditation programs for individual physicians, medical groups, and health plans. Health plans seek accreditation and measure performance through the administration and submission of the Healthcare Effectiveness Data and Information Set (HEDIS) and Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey.

Oversampling

Sampling more than the minimum NCQA-specified sample size for a given survey type. A health plan must oversample if it cannot eliminate disenrolled members from membership files; correct addresses and, when appropriate, telephone numbers; provide updated, accurate sample frames to the survey vendor by the required date; or if it anticipates a high rate of disenrollment after providing the sample frame to the survey vendor. In such cases, oversampling will help ensure that enough survey-eligible members remain in the sample. Another reason to oversample is to obtain a greater number of completed surveys. For example, the health plan may oversample if it has a prior history of low survey response rates or if it anticipates that a considerable number of the telephone numbers in the membership files are inaccurate. Collecting more completed surveys will help the plan to achieve reportable results and/or detect statistically significant differences or changes in scores. The oversampling rate must be a whole number representing the percent of the base sample to be oversampled (e.g., 7).

Question Summary Rate

Question Summary Rates express the proportion of respondents selecting the response option(s) of interest (typically representing the most favorable outcome(s) from a given question on the survey). Many survey items use a *Never*, *Sometimes*, *Usually*, or *Always* response scale, with *Always* being the most favorable outcome. Results are typically reported as the proportion of members selecting *Usually* or *Always*.

Regression Analysis

Regression analysis is a statistical technique used to identify which variables (e.g., member experience touch points) have a measurable impact on an outcome measure of interest (e.g., overall rating of the health plan).

Response Rate

Survey response rate is calculated by NCQA using the following formula:

Complete and Eligible Surveys

Response Rate =

[Complete and Eligible + Incomplete (but Eligible) + Refusal + Nonresponse after maximum attempts + Added to Do Not Call (DNC) List]

Rolling Average Rate Calculation Method The rolling averages method was introduced by NCQA to accommodate measures with small denominators. To report the results of these measures, there must be at least 100 responses collected over two years of survey administration. The numerators and the denominators of these measures are combined over a two-year period to calculate the final reported rate.

Sample Size

The NCQA-required sample size is 1,100 for Adult Commercial plans, 1,350 for Adult Medicaid plans, and 1,650 for Child Medicaid plans.

Statistically Significant Difference

When survey results are calculated based on sample data and compared to a benchmark score (e.g., the NCQA National Average rate, the CSS multi-plan average, or the plan's own prior-year rate), the question is whether the observed difference is real or due to chance. A difference is said to be statistically significant at a given confidence level (e.g., 95%) if it has a 95% chance of being true.

Trending

Comparison of survey results over time.

Usable Responses (n)

See Denominator.

Valid Response

Any acceptable response to a survey question (i.e., falling within a predefined set) that follows the NCQA skip pattern rules and data cleaning guidelines.

APPENDIX B. SURVEY RESULTS AT A GLANCE

2024 (MY 2023) CAHPS® 5.1H Survey Results at a Glance



Mercy Care (Adult Medicaid Survey)

				Your Organ	ization				Benchmark (Comparison	ıs	Your
Abbreviated Measure Name and Reported Rate		2024		2(023	2	022	-	CSS Adult id Average	Quality National	2022) NCQA Compass Average (All OBs)	Organization's Estimated 2024 NCQA Health Plan Rating
	Rate	95% CI	(n)	Rate	Change	Rate	Change	Rate	Difference	Rate	Difference	(HPR)
PATIENT EXPERIENCE												****
Getting Care												☆☆☆☆ ☆
Getting Needed Care (% A+U)	86.04%	(±4.22)	(260)	no data		no data		80.58%	[+5.46] ✓	80.99%	[+5.05] ✓	★★★☆ ☆
Ease of Getting Needed Care	88.32%	(±3.69)	(291)	no data		no data		84.02%	[+4.30]	84.15%	[+4.17]	Not reported in
Ease of Seeing a Specialist	83.77%	(±4.79)	(228)	no data		no data		77.14%	[+6.63] 🗸	78.29%	[+5.48] ✓	HPR
Getting Care Quickly (% A+U)	84.14%	(±4.82)	(221)	no data		no data		79.24%	[+4.90]	80.36%	[+3.78]	★★★☆ ☆
Ease of Getting Urgent Care	88.51%	(±4.74)	(174)	no data		no data		80.63%	[+7.88] ✓	81.96%	[+6.55] 🗸	Not reported in
Ease of Getting Routine Care	79.78%	(±4.82)	(267)	no data		no data		77.85%	[+1.93]	79.17%	[+0.61]	HPR
Satisfaction With Plan Physicians												★★★☆ ☆
Rating of Doctor (% 9+10)	73.80%	(±4.73)	(332)	no data		no data		68.41%	[+5.38] ✓	67.88%	[+5.92] ✓	★★★☆
Satisfaction With Plan and Plan Services												☆☆☆☆
Rating of Health Plan (% 9+10)	69.25%	(±4.45)	(413)	no data		no data		59.15%	[+10.10] ✓	61.24%	[+8.01] ✓	****
Rating of Health Care (% 9+10)	63.45%	(±5.54)	(290)	no data		no data		56.78%	[+6.67] 🗸	55.65%	[+7.80] ✓	****
ADDITIONAL MEASURES AND RATES												
Coordination of Care (% A+U)	80.65%	(±5.68)	(186)	no data		no data		83.58%	[-2.93]	84.61%	[-3.96]	
Doctor Communication (% A+U)	93.94%	(±2.90)	(260)	no data		no data		92.65%	[+1.29]	92.49%	[+1.45]	
Doctor Explained Things	94.25%	(±2.82)	(261)	no data		no data		92.45%	[+1.80]	92.60%	[+1.65]	
Doctor Listened Carefully	94.25%	(±2.82)	(261)	no data		no data		93.06%	[+1.19]	92.64%	[+1.61]	
Doctor Showed Respect	95.77%	(±2.45)	(260)	no data		no data		94.51%	[+1.26]	94.38%	[+1.39]	
Doctor Spent Enough Time	91.47%	(±3.41)	(258)	no data		no data		90.58%	[+0.89]	90.30%	[+1.17]	
Customer Service (% A+U)	88.83%	(±4.55)	(184)	no data		no data		88.84%	[-0.00]	89.18%	[-0.35]	Not reported in
Customer Service Provided Info/Help	84.15%	(±5.29)	(183)	no data		no data		82.94%	[+1.21]	83.67%	[+0.48]	HPR
Customer Service Courteous/Respectful	93.51%	(±3.55)	(185)	no data		no data		94.73%	[-1.22]	94.69%	[-1.18]	
Rating of Health Care (% 8+9+10)	82.41%	(±4.38)	(290)	no data		no data		75.79%	[+6.62] 🗸	74.55%	[+7.86] ✓	
Rating of Doctor (% 8+9+10)	85.84%	(±3.75)	(332)	no data		no data		83.01%	[+2.83]	82.40%	[+3.44]	
Rating of Specialist (% 8+9+10)	83.71%	(±4.87)	(221)	no data		no data		82.52%	[+1.19]	81.40%	[+2.31]	
Rating of Specialist (% 9+10)	71.95%	(±5.92)	(221)	no data		no data		67.04%	[+4.91]	66.20%	[+5.75]	
Rating of Health Plan (% 8+9+10)	82.08%	(±3.70)	(413)	no data		no data		75.73%	[+6.35] 🗸	77.69%	[+4.39] 🗸	
MEDICAL ASSISTANCE WITH SMOKING CES	SATION											
Advising Smokers to Quit (% A+U+S)	72.60%	(±10.23)	(73)	no data		no data		73.19%	[-0.59]	72.78%	[-0.18]	★★★ ☆☆
Discussing Cessation Meds (% A+U+S)	43.84%	(±11.38)	(73)	no data		no data		48.87%	[-5.03]	51.16%	[-7.32]	Not reported in
Discussing Cessation Strategies (% A+U+S)	39.73%	(±11.23)	(73)	no data		no data		44.48%	[-4.75]	45.43%	[-5.70]	HPR

The 95% confidence interval (CI) and the number of valid responses (n, or measure denominator) are provided for the current-year measure rate only. Statistically significant differences between the current-year rate and the comparison rate are marked with a checkmark (1) symbol.

Unofficial Health Plan Ratings were estimated by CSS based on the prior-year (2023, or MY 2022) NCQA Quality Compass national benchmarks. The official 2024 Health Plan Ratings, based on the current-year (2024, or MY 2023) national benchmarks, will be posted by NCQA on the Health Plan Report Card website in September of 2024.

[&]quot;No data" indicates that the survey was not conducted or the result is not available for comparison.

APPENDIX C. CROSS-TABULATIONS

Mercy Care

CAHPS® 5.1H Adult Medicaid Member Satisfaction Survey for Measurement Year 2023 (Fielded February - May 2024)

Patient Experience Measures

	Re	eportable Rat	es		Health Plan (HPR)
	2023 NCQA Quality Compass National	2024 CSS Average	Plan Rate	Percentile	Stars
	Average, All LOBs		2024		
Consumer Satisfaction					4.5
Getting Care				<u>, </u>	4.0
Getting Needed Care	80.99%	80.58%	86.04%	67th	4.0
Getting Care Quickly	80.36%	79.24%	84.14%	67th	4.0
Satisfaction with Plan Physicians					4.0
Rating of Personal Doctor	67.88%	68.41%	73.80%	67th	4.0
Satisfaction with Plan and Plan Services					5.0
Rating of All Health Care	55.65%	56.78%	63.45%	90th	5.0
Rating of Health Plan	61.24%	59.15%	69.25%	90th	5.0
Non-HPR Measures					
Rating of Specialist Seen Most Often	66.20%	67.04%	71.95%		
Coordination of Care	84.61%	83.58%	80.65%		
How Well Doctors Communicate	92.49%	92.65%	93.94%		
Customer Service	89.18%	88.84%	88.83%		

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Note: The official Health Plan Ratings (HPR) scores will be released by NCQA in September 2024 using current year (2024 or MY 2023) benchmarks. The results presented in this report use the 2023 benchmarks (MY 2022) released by NCQA to estimate the MY 2023 HPR; therefore the HPR scores presented in this report should be treated as estimates. Results are presented for NCQA's top-box rates (% 9+10 or % Usually+Always). At least 100 valid responses must be collected for a measure to be reportable by NCQA. A lighter display is used to indicate that a result is not reportable by NCQA due to insufficient denominator (fewer than 100 responses). In such cases, CSS calculates measure results only for internal plan reporting.

Mercy Care

CAHPS® 5.1H Adult Medicaid Member Satisfaction Survey for Measurement Year 2023 (Fielded February - May 2024)

Effectiveness of Care Measures

		2024 Reported Rate	2024 Rate (Single Year)
Medical Assistance with Smoking and Tobacco Use Cess	ation (MSC)		
Base: All eligible respondents who smoke or use tobacco			
	Advised to quit	53	53
Advising Smokers and Tobacco Users to Quit	Usable responses	73	73
	MSC Rate	72.6%	72.6%
	Discussed medications	32	32
Discussing Cessation Medications	Usable responses	73	73
	MSC Rate	43.8%	43.8%
	Discussed strategies	29	29
Discussing Cessation Strategies	Usable responses	73	73
	MSC Rate	39.7%	39.7%

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Note: Results are presented regardless of whether the plan is reporting the measure(s) to NCQA or meets the minimum reporting threshold of 100 valid responses. A lighter display is used to indicate that the measure does not meet the NCQA minimum denominator threshold. The 2024 Reported Rate for the MSC measures were calculated using NCQA's rolling average methodology. For more detail on the calculation of these rates, please refer to HEDIS® Measurement Year 2023, Volume 3: Specifications for Survey Measures, Section 2: Effectiveness of Care. CSS provides unofficial Effectiveness of Care results only for internal plan reporting.

Question 3

In the last 6 months, did you have an illness, injury, or condition that <u>needed care right away</u>?

Base: All respondents

	rage			Age (Q35)			ider 36)	E	ducation	า	Ethn (Q:	icity 38)		Race (Q39)			n Care Vi ast 6 Mo: (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poob	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	67	4	2	0	1	2	2	2	1	0	1	3	2	0	2	1	3	0	1	2	1
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,343	426	123	135	152	161	253	222	132	51	184	222	240	29	115	122	205	85	130	152	136
	98.8%	99.1%	98.4%	100.0%	99.3%	98.8%	99.2%	99.1%	99.2%	100.0%	99.5%	98.7%	99.2%	100.0%	98.3%	99.2%	98.6%	100.0%	99.2%	98.7%	99.3%
Yes	1,874	182	45	63	68	70	107	90	55	29	74	99	103	14	48	17	101	57	49	55	73
	35.1%	42.7%	36.6%	46.7%	44.7%	43.5%	42.3%	40.5%	41.7%	56.9%	40.2%	44.6%	42.9%	48.3%	41.7%	13.9%	49.3%	67.1%	37.7%	36.2%	53.7%
No	3,469	244	78	72	84	91	146	132	77	22	110	123	137	15	67	105	104	28	81	97	63
	64.9%	57.3%	63.4%	53.3%	55.3%	56.5%	57.7%	59.5%	58.3%	43.1%	59.8%	55.4%	57.1%	51.7%	58.3%	86.1%	50.7%	32.9%	62.3%	63.8%	46.3%
Significantly different from column:*		Α						J		Н						QR	PR	PQ	U	U	ST

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^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 4

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

Base: All respondents who needed care right away (Q3)

	verage			Age		Ger		E	ducation	า		icity		Race			Care Vis		He	alth Stat	us
	<u>r</u> a			(Q35)		(Q:	36)		(Q37)		(Q.	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	рооЭ	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	1,874	182	45	63	68	70	107	90	55	29	74	99	103	14	48	17	101	57	49	55	73
Number missing or multiple answer	57	8	0	0	8	2	6	2	6	0	0	8	6	2	0	0	5	3	3	2	3
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,817 97.0%	174 95.6%	_	63 100.0%	60 88.2%	68 97.1%	101 94.4%	88 97.8%	49 89.1%	29 100.0%	74 100.0%	91 91.9%	97 94.2%	12 85.7%	48 100.0%	17 100.0%	96 95.0%	54 94.7%	46 93.9%	53 96.4%	70 95.9%
Never	51 2.8%	3 1.7%	0	1	1	1	2	3 3.4%	0 0.0%	0 0.0%	1	1	2	0 0.0%	1 2.1%	1	0	1 1.9%	0 0.0%	0.0%	3 4.3%
Sometimes	301 16.6%	17 9.8%	11	2	4	6	11	9 10.2%	6	2 6.9%	9	8	9	1 8.3%	5	2	12	1 1.9%	6 13.0%	5 9.4%	6 8.6%
Usually	398 21.9%	44 25.3%	14	13	15 25.0%	16	27	23	11	8	20	23	20	5	15	3 17.6%	29	12 22.2%	9	11	23
Always	1,067 58.7%	110 63.2%	20	47	40	45	61	53	32	19	44	59	66	6 50.0%	27	11	55	40	31	37	38
Significantly different from column:*			DE	С	С												R	Q			
Usually or Always	1,465 80.6%	154 88.5%	75.6%	I	55 91.7%		88 87.1%		43 87.8%	27 93.1%	64 86.5%	82 90.1%		11 91.7%	42 87.5%	14 82.4%		52 96.3%	40 87.0%		
Significantly different from column:*		Α	DE	C	С															1	

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 5

In the last 6 months, did you make any in person, phone, or video appointments for a check-up or routine care?

Base: All respondents

	rage			Age (Q35)		Ger (Q:	ider 36)	E	ducation	1	Ethn (Q3	,		Race (Q39)			Care Vi ast 6 Mos (Q7)		He	alth Stat (Q29)	us
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	84	10	0	4	6	2	8	5	4	0	3	5	6	0	3	0	5	1	2	3	5
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,326 98.4%		125 100.0%	131 97.0%	147 96.1%	161 98.8%	247 96.9%	219 97.8%		51 100.0%	182 98.4%		236 97.5%	29 100.0%	114 97.4%	123 100.0%	203 97.6%			151 98.1%	132 96.4%
Yes	3,168 59.5%	278 66.2%		87 66.4%	113 76.9%	100 62.1%	169 68.4%	135 61.6%		44 86.3%				20 69.0%	77 67.5%	31 25.2%	164 80.8%	76 90.5%		104 68.9%	94 71.2%
No	2,158			44	34	61	78	-		7	69			9	37	92	39		54	47	38
	40.5%		46.4%	33.6%	23.1%	37.9%			34.1%	13.7%	37.9%		32.6%	31.0%	32.5%				41.9%	31.1%	28.8%
Significantly different from column:*		Α	DE	С	С			J	J	HI						QR	PR	PQ	U		S

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^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 6

In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> as soon as you needed?

Base: All respondents who made an appointment for a check-up or routine care (Q5)

	је			Age		Ger	nder	Е	ducation	า	Ethn	icity		Race			Care Vis		Не	alth Stat	us
	erage			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,168	278	67	87	113	100	169	135	85	44	113	154	159	20	77	31	164	76	75	104	94
Number missing or multiple answer	85	11	0	1	9	2	9	4	4	2	2	7	6	1	3	1	7	3	3	6	2
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,083	267	67	86	104	98	160	131	81	42	111	147		19	74	30	157	73	72	98	92
	97.3%	96.0%	100.0%	98.9%	92.0%	98.0%	94.7%	97.0%	95.3%	95.5%	98.2%	95.5%	96.2%	95.0%	96.1%	96.8%	95.7%	96.1%	96.0%	94.2%	97.9%
Never	96	5	2	2	1	4	1	3	1	1	3	2	2	0	3	2	3	0	2	1	2
	3.1%	1.9%	3.0%	2.3%	1.0%	4.1%	0.6%	2.3%	1.2%	2.4%	2.7%	1.4%	1.3%	0.0%	4.1%	6.7%	1.9%	0.0%	2.8%	1.0%	2.2%
Sometimes	587	49		10	11	15	33	25	13	8	22	26	25	3	18	11	34	3	20	18	10
	19.0%	18.4%	40.3%	11.6%	10.6%	15.3%	20.6%	19.1%	16.0%	19.0%	19.8%	17.7%	16.3%	15.8%	24.3%	36.7%	21.7%	4.1%	27.8%	18.4%	10.9%
Usually	806	83	18	22	40	28	52	41	25	14	31	49	49	5	21	5	55	23	19	25	38
	26.1%	31.1%		25.6%	38.5%	28.6%	32.5%	31.3%	30.9%	33.3%	27.9%	33.3%	32.0%	26.3%	28.4%	16.7%	35.0%	31.5%	26.4%	25.5%	41.3%
Always	1,594	130	20	52	52	51	74	62	42	19	55	70	77	11	32	12	65	47	31	54	42
	51.7%	48.7%	29.9%	60.5%	50.0%	52.0%	46.3%	47.3%	51.9%	45.2%	49.5%	47.6%	50.3%	57.9%	43.2%	40.0%	41.4%	64.4%	43.1%	55.1%	45.7%
Significantly different from column:*			DE	С	С											R	R	PQ			
Usually or Always	2,400	213			92			103	67	33	86			16			120	70	50	79	80
	77.8%	79.8%		86.0%	88.5%	80.6%	78.8%	78.6%	82.7%	78.6%	77.5%	81.0%	82.4%	84.2%	71.6%	56.7%	76.4%	95.9%	69.4%	80.6%	
Significantly different from column:*			DE	С	С											Q	PR	Q	U		S

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 7

In the last 6 months, <u>not</u> counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone, or by video?

Base: All respondents

	4)			Age		Gen	ıder	E	ducation	า	Ethn	icity		Race			Care Vis		He	alth Stat	us
	Average			(Q35)		(Q3	36)		(Q37)	_	(Q:	38)		(Q39)		L L	ast 6 Mos (Q7)	5.		(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	рооЭ	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	134	14	2	3	7	3	11	10	1	2	6	5	7	1	4	0	0	0	2	6	6
Number no experience	NA 5 276	NA	NA	NA	NA 1.16	NA 160	NA	NA	NA	NA	NA 170	NA		NA	NA	NA	NA	NA	NA	NA	NA 121
Usable responses	5,276 97.5%	416 96.7%	123 98.4%	132 97.8%	146 95.4%	160 98.2%	244 95.7%	214 95.5%	132 99.2%	49 96.1%	179 96.8%	220 97.8%		28 96.6%	113 96.6%	123 100.0%	208 100.0%	85 100.0%	129 98.5%	148 96.1%	131 95.6%
None	1,907	123	54	37	25	53	66	74	34	10	63	55		7	38	123	0	0	52	42	26
	36.1%	29.6%	43.9%	28.0%	17.1%	33.1%	27.0%	34.6%	25.8%	20.4%	35.2%	25.0%	26.0%	25.0%	33.6%	100.0%	0.0%	0.0%	40.3%	28.4%	19.8%
1 time	839	51	19	10	21	20	30	28	16	5	24	25	22	4	19	0	51	0	17	21	11
	15.9%	12.3%		7.6%	14.4%	12.5%	12.3%		12.1%	10.2%				14.3%	16.8%	0.0%	24.5%	0.0%	13.2%	14.2%	8.4%
2	763	65	14	26	23	26	38	30	19	12	23	39		3	16	0	65	0	19	23	23
3	14.5% 577	15.6% 40	11.4% 13	19.7%	15.8%	16.3% 12	15.6% 26	14.0% 26	14.4% 10	24.5%	12.8% 22	17.7% 16	18.3% 24	10.7%	14.2%	0.0%	31.3% 40	0.0%	14.7% 13	15.5% 13	17.6%
ľ	10.9%	9.6%		6.1%	11.6%	7.5%	10.7%	12.1%	7.6%	4.1%		7.3%	- 1	7.1%	6.2%	0.0%	19.2%	0.0%	10.1%	8.8%	9.9%
4	353	52	12	18	21	23	28	21	23	5	17	34	33	5	12	0.070	52	0.070	12	24	16
	6.7%	12.5%		13.6%	14.4%	14.4%	11.5%	9.8%	17.4%	10.2%	9.5%	15.5%	14.0%	17.9%	10.6%	0.0%		0.0%	9.3%	16.2%	12.2%
5 to 9	540	50		19	26	14	33	21	16	10	16	31	30	5	11	0	0	50	8	12	28
	10.2%	12.0%	2.4%	14.4%	17.8%	8.8%	13.5%	9.8%	12.1%	20.4%	8.9%	14.1%	12.8%	17.9%	9.7%	0.0%	0.0%	58.8%	6.2%	8.1%	21.4%
10 or more times	297 5.6%	35 8.4%	8 6.5%	14 10.6%	13 8.9%	12 7.5%	23 9.4%	14 6.5%	14 10.6%	5 10.2%	14 7.8%	20 9.1%	22 9.4%	2 7.1%	10 8.8%	0.0%	0.0%	35 41.2%	8 6.2%	13 8.8%	14 10.7%
5 or more times	837	85		33	39	26	56	35	30	15.2 %	30	51		7.1.70	21	0.070	0.070	85	16	25	42
	15.9%	20.4%	8.9%	25.0%	26.7%	16.3%	23.0%	16.4%	22.7%	30.6%				25.0%	18.6%	0.0%	0.0%	100.0%	12.4%	16.9%	32.1%
Significantly different from column:*		Α	DE	С	С			J		Н						R	R	PQ	U	U	ST

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

4993000

Question 8

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

Base: All respondents who went to a doctor's office/clinic to get care (Q7)

Base: All respondents who went to a doctor's office				Age		Ger	ıder	E	ducation	า	Ethn	icity		Race			n Care Vi ast 6 Mos		Не	alth Statı	us
	raç			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	T	U
Number in sample	3,369	293	69	95	121	107	178	140	98	39	116	165	174	21	75	0	208	85	77	106	105
Number missing or multiple answer	35	3	0	0	3	1	2			0	0	3	2	1	0	0	3	0	0	. 2	1
Number no experience	NA 3,334	NA 290	NA 69	NA 95	NA 118	NA 106	NA 176	NA 138	NA 97	NA 39	NA 116	NA 162	NA 172	NA 20	NA 75	NA	NA 205	NA 85	NA 77	NA 104	NA 104
Usable responses	99.0%		100.0%		97.5%			98.6%		100.0%		98.2%			100.0%			100.0%		98.1%	
0 Worst health care possible	17	99.070	100.070	100.070	97.370 1	99.1 /0 O	90.970	90.070	99.0 /0	100.0 /0 0	100.070	90.2 /0 1	90.970	93.2 /0 0	100.0 /0	0	90.070	100.0 /0 O	100.070	0.170	33.0 /0
o monot meanth can a possible	0.5%	0.3%	0.0%	0.0%	0.8%	0.0%	0.6%	0.0%	1.0%	0.0%	0.0%	0.6%	0.6%	0.0%	0.0%		0.5%	0.0%	0.0%	0.0%	1.0%
1	12	1	0	0	1	0	1	0	0	1	0	1	1	0	0	0	0	1	0	0	1
	0.4%	0.3%	0.0%	0.0%	0.8%	0.0%	0.6%	0.0%	0.0%	2.6%	0.0%	0.6%	0.6%	0.0%	0.0%		0.0%	1.2%	0.0%	0.0%	1.0%
2	26	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0.8%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%
3	34	1	0	0	1	1	0	0	1	0	0	1	0	0	1	0	-	0	0	0	1
	1.0%	0.3%	0.0%	0.0%	0.8%	0.9%	0.0%	0.0%	1.0%	0.0%	0.0%	0.6%	0.0%	0.0%	1.3%		0.5%	0.0%	0.0%	0.0%	1.0%
4	57	3	0 000	1 10/	1 70/	0 000	1 70/	3	0 000	0 004	1 70/	0.604	0 00/	0 000	2 70/	0	I -I	1 20/	0 00/	1 00/	1.00/
5	1.7% 169	1.0% 15	0.0%	1.1%	1.7%	0.0%	1.7% 10	2.2%	0.0%	0.0%	1.7%	0.6%	0.0%	0.0%	2.7%		1.0% 12	1.2%	0.0%	1.0%	1.9%
	5.1%	5.2%	10.1%	3.2%	3.4%	3.8%	5.7%	6.5%	5.2%	0.0%	6.9%	3.7%	4.1%	0.0%	9.3%		5.9%	3.5%	5.2%	2.9%	6.7%
6	143	6	0	3.270	3.470	2.0 %	3.7 70	5	0.270	0.070	1	5.7 70	3	1	2.570	0	5.576	0.570	2.270	2.5 %	2
	4.3%	2.1%	0.0%	3.2%	2.5%	1.9%	2.3%	3.6%	0.0%	0.0%	0.9%	3.1%	1.7%	5.0%	2.7%		2.9%	0.0%	2.6%	1.9%	1.9%
7	349	24	8	9	7	9	15	7	11	4	6	17	18	0	5	0	17	7	6	6	12
	10.5%	8.3%	11.6%	9.5%	5.9%	8.5%	8.5%	5.1%	11.3%	10.3%	5.2%	10.5%	10.5%	0.0%	6.7%		8.3%	8.2%	7.8%	5.8%	11.5%
8	634	55	13	18	22	20	33	24	13	16	22	31	30	5	14	0	43	12	12	21	21
	19.0%	19.0%	18.8%	18.9%	18.6%		18.8%	17.4%	13.4%	41.0%	19.0%	19.1%		25.0%	18.7%		21.0%	14.1%	15.6%	20.2%	20.2%
9	531	40	9	12	18	15	23	22	13	3	12	26	29	3	6	0	29	11	9	15	15
10 Post health care possible	15.9%	13.8%		12.6%	15.3%		13.1%	15.9%	13.4%	7.7%				15.0%	8.0%		14.1%	12.9%	11.7%	14.4%	14.4%
10 Best health care possible	1,362 40.9%	144 49.7%	32 46.4%	49 51.6%	59 50.0%	55 51.9%	86 48 0%	68 49.3%	53 54.6%	15 29 5%	65 56 0%	73 45 106	83 48.3%	11 55 00/	38 50.7%	0	94 45 0%	50 58.8%	44 57.1%	56 52 804	42 40.4%
NA Nataraliashla	40.9%	49.7%	40.4%	51.0%	50.0%	31.9%	48.9%	49.3%	34.0%	38.5%	56.0%	45.1%	48.5%	55.0%	50.7%		45.9%	ეთ. ბ%	57.1%	53.8%	40.4%

Question 8

Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months?

Base: All respondents who went to a doctor's office/clinic to get care (Q7)

	age			Age (Q35)		Ger (Q:		E	Education (Q37)	า	Ethn (Q3	,		Race (Q39)			Care Visast 6 Mos (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample Number missing or multiple answer Number no experience	3,369 35 NA	293 3 NA	0	0	121 3 NA	107 1 NA	178 2 NA	140 2 NA	98 1 NA	39 0 NA	116 0 NA	165 3 NA	2	21 1 NA	75 0 NA	0 0 NA	208 3 NA	85 0 NA	77 0 NA	106 2 NA	105 1 NA
Usable responses	3,334 99.0%	290	69		118 97.5%	106	176	138	97	39	116 100.0%	162	172	20	75 100.0%	0	205	85	77 100.0%	104 98.1%	104 99.0%
0 to 4	146 4.4%	6 2.1%	0.0%	1 1.1%	5 4.2%	1 0.9%	5 2.8%	3 2.2%	2 2.1%	1 2.6%	2 1.7%	4 2.5%	2 1.2%	0.0%	3 4.0%	0	4 2.0%	2 2.4%	0 0.0%	1 1.0%	5 4.8%
5	169 5.1%	15 5.2%		3.2%	4 3.4%	4 3.8%	10 5.7%	9 6.5%	5 5.2%	0.0%	8 6.9%	6 3.7%	7 4.1%	0.0%	7 9.3%	0	12 5.9%	3 3.5%	4 5.2%	3 2.9%	7 6.7%
6 to 7	492 14.8%	30 10.3%		12 12.6%	10 8.5%	11 10.4%	19 10.8%	12 8.7%	11 11.3%	4 10.3%	7 6.0%	22 13.6%		1 5.0%	7 9.3%	0	23 11.2%	7 8.2%	8 10.4%	8 7.7%	14 13.5%
8 to 10	2,527 75.8%	239 82.4%		1	99 83.9%	90 84.9%	142 80.7%	114 82.6%	79 81.4%		99 85.3%	130 80.2%		19 95.0%	58 77.3%	0 	166 81.0%	73 85.9%	65 84.4%	92 88.5%	78 75.0%
Significantly different from column:*		Α																		U	Т
0 to 6	458 13.7%	27 9.3%		7.4%	12 10.2%	7 6.6%	19 10.8%	17 12.3%	7 7.2%	2.6%	11 9.5%	15 9.3%		1 5.0%	12 16.0%	0 	22 10.7%	5.9%	6 7.8%	6 5.8%	14 13.5%
7 to 8	983 29.5%	79 27.2%		27 28.4%	29 24.6%	29 27.4%	48 27.3%	31 22.5%	24 24.7%	20 51.3%	28 24.1%	48 29.6%	-	5 25.0%	19 25.3%	0 	60 29.3%	19 22.4%	18 23.4%	27 26.0%	33 31.7%
9 to 10	1,893 56.8%	184 63.4%		61 64.2%	77 65.3%	70 66.0%	109 61.9%	90 65.2%	66 68.0%	18 46.2%		99 61.1%		14 70.0%	44 58.7%	0	123 60.0%	61 71.8%	53 68.8%	71 68.3%	57 54.8%
Significantly different from column:*		Α						J	J	HI										U	Т

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 9

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

Base: All respondents who went to a doctor's office/clinic to get care (Q7)

	je			Age		Ger	ıder	Е	ducation	ı	Ethn	icity		Race			Care Vi		Не	alth Stat	us
	verage			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,369	293	69	95	121	107	178	140	98	39	116	165	174	21	75	0	208	85	77	106	105
Number missing or multiple answer	34	2	0	0	2	0	2	2	0	0	1	1	0	1	0	0	2	0	0	2	0
Number no experience	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,335	291	69		119	107	176	138	98	39	115	164		20	75	0	206	85	77	104	105
	99.0%	99.3%	100.0%	100.0%	98.3%	100.0%	98.9%	98.6%	100.0%	100.0%	99.1%	99.4%	100.0%	95.2%	100.0%		99.0%	100.0%	100.0%	98.1%	100.0%
Never	73	3	1	1	1	0	3	2	0	1	2	1	1	0	2	0	2	1	1	0	2
	2.2%	1.0%	1.4%	1.1%	0.8%	0.0%	1.7%	1.4%	0.0%	2.6%	1.7%	0.6%	0.6%	0.0%	2.7%		1.0%	1.2%	1.3%	0.0%	1.9%
Sometimes	460	31	9	15	7	11	20	13	13	3	13	18	18	1	9	0	22	9	3	12	16
	13.8%	10.7%	13.0%	15.8%	5.9%	10.3%	11.4%	9.4%	13.3%	7.7%	11.3%	11.0%	10.3%	5.0%	12.0%		10.7%	10.6%	3.9%	11.5%	15.2%
Usually	960	88	26	23	36	24	61	46	28	11	39	46	49	4	29	0	62	26	24	28	35
	28.8%	30.2%			30.3%		34.7%	33.3%		28.2%	33.9%	28.0%	28.2%	20.0%			30.1%	30.6%	31.2%	26.9%	33.3%
Always	1,842	169	33	56	75	72	92	77	57	24	61	99	106	15	35	0	120	49	49	64	52
	55.2%	58.1%	47.8%	58.9%	63.0%	67.3%	52.3%	55.8%	58.2%	61.5%	53.0%	60.4%	60.9%	75.0%	46.7%		58.3%	57.6%	63.6%	61.5%	49.5%
Significantly different from column:*			E		С	G	F						0	0	MN						
Usually or Always	2,802	257			111	96		123	85	35	100			19	64	0		75	73	92	87
	84.0%	88.3%	85.5%	83.2%	93.3%	89.7%	86.9%	89.1%	86.7%	89.7%	87.0%	88.4%	89.1%	95.0%	85.3%		88.3%	88.2%	94.8%	88.5%	82.9%
Significantly different from column:*				Е	D														U		S

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 10

A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

Base: All respondents

	ge			Age			ıder	Е	ducation	า		icity		Race			n Care Vi ast 6 Mos		Не	alth Stat	us
	ra			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	60	3	1	0	2	1	2	2	1	0	2	1	2	0	1	2	0	0	2	1	0
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,350	427	124	135	151	162	253	222	132	51	183	224	240	29	116	121	208	85	129	153	137
	98.9%	99.3%	99.2%	100.0%	98.7%	99.4%	99.2%	99.1%	99.2%	100.0%	98.9%	99.6%	99.2%	100.0%	99.1%	98.4%	100.0%	100.0%	98.5%	99.4%	100.0%
Yes	4,207	341	82	111	135	126	204	172	108	43	141	184	195	25	90	73	183	74	99	123	112
	78.6%	79.9%	66.1%	82.2%	89.4%	77.8%	80.6%	77.5%	81.8%	84.3%	77.0%	82.1%	81.3%	86.2%	77.6%	60.3%	88.0%	87.1%	76.7%	80.4%	81.8%
No	1,143	86	42	24	16	36	49	50	24	8	42	40	45	4	26	48	25	11	30	30	25
	21.4%	20.1%	33.9%	17.8%	10.6%	22.2%	19.4%	22.5%	18.2%	15.7%	23.0%	17.9%	18.8%	13.8%	22.4%	39.7%	12.0%	12.9%	23.3%	19.6%	18.2%
Significantly different from column:*			DE	С	С											QR	Р	Р			

4993000

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 11

In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health?

Base: All respondents who have a personal doctor (Q10)

	Average			Age (Q35)		Gen (Q3		Е	ducation	1	Ethn (O3	icity 38)		Race (Q39)			n Care Vis ast 6 Mos (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	4,207	341	82	111	135	126	204	172	108	43	141	184	195	25	90	73	183	74	99	123	112
Number missing or multiple answer	112	15		4	9	7	8	7	4	2	6	8	3	2	8	3	6	2	4	6	4
Number no experience	NA 4 005	NA	NA	NA	NA 126	NA 110	NA 106	NA	NA 104	NA		NA 176	NA	NA	NA	NA	NA	NA	NA	NA	NA 100
Usable responses	4,095 97.3%	326 95.6%		107 96.4%	126 93.3%	119 94.4%	196 96.1%	165 95.9%	104 96.3%	41 95.3%	135 95.7%	176 95.7%	192 98.5%	23 92.0%	82 91.1%	70 95.9%	177 96.7%	72 97.3%	95 96.0%	117 95.1%	108 96.4%
None	967	64	21	25	15	23	39	31	22	8	30	30	39	2	18	36	19	7	21	23	18
	23.6%	19.6%	26.3%	23.4%	11.9%	19.3%	19.9%	18.8%	21.2%	19.5%	22.2%	17.0%	20.3%	8.7%	22.0%	51.4%	10.7%	9.7%	22.1%	19.7%	16.7%
1 time	1,053	79		21	27	33	44	33	32	11	37	39	47	5	20	16	53	7	28	36	15
	25.7%	24.2%			21.4%		22.4%	20.0%	30.8%	26.8%			24.5%	21.7%	24.4%	22.9%		9.7%	29.5%	30.8%	13.9%
2	875	67	_	21	31	26	40	38	16	11	20	45	37	6	19	11	48	7	16	25	25
3	21.4% 500	20.6% 54	16.3%	19.6% 22	24.6% 22	21.8%	20.4% 35	23.0% 32	15.4% 15	26.8%	14.8% 22	25.6% 29	19.3% 32	26.1%	23.2% 12	15.7%	27.1% 32	9.7%	16.8%	21.4% 16	23.1%
ľ	12.2%	16.6%	10.0%		17.5%	14.3%	17.9%	19.4%	14.4%	7.3%				13.0%	14.6%	8.6%		20.8%	14.7%	13.7%	20.4%
4	254	24	5	3	15	8	14	12	7	4	12	11	16	3	4	1	14	9	9	4	11
	6.2%	7.4%	6.3%	2.8%	11.9%	6.7%	7.1%	7.3%	6.7%	9.8%	8.9%	6.3%	8.3%	13.0%	4.9%	1.4%	7.9%	12.5%	9.5%	3.4%	10.2%
5 to 9	341	33		14	12	10	21	16	10	4	14	17	19	2	8	0	10	23	5	13	14
	8.3%	10.1%	6.3%	13.1%	9.5%	8.4%	10.7%	9.7%	9.6%	9.8%	10.4%	9.7%	9.9%	8.7%	9.8%	0.0%	5.6%	31.9%	5.3%	11.1%	13.0%
10 or more times	105	5	0	1	4	2	3	3	2	0	0	5	2	2	1	0	1	4	2	0	3
	2.6%	1.5%		0.9%	3.2%		1.5%	1.8%	1.9%	0.0%	0.0%	2.8%	1.0%	8.7%	1.2%	0.0%	0.6%	5.6%	2.1%	0.0%	2.8%
5 or more times	446	38		15	16	12	24	19	12	4	14	22	21	4	9	0	11	27	7	13	17
	10.9%	11.7%	6.3%	14.0%	12.7%	10.1%	12.2%	11.5%	11.5%	9.8%	10.4%	12.5%	10.9%	17.4%	11.0%	0.0%	6.2%	37.5%	7.4%	11.1%	15.7%
Significantly different from column:*																R	R	PQ			

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 12

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

Base: All respondents who have a personal doctor and visited their personal doctor to get care (Q10 & Q11)

	ge			Age		Gen		Е	ducation	١		icity		Race			n Care Vi		He	alth Stat	us
	era			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	рооЭ	Fair or Poor
	Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,128	262	59	82	111	96	157	134	82	33	105	146	153	21	64	34	158	65	74	94	90
Number missing or multiple answer	14	1	0	0	1	0	1	1	0	0	0	1	1	0	0	0	1	0	0	1	0
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,114 99.6%	261 99.6%	59 100.0%	82 100.0%	110 99.1%	96 100.0%	156 99.4%	133 99.3%	82 100.0%	33 100.0%	105 100.0%	145 99.3%	152 99.3%	21 100.0%	64 100.0%	34 100.0%	157 99.4%	65 100.0%	74 100.0%	93 98.9%	90 100.0%
Never	32 1.0%	2 0.8%	0.0%	1 1.2%	1 0.9%	1 1.0%	1 0.6%	1 0.8%	0 0.0%	1 3.0%	0.0%	2 1.4%	0.0%	1 4.8%	1 1.6%	0.0%	2 1.3%	0.0%	1 1.4%	1 1.1%	0 0.0%
Sometimes	203 6.5%	13 5.0%		5 6.1%	7 6.4%	3 3.1%	10 6.4%	7 5.3%	6 7.3%	0.0%	6 5.7%	7 4.8%	8 5.3%	0 0.0%	5 7.8%	2 5.9%	7 4.5%	3 4.6%	0.0%	6 6.5%	7 7.8%
Usually	528 17.0%	57 21.8%	23 39.0%	10 12.2%	24 21.8%	20 20.8%	37 23.7%	33 24.8%	15 18.3%	9 27.3%	28 26.7%	29 20.0%	33 21.7%	6 28.6%	14 21.9%	8 23.5%	35 22.3%	13 20.0%	16 21.6%	23 24.7%	18 20.0%
Always	2,351 75.5%	189 72.4%		66 80.5%	78 70.9%		108 69.2%	92 69.2%	61 74.4%	23 69.7%	71 67.6%	107 73.8%	111 73.0%	14 66.7%	44 68.8%	24 70.6%	113 72.0%	49 75.4%	57 77.0%	63 67.7%	65 72.2%
Significantly different from column:*			D	С																	
Usually or Always	2,879 92.5%	246 94.3%			102 92.7%			125 94.0%	76 92.7%	32 97.0%	99 94.3%	136 93.8%	144 94.7%	20 95.2%	58 90.6%	32 94.1%		62 95.4%	73 98.6%	86 92.5%	83 92.2%
Significantly different from column:*																					

4993000

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 13

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

Base: All respondents who have a personal doctor and visited their personal doctor to get care (Q10 & Q11)

	је			Age		Ger	ıder	E	ducation	ı	Ethn	nicity		Race			Care Vis		He	alth Stat	us
	erage			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,128	262	59	82	111	96	157	134	82	33	105	146	153	21	64	34	158	65	74	94	90
Number missing or multiple answer	14	1	0	0	1	0	1	1	0	0	0	1	1	0	0	0	1	0	0	1	0
Number no experience	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,114	261	59		110	96	156	133	82	33	105	145		21	64	34	157	65	74	93	90
	99.6%	99.6%	100.0%	100.0%	99.1%	100.0%	99.4%	99.3%	100.0%	100.0%	100.0%	99.3%	99.3%	100.0%	100.0%	100.0%	99.4%	100.0%	100.0%	98.9%	100.0%
Never	28	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0.9%	0.0%		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Sometimes	188	15		6	7	2	13	8	5	2	7	8	10	0	5	1	8	5	2	4	9
	6.0%	5.7%			6.4%				6.1%	6.1%				0.0%		2.9%		7.7%	2.7%	4.3%	10.0%
Usually	482	46			17	17	27	25	12	7	21	23		4 10 00/	12	4	34	8	10	25	10
Alwaye	15.5%	17.6% 200			15.5%		17.3%		14.6%	21.2%									13.5%	26.9%	11.1%
Always	2,416				86 70 20/	77	116	100	65	24	77	114		17	47	29	115	52	62	64	70.00/
Cianificantly, different from column *	77.6%	76.6%	66.1% D	81.7%	78.2%	80.2%	74.4%	75.2%	79.3%	72.7%	73.3%	78.6%	76.3%	81.0%	73.4%	85.3%	73.2%	80.0%	83.8%	68.8% S	78.9%
Significantly different from column:*	2 000	246	_	76	102	0.4	143	125	77	21	00	127	1.42	21	Ε0	22	140	60	72		
Usually or Always	2,898	246			103		143		77	31	98			21	59	33		60	72	89 05 7%	81
Significantly different from column:*	93.1%	94.3%	96.6%	92.7%	93.6%	97.9% G	91.7% F	94.0%	93.9%	93.9%	93.3%	94.5%	93.4%	100.0%	92.2%	97.1%	94.9%	92.3%	97.3%	95.7%	90.0%

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 14

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

Base: All respondents who have a personal doctor and visited their personal doctor to get care (Q10 & Q11)

	erage			Age			nder	E	ducation	ı		icity		Race			Care Vi		Не	alth Stat	us
	<u>0</u>			(Q35)		(Q.	36)		(Q37)		(Q.	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,128	262	59	82	111	96	157	134	82	33	105	146	153	21	64	34	158	65	74	94	90
Number missing or multiple answer	15	2	0	0	1	0	2	1	0	0	1	1	2	0	0	0	2	0	0	2	0
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,113	260	59	82	110	96	155	133	82	33	104	145	151	21	64	34	156	65	74	92	90
	99.5%	99.2%	100.0%	100.0%	99.1%	100.0%	98.7%	99.3%	100.0%	100.0%	99.0%	99.3%	98.7%	100.0%	100.0%	100.0%	98.7%	100.0%	100.0%	97.9%	100.0%
Never	23	1	0	1	0	1	0	1	0	0	0	1	1	0	0	0	1	0	0	1	0
	0.7%	0.4%	0.0%	1.2%	0.0%	1.0%	0.0%	0.8%	0.0%	0.0%	0.0%	0.7%	0.7%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	1.1%	0.0%
Sometimes	148	10	2	2	6	2	8	6	3	1	1	9	6	1	3	1	6	2	2	2	6
	4.8%	3.8%	3.4%	2.4%	5.5%	2.1%	5.2%	4.5%	3.7%	3.0%	1.0%	6.2%	4.0%	4.8%	4.7%	2.9%	3.8%	3.1%	2.7%	2.2%	6.7%
Usually	361	25	11	5	9	11	14	16	6	3	14	11	17	2	6	3	16	6	5	11	9
	11.6%	9.6%	18.6%	6.1%	8.2%	11.5%	9.0%	12.0%	7.3%	9.1%	13.5%	7.6%	11.3%	9.5%	9.4%	8.8%	10.3%	9.2%	6.8%	12.0%	10.0%
Always	2,581	224	46	74	95	82	133	110	73	29	89	124	127	18	55	30	133	57	67	78	75
	82.9%	86.2%	78.0%	90.2%	86.4%	85.4%	85.8%	82.7%	89.0%	87.9%	85.6%	85.5%	84.1%	85.7%	85.9%	88.2%	85.3%	87.7%	90.5%	84.8%	83.3%
Significantly different from column:*			D	С																	
Usually or Always	2,942	249	57	79	104	93	147	126	79	32	103	135	144	20	61	33	149	63	72	89	84
	94.5%	95.8%	96.6%	96.3%	94.5%	96.9%	94.8%	94.7%	96.3%	97.0%	99.0%	93.1%	95.4%	95.2%	95.3%	97.1%	95.5%	96.9%	97.3%	96.7%	93.3%
Significantly different from column:*																					

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 15

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

Base: All respondents who have a personal doctor and visited their personal doctor to get care (Q10 & Q11)

	ge			Age		Ger		E	ducation	า	Ethn	,		Race			Care Vi		He	alth Stat	us
	era			(Q35)		(Q:	36)		(Q37)		(Q3	38)		(Q39)			(Q7)	1		(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,128	262	59	82	111	96	157	134	82	33	105	146	153	21	64	34	158	65	74	94	90
Number missing or multiple answer	18	4	0	1	2	0	4	3	0	0	2	1	3	0	0	1	2	0	1	3	0
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,110	258	59	81	109	96	153	131	82	33	103	145	150	21	64	33	156	65	73	91	90
	99.4%	98.5%	100.0%	98.8%	98.2%	100.0%	97.5%	97.8%	100.0%	100.0%	98.1%	99.3%	98.0%	100.0%	100.0%	97.1%	98.7%	100.0%	98.6%	96.8%	100.0%
Never	48	4	1	0	3	0	4	4	0	0	1	3	2	1	1	1	1	1	1	1	2
	1.5%	1.6%	1.7%	0.0%	2.8%	0.0%	2.6%	3.1%	0.0%	0.0%	1.0%	2.1%	1.3%	4.8%	1.6%	3.0%	0.6%	1.5%	1.4%	1.1%	2.2%
Sometimes	245	18	4	8	6	4	14	6	10	2	11	7	11	1	6	1	11	6	2	8	8
	7.9%	7.0%	6.8%	9.9%						6.1%				4.8%	9.4%	3.0%	7.1%	9.2%		8.8%	8.9%
Usually	614	53	18	9	24	24	27	27	15	9	24	28	33	5	12	7	34	11	18	18	16
	19.7%	20.5%	-														21.8%			19.8%	17.8%
Always	2,203	183	36	64	76	68	108	94	57	22	67	107	104	14	45	24	110		52	64	64
	70.8%	70.9%			69.7%	70.8%	70.6%	71.8%	69.5%	66.7%	65.0%	73.8%	69.3%	66.7%	70.3%	72.7%	70.5%	72.3%	71.2%	70.3%	71.1%
Significantly different from column:*			D	С																	
Usually or Always	2,817	236	54		100	92		121	72	31	91	135	137		57	31	144			82	80
Significantly different from column:*	90.6%	91.5%	91.5%	90.1%	91.7%	95.8% G	88.2% F	92.4%	87.8%	93.9%	88.3%	93.1%	91.3%	90.5%	89.1%	93.9%	92.3%	89.2%	95.9%	90.1%	88.9%
<u> </u>																					

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 16

In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor?

Base: All respondents who have a personal doctor and visited their personal doctor to get care (Q10 & Q11)

	ge			Age		Gen		E	Education	า		icity		Race			Care Visast 6 Mos		He	alth Stat	us
	ra			(Q35)		(Q3	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	3,128	262	59	82	111	96	157	134	82	33	105	146	153	21	64	34	158	65	74	94	90
Number missing or multiple answer	55	7	0	1	5	0	7	6	0	0	3	3	3	0	2	1	2	3	1	5	1
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	3,073	255	59	81	106	96	150	128	82	33	102	143	150	21	62	33	156	62	73	89	89
	98.2%	97.3%	100.0%	98.8%	95.5%	100.0%	95.5%	95.5%	100.0%	100.0%	97.1%	97.9%	98.0%	100.0%	96.9%	97.1%	98.7%	95.4%	98.6%	94.7%	98.9%
Yes	1,873	188	39	60	82	72	108	86	65	26	67	113	115	15	43	17	111	58	54	62	68
	61.0%	73.7%	66.1%	74.1%	77.4%	75.0%	72.0%	67.2%	79.3%	78.8%	65.7%	79.0%	76.7%	71.4%	69.4%	51.5%	71.2%	93.5%	74.0%	69.7%	76.4%
No	1,200	67	20	21	24	24	42	42	17	7	35	30	35	6	19	16	45	4	19	27	21
	39.0%	26.3%	33.9%	25.9%	22.6%	25.0%	28.0%	32.8%	20.7%	21.2%	34.3%	21.0%	23.3%	28.6%	30.6%	48.5%	28.8%	6.5%	26.0%	30.3%	23.6%
Significantly different from column:*		Α									L	K				QR	PR	PQ			

4993000

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 17

In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

Base: All respondents who have a personal doctor, visited their personal doctor, and got care from another health provider besides their personal doctor (Q10, Q11, & Q16)

	је			Age		Ger	nder	Е	ducation	ı	Ethn	icity		Race			Care Vis		Не	alth Stat	JS
	erage			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	1,873	188	39	60	82	72	108	86	65	26	67	113	115	15	43	17	111	58	54	62	68
Number missing or multiple answer	28	2	0	2	0	0	2	1	0	1	1	1	0	0	1	0	1	1	0	1	1
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,845	186	39	58		72	106	85	65	25	66	112	115	15	42	17	110	57	54	61	67
	98.5%		100.0%	96./%	100.0%	100.0%	98.1%	98.8%	100.0%	96.2%	98.5%	99.1%	100.0%	100.0%	97.7%	100.0%		98.3%	100.0%	98.4%	98.5%
Never	87 4.7%	10 5.4%		6 10.3%	2.4%	6 8.3%	4 3.8%	3.5%	4 6.2%	3 12.0%	3 4.5%	6.3%	4.3%	1 6.7%	4 9.5%	0.0%	10 9.1%	0.0%	3 5.6%	3 4.9%	4 6.0%
Sometimes	216	26		10.570	2.470	0.570	16	3.5%	7	12.070 R	4.5%	16	17	0.7 70	9.5% 7	0.070	15	0.070	7.0%	4.970	10
	11.7%	14.0%	-	8.6%		12.5%		11.8%	10.8%	32.0%	13.6%		14.8%	6.7%	16.7%	5.9%		15.8%	13.0%	14.8%	14.9%
Usually	458	63	13	16	32	25	35	32	23	7	25	37		6	11	9	38	16	14	26	22
	24.8%	33.9%	33.3%	27.6%	39.0%	34.7%	33.0%	37.6%	35.4%	28.0%	37.9%	33.0%	36.5%	40.0%	26.2%	52.9%	34.5%	28.1%	25.9%	42.6%	32.8%
Always	1,084	87	15	31	37	32	51	40	31	7	29	52	51	7	20	7	47	32	30	23	31
	58.8%	46.8%	38.5%	53.4%	45.1%	44.4%	48.1%	47.1%	47.7%	28.0%	43.9%	46.4%	44.3%	46.7%	47.6%	41.2%	42.7%	56.1%	55.6%	37.7%	46.3%
Significantly different from column:*		Α																			
Usually or Always	1,542	150					86	72	54	14	54	89		13	31	16		48	44	49	53
	83.6%	80.6%	71.8%	81.0%	84.1%	79.2%	81.1%	84.7%	83.1%	56.0%	81.8%	79.5%	80.9%	86.7%	73.8%	94.1%	77.3%	84.2%	81.5%	80.3%	79.1%
Significantly different from column:*								J	J	HI											

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

4993000

Question 18

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

Base: All respondents who have a personal doctor (Q10)

	age			Age (Q35)		Ger (Q:		E	ducation	1	Ethn (Q:	icity		Race (Q39)			Care Vis		Не	alth Stat (Q29)	us
	Average	-		(Q33)		(ψ.	50)	SS		o.	(Q.			(Q39)			(Q7)			(Q29)	
	2024 CSS A	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad c more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	4,207	341	82	111	135	126	204	172	108	43	141	184	195	25	90	73	183	74	99	123	112
Number missing or multiple answer	104	9	2	3	2	6	3	3	3	1	1	7	6	1	2	3	4	1	3	6	0
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA 113
Usable responses	4,103 97.5%	332	80	108	133	120	201	169 98.3%	105	42	140		189	24	88	70	179	73	96	117	112
0 Worst personal doctor possible		97.4%	97.6%	97.3%	98.5%	95.2%	98.5%	98.3%	97.2%	97.7%	99.3%	96.2%	96.9%	96.0%	97.8%	95.9%	97.8%	98.6%	97.0%	95.1%	100.0%
o worst personal doctor possible	28 0.7%	0.9%	0.0%	0.0%	2.3%	0.8%	1.0%	1.2%	0.0%	2.4%	0.7%	0.6%	1.6%	0.0%	0.0%	1.4%	0.6%	1.4%	2.1%	0.0%	0.9%
1	11	0.9%	0.070	0.070	2.5%	0.6%	1.0%	1.270	0.0%	2.470	0.7 70	0.0%	1.0%	0.0%	0.0%	1.470	0.070	1.470	2.170	0.0%	0.970
	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
2	24	1	0	1	0	1	0	1	0	0	0	1	1	0	0	0	1	0	0	1	0
	0.6%	0.3%	0.0%	0.9%	0.0%	0.8%	0.0%	0.6%	0.0%	0.0%	0.0%	0.6%	0.5%	0.0%	0.0%	0.0%	0.6%	0.0%	0.0%	0.9%	0.0%
3	31	2	0	0	2	0	2	2	0	0	0	2	0	1	1	0	1	1	0	1	1
	0.8%	0.6%	0.0%	0.0%	1.5%	0.0%	1.0%	1.2%	0.0%	0.0%	0.0%	1.1%	0.0%	4.2%	1.1%	0.0%	0.6%	1.4%	0.0%	0.9%	0.9%
4	53	3	0	2	1	1	2	1	1	1	1	2	2	0	1	1	2	0	1	1	1
	1.3%	0.9%	0.0%	1.9%	0.8%	0.8%	1.0%	0.6%	1.0%	2.4%	0.7%	1.1%	1.1%	0.0%	1.1%	1.4%	1.1%	0.0%	1.0%	0.9%	0.9%
5	143	7	2	4	1	2	5	4	1	2	3	4	4	0	3	3	3	1	0	4	3
6	3.5%	2.1%	2.5%	3.7%	0.8%	1.7%	2.5%	2.4%	1.0%	4.8%	2.1%	2.3%	2.1%	0.0%	3.4%	4.3%	1.7%	1.4%	0.0%	3.4%	2.7%
0	118 2.9%	1.8%	3.8%	0.9%	1.5%	0.8%	2.5%	3.6%	0.0%	0.0%	2 1.4%	2.3%	1.1%	0.0%	4.5%	1.4%	0.6%	2.7%	1.0%	0.0%	4.5%
7	2.9%	25	3.6%	0.9%	7.5%	0.6% Q	2.5%	3.0%	10	0.0%	1.4%	2.5%	1.1%	0.0%	4.5%	1.4%	13	2.7%	1.0%	10	4.5% g
	7.0%	7.5%		5.6%	5.3%	6.7%	8.0%	5.3%	9.5%	11.9%	7.9%	7.3%		8.3%	10.2%	8.6%	7.3%	8.2%	6.3%	8.5%	7.1%
8	599	40	13.0 %	12	14	15	24	20	14	5	20	19	25	3	9	12	21	7	9	18	13
	14.6%	12.0%		11.1%	10.5%	12.5%	11.9%	11.8%	13.3%	11.9%	14.3%	10.7%	13.2%	12.5%	10.2%	17.1%		9.6%	9.4%	15.4%	11.6%
9	662	51	14	10	25	23	26	22	20	7	18	31	32	5	10	11	30	9	13	18	18
	16.1%	15.4%	17.5%	9.3%	18.8%	19.2%	12.9%	13.0%	19.0%	16.7%	12.9%	17.5%	16.9%	20.8%	11.4%	15.7%	16.8%	12.3%	13.5%	15.4%	16.1%
10 Best personal doctor possible	2,145	194	37	72	78	68	119	102	59	21	84	100	107	13	51	35	106	46	64	64	62
	52.3%	58.4%	46.3%	66.7%	58.6%	56.7%	59.2%	60.4%	56.2%	50.0%	60.0%	56.5%	56.6%	54.2%	58.0%	50.0%	59.2%	63.0%	66.7%	54.7%	55.4%

Question 18

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

Base: All respondents who have a personal doctor (Q10)

	age			Age (Q35)		Ger (Q:		E	ducation	ı	Ethn (Q3	,		Race (Q39)			Care Vistoriast 6 Mos (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample Number missing or multiple answer Number no experience	4,207 104 NA	341 9 NA	82 2 NA	111 3 NA	135 2 NA	126 6 NA	204 3 NA	172 3 NA	108 3 NA	43 1 NA	141 1 NA	184 7 NA	195 6 NA	25 1 NA	90 2 NA	73 3 NA	183 4 NA	74 1 NA	99 3 NA	123 6 NA	112 0 NA
Usable responses	4,103 97.5%	332	80	108 97.3%	133	120	201	169	105 97.2%	42 97.7%	140 99.3%	177	189	24 96.0%	88	70 95.9%	179 97.8%	73	96	117	112 100.0%
0 to 4	147 3.6%	9 2.7%	0 0.0%	3 2.8%	6 4.5%	3 2.5%	6 3.0%	6 3.6%	1 1.0%	2 4.8%	2 1.4%	6 3.4%	6	1 4.2%	2 2.3%	2 2.9%	5 2.8%	2 2.7%	3 3.1%	3 2.6%	3 2.7%
5	143 3.5%	7 2.1%	2 2.5%	4 3.7%	0.8%	2 1.7%	5 2.5%	4 2.4%	1 1.0%	2 4.8%	3 2.1%	4 2.3%	4 2.1%	0 0.0%	3 3.4%	3 4.3%	3 1.7%	1 1.4%	0.0%	4 3.4%	3 2.7%
6 to 7	407 9.9%	31 9.3%	14 17.5%	7 6.5%	9 6.8%	9 7.5%	21 10.4%	15 8.9%	10 9.5%	5 11.9%	13 9.3%	17 9.6%		2 8.3%	13 14.8%	7 10.0%	14 7.8%	8 11.0%	7 7.3%	10 8.5%	13 11.6%
8 to 10	3,406 83.0%	285 85.8%		94 87.0%	117 88.0%	106 88.3%	169 84.1%	144 85.2%	93 88.6%	33 78.6%	122 87.1%	150 84.7%		21 87.5%	70 79.5%	58 82.9%	157 87.7%	62 84.9%	86 89.6%	100 85.5%	93 83.0%
Significantly different from column:*																					
0 to 6	408 9.9%	22 6.6%		8 7.4%	9 6.8%	6 5.0%	16 8.0%	16 9.5%	2 1.9%	4 9.5%	7 5.0%	14 7.9%		1 4.2%	9 10.2%	6 8.6%	9 5.0%	5 6.8%	4 4.2%	7 6.0%	11 9.8%
7 to 8	888 21.6%	65 19.6%		18 16.7%		23 19.2%	40 19.9%		24 22.9%	10 23.8%	31 22.1%	32 18.1%		5 20.8%	18 20.5%	18 25.7%	34 19.0%	13 17.8%	15 15.6%	28 23.9%	21 18.8%
9 to 10	2,807 68.4%	245 73.8%		82 75.9%			145 72.1%	124 73.4%	79 75.2%	28 66.7%	102 72.9%	131 74.0%		18 75.0%	61 69.3%	46 65.7%	136 76.0%	55 75.3%	77 80.2%	82 70.1%	80 71.4%
Significantly different from column:*		Α	E		С																

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 19

Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments with a specialist?

4993000

Base: All respondents

	ge			Age			ıder	Е	ducation	า		icity		Race			n Care Vi ast 6 Mos		Не	alth Stat	us
	ra			(Q35)		(Q3	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	56	4	0	0	3	1	3	1	2	0	2	2	2	0	2	0	3	0	0	1	2
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,354	426	125	135	150	162	252	223	131	51	183	223	240	29	115	123	205	85	131	153	135
	99.0%	99.1%	100.0%	100.0%	98.0%	99.4%	98.8%	99.6%	98.5%	100.0%	98.9%	99.1%	99.2%	100.0%	98.3%	100.0%	98.6%	100.0%	100.0%	99.4%	98.5%
Yes	2,276	230	43	81	101	83	140	112	74	33	89	131	134	17	58	23	125	75	55	83	87
	42.5%	54.0%	34.4%	60.0%	67.3%	51.2%	55.6%	50.2%	56.5%	64.7%	48.6%	58.7%	55.8%	58.6%	50.4%	18.7%	61.0%	88.2%	42.0%	54.2%	64.4%
No	3,078	196	82	54	49	79	112	111	57	18	94	92	106	12	57	100	80	10	76	70	48
	57.5%	46.0%	65.6%	40.0%	32.7%	48.8%	44.4%	49.8%	43.5%	35.3%	51.4%	41.3%	44.2%	41.4%	49.6%	81.3%	39.0%	11.8%	58.0%	45.8%	35.6%
Significantly different from column:*		Α	DE	C	С	·			·		Ĺ	K				QR	PR	PQ	TU	S	S

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 20

In the last 6 months, how often did you get an appointment with a specialist as soon as you needed?

Base: All respondents who made an appointment to see a specialist (Q19)

	је			Age		Ger	ıder	Е	ducation	า	Ethn	icity		Race			Care Vi		He	alth Statı	us
	erag			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	2,276	230	43	81	101	83	140	112	74	33	89	131	134	17	58	23	125	75	55	83	87
Number missing or multiple answer	36	2	0	0	2	0	2	2	0	0	1	1	0	1	0	0	2	0	0	2	0
Number no experience	NA	NA			NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	2,240	228			99	83	138	110	74	33	88	130		16	58	23	123	75	55	81	87
	98.4%	99.1%	100.0%	100.0%	98.0%	100.0%	98.6%	98.2%	100.0%	100.0%	98.9%	99.2%	100.0%	94.1%	100.0%	100.0%	98.4%	100.0%	100.0%	97.6%	100.0%
Never	110	3	1	2	0	0	3	1	2	0	0	3	2	0	1	1	1	1	0	1	2
	4.9%	1.3%		2.5%			2.2%	0.9%	2.7%	0.0%	0.0%	2.3%		0.0%	1.7%	4.3%	0.8%	1.3%	0.0%	1.2%	2.3%
Sometimes	402	34		11	12	_	24	19	12	3	14	20		2	14	3	19	9	10	7	17
	17.9%							17.3%		9.1%			12.7%	12.5%	24.1%	13.0%				8.6%	
Usually	682	82		_	39	27	51	42	21	14	33	45		5	15	6	49	25	11	34	33
Always	30.4%	36.0%			39.4%			38.2%						31.3%				33.3%		42.0%	37.9%
Always	1,046	109			48	46	60 43 F0/	48	39	16	41	62		FC 201	28	13	54	40 52.20/	34	39	35 40 20/
C: :C 11 1:C 1 C	46.7%	47.8%	39.5%	53.1%	48.5%	55.4%	43.5%	43.6%	52.7%	48.5%	46.6%	47.7%	47.8%	56.3%	48.3%	56.5%	43.9%	53.3%		48.1%	40.2%
Significantly different from column:*	1 700	161	24		0.7	70	111	0.0		20		107	115		43	10	100	6.5	U	72	S
Usually or Always	1,728			1	87	73		90	60	30	74	107		14	43		103	65			68
Significantly different from columns*	77.1%	83.8% A	72.1% F	84.0%	87.9% C	88.0%	80.4%	81.8%	81.1%	90.9%	84.1%	82.3%	85.8%	87.5%	74.1%	82.6%	83.7%	86.7%	81.8%	90.1%	78.2% T
Significantly different from column:*		_ ^	L		C															U	ı

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 21

How many specialists have you talked to in the last 6 months?

Base: All respondents who made an appointment to see a specialist (Q19)

	ıge			Age		Ger		E	ducation	١	Ethn	,		Race			Care Vi		Не	alth Stat	cus
	9 <u>r</u> 9			(Q35)		(Q:	36)		(Q37)		(Q3	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	2,276	230	43	81	101	83	140	112	74	33	89	131	134	17	58	23	125	75	55	83	87
Number missing or multiple answer	42	1	0	0	1	0	1	1	0	0	0	1	0	1	0	0	1	0	0	1	0
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	2,234	229	43	81	100	83	139	111	74	33	89	130	134	16	58	23	124	75		82	87
	98.2%	99.6%	100.0%	100.0%	99.0%	100.0%	99.3%	99.1%	100.0%	100.0%	100.0%	99.2%	100.0%	94.1%	100.0%	100.0%	99.2%	100.0%	100.0%	98.8%	100.0%
None	68	4	0	3	1	2	2	3	1	0	2	2	3	0	1	3	0	0	1	2	1
	3.0%	1.7%	0.0%	3.7%	1.0%	2.4%	1.4%	2.7%	1.4%	0.0%	2.2%	1.5%	2.2%	0.0%	1.7%	13.0%	0.0%	0.0%	1.8%	2.4%	1.1%
1 specialist	983	88	25	32	31	35	53	52	21	12	39	48	54	7	21	9	59	16	31	34	23
	44.0%	38.4%	58.1%	39.5%	31.0%	42.2%	38.1%	46.8%	28.4%	36.4%	43.8%	36.9%	40.3%	43.8%	36.2%	39.1%	47.6%	21.3%	56.4%	41.5%	26.4%
2	632	65	12	19	33	24	40	29	21	13	27	35	35	3	21	9	36	19	16	26	22
	28.3%	28.4%	27.9%	23.5%	33.0%	28.9%	28.8%	26.1%	28.4%	39.4%	30.3%	26.9%	26.1%	18.8%	36.2%	39.1%	29.0%	25.3%	29.1%	31.7%	25.3%
3	313	37	3	14	17	13	20	13	16	5	10	24	18	4	9	1	22	14	5	10	19
	14.0%	16.2%	7.0%	17.3%	17.0%	15.7%	14.4%	11.7%	21.6%	15.2%	11.2%	18.5%	13.4%	25.0%	15.5%	4.3%	17.7%	18.7%	9.1%	12.2%	21.8%
4	114	14	1	3	9	3	10	4	6	2	3	9	10	0	2	1	4	8	0	3	10
	5.1%	6.1%	2.3%	3.7%	9.0%	3.6%	7.2%	3.6%	8.1%	6.1%	3.4%	6.9%	7.5%	0.0%	3.4%	4.3%	3.2%	10.7%	0.0%	3.7%	11.5%
5 or more specialists	124	21	2	10	9	6	14	10	9	1	8	12	14	2	4	0	3	18	2	7	12
	5.6%	9.2%	4.7%	12.3%	9.0%	7.2%	10.1%	9.0%	12.2%	3.0%	9.0%	9.2%	10.4%	12.5%	6.9%	0.0%	2.4%	24.0%	3.6%	8.5%	13.8%
3 or more specialists	551	72		27	35	22	44	27	31	8	21	45	42	6	15	2	29		7	20	41
	24.7%	31.4%	14.0%	33.3%	35.0%	26.5%	31.7%	24.3%	41.9%	24.2%	23.6%	34.6%	31.3%	37.5%	25.9%	8.7%	23.4%		12.7%	24.4%	
Significantly different from column:*		Α	DE	С	С			I	Н							R	R	PQ	U	U	ST

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 22

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

4993000

Base: All respondents who saw a specialist (Q19 & Q21)

Dase. All respondents who saw a specialist (Q19 &	ξ/															Uool⊭b	Coro Vi	oito in				
	2024 CSS Average	Эe			Age		Ger	nder	E	ducatio	า	Ethn	icity		Race			Care Vi		He	alth Stat	:us
			(Q35)			(Q	36)		(Q37)		(Q38)			(Q39)			(Q7)			(Q29)		
		2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	poog	Fair or Poor	
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U	
Number in sample	2,166	225	43	78	99	81	137	108	73	33	87	128	131	16	57	20	124	75	54	80	86	
Number missing or multiple answer	21	4	. 0	1	3	1	3	2	0	2	2	2	1	. 0	. 1	.0	. 3	1	0	2	2	
Number no experience	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	
Usable responses	2,145 99.0%	221	43 100.0%	77 98.7%	96 97.0%	80 98.8%	134 97.8%	106	73 100.0%	31 93.9%	85 97.7%	126 98.4%	130	16 100.0%	56	20 100.0%	121 97.6%	74 09 70/	54 100.0%	78 97.5%	84 97.7%	
0 Worst specialist possible		90.2%	100.0%	90.7%	97.0%	96.6%	97.0%	90.1%	100.0%	93.9%	97.7%	90.4%	99.2%	100.0%	90.2%	100.0%	97.0%	90.7%	100.0%	97.5%	97.7%	
o worst specialist possible	14 0.7%	0.5%	0.0%	0.0%	1.0%	0.0%	0.7%	0.0%	0.0%	3.2%	0.0%	0.8%	0.8%	0.0%	0.0%	0.0%	0.0%	1.4%	0.0%	0.0%	1.2%	
1	4	2	0	1	1	1	1	0	1	1	0	2	1	1	0	0	0	1	0	0	2	
	0.2%	0.9%	0.0%	1.3%	1.0%	1.3%	0.7%	0.0%	1.4%	3.2%	0.0%	1.6%	0.8%	6.3%	0.0%	0.0%	0.0%	1.4%	0.0%	0.0%	2.4%	
2	10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	0.5%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
3	22	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	1.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	
4	32 1.5%	5 2.3%	2.3%	1.3%	3.1%	1 1.3%	3.0%	1.9%	1 1.4%	3.2%	1 1.2%	4 3.2%	3.1%	0.0%	1 1.8%	0.0%	5 4.1%	0.0%	1 1.9%	1.3%	3.6%	
5	66	10	2.5 /0	3	2.1 /0	1.5 /0	5.070	5	4	3.2 /0 0	1.2 /0	5.2 /0	5.1 /0	0.0 /0	1.0 /0	2	7.1 /0 5	3	3	1.570	5.070	
	3.1%	4.5%	9.3%	3.9%	2.1%	5.0%	3.7%	4.7%	5.5%	0.0%	4.7%	4.0%	3.8%	0.0%	7.1%	10.0%	4.1%	4.1%	5.6%	1.3%	6.0%	
6	80	4	1	3	0	3	1	3	1	0	0	4	1	0	2	0	3	1	1	2	1	
	3.7%	1.8%	2.3%	3.9%	0.0%	3.8%	0.7%	2.8%	1.4%	0.0%	0.0%	3.2%	0.8%	0.0%	3.6%	0.0%	2.5%	1.4%	1.9%	2.6%	1.2%	
7	147	14	5	4	4	8	5	5	6	2	6	7	6	2	4	1	7	6	3	6	4	
	6.9%	6.3%	11.6%	5.2%	4.2%	10.0%	3.7%	4.7%	8.2%	6.5%	7.1%	5.6%	4.6%	12.5%	7.1%	5.0%	5.8%	8.1%	5.6%	7.7%	4.8%	
8	332	26	6	11	8	5	20	15	6	3	12	13	14	4	7	2	16	7	6	8	11	
	15.5%	11.8%	14.0%	14.3%	8.3%	6.3%			8.2%	9.7%		10.3%		25.0%	12.5%	10.0%	13.2%	9.5%	11.1%	10.3%	13.1%	
9	360	35	6	7 00	22	16	18	20	10	3	13	20	22	1	9	4	19	11	3	17	14	
10 Best specialist possible	16.8%	15.8% 124	14.0% 20	7.8% 48	22.9% 55	20.0%	13.4%	18.9% 56	13.7% 44	9.7%	15.3%	15.9% 70	16.9% 76	6.3%	16.1% 29	20.0% 11	15.7% 66	14.9%	5.6% 37	21.8%	16.7%	
To pest specialist possible	1,078 50.3%		- I			. –	79 59 0%	52.8%		20 64 5%	49 57.6%			50.0%				59.5%		. •	51.2%	
	50.570	JU.1 70	TU.J /0	02.5 /0	37.370	32.370	33.070	JZ.0 /0	30.3 /0	07.570	37.070	33.0 /0	30.370	50.070	J1.0 /0	33.070	JT.J /0	33.370	00.570	JJ.1 /0	J1.2 /0	

Question 22

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

4993000

Base: All respondents who saw a specialist (Q19 & Q21)

	age		Age (Q35)			Ger (Q:		E	ducation	า		icity 38)		Race (Q39)		Health Care Visits in Last 6 Mos. (Q7)			Не	us	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Wale	Female	HS grad or less	(Q37) egalloo emos	College grad or more	Hispanic	Not Hispanic	White	African-	Other	None	1 to 4	5 or more	Excellent or Very good	(Q29) poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample Number missing or multiple answer Number no experience	2,166 21 NA	225 4 NA	0	78 1 NA	99 3 NA	81 1 NA	137 3 NA	108 2 NA	73 0 NA	33 2 NA	87 2 NA	128 2 NA	1	16 0 NA	57 1 NA	20 0 NA	124 3 NA	75 1 NA	54 0 NA	80 2 NA	86 2 NA
Usable responses	2,145 99.0%	221		77 98.7%	96 97.0%	80	134	106	73	31	85	126	130	16 100.0%	56	20 100.0%	121	74	54 100.0%	78 97.5%	84 97.7%
0 to 4	82 3.8%	8 3.6%	1 2.3%	2 2.6%	5 5.2%	2 2.5%	6 4.5%	2 1.9%	2 2.7%	3 9.7%	1 1.2%	7 5.6%	6 4.6%	1 6.3%	1 1.8%	0.0%	5 4.1%	2 2.7%	1 1.9%	1 1.3%	6 7.1%
5	66 3.1%	10 4.5%		3 3.9%	2 2.1%	4 5.0%	5 3.7%	5 4.7%	4 5.5%	0 0.0%	4 4.7%	5 4.0%	5 3.8%	0 0.0%	4 7.1%	2 10.0%	5 4.1%	3 4.1%	3 5.6%	1 1.3%	5 6.0%
6 to 7	227 10.6%	18 8.1%	6	7 9.1%	4 4.2%	11	6 4.5%	8	7 9.6%	2	6 7.1%	11	7	2 12.5%	6	1	10 8.3%	7 9.5%	4	8	5 6.0%
8 to 10	1,770 82.5%	185 83.7%		65 84.4%	85 88.5%	63 78.8%	117	91	60 82.2%	26	74	103		13 81.3%	45	17 85.0%	101 83.5%	62 83.8%	46 85.2%	68 87.2%	68 81.0%
Significantly different from column:*			Е		С																
0 to 6	228 10.6%	22 10.0%		8 10.4%	7 7.3%	9 11.3%	12 9.0%	10 9.4%	7 9.6%	3 9.7%	5 5.9%	16 12.7%		1 6.3%	7 12.5%	2 10.0%	13 10.7%	6 8.1%	5 9.3%	4 5.1%	12 14.3%
7 to 8	479 22.3%	40 18.1%		15 19.5%	12 12.5%	13 16.3%	25 18.7%	20 18.9%	12 16.4%	5 16.1%	18 21.2%	20 15.9%		6 37.5%	11 19.6%	3 15.0%	23 19.0%	13 17.6%	9 16.7%	14 17.9%	15 17.9%
9 to 10	1,438 67.0%	159 71.9%	60.5%	54 70.1%	77 80.2%	58 72.5%	97 72.4%	76 71.7%	54 74.0%	23 74.2%	62 72.9%	90 71.4%		9 56.3%	38 67.9%	15 75.0%	85 70.2%	55 74.3%	40 74.1%	60 76.9%	57 67.9%
Significantly different from column:*			Е		С																

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 23

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

Base: All respondents

	ge		Age (Q35)			Gender (Q36)		Education			Ethnicity		Race				n Care Vi ast 6 Mos		Health Status (Q29)		
	era	1 1						(Q37)			(Q38)		(Q39)			(Q7)					
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	124	8	0	2	4	0	6	5	0	0	4	2	3	0	0	4	4	0	0	4	2
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,286	422	125	133	149	163	249	219	133	51	181	223	239	29	117	119	204	85	131	150	135
	97.7%	98.1%	100.0%	98.5%	97.4%	100.0%	97.6%	97.8%	100.0%	100.0%	97.8%	99.1%	98.8%	100.0%	100.0%	96.7%	98.1%	100.0%	100.0%	97.4%	98.5%
Yes	1,956	191	46	54	84	72	114	94	61	27	87	96	99	15	61	39	100	46	64	63	61
	37.0%	45.3%	36.8%	40.6%	56.4%	44.2%	45.8%	42.9%	45.9%	52.9%	48.1%	43.0%	41.4%	51.7%	52.1%	32.8%	49.0%	54.1%	48.9%	42.0%	45.2%
No	3,330	231	79	79	65	91	135	125	72	24	94	127	140	14	56	80	104	39	67	87	74
	63.0%	54.7%	63.2%	59.4%	43.6%	55.8%	54.2%	57.1%	54.1%	47.1%	51.9%	57.0%	58.6%	48.3%	47.9%	67.2%	51.0%	45.9%	51.1%	58.0%	54.8%
Significantly different from column:*		Α	Е	Е	CD											QR	Р	Р			

4993000

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 24

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

Base: All respondents who got information or help from the health plan's customer service (Q23)

	age.			Age	_		nder	Е	ducation	ı	Ethn	icity		Race		Health Care Visits in Last 6 Mos.			Не	us	
	2024 CSS Avera			(Q35)			36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
		2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	1,956	191	46	54	84	72	114	94	61	27	87	96	99	15	61	39	100	46	64	63	61
Number missing or multiple answer	33	8	1	0	5	1	5	4	1	1	3	3	3	0	2	1	6	0	2	3	3
Number no experience	NA	NA			NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,923	183		54	79	71	109	90	60	26	84	93		15	59	38	94	46	62	60	58
Never	98.3%	95.8%	97.8%	100.0%	94.0%	98.6%	95.6%	95.7%	98.4%	96.3%	96.6%	96.9%	97.0%	100.0%	96.7%	97.4%	94.0%	100.0%	96.9%	95.2%	95.1%
ivevei	43 2.2%	0.5%	0.0%	1.9%	0.0%	1.4%	0.0%	1.1%	0.0%	0.0%	1.2%	0.0%	0.0%	0.0%	1.7%	0.0%	1.1%	0.0%	0.0%	1.7%	0.0%
Sometimes	285	28			7	9	19	16	8	4	16	11	14	2	11	6	14	7	10	7	11
	14.8%	15.3%	22.2%	18.5%	8.9%	12.7%	17.4%	17.8%	13.3%	15.4%	19.0%	11.8%	14.6%	13.3%	18.6%	15.8%	14.9%	15.2%	16.1%	11.7%	19.0%
Usually	503	63	18	16	29	21	42	32	20	11	29	34	33	7	20	16	33	14	14	27	22
	26.2%	34.4%	40.0%	29.6%	36.7%	29.6%	38.5%	35.6%	33.3%	42.3%	34.5%	36.6%	34.4%	46.7%	33.9%	42.1%	35.1%	30.4%	22.6%	45.0%	37.9%
Always	1,092	91	17		43	40	48		32	11	38	48	49	6	27	16	46	25	38	25	25
	56.8%	49.7%	37.8%	50.0%	54.4%	56.3%	44.0%	45.6%	53.3%	42.3%	45.2%	51.6%	51.0%	40.0%	45.8%	42.1%	48.9%	54.3%	61.3%	41.7%	
Significantly different from column:*																			TU	S	S
Usually or Always	1,595	154					90		52	22	67	82		13	47	32		39	52	52	47
	82.9%	84.2%		79.6%	91.1%	85.9%	82.6%	81.1%	86.7%	84.6%	79.8%	88.2%	85.4%	86.7%	79.7%	84.2%	84.0%	84.8%	83.9%	86.7%	81.0%
Significantly different from column:*			E		C																

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 25

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

Base: All respondents who got information or help from the health plan's customer service (Q23)

	age			Age		Ger	nder	E	ducation	ı	Ethn	icity		Race			Care Vis		Не	alth Statı	us
	era			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	T	U
Number in sample	1,956	191	46	54	84	72	114	94	61	27	87	96	99	15	61	39	100	46	64	63	61
Number missing or multiple answer	40	6	1	0	3	1	3	3	0	0	2	1	2	0	0	2	3	1	0	2	2
Number no experience	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,916 98.0%	185 96.9%	45 97.8%	54 100.0%	81 96.4%	71 98.6%	111 97.4%	91 96.8%	61 100.0%	27 100.0%	85 97.7%	95 99.0%		15 100.0%	61 100.0%	37 94.9%	97 97.0%	45 97.8%	64 100.0%	61 96.8%	59 96.7%
Never	25	1	0	1	0	1	0	1	0	0	1	0	0	0	1	0	1	0	0	1	0
	1.3%	0.5%	0.0%	1.9%	0.0%	1.4%	0.0%	1.1%	0.0%	0.0%	1.2%	0.0%	0.0%	0.0%	1.6%	0.0%	1.0%	0.0%	0.0%	1.6%	0.0%
Sometimes	76	11	2	5	3	4	7	5	4	2	4	6	5	0	6	1	7	1	2	4	5
	4.0%	5.9%		9.3%					6.6%	7.4%				0.0%				2.2%	3.1%	6.6%	8.5%
Usually	318 16.6%	37 20.0%	12 26.7%	7 13.0%	17 21.0%	10 14.1%	26 23.4%	21 23.1%	9 14.8%	6 22.2%	17 20.0%	19 20.0%	13 13.4%	5 33.3%	15 24.6%	11 29.7%	17 17.5%	8 17.8%	10 15.6%	14 23.0%	13 22.0%
Always	1,497	136		41	61	56	78		48	19	63	70		10	39	25	72	36	52	42	41
	78.1%	73.5%	68.9%	75.9%	75.3%	78.9%	70.3%	70.3%	78.7%	70.4%	74.1%	73.7%	81.4%	66.7%	63.9%	67.6%	74.2%	80.0%	81.3%	68.9%	69.5%
Significantly different from column:*													0		М						
Usually or Always	1,815	173						85		25	80			15	54	36		44		56	
	94.7%	93.5%	95.6%	88.9%	96.3%	93.0%	93.7%	93.4%	93.4%	92.6%	94.1%	93.7%	94.8%	100.0%	88.5%	97.3%	91.8%	97.8%	96.9%	91.8%	91.5%
Significantly different from column:*																					

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 26

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

Base: All respondents

	ge			Age			ıder	E	ducation	ı		icity		Race			Care Visast 6 Mos		Не	alth Stat	us
	ra			(Q35)		(Q3	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	206	15	1	2	8	3	8	7	2	1	4	6	4	1	4	4	7	2	1	3	7
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,204	415	124	133	145	160	247	217	131	50	181	219	238	28	113	119	201	83	130	151	130
	96.2%	96.5%	99.2%	98.5%	94.8%	98.2%	96.9%	96.9%	98.5%	98.0%	97.8%	97.3%	98.3%	96.6%	96.6%	96.7%	96.6%	97.6%	99.2%	98.1%	94.9%
Yes	1,401	123	30	44	44	44	76	69	38	10	57	60	73	8	30	20	73	26	37	43	40
	26.9%	29.6%	24.2%	33.1%	30.3%	27.5%	30.8%	31.8%	29.0%	20.0%	31.5%	27.4%	30.7%	28.6%	26.5%	16.8%	36.3%	31.3%	28.5%	28.5%	30.8%
No	3,803	292	94	89	101	116	171	148	93	40	124	159	165	20	83	99	128	57	93	108	90
	73.1%	70.4%	75.8%	66.9%	69.7%	72.5%	69.2%	68.2%	71.0%	80.0%	68.5%	72.6%	69.3%	71.4%	73.5%	83.2%	63.7%	68.7%	71.5%	71.5%	69.2%
Significantly different from column:*				-												QR	Р	Р			

4993000

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 27

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

Base: All respondents whose health plan gave them forms to fill out (Q26)

	Average			Age (Q35)		Ger (Q:		E	Education (Q37)	ı		icity 38)		Race (Q39)			Care Visast 6 Mos (Q7)		He	alth Stat (Q29)	JS
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Τ	U
Number in sample	5,204	415	124	133	145	160	247	217	131	50	181	219	238	28	113	119	201	83	130	151	130
Number missing or multiple answer	39	5	1	1	1	1	3	4	0	0	2	1	3	0	0	1	2	0	1	1	2
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,165 99.3%	410 98.8%		132 99.2%	144 99.3%	159 99.4%	244 98.8%	213 98.2%	131 100.0%	50 100.0%	179 98.9%	218 99.5%	235 98.7%	28 100.0%	113 100.0%	118 99.2%	199 99.0%	83 100.0%	129 99.2%	150 99.3%	128 98.5%
Never	55 1.1%	1 0.2%	0.0%	1 0.8%	0 0.0%	0.0%	1 0.4%	0 0.0%	1 0.8%	0 0.0%	0 0.0%	1 0.5%	1 0.4%	0 0.0%	0.0%	0 0.0%	0 0.0%	1 1.2%	0 0.0%	0 0.0%	1 0.8%
Sometimes	188 3.6%	14 3.4%	3 2.4%	3 2.3%	8 5.6%	6 3.8%	8 3.3%	10 4.7%	3 2.3%	1 2.0%	7 3.9%	7 3.2%	7 3.0%	1 3.6%	5 4.4%	3 2.5%	9 4.5%	1 1.2%	3 2.3%	5 3.3%	6 4.7%
Usually	431 8.3%	46 11.2%		17 12.9%	15 10.4%	14 8.8%	31	27	12 9.2%	3 6.0%	19 10.6%	25 11.5%		0 0.0%	13 11.5%	8 6.8%	28 14.1%	10 12.0%	13 10.1%	17 11.3%	15 11.7%
Always	4,491 87.0%	349 85.1%	108	111 84.1%	121 84.0%	139 87.4%	204 83.6%	176 82.6%	115 87.8%	46 92.0%	153 85.5%	185 84.9%		27 96.4%	95	107	162 81.4%	71 85.5%	113 87.6%	128 85.3%	106 82.8%
Significantly different from column:*																Q	Р				
Usually or Always	4,922 95.3%	395 96.3%	120 97.6%		136 94.4%	153 96.2%	235 96.3%	203 95.3%	127 96.9%	49 98.0%	172 96.1%	210 96.3%		27 96.4%	108 95.6%	115 97.5%	190 95.5%	81 97.6%	126 97.7%	145 96.7%	121 94.5%
Significantly different from column:*																					

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

^{**}Respondents answering "No" to question 26 are reported to NCQA as "Always" in question 27, and are used in calculating the Question Summary Rate.

4993000

Question 28

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

Base: All respondents

Base: All respondents																					
	је			Age		Ger	nder	E	ducation	ı	Ethni	icity		Race			Care Vi		He	alth Stat	us
	ra O			(Q35)		(Q:	36)		(Q37)		(Q3	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	206	17	3	1	3	6	4	5	1	2	3	4	6	0	2	5	6	3	5	2	4
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA
Usable responses	5,204	413	122	134	150	157	251	219	132	49	182	221	236	29	115	118	202			152	133
	96.2%	96.0%	97.6%	99.3%	98.0%	96.3%	98.4%	97.8%	99.2%	96.1%	98.4%	98.2%	97.5%	100.0%	98.3%	95.9%	97.1%	96.5%	96.2%	98.7%	97.1%
0 Worst health plan possible	48 0.9%	3 0.7%	1 0.8%	1 0.7%	1 0.7%	0.0%	3 1.2%	2 0.9%	1 0.8%	0.0%	1 0.5%	2 0.9%	3 1.3%	0.0%	0.0%	2 1.7%	1 0.5%	0.0%	0.0%	0 0.0%	2.3%
1	16 0.3%	0 0.0%	0.0%	0.0%	0.0%	0.0%	0 0.0%	0.0%	0 0.0%	0.0%	0.0%	0.0%	0 0.0%	0 0.0%	0 0.0%	0.0%	0.0%	0.0%	0 0.0%	0 0.0%	0.0%
2	36 0.7%	3 0.7%	0.0%	1 0.7%	2 1.3%	2	1	0.0%	2 1.5%	1 2.0%	0.0%	3	1	1	0.9%	1 0.8%	1 0.5%	0	0	0.0%	2.3%
3	48	0.7%	0.0%	0.7%	1.3%	1.3%	0.4%	0.0%	1.5%	2.0%	0.0%	1.4%	0.4%	3.4%	0.9%	0.0%	0.5%	0.0%	0.0%	0.0%	2.3%
3	0.9%	0.5%	1.6%	0.0%	0.0%	0.6%	0.4%	0.5%	0.8%	0.0%	0.0%	0.9%	0.8%	0.0%	0.0%	0.8%	0.5%	0.0%	1.6%	0.0%	0.0%
4	77 1.5%	6 1.5%	2.5%	2 1.5%	1 0.7%	2 1.3%	4 1.6%	0.5%	4 3.0%	2.0%	0.5%	5 2.3%	5 2.1%	0.0%	0.9%	2 1.7%	3 1.5%	1 1.2%	2 1.6%	3 2.0%	0.8%
5	299	13	3	5	4	3	9	6	4	1	2	10	6	1	5	4	5	4	4	2	7
	5.7%	3.1%	2.5%	3.7%	2.7%	1.9%	3.6%	2.7%	3.0%	2.0%	1.1%	4.5%	2.5%	3.4%	4.3%	3.4%	2.5%	4.9%	3.2%	1.3%	5.3%
6	247	17	8	8	1	7	10	7	6	3	8	9	11	1	4	4	6	6	2	10	5
	4.7%	4.1%	6.6%	6.0%	0.7%	4.5%	4.0%	3.2%	4.5%	6.1%	4.4%	4.1%	4.7%	3.4%	3.5%	3.4%	3.0%	7.3%	1.6%	6.6%	3.8%
7	492	30	13	10	6	14	15	18	8	3	15	14	13	3	11	11	14	_	9	6	14
	9.5%	7.3%	10.7%	7.5%	4.0%	8.9%	6.0%	8.2%	6.1%	6.1%	8.2%	6.3%	5.5%	10.3%	9.6%	9.3%	6.9%		7.1%	3.9%	10.5%
8	863	53	16	15	22	25	27	22	17	14	17	36	32	7	12	17	30		13	23	17
0	16.6%	12.8%	13.1%	11.2%	14.7%	15.9%			12.9%	28.6%		16.3%		24.1%		14.4%	14.9%			15.1%	12.8%
9	811 15.6%	61 14.8%	15 12.3%	17 12.7%	29 19.3%	25 15.9%	36 14.3%	34 15.5%	22 16.7%	4 8.2%	19 10.4%	41 18.6%	40 16.9%	5 17.2%	13 11.3%	18 15.3%	30 14.9%		13 10.3%	27 17.8%	21 15.8%
10 Best health plan possible	2,267	225	61	75	19.5%	78	14.5%	128	67	22	119	99	123	17.270	68	58	111	49	81	81	13.6%
	43.6%	54.5%	50.0%	56.0%	56.0%	49.7%	57.8%		50.8%		65.4%	44.8%		37.9%	59.1%	49.2%	55.0%	59.8%	64.3%	53.3%	46.6%

NA - Not applicable

Question 28

Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

Base: All respondents

	age			Age (Q35)		Ger (Q:		E	ducation	า	Ethn (Q3	,		Race (Q39)			Care Visest 6 Mos (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African-	Other	None	1 to 4	5 or more	Excellent or Very good	Poob	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	206	17	3	1	3	6	4	5	1	2	3	4	6	0	2	5	6	3	5	2	4
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,204	413	122	134	150	157	251	219	132		182	221		29	115	118	202	82	126	152	133
	96.2%	96.0%	97.6%	99.3%	98.0%	96.3%	98.4%	97.8%	99.2%	96.1%	98.4%	98.2%	97.5%	100.0%	98.3%	95.9%	97.1%	96.5%	96.2%	98.7%	97.1%
0 to 4	225 4.3%	14 3.4%	6 4.9%	4 3.0%	4 2.7%	5 3.2%	9 3.6%	4 1.8%	8 6.1%	2 4.1%	2 1.1%	12 5.4%		1 3.4%	2 1.7%	5.1%	6 3.0%	1 1.2%	4 3.2%	2.0%	7 5.3%
5	299	13	3	5	4	3	9	6	4	1	2	10	6	1	5	4	5	4	4	2	7
	5.7%	3.1%	2.5%	3.7%	2.7%	1.9%	3.6%	2.7%	3.0%	2.0%	1.1%	4.5%	2.5%	3.4%	4.3%	3.4%	2.5%	4.9%	3.2%	1.3%	5.3%
6 to 7	739	47	21	18	7	21	25	25	14	6	23	23		4	15	15	20	11	11	16	19
0	14.2%	11.4%		13.4%	4.7%		10.0%		10.6%					13.8%			9.9%	13.4%	8.7%	10.5%	
8 to 10	3,941	339		107	135	128	208	184	106	40	155	176		23	93	93	171	66	107	131	100
C: :C 11 1:CC 1 C	75.7%	82.1%		79.9%	90.0%	81.5%	82.9%	84.0%	80.3%	81.6%	85.2%	79.6%	82.6%	79.3%	80.9%	78.8%	84.7%	80.5%	84.9%	86.2%	75.2%
Significantly different from column:*	774	A	E	E	CD	4.5	20	4-7	10		4.2	24	20			- 4.4	4-7		10	U	10
0 to 6	771 14.8%	44 10.7%		17 12.7%	6.0%	15 9.6%	28 11.2%	17 7.8%	18 13.6%		12 6.6%	31 14.0%		3 10.3%	11 9.6%	14 11.9%	17 8.4%	11 13.4%	10 7.9%	15 9.9%	19 14.3%
7 to 8	1,355 26.0%	83 20.1%	_	25 18.7%	28 18.7%	39 24.8%	42 16.7%	40 18.3%	25 18.9%	17 34.7%	32 17.6%	50 22.6%		10 34.5%	23 20.0%	28 23.7%		10 12.2%	22 17.5%	29 19.1%	31 23.3%
9 to 10	3,078	286 69.2%	76	92	113	103	181	162	89	26	138	140	163	16	81	76	141	61	94	108	83
Significantly different from column:*	59.1%	69.2% A	62.3% E	68.7%	75.3% C	65.6%	72.1%	74.0% 1	67.4%	53.1% H	75.8% I	63.3% K	69.1%	35.2%	70.4%	64.4%	69.8%	74.4%	74.6%	71.1%	62.4% S

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 29

In general, how would you rate your overall health?

Base: All respondents

	ge			Age			nder	E	ducation	ı	Ethn	,		Race			Care Vi		He	alth Stat	us
	era			(Q35)		(Q:	36)		(Q37)		(Q3	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	рооЭ	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	132	8	0	0	1	1	0	0	1	0	0	1	0	0	1	3	3	2	0	0	0
Number no experience	NA	NA		NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,278 97.6%		125 100.0%		152 99.3%	162 99.4%	255 100.0%	224 100.0%	132 99.2%	51 100.0%	185 100.0%	224 99.6%	242 100.0%	29 100.0%	116 99.1%	120 97.6%	205 98.6%	83 97.6%	131 100.0%	154 100.0%	137 100.0%
Poor	278 5.3%	32 7.6%		13 9.6%		11 6.8%	21 8.2%	14 6.3%	11 8.3%	6 11.8%	9 4.9%	23 10.3%		1 3.4%	10 8.6%	5 4.2%	13 6.3%	13 15.7%	_	0 0.0%	32 23.4%
Fair	1,232 23.3%	105 24.9%	20	28	54	35	69	63	27 20.5%	11	40	59 26.3%	60	8 27.6%	28 24.1%	21	50 24.4%	29 34.9%	0	0 0.0%	105 76.6%
Good	1,837 34.8%	154 36.5%		56	53	59 36.4%	94	83 37.1%	51	16	68	83	93	13 44.8%	38 32.8%	42	81 39.5%	25 30.1%	0.0%	154 100.0%	0.0%
Very good	1,242 23.5%				22 14.5%	35 21.6%	45 17.6%	36 16.1%	30 22.7%	13 25.5%	43 23.2%	37 16.5%	45 18.6%	5 17.2%	26 22.4%	28 23.3%	40 19.5%	12 14.5%	82 62.6%	0.0%	0.0%
Excellent	689 13.1%	49 11.6%	29 23.2%	13 9.6%	6 3.9%	22 13.6%	26 10.2%	28 12.5%	13 9.8%	5 9.8%	25 13.5%	22 9.8%	25 10.3%	2 6.9%	14 12.1%	24 20.0%	21 10.2%	4 4.8%	49 37.4%	0 0.0%	0.0%
Excellent or Very good	1,931 36.6%	131 31.0%			28 18.4%	57 35.2%		64 28.6%	43 32.6%	18 35.3%	68 36.8%	59 26.3%		7 24.1%	40 34.5%	52 43.3%	61 29.8%	16 19.3%	131 100.0%	0 0.0%	0 0.0%
Significantly different from column:*		Α	DE	С	С					_	L	K	_			QR	Р	Р	TU	S	S

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 30

In general, how would you rate your overall mental or emotional health?

Base: All respondents

	erage			Age			nder	E	ducation	า		icity		Race			Care Vis		Не	alth Stat	us
	CSS Avera	2024	to 34	to 54 (G32)	more	Male	6) emale	d or less	(Q37) egelloo	ge grad or more	Hispanic	Hispanic (88	White	African- & & & & & & & & & & & & & & & & & & &	Other	None	4 (Q7)	more	ent or good	(Q29)	r Poor
	2024		18 t	35 t	55 or	РМ	Fen	HS grad	Some	College	Hisp	Not Hi	W	Afri Ame	Otl	ON	1 t	5 or	Excelle Very	OĐ	Fair or
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	119	8	0	0	1	1	0	0	1	0	0	1	0	0	1	3	3	2	0	0	0
Number no experience	NA	NA			NA	NA	NA	NA	NA	NA		NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,291 97.8%	422 98.1%	125 100.0%		152 99.3%		255 100.0%	224 100.0%	132 99.2%	51 100.0%	185 100.0%	224 99.6%	242 100.0%	29 100.0%	116 99.1%	120 97.6%	205 98.6%	83 97.6%	131 100.0%	154 100.0%	137 100.0%
Poor	323 6.1%	25 5.9%		10 7.4%	7 4.6%	7 4.3%	18 7.1%	16 7.1%	9 6.8%	0 0.0%	12 6.5%	13 5.8%		0 0.0%	11 9.5%	7 5.8%	10 4.9%	7 8.4%	1 0.8%	2 1.3%	22 16.1%
Fair	1,068 20.2%	100 23.7%	24	37 27.4%	38 25.0%	40	60	62	27 20.5%	9	40	58	62	4 13.8%	26	22	54	21 25.3%	10 7.6%	33	57
Good	1,635 30.9%	123 29.1%	26	35	55 36.2%	46	74	57	40	17	44	73	68	12	33	34	56	27 32.5%	19	67	37
Very good	1,181 22.3%	99 23.5%	41	26	31 20.4%	33	65	52	33 25.0%	13 25.5%	60	37	56	8 27.6%	25	28	50	18 21.7%	50 38.2%	35	14
Excellent	1,084 20.5%	75	26	27	21 13.8%	36	38	37 16.5%	23	12	29	43	43 17.8%	5	21	29	35	10	51	17	7
Excellent or Very good	2,265 42.8%	174 41.2%		I	52 34.2%			89 39.7%	56 42.4%	25 49.0%		80 35.7%		13 44.8%	46 39.7%	57 47.5%	85 41.5%	28 33.7%	101 77.1%	52 33.8%	21 15.3%
Significantly different from column:*			DE	С	С						L	K							TU	SU	ST

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 31

Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

Base: All respondents

	erage			Age (Q35)		Ger	nder 36)	E	ducation	n	Ethn (Q3	,		Race (Q39)			Care Vi ast 6 Mos (Q7)		He	alth Stat (Q29)	us
	2024 CSS Aver	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African-	Other	None	1 to 4	5 or more	Excellent or Very good	Pood	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410		125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	157	16	0	0	5	3	4	3	3	0	2	2	1	0	3	4	7	3	2	2	4
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,253 97.1%	414 96.3%	125 100.0%	135 100.0%	148 96.7%	160 98.2%	251 98.4%	221 98.7%	130 97.7%	51 100.0%	183 98.9%	223 99.1%	241 99.6%	29 100.0%	114 97.4%	119 96.7%	201 96.6%	82 96.5%	129 98.5%	152 98.7%	133 97.1%
Every day	800 15.2%	40 9.7%		20 14.8%	15 10.1%	23 14.4%			13	3	9	30 13.5%	24	3	12	8 6.7%	18 9.0%	13 15.9%	4 3.1%	13 8.6%	23 17.3%
Some days	511 9.7%	34 8.2%		17 12.6%	13 8.8%	15 9.4%	18 7.2%	17 7.7%	11 8.5%	5 9.8%	12 6.6%	21 9.4%	20 8.3%	3	9 7.9%	8 6.7%	19 9.5%	5 6.1%	6 4.7%	15 9.9%	13 9.8%
Not at all	3,850 73.3%	331 80.0%	114 91.2%	95 70.4%		118 73.8%	212 84.5%	174 78.7%	106 81.5%	41 80.4%	157 85.8%	169 75.8%	191 79.3%	22 75.9%	91 79.8%	101 84.9%	160 79.6%	61 74.4%	114 88.4%	122 80.3%	95 71.4%
Don't know	92 1.8%	9 2.2%	3 2.4%	3 2.2%	3 2.0%	4 2.5%	5 2.0%	7 3.2%	0.0%	2 3.9%	5 2.7%	3 1.3%	6 2.5%	1 3.4%	2 1.8%	2 1.7%	4 2.0%	3 3.7%	5 3.9%	2 1.3%	2 1.5%
Every day or Some days	1,311 25.0%	74 17.9%		37 27.4%	28 18.9%	38 23.8%		40 18.1%		8 15.7%	21 11.5%	51 22.9%	44 18.3%	6 20.7%	21 18.4%	16 13.4%	37 18.4%	18 22.0%	-	28 18.4%	36 27.1%
Significantly different from column:*		Α	DE	С	С	G	F				L	K							TU	S	S

4993000

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 32

In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

Base: All respondents who smoke cigarettes or use tobacco (Q31)

	је			Age		Gen	ıder	E	ducation	ì	Ethn	nicity		Race			n Care Vi ast 6 Mos		Не	alth Stati	JS
	erage			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	1,311	74	8	37	28	38	34	40	24	8	21	51	44	6	21	16	37	18	10	28	36
Number missing or multiple answer	24	1	0	1	0	0	1	0	0	1	0	1	1	0	0	0	0	0	0	0	1
Number no experience	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,287	73	Ŭ	36	28	38	33	40	24	7	21	50		6	21	16	37	18	10	28	35
	98.2%		100.0%	97.3%	100.0%		97.1%	100.0%	100.0%	87.5%	100.0%			100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	97.2%
Never	345	20		14	4	12	7	11	5	3	5	15		1	4	9	9	2	2	11	7
	26.8%	27.4%		38.9%	14.3%	31.6%	21.2%	27.5%	20.8%	42.9%	23.8%	30.0%	32.6%	16.7%	19.0%	56.3%	24.3%	11.1%	20.0%	39.3%	20.0%
Sometimes	289 22.5%	18 24.7%	_	7 19.4%	9 32.1%	6 15.8%	12 26 40/	12 30.0%	6 25.0%	0 00%	7 22 20/	22.00/	12 27.9%	1 16.7%	5 22.00/	6.3%	9	7 38.9%	4 40.0%	5 17.9%	9 25.7%
Usually	22.5%	24.7%	25.0%	19.4%	32.1%	15.6%	30.4%	30.0%	23.0%	0.0%	33.3%	22.0%	27.9%	10.7%	23.8%	0.5%	24.3%	30.9%	40.0%	17.9%	25.7%
osuany	16.9%		37.5%	11.1%	14.3%	21.1%	9.1%	15.0%	20.8%	0.0%	14.3%	16.0%	14.0%	0.0%	19.0%	12.5%	21.6%	5.6%	10.0%	17.9%	14.3%
Always	436	24		11	11	12	11	11	8	4	6	16	11	4	8	4	11	8	3	7	14
	33.9%	32.9%	25.0%	30.6%	39.3%	31.6%	33.3%	27.5%	33.3%	57.1%	28.6%	32.0%	25.6%	66.7%	38.1%	25.0%	29.7%	44.4%	30.0%	25.0%	40.0%
Significantly different from column:*																					
Sometimes, Usually, or Always	942	53		22	24				19	4	16			5	17	7	28	16	8	17	28
	73.2%	72.6%	87.5%	61.1%		68.4%	78.8%	72.5%	79.2%	57.1%	76.2%	70.0%	67.4%	83.3%	81.0%		75.7%		80.0%	60.7%	80.0%
Significantly different from column:*				E	D											QR	Р	Р			

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 33

In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

4993000

Base: All respondents who smoke cigarettes or use tobacco (Q31)

	erage			Age		Ger		E	Education	า		nicity		Race			n Care Vis		Не	alth Stat	us
	10			(Q35)		(Q.	36)		(Q37)		(Q.	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	1,311	74	8	37	28	38	34	40	24	8	21	51	44	6	21	16	37	18	10	28	36
Number missing or multiple answer	30	1	0	0	1	0	1	1	0	0	0	1	1	0	0	0	0	1	0	0	1
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,281	73	8	37	27	38	33	39	l .	8	21	50	43	6	21	16	37	17	10	28	35
	97.7%	98.6%	100.0%	100.0%	96.4%	100.0%	97.1%	97.5%	100.0%	100.0%	100.0%	98.0%	97.7%	100.0%	100.0%	100.0%	100.0%	94.4%	100.0%	100.0%	97.2%
Never	655	41	3	25	12	24	16	22	11	7	9	32	29	2	8	13	16	10	5	17	19
	51.1%	56.2%	37.5%	67.6%	44.4%	63.2%	48.5%	56.4%	45.8%	87.5%	42.9%	64.0%	67.4%	33.3%	38.1%	81.3%	43.2%	58.8%	50.0%	60.7%	54.3%
Sometimes	236	14	3	7	4	8	6	8	6	0	7	7	8	1	5	0	11	3	3	4	7
	18.4%	19.2%	37.5%	18.9%	14.8%	21.1%	18.2%	20.5%	25.0%	0.0%	33.3%	14.0%	18.6%	16.7%	23.8%	0.0%	29.7%	17.6%	30.0%	14.3%	20.0%
Usually	166	9	1	3	5	1	7	6	2	0	3	4	3	1	4	2	5	2	1	4	4
	13.0%	12.3%	12.5%	8.1%	18.5%	2.6%	21.2%	15.4%	8.3%	0.0%	14.3%	8.0%	7.0%	16.7%	19.0%	12.5%	13.5%	11.8%	10.0%	14.3%	11.4%
Always	224	9	1	2	6	5	4	3	5	1	2	7	3	2	4	1	5	2	1	3	5
	17.5%	12.3%	12.5%	5.4%	22.2%	13.2%	12.1%	7.7%	20.8%	12.5%	9.5%	14.0%	7.0%	33.3%	19.0%	6.3%	13.5%	11.8%	10.0%	10.7%	14.3%
Significantly different from column:*																					
Sometimes, Usually, or Always	626	32		12	15	14		17	13	1	12	18		4	13	3	21	7	5	11	16
	48.9%	43.8%	62.5%	32.4%	55.6%	36.8%	51.5%	43.6%	54.2%	12.5%	57.1%	36.0%	32.6%	66.7%				41.2%	50.0%	39.3%	45.7%
Significantly different from column:*													0		М	Q	P				

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 34

In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

4993000

Base: All respondents who smoke cigarettes or use tobacco (Q31)

	је			Age		Ger	ıder	E	Education	ı	Ethn	nicity		Race			Care Vis		He	alth Stati	JS
	erage			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	1,311	74	8	37	28	38	34	40	24	8	21	51	44	6	21	16	37	18	10	28	36
Number missing or multiple answer	34	1	0	0	1	0	1	1	0	0	0	1	1	0	0	0	0	1	0	0	1
Number no experience	NA	NA			NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	1,277	73	_	37	27	38	33	39		8	21	50	_	6	21	16	37	17	10	28	35
	97.4%	98.6%	100.0%	100.0%	96.4%	100.0%	97.1%	97.5%	100.0%	100.0%	100.0%	98.0%	97.7%	100.0%	100.0%	100.0%	100.0%	94.4%	100.0%	100.0%	97.2%
Never	709	44		27	12		21	22		7	9	34		1	10	14	18	10	4	19	21
	55.5%	60.3%	50.0%	73.0%	44.4%	55.3%	63.6%	56.4%	54.2%	87.5%	42.9%	68.0%	69.8%	16.7%	47.6%	87.5%	48.6%	58.8%	40.0%	67.9%	60.0%
Sometimes	233	16	_	7	8	7	9	9	7	0	8	7	6	3	7	1	12	3	4	4	8
	18.2%	21.9%	12.5%	18.9%	29.6%	18.4%	27.3%	23.1%	29.2%	0.0%	38.1%	14.0%	14.0%	50.0%	33.3%	6.3%	32.4%	17.6%	40.0%	14.3%	22.9%
Usually	145 11.4%	6 8.2%	37.5%	2.7%	7.4%	6 15.8%	0.0%	5 12.8%	4.2%	0.0%	14.3%	6.0%	9.3%	0.0%	9.5%	0.0%	8.1%	3 17.6%	1 10.0%	7.1%	8.6%
Always	190	7	0	2	5	4	3	3	3	1	1	6	3	2	2	1	4	1	1	3	3
	14.9%	9.6%	0.0%	5.4%	18.5%	10.5%	9.1%	7.7%	12.5%	12.5%	4.8%	12.0%	7.0%	33.3%	9.5%	6.3%	10.8%	5.9%	10.0%	10.7%	8.6%
Significantly different from column:*										_											
Sometimes, Usually, or Always	568	29	4	10	15	17	12	17	11	1	12	16	13	5	11	2	19	7	6	9	14
	44.5%	39.7%	50.0%	27.0%	55.6%	44.7%	36.4%	43.6%	45.8%	12.5%	57.1%	32.0%	30.2%	83.3%	52.4%	12.5%	51.4%	41.2%	60.0%	32.1%	40.0%
Significantly different from column:*				Е	D						L	K				Q	Р				

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 35

What is your age?

Base: All respondents

·																					
	је			Age		Ger	nder	E	ducation	ı	Ethn	icity		Race			Care Vi st 6 Mos		He	alth Stat	us
	raç			(Q35)		(Q:	36)		(Q37)		(Q3	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	E	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	148	17	0	0	0	4	3	3	1	0	4	1	4	0	2	7	6	2	3	4	3
Number no experience	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,262 97.3%	413 96.0%	125 100.0%	135 100.0%	153 100.0%	159 97.5%	252 98.8%	221 98.7%	132 99.2%	51 100.0%		224 99.6%	238 98.3%	29 100.0%	115 98.3%	116 94.3%	202 97.1%	83 97.6%	128 97.7%	150 97.4%	134 97.8%
18 to 24	649	53	53	0	0	26	27	33	19	1	43	10	27	1	18	25	24	4	28	16	9
	12.3%	12.8%	42.4%	0.0%	0.0%	16.4%	10.7%	14.9%	14.4%	2.0%	23.8%	4.5%	11.3%	3.4%	15.7%	21.6%	11.9%	4.8%	21.9%	10.7%	6.7%
25 to 34	930	72	72	0	0	25	47	42	19	10	39	33	39	6	22	29	34	7	34	25	13
	17.7%	17.4%	57.6%	0.0%	0.0%	15.7%	18.7%	19.0%	14.4%	19.6%	21.5%	14.7%	16.4%	20.7%	19.1%	25.0%	16.8%	8.4%	26.6%	16.7%	9.7%
35 to 44	924	72	0	72	0	30	42	37	22	11	34	38	43	2	24	19	31	20	23	27	22
	17.6%	17.4%	0.0%	53.3%	0.0%	18.9%	16.7%	16.7%	16.7%	21.6%	18.8%	17.0%	18.1%	6.9%	20.9%	16.4%	15.3%	24.1%	18.0%	18.0%	16.4%
45 to 54	892	63		63	0	28	34	29	24	9	21	40	39	3	18	18	31	13	15	29	19
	17.0%	15.3%	0.0%	46.7%	0.0%		13.5%	13.1%		17.6%	-	17.9%	16.4%	10.3%	15.7%	15.5%	15.3%	15.7%	11.7%	19.3%	14.2%
55 to 64	1,520	77	0	0	77	28	48	39	28	9	18	59	46	12	16	9	41	24	16	23	38
65 . 74	28.9%	18.6%	0.0%	0.0%	50.3%		19.0%			17.6%		26.3%		41.4%	13.9%	7.8%	20.3%	28.9%	12.5%	15.3%	28.4%
65 to 74	246	47	0	0	47	11	36	23	14	6	15	28	26	5	8	4	31	11	5	22	20
75 or older	4.7%	11.4%		0.0%	30.7%	6.9%			10.6%	11.8%		12.5%		17.2%	7.0%	3.4%	15.3%	13.3%	3.9%	14.7%	14.9%
75 Of Older	101 1.9%	29 7.0%		0.0%	29 19.0%	11 6.9%	18 7.1%	18 8.1%	4.5%	5 9.8%	11 6.1%	16 7.1%	18 7.6%	0.0%	9 7.8%	12 10.3%	10 5.0%	4 4.8%	5.5%	5.3%	13 9.7%
55 or older	1,867	153		0	153	50	102	80	48	20	44	103	90	17	33	25	82	39	28	53	71
	35.5%	37.0%	0.0%	0.0%	100.0%	31.4%	40.5%	36.2%	36.4%	39.2%	24.3%	46.0%	37.8%	58.6%	28.7%	21.6%	40.6%	47.0%		35.3%	53.0%
Significantly different from column:*			Е	E	CD						L	K	N	МО	N	QR	Р	Р	TU	SU	ST
4																					

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 36

Are you male or female?

Base: All respondents

	ge			Age			nder	E	ducation	า		icity		Race			Care Visast 6 Mos		Не	alth Stat	us
	ra B			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	PooD	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	147	12	0	1	1	0	0	1	1	0	1	1	2	0	0	4	5	3	3	1	1
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,263	418	125	134	152	163	255	223	132	51	184	224	240	29	117	119	203	82	128	153	136
	97.3%	97.2%	100.0%	99.3%	99.3%	100.0%	100.0%	99.6%	99.2%	100.0%	99.5%	99.6%	99.2%	100.0%	100.0%	96.7%	97.6%	96.5%	97.7%	99.4%	99.3%
Male	2,141	163	51	58	50	163	0	85	49	24	59	99	95	10	48	53	81	26	57	59	46
	40.7%	39.0%	40.8%	43.3%	32.9%	100.0%	0.0%	38.1%	37.1%	47.1%	32.1%	44.2%	39.6%	34.5%	41.0%	44.5%	39.9%	31.7%	44.5%	38.6%	33.8%
Female	3,122	255	74	76	102	0	255	138	83	27	125	125	145	19	69	66	122	56	71	94	90
	59.3%	61.0%	59.2%	56.7%	67.1%	0.0%	100.0%	61.9%	62.9%	52.9%	67.9%	55.8%	60.4%	65.5%	59.0%	55.5%	60.1%	68.3%	55.5%	61.4%	66.2%
Significantly different from column:*						G	F				L	K									

4993000

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 37

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

Base: All respondents

	age			Age (Q35)		Ger (Q:		E	ducation	١	Ethn (Q3	,		Race (Q39)			n Care Vi ast 6 Mos (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Average	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	I I	85	131	154	137
Number missing or multiple answer	203	22	1	3	5	5	7	0	0	0	5	3	6	0	2	5	11	5	6	4	5
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA
Usable responses	5,207	408	124	132	148	158	248	224	133	51	180	222	236	29	115	118		80	125	150	132
	96.2%	94.9%	99.2%	97.8%	96.7%	96.9%	97.3%	100.0%	100.0%	100.0%	97.3%	98.7%	97.5%	100.0%	98.3%	95.9%	94.7%	94.1%	95.4%	97.4%	96.4%
8th grade or less	310	34		6	22	11	22	34	0	0	21	12	19	2	7	8	18	5	10	13	11
	6.0%	8.3%	3.2%	4.5%	14.9%	7.0%	8.9%	15.2%	0.0%	0.0%	11.7%	5.4%	8.1%	6.9%	6.1%	6.8%	9.1%	6.3%	8.0%	8.7%	8.3%
Some high school, but did not graduate	713	52	11	21	19	19	33	52	0	0	30	19	25	2	21	20	20	10	12	17	23
	13.7%	12.7%	8.9%	15.9%	12.8%	12.0%	13.3%	23.2%	0.0%	0.0%	16.7%	8.6%	10.6%	6.9%	18.3%	16.9%	10.2%	12.5%	9.6%	11.3%	17.4%
High school graduate or GED	2,033	138	60	39	39	55	83	138	0	0	69	69	81	8	39	46	67	20	42	53	43
	39.0%	33.8%	48.4%	29.5%	26.4%	34.8%	33.5%	61.6%	0.0%	0.0%	38.3%	31.1%	34.3%	27.6%	33.9%	39.0%	34.0%	25.0%	33.6%	35.3%	32.6%
Some college or 2-year degree	1,454	133	38	46	48	49	83	0	133	0	48	83	85	9	32	34	68	30	43	51	38
	27.9%	32.6%	30.6%	34.8%	32.4%	31.0%	33.5%	0.0%	100.0%	0.0%	26.7%	37.4%	36.0%	31.0%	27.8%	28.8%	34.5%	37.5%	34.4%	34.0%	28.8%
4-year college graduate	455	34	6	15	13	14	20	0	0	34	6	28	16	6	12	5	17	11	11	9	14
	8.7%	8.3%	4.8%	11.4%	8.8%	8.9%	8.1%	0.0%	0.0%	66.7%	3.3%	12.6%	6.8%	20.7%	10.4%	4.2%	8.6%	13.8%	8.8%	6.0%	10.6%
More than 4-year college degree	242	17	5	5	7	10	7	0	0	17	6	11	10	2	4	5	7	4	7	7	3
	4.6%	4.2%	4.0%	3.8%	4.7%	6.3%	2.8%	0.0%	0.0%	33.3%	3.3%	5.0%	4.2%	6.9%	3.5%	4.2%	3.6%	5.0%	5.6%	4.7%	2.3%
4-year college graduate or more	697	51	11	20	20	24	27	0	0	51	12	39		8	16	10		15	18	16	17
	13.4%	12.5%	8.9%	15.2%	13.5%	15.2%	10.9%	0.0%	0.0%	100.0%	6.7%	17.6%	11.0%	27.6%	13.9%	8.5%	12.2%	18.8%	14.4%	10.7%	12.9%
Significantly different from column:*								J	J	HI	L	K				R		Р			

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 38

Are you of Hispanic or Latino origin or descent?

Base: All respondents

	rage			Age (Q35)		Gen (Q3	ider 36)	E	ducation	า		nicity 38)		Race (Q39)			n Care Vi ast 6 Mos (Q7)		Не	alth Stat (Q29)	us
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Good	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	267	20	0	2	6	5	5	4	2	0	0	0	4	1	2	5	8	4	4	3	6
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,143			133	147	158			131	51	185	225		28	115	118		81	127	151	131
	95.1%	95.3%	100.0%	98.5%	96.1%	96.9%	98.0%	98.2%	98.5%	100.0%	100.0%	100.0%	98.3%	96.6%	98.3%	95.9%	96.2%	95.3%	96.9%	98.1%	95.6%
Yes, Hispanic or Latino	1,221	185	82	55	44	59	125	120	48	12	185	0	91	5	64	63	86	30	68	68	49
	23.7%	45.1%	65.6%	41.4%	29.9%	37.3%	50.0%	54.5%	36.6%	23.5%	100.0%	0.0%	38.2%	17.9%	55.7%	53.4%	43.0%	37.0%	53.5%	45.0%	37.4%
No, not Hispanic or Latino	3,922	225	43	78	103	99	125	100	83	39	0	225	147	23	51	55	114	51	59	83	82
	76.3%	54.9%	34.4%	58.6%	70.1%	62.7%	50.0%	45.5%	63.4%	76.5%	0.0%	100.0%	61.8%	82.1%	44.3%	46.6%	57.0%	63.0%	46.5%	55.0%	62.6%
Significantly different from column:*		Α	DE	CE	CD	G	F	IJ	Н	Н	L	K	NO	MO	MN	R		Р	U		S

4993000

NA - Not applicable

^{*}A letter in a cell means the percentage in the cell immediately above is significantly different from the percentage in the column headed by that letter (in that same row). The significance test was conducted at the 95% confidence level.

Question 39

What is your race? Mark one or more.

Base: All respondents

	age			Age		Gen		E	ducation	า		icity		Race			Care Vis		He	alth Stat	us
	era			(Q35)		(Q:	36)		(Q37)		(Q:	38)		(Q39)			(Q7)			(Q29)	
	2024 CSS Ave	2024	18 to 34	35 to 54	55 or more	Male	Female	HS grad or less	Some college	College grad or more	Hispanic	Not Hispanic	White	African- American	Other	None	1 to 4	5 or more	Excellent or Very good	Poog	Fair or Poor
	Α	В	С	D	Е	F	G	Н	I	J	K	L	М	N	0	Р	Q	R	S	Т	U
Number in sample	5,410	430	125	135	153	163	255	224	133	51	185	225	242	29	117	123	208	85	131	154	137
Number missing or multiple answer	377	42	12	6	13	10	22	20	7	1	25	4	0	0	0	17	18	5	14	10	11
Number no experience	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA		NA	NA	NA	NA	NA	NA	NA	NA
Usable responses	5,033	388	113	129	140	153	233	204	126	50	160	221		29	117	106	190	80	117	144	126
	93.0%	90.2%	90.4%	95.6%	91.5%	93.9%	91.4%	91.1%	94.7%	98.0%	86.5%	98.2%	100.0%	100.0%	100.0%	86.2%	91.3%	94.1%	89.3%	93.5%	92.0%
White	2,827	273	77	95	96	108	163	140	96	30	105	163	242	0	31	70	135	59	75	103	95
	56.2%	70.4%	68.1%	73.6%	68.6%	70.6%	70.0%	68.6%	76.2%	60.0%	65.6%	73.8%	100.0%	0.0%	26.5%	66.0%	71.1%	73.8%	64.1%	71.5%	75.4%
Black or African-American	1,506	41	10	9	22	18	23	16	16	9	8	32	_	29	12	8	21	10	10	15	15
	29.9%	10.6%		7.0%	15.7%	11.8%	9.9%	7.8%	12.7%	18.0%	5.0%	14.5%	0.0%	100.0%	10.3%	7.5%	11.1%	12.5%	8.5%	10.4%	11.9%
Asian	305	20	_	4	10	9	11	12	4	4	1	19		0	20	8	9	3	9	6	4
N 1: 11 " 11 D 15 T 1 1	6.1%	5.2%	5.3%	3.1%	7.1%	5.9%	4.7%	5.9%	3.2%	8.0%	0.6%	8.6%	0.0%	0.0%	17.1%	7.5%	4.7%	3.8%	7.7%	4.2%	3.2%
Native Hawaiian or other Pacific Islander	49	5	1 00/	3	0 000	1 20/	1 20/	1	1 60/	4.00/	1.00/	0.00	0 000	0 000	4 204	1 00/	3	0 004	1 70/	0 00′	3 404
American Indian or Alaska Native	1.0% 187	1.3% 18	1.8%	2.3% 10	0.0%	1.3%	1.3%	0.5%	1.6%	4.0%	1.9%	0.9% 10	0.0%	0.0%	4.3% 18	1.9%	1.6% 10	0.0%	1.7%	0.0%	2.4%
American Indian of Alaska Native	3.7%	4.6%	4.4%	7.8%	2.1%	5.9%	3.9%	4.4%	4.8%	6.0%	5.0%	I	0.0%	0.0%		3.8%		5.0%	4.3%	3.5%	6.3%
Other	677	84		31	2.1 70	3.5 70	5.5 %	47	26	9.070	5.0 %	27		0.070	84	26	39	15	27	28	29
	13.5%				15.0%		-	23.0%		18.0%				0.0%					23.1%		_

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Please note that respondents could select more than one response option, therefore percentages may not add up to 100%.

APPENDIX D. SURVEY MATERIALS



CSS Processing PO Box 3416 Hopkins, MN 55343

Scan here to take the survey online! ¡Escanee aquí para completar la encuesta en línea! PRST FIRST CLASS
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PERMIT 5745

We need your help! Mercy Care is conducting a survey to find out about the services that it provides to its members. Your name was selected at random to tell us what you think.

You can complete the survey online, right now, by scanning the QR code on the front of this postcard with your smart phone.

In a few days you'll be receiving a printed survey in the mail if you prefer to complete it on paper.

If you have questions about the survey, please call CSS, an independent research firm working with us on this survey, at the toll-free number 1-800-874-5561 or e-mail them at questions@cssresearch.org.

Thanks again for your help!

¡Necesitamos su ayuda! Mercy Care está realizando una encuesta para averiguar sobre los servicios que proporciona a sus miembros. Su nombre fue seleccionado al azar para que nos diga lo que piensa.

Puede completar la encuesta en línea, ahora mismo, escaneando con su teléfono celular el código QR que se encuentra al frente de esta tarjeta.

Si prefiere completar la encuesta en formato papel, recibirá una encuesta impresa por correo postal en los próximos días.

Si usted tiene preguntas sobre esta encuesta, llame a CSS, una firma independiente de investigaciones, al número de teléfono gratuito 1-800-874-5561 o por correo electrónico a questions@cssresearch.org.

¡Muchas gracias de nuevo por su ayuda!



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RESPONSE



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FINAL REMINDER - PLEASE RESPOND!



MER3B_1

How can Mercy Care serve you better? How can people choose the health care plan that is best for them?

This survey gives you the chance to tell us what you think about the services we provide at Mercy Care. It will take less than 20 minutes to complete.

The survey is part of a national project by the National Committee for Quality Assurance (NCQA), a non-profit group that helps people learn more about health care plans.

The Center for the Study of Services (CSS) is an independent research firm that is helping us conduct the survey. No one but the staff at CSS and NCQA will see your answers. Your answers will not have your name on them and will be part of a pool of information from others like you. Please call CSS at the toll-free number 1-800-874-5561 or e-mail them at questions@cssresearch.org if you have any questions.

You can complete the survey right now, online, by using a phone to scan the QR code at the top of this letter, which will take you directly to the survey. If you prefer to complete a paper survey, you may return the included survey using the enclosed postage paid envelope.

Because we are asking only a few people to take the survey, it is very important that you complete the survey right away.

Thank you for helping to make health care better.

Sandra Wendt

Sincerely,

Sandra Wendt

V.P. of Quality Management



MER3B_3

About three weeks ago, we sent you a survey about the services we provide at Mercy Care. If you responded, thank you for your help! You can ignore this letter.

We sent you another survey, just in case you misplaced the first one. Please take a little time to complete it. It will take less than 20 minutes to complete.

You can complete the survey right now, online, by using a phone to scan the QR code at the top of this letter, which will take you directly to the survey. If you prefer to complete a paper survey, you may return the included survey using the enclosed postage paid envelope.

The survey is part of a national project by the National Committee for Quality Assurance (NCQA), a non-profit group that helps people learn more about health care plans.

The Center for the Study of Services (CSS) is an independent research firm that is helping us conduct the survey. No one but the staff at CSS and NCQA will see your answers. Your answers will not have your name on them and will be part of a pool of information from others like you. Please call CSS at the toll-free number 1-800-874-5561 or e-mail them at questions@cssresearch.org if you have any questions.

Because we asked only a few people to take the survey, it is very important that you complete the survey right away. If you completed the paper survey, please return it in the pre-paid envelope.

Thank you for helping to make health care better.

Sandra Wendt

Sincerely,

Sandra Wendt

V.P. of Quality Management



CSS Processing PO Box 3416 Hopkins, MN 55343

Scan here to take the survey online! ¡Escanee aquí para completar la encuesta en línea! PRST FIRST CLASS
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PERMIT 5745

We need your help! Recently, we sent you a short survey about your health care. Your answers will help us improve the services we provide. The survey will also help other people learn more about health care plans, but it will help only if everyone who gets the survey sends it back.

If you have already sent in your survey, thank you! You can ignore this reminder.

If you did not get the survey, or if you misplaced it, please call CSS at the toll-free number 1-800-874-5561 or e-mail them at questions@cssresearch.org. They will mail you another one. You can also call that number if you have any questions.

You can complete the survey online, right now, by scanning the QR code on the front of this postcard with your smart phone.

Thanks again for your help!

¡Necesitamos su ayuda! Hace poco le enviamos una breve encuesta sobre su atención médica. Sus respuestas nos ayudarán a mejorar los servicios que ofrecemos. La encuesta también ayudará a otras personas a informarse mejor sobre los planes de atención médica, pero solamente será útil si todos los que la reciban la devuelven.

Si ya ha devuelto la encuesta, se lo agradecemos de sobremanera. De ser el caso, puede ignorar este recordatorio.

Si no recibió la encuesta o si se le ha perdido, llame a CSS al número de teléfono gratuito 1-800-874-5561 o por correo electrónico a questions@cssresearch.org. Ellos le enviarán otra por correo. También puede llamar a dicho número si tiene alguna pregunta.

Puede completar la encuesta en línea, ahora mismo, escaneando con su teléfono celular el código QR que se encuentra al frente de esta tarjeta.

¡Muchas gracias de nuevo por su ayuda!





SURVEY INSTRUCTIONS	
Answer each question by marking the box to the left. You are sometimes told to skip over some questions arrow with a note that tells you what question to answer that it is a left of the solution of the solu	in this survey. When this happens you will see an swer next, like this: f Yes, Go to Question 1 public and will only be released in accordance with thoose not to, this will not affect the benefits you rvey. This number is ONLY used to let us know if you eminders.
 Our records show that you are now in Mercy Care. Is that right? □ Yes → If Yes, Go to Question 3 □ No What is the name of your health plan? (Please print) 	 5. In the last 6 months, did you make any in person, phone, or video appointments for a <u>check-up or routine care</u>? ☐ Yes ☐ No → If No, Go to Question 7 6. In the last 6 months, how often did you get an appointment for a <u>check-up or routine care</u> as soon as you needed?
Your Health Care in the Last 6 Months These questions ask about your own health care from a clinic, emergency room, or doctor's office. This includes care you got in person, by phone, or by video. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.	 □¹ Never □² Sometimes □₃ Usually □₄ Always In the last 6 months, not counting the times you went to an emergency room, how many times did you get health care for yourself in person, by phone, or by video? □₀ None → If None, Go to Question 10
 In the last 6 months, did you have an illness, injury, or condition that needed care right away? □₁ Yes □₂ No → If No, Go to Question 5 	\square_1 1 time \square_2 2 \square_3 3 \square_4 4 \square_5 5 to 9 \square_6 10 or more times
 In the last 6 months, when you needed care right away, how often did you get care as soon as you needed? \(\begin{align*} & \left\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	8. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months? O 1 2 3 4 5 6 7 8 9 10 Worst health care possible Best health care possible

Best health care

possible

 9. In the last 6 months, how often was it easy to get the care, tests, or treatment you needed? \(\sum_1 \) Never \(\sum_2 \) Sometimes \(\sum_3 \) Usually \(\sum_4 \) Always 	15. In the last 6 months, how often did your personal doctor spend enough time with you? □₁ Never □₂ Sometimes □₃ Usually □₄ Always
YOUR PERSONAL DOCTOR 10. A personal doctor is the one you would talk to if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor? □1 Yes □2 No → If No, Go to Question 19 11. In the last 6 months, how many times did you have an in person, phone, or video visit with your personal doctor about your health? □0 None → If None, Go to Question 18 □1 1 time □2 2 □3 3 □4 4 □5 5 to 9 □6 10 or more times 12. In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand?	 16. In the last 6 months, did you get care from a doctor or other health provider besides your personal doctor? ☐ Yes ☐ Yes ☐ No → If No, Go to Question 18 17. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers? ☐ Never ☐ Sometimes ☐ Usually ☐ Always 18. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor? 0 1 2 3 4 5 6 7 8 9 10 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
□¹ Never □² Sometimes □³ Usually □⁴ Always 13. In the last 6 months, how often did your personal doctor listen carefully to you? □¹ Never □² Sometimes □³ Usually □⁴ Always 14. In the last 6 months, how often did your personal doctor show respect for what you had to say? □¹ Never □² Sometimes □³ Usually □⁴ Always	 GETTING HEALTH CARE FROM SPECIALISTS When you answer the next questions, include the care you got in person, by phone, or by video. Do not include dental visits or care you got when you stayed overnight in a hospital. 19. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you make any appointments with a specialist? □₁ Yes □₁ Yes □₂ No → If No, Go to Question 23

20. In the last 6 months, how often did you get an appointment with a specialist as soon as you needed? □₁ Never □₂ Sometimes □₃ Usually □₄ Always	25. In the last 6 months, how often did your health plan's customer service staff treat you with courtesy and respect? Never Sometimes Usually Always
21. How many specialists have you talked to in the last 6 months? □₀ None → If None, Go to Question 23 □₁ 1 specialist □₂ 2 □₃ 3 □₄ 4 □₅ 5 or more specialists 22. We want to know your rating of the specialist you talked to most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist? ○ 1 2 3 4 5 6 7 8 9 10 □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	 26. In the last 6 months, did your health plan give you any forms to fill out? ☐ Yes ☐ No → If No, Go to Question 28 27. In the last 6 months, how often were the forms from your health plan easy to fill out? ☐ Never ☐ Sometimes ☐ Usually ☐ Always 28. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan? O 1 2 3 4 5 6 7 8 9 10 ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
The next questions ask about your experience with your health plan.	ABOUT YOU
 23. In the last 6 months, did you get information or help from your health plan's customer service? \[\begin{align*} \textsup_1 \text{ Yes} \\ \textsup_2 \text{ No } \rightarrow \textit{ If No, Go to Question 26} \end{align*} \] 24. In the last 6 months, how often did your health plan's customer service give you the information or help you needed? \[\begin{align*} \textsup_1 \text{ Never} \\ \textsup_2 \text{ Sometimes} \\ \textsup_3 \text{ Usually} \\ \textsup_4 \text{ Always} \end{align*} \] 	29. In general, how would you rate your overall health?

	Do you now smoke cigarettes or use tobacco every day, some days, or not at all?	37. What is the highest grade or level of school that you have completed?
22	 □₁ Every day □₂ Some days □₃ Not at all → If Not at all, Go to Question 35 □₄ Don't know → If Don't know, Go to Question 35 	 □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
	In the last 6 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan? Never Sometimes Usually Always	38. Are you of Hispanic or Latino origin or descent? ☐₁ Yes, Hispanic or Latino ☐₂ No, not Hispanic or Latino 39. What is your race? Mark one or more. ☐₃ White
	In the last 6 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.	 □ Black or African-American □ Asian □ Native Hawaiian or other Pacific Islander □ American Indian or Alaska Native □ Other
	□₁ Never	THANK YOU
	☐₂ Sometimes ☐₃ Usually ☐₄ Always In the last 6 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of	Please return the completed survey in the postage-paid envelope to: Center for the Study of Services PO Box 3416 Hopkins, MN 55343 Please do not include any other correspondence.
	methods and strategies are: telephone helpline, individual or group counseling, or cessation program. \[\begin{align*} \b	
35.	What is your age?	
	 □₁ 18 to 24 □₂ 25 to 34 □₃ 35 to 44 □₄ 45 to 54 □₅ 55 to 64 □₆ 65 to 74 □₃ 75 or older 	
36.	Are you male or female?	
	□₁ Male □₂ Female	

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MER3B_1-S

¿Cómo puede Mercy Care servirle mejor? ¿Cómo pueden las personas escoger el plan de atención médica más conveniente para ellas?

Esta encuesta le brinda la oportunidad de decirnos lo que piensa sobre los servicios que ofrecemos en Mercy Care. Le tomará menos de 20 minutos responderla.

La encuesta forma parte de un proyecto nacional del Comité Nacional de Control de Calidad (NCQA, por sus siglas en inglés), una organización sin fines de lucro que ayuda a las personas a informarse mejor sobre los planes de atención médica.

Center for the Study of Services (CSS) es una firma independiente de investigaciones que nos está ayudando a llevar a cabo la encuesta. Solamente el personal de CSS y de NCQA podrá ver sus respuestas. Sus respuestas no llevarán su nombre y serán parte de un conjunto de información de otras personas como usted. Comuníquese con CSS al número de teléfono gratuito 1-800-874-5561 o por correo electrónico a questions@cssresearch.org si tiene alguna pregunta.

Puede completar la encuesta, en línea, ahora mismo escaneando con su teléfono celular el código QR que se encuentra en la parte superior de esta carta. Este le redireccionará directamente a la encuesta. Si prefiere completar la encuesta en formato papel, sírvase enviar la encuesta aquí incluida en el sobre adjunto con porte pagado.

Debido a que le pedimos solo a unas pocas personas que participen en la encuesta, **es muy importante que usted complete la encuesta y la devuelva de inmediato.**

Gracias por contribuir a que la atención médica sea mejor para todos.

Atentamente.

Sandra Wendt

V.P. of Quality Management

Sandra Wendt



MER3B_3-S

Hace unas tres semanas le enviamos una encuesta sobre los servicios que ofrecemos en Mercy Care. Si devolvió su encuesta, se lo agradecemos de sobremanera. De ser el caso, puede ignorar esta carta.

Le enviamos otra encuesta, en caso de que haya perdido la primera. Le pedimos que se tome un poco de tiempo para completarla. Le tomará menos de 20 minutos responderla.

Puede completar la encuesta, en línea, ahora mismo escaneando con su teléfono celular el código QR que se encuentra en la parte superior de esta carta. Este le redireccionará directamente a la encuesta. Si prefiere completar la encuesta en formato papel, sírvase enviar la encuesta aquí incluida en el sobre adjunto con porte pagado.

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Debido a que le pedimos solo a unas pocas personas que participen en la encuesta, **es muy importante que complete la encuesta de inmediato.** Si completó la encuesta en papel, favor de retornarla en el sobre con porte pagado.

Gracias por contribuir a que la atención médica sea mejor para todos.

Atentamente,

mercy care

Sandra Wendt

V.P. of Quality Management

Sandra Wendt





INSTRUCCIONES PARA EL CUESTIONARIO

Conteste cada	pregunta marcando	el cuadro	que aparece a	la izquierda	de su respuesta.

A veces hay que saltarse alguna pregunta del cuestionario. Cuando esto ocurra, verá una flecha con una nota que le indicará cuál es la siguiente pregunta a la que tiene que pasar. Por ejemplo:

La información personal identificable no se hará pública y solo se dará a conocer de conformidad con las leyes y reglamentos federales.

Usted puede optar por responder a esta encuesta o no. Si decide no participar, esto no afectará los beneficios que obtenga. Usted notará un número en la portada de esta encuesta. Este número se utiliza SOLO para hacernos saber si usted ya envió su encuesta para que no tengamos que enviarle recordatorios.

Si quiere informarse más sobre este estudio, llame al 1-800-874-5561.

- 1. Nuestros registros muestran que usted actualmente está inscrito en Mercy Care. ¿Es correcta esta información?
 - \square_1 Sí \rightarrow Si contestó "Sí", pase a la pregunta 3
 - _₂ No
- 2. ¿Cómo se llama su plan de salud? (Escriba en letra imprenta)

LA ATENCIÓN MÉDICA QUE USTED RECIBIÓ EN LOS ÚLTIMOS 6 MESES

Estas preguntas se refieren a su propia atención médica en una clínica, sala de emergencias o consultorio médico. Esto incluye la atención que recibió en persona, por teléfono o por videollamada. No incluya la atención que recibió cuando pasó la noche hospitalizado. No incluya las consultas al dentista.

- 3. En los últimos 6 meses, ¿tuvo usted una enfermedad, lesión o problema de salud para el cual necesitó atención inmediata?
 - □₁ Sí
 - $\square_{\scriptscriptstyle 2}$ No \Rightarrow Si contestó "No", pase a la pregunta 5

4. En los últimos 6 meses, cuando usted <u>necesitó</u> <u>atención inmediata</u>, ¿con qué frecuencia lo atendieron tan pronto como lo necesitaba?

 $\begin{array}{ccc} & & La \ mayor \'ia \\ \text{Nunca} & \text{A veces} & \text{de las veces} & \text{Siempre} \\ & \square_{\scriptscriptstyle 1} & \square_{\scriptscriptstyle 2} & \square_{\scriptscriptstyle 3} & \square_{\scriptscriptstyle 4} \end{array}$

5. En los últimos 6 meses, ¿hizo alguna cita en persona, por teléfono o por videollamada para una consulta o atención de rutina?

₁ Sí

- \square_{2} No \rightarrow Si contestó "No", pase a la pregunta 7
- 6. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita para una <u>consulta o atención</u> <u>de rutina</u> tan pronto como lo necesitaba?

La mayoría Nunca A veces de las veces Siempre \Box_1 \Box_2 \Box_3 \Box_4

7. En los últimos 6 meses, <u>sin</u> contar las veces que fue a una sala de emergencias, ¿cuántas veces recibió atención médica en persona, por teléfono o por videollamada?

 \square_{\circ} Ninguna vez \rightarrow Si contestó "Ninguna vez", pase a la pregunta 10

 $\square_{\scriptscriptstyle 1}$ 1 vez

- _₂ 2
- \square_3 3
- ____4 4
- __₅ 5a9
- ☐ 10 veces o más

8.	Usando un número del 0 al 10, siendo 0 la p médica posible y 10 la mejor atención mé ¿qué número usaría para calificar toda la médica que ha recibido en los últimos 6	edica posible, a atención	tenía que decir?
	0 1 2 3 4 5 6 7 La peor atención La mej	8 9 10 D D	La mayoría Nunca A veces de las veces Siempre \square_1 \square_2 \square_3 \square_4
	médica posible mé	dica posible	15. En los últimos 6 meses, ¿con qué frecuencia su doctor personal pasó suficiente tiempo con usted?
9.	En los últimos 6 meses, ¿con qué frecue fácil conseguir la atención médica, los e		La mayoría
	o el tratamiento que usted necesitaba?		Nunca A veces de las veces Siempre \square_1 \square_2 \square_3 \square_4
	Nunca A veces de las veces 1	Siempre	16. En los últimos 6 meses, ¿lo atendió algún doctor u otro profesional médico además de su doctor personal?
5	SU DOCTOR PERSONAL		\square_1 Sí \square_2 No \rightarrow Si contestó "No", pase a la pregunta 18
10	El doctor personal es aquel a quien uste necesita un chequeo, quiere pedir cons un problema de salud, o si se enferma de ¿Tiene usted un doctor personal?	ejo sobre	17. En los últimos 6 meses, ¿con qué frecuencia parecía su doctor personal estar informado y al día acerca de la atención que usted había recibido de estos doctores u otros profesionales médicos?
	\square_1 Sí \square_2 No \Rightarrow Si contestó "No", pase a la p	oregunta 19	La mayoría Nunca A veces de las veces Siempre \square_1 \square_2 \square_3 \square_4
11	En los últimos 6 meses, ¿cuántas veces una consulta en persona, por teléfono o videollamada con su doctor personal re a su salud?	por	18. Usando un número del 0 al 10, siendo 0 el peor docto personal posible y 10 el mejor doctor personal posible ¿qué número usaría para calificar a su doctor personal
	□₀ Ninguna vez → Si contestó "Ning		0 1 2 3 4 5 6 7 8 9 10
	pase a la pregunt \Box_1 1 vez	ta 18	El peor doctor El mejor doctor personal posible personal posible
	□ ₂ 2 □ ₃ 3		
	□₄ 4 □₅ 5 a 9		LA ATENCIÓN MÉDICA QUE RECIBIÓ DE ESPECIALISTAS
	☐ ₆ 10 veces o más		Cuando responda las siguientes preguntas,
12	En los últimos 6 meses, ¿con qué frecue doctor personal le explicó las cosas de u fácil de entender?		incluya la atención que recibió en persona, por teléfono o por videollamada. <u>No</u> incluya las
	La mayoría		consultas al dentista ni la atención que recibió cuando pasó la noche hospitalizado.
	Nunca A veces de las veces \square_1 \square_2 \square_3	Siempre	19. Los especialistas son doctores que se especializar
13	En los últimos 6 meses, ¿con qué frecue doctor personal le escuchó con atenció		en un área de la medicina. Pueden ser cirujanos, doctores especialistas en el corazón, las alergias, la piol y otras áreas. En los últimos 6 mosos, ibiz
	La mayoría		la piel, y otras áreas. En los últimos 6 meses, ¿hizalguna cita con un especialista?
	Nunca A veces de las veces \square_1 \square_2 \square_3	Siempre □ ₄	\square_1 Sí \square_2 No \rightarrow Si contestó "No", pase a la pregunta 2.

20. En los últimos 6 meses, ¿con qué frecuencia consiguió una cita con un especialista tan pronto como lo necesitaba?	25. En los últimos 6 meses, ¿con qué frecuencia el personal de servicio al cliente de su plan de salud le trató con cortesía y respeto?
La mayoría Nunca A veces de las veces Siempre \square_1 \square_2 \square_3 \square_4	La mayoría Nunca A veces de las veces Siempre \square_1 \square_2 \square_3 \square_4
 21. ¿Con cuántos especialistas ha hablado en los últimos 6 meses? □₀ Ninguno → Si contestó "Ninguno", pase a la pregunta 23 □₁ 1 especialista □₂ 2 □₃ 3 □₄ 4 □₅ 5 especialistas o más 22. Queremos saber cómo califica el especialista con el que habló con más frecuencia en los últimos 6 meses. Usando cualquier número del 0 al 10, siendo 0 es el peor especialista posible y 10 es el 	 26. En los últimos 6 meses, ¿le dio su plan de salud algún formulario para completar? □₁ Sí □₂ No → Si contestó "No", pase a la pregunta 28 27. En los últimos 6 meses, ¿con qué frecuencia fueron fáciles de completar los formularios de su plan de salud? La mayoría Nunca A veces de las veces Siempre □₁ □₂ □₃ □₄ 28. Usando un número del 0 al 10, siendo 0 el peor plan de salud posible y 10 el mejor plan de salud posible,
mejor especialista posible, ¿qué número usaría para evaluar a ese especialista? 0 1 2 3 4 5 6 7 8 9 10 □ □ □ □ □ □ □ □ □ El peor especialista El mejor especialista posible	¿qué número usaría para calificar su plan de salud? 0 1 2 3 4 5 6 7 8 9 10 El peor plan de salud posible CERCA DE USTED
Las siguientes preguntas son acerca de su experiencia con su plan de salud.	29. En general, ¿cómo calificaría toda su salud? Excelente Muy buena Buena
 23. En los últimos 6 meses, ¿recibió información o ayuda por parte del servicio al cliente de su plan de salud? □₁ Sí □₂ No → Si contestó "No", pase a la pregunta 26 24. En los últimos 6 meses, ¿con qué frecuencia el 	 ☐₄ Regular ☐₅ Mala 30. En general, ¿cómo calificaría toda su salud mental o emocional? ☐₁ Excelente
servicio al cliente de su plan de salud le dio la información o ayuda que usted necesitaba? La mayoría Nunca A veces de las veces Siempre \square_1 \square_2 \square_3 \square_4	□₂ Muy buena □₃ Buena □₄ Regular □₅ Mala

	nte, ¿fuma ci Igunos días o	garrillos o usa t nunca?	tabaco todos	37. ¿Cuál es el grado o nivel escolar más alto que ha completado?
□₁ Tod □₂ Algu □₃ No	los los días unos días fumo en abs sé → Si conte	oluto → <i>Si conte</i> <i>en abs</i>	oluto", pase a gunta 35	□₁ 8 años de escuela o menos □₂ 9 a 12 años de escuela, pero sin graduarse □₃ Graduado de la escuela secundaria (high school), Diploma de escuela secundaria, preparatoria o su equivalente (o GED) □₄ Algunos cursos universitarios o un título universitario de un programa de 2 años
aconsejó ι	un doctor u c	, ¿qué tan segu otro profesional ra de fumar ο ι La mayoría de las veces	l médico de su	 ☐₅ Título universitario de 4 años ☐₀ Título universitario de más de 4 años 38. ¿Es usted de origen o ascendencia hispano o latino ☐₁ Sí, hispano o latino ☐₂ No, ni hispano ni latino
		\square_3	\square_4	39. ¿Cuál es su raza? Marque una o más.
recomend sobre med o usar taba o goma de	ló, o habló un dicamentos p aco? Ejemplo e mascar con	, ¿qué tan segu doctor o profe ara ayudarlo a c s de medicamer nicotina, parch o medicamento	sional médico dejar de fumar ntos son: chicle ne, rociador o	□ Blanco □ Negro o afroamericano □ Asiático □ Nativo de Hawái o de otras islas del Pacífico □ Indígena americano o nativo de Alaska □ Otra
		La mayoría		
Nunca	A veces	de las veces	Siempre	GRACIAC
Nunca 	A veces	de las veces	Siempre 	GRACIAS
34. En los último habló su métodos y para ayud Ejemplos o telefónica	mos 6 meses u doctor o pro y estrategias, arlo a dejar o de métodos y de ayuda, co		uido le ofreció co sobre dicamentos, tabaco? on: una línea dual o terapia	Utilice el sobre con el franqueo pagado para devolver la encuesta a: Center for the Study of Services PO Box 3416 Hopkins, MN 55343 Por favor no incluya cualquier otra correspondencia.
34. En los último habló su métodos y para ayud Ejemplos de grupo de grupo de sultina de s	mos 6 meses u doctor o pro y estrategias, arlo a dejar o de métodos y de ayuda, co o un program	□₃ c, ¿qué tan segu ofesional médic aparte de med de fumar o usar y estrategias so onsejería individ na para dejar de La mayoría	uido le ofreció co sobre dicamentos, r tabaco? on: una línea dual o terapia e fumar.	Utilice el sobre con el franqueo pagado para devolver la encuesta a: Center for the Study of Services PO Box 3416 Hopkins, MN 55343
34. En los último habló su métodos y para ayud Ejemplos o telefónica	mos 6 meses u doctor o pro y estrategias, arlo a dejar o de métodos y de ayuda, co	□₃ c, ¿qué tan segu ofesional médic aparte de med de fumar o usar y estrategias so onsejería individ na para dejar de	uido le ofreció co sobre dicamentos, tabaco? on: una línea dual o terapia	Utilice el sobre con el franqueo pagado para devolver la encuesta a: Center for the Study of Services PO Box 3416 Hopkins, MN 55343
34. En los últico habló su métodos y para ayud Ejemplos de grupo de Nunca	mos 6 meses u doctor o pro y estrategias, arlo a dejar o de métodos y de ayuda, co o un program A veces	□₃ a, ¿qué tan segulofesional médic aparte de medic de fumar o usar y estrategias so onsejería individa na para dejar de La mayoría de las veces	uido le ofreció co sobre dicamentos, tabaco? on: una línea dual o terapia e fumar.	Utilice el sobre con el franqueo pagado para devolver la encuesta a: Center for the Study of Services PO Box 3416 Hopkins, MN 55343
34. En los últico habló su métodos y para ayud Ejemplos o telefónica de grupo o Nunca \[\begin{array}{c} \text{Nunca} & \begin{array}{c} \text{1 & 8 & 6 & 6 & 6 & 6 \end{array}} \]	mos 6 meses u doctor o pro y estrategias, arlo a dejar o de métodos y de ayuda, co o un program A veces 2 d tiene? a 24 años a 34 a 44 a 54 a 64	□₃ a, ¿qué tan segulofesional médic aparte de medic de fumar o usar y estrategias so onsejería individa na para dejar de La mayoría de las veces	uido le ofreció co sobre dicamentos, tabaco? on: una línea dual o terapia e fumar.	Utilice el sobre con el franqueo pagado para devolver la encuesta a: Center for the Study of Services PO Box 3416 Hopkins, MN 55343
34. En los últico habló su métodos y para ayud Ejemplos o telefónica de grupo o Nunca \[\begin{array}{c} \text{Nunca} & \begin{array}{c} \text{1 & 8 & 6 & 6 & 6 & 6 \end{array}} \]	mos 6 meses u doctor o pro y estrategias, arlo a dejar o de métodos y de ayuda, co o un program A veces 2 d tiene? a 24 años a 34 a 44 a 54 a 64 a 74 años o más	□₃ c, ¿qué tan segulofesional médicional médicional médicional médicional para dejar de La mayoría de las veces □₃	uido le ofreció co sobre dicamentos, tabaco? on: una línea dual o terapia e fumar.	Utilice el sobre con el franqueo pagado para devolver la encuesta a: Center for the Study of Services PO Box 3416 Hopkins, MN 55343

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