2011 FFS Survey (April)	2011 FFS Survey Revised
1. Our records show that you are now in Medicare, the health insurance program for people 65 years old or older or persons with certain disabilities. Please answer the following questions in this survey as fully as possible regardless of whether you consider yourself in Medicare.	people 65 years old or older or persons
 Some people who have Medicare also hav other insurance to help pay for some of the costs of their health care. Do you have an other insurance that pays at least some of the cost of your health care? Yes If Yes, Go to Question 3 No 	other insurance to help pay for some of the costs of their health care. Do you have any
3. Please mark the box below for each type of health insurance that you have. Medigap, which may be identified of the front of your policy as "Medica Supplemental Insurance" Employer, Union, or Retiree Health Coverage (insurance) Veteran's Benefits, also known as Veteran's Benefits, also known as Tricare Military Retiree Benefits, also known as Tricare Medicaid, also known as State mediassistance, which is for some person with limited income and resources Any Prescription Drug Plan Other (Please write the name of the other health insurance you current have on the line below.) I don't have health insurance other than Medicare.	health insurance that you have. Medigap, which may be identified on the front of your policy as "Medicare Supplemental Insurance" Employer, Union, or Retiree Health Coverage (insurance) VA Veteran's Benefits, also known as VA benefits Military Retiree Benefits, also known as Tricare Medicaid, also known as State medical assistance, which is for some persons with limited income and resources Any Prescription Drug Plan Other (Please write the name of the other health insurance you currently have on the line below.)
YOUR HEALTH CARE IN THE LAST 6 MONTHS 4. In the last 6 months, did you have an	YOUR HEALTH CARE IN THE LAST 6 MONTHS 4. In the last 6 months, did you have an
illness, injury, or condition that <u>needed caright away</u> in a clinic, emergency room, or doctor's office? Yes	<u>re</u> illness, injury, or condition that <u>needed</u>

	No → If No, Go to Question 5	No → If No, Go to Question 6
5.	In the last 6 months, when you needed care right away, how often did you get care as soon as you thought you needed? Never Sometimes Usually Always	5. In the last 6 months, when you needed care right away, how often did you get care as soon as you thought you needed? Never Sometimes Usually Always
6.	In the last 6 months, <u>not</u> counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic? Yes No → If No, Go to Question 8	6. In the last 6 months, <u>not</u> counting the times you needed care right away, did you make any appointments for your health care at a doctor's office or clinic? Yes No → If No, Go to Question 8
7.	In the last 6 months, <u>not</u> counting the times you needed care right away, how often did you get an appointment for your health care at a doctor's office or clinic as soon as you thought you needed? Never Sometimes Usually Always	7. In the last 6 months, not counting the times you needed care right away, how often did you get an appointment for your health care at a doctor's office or clinic as soon as you thought you needed? Never Sometimes Usually Always
8.	In the last 6 months, <u>not</u> counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself? None → If None, Go to Question 10 1 2 3 4 5 to 9 10 or more	 8. In the last 6 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself? None → If None, Go to Question 11 1 2 3 4 5 to 9 10 or more
9.	Wait time includes time spent in the waiting room and exam room. In the last 6 months, how often did you see the person you came to see within 15 minutes of your appointment time? Never Sometimes Usually Always	9. Wait time includes time spent in the waiting room and exam room. In the last 6 months, how often did you see the person you came to see within 15 minutes of your appointment time? Never Sometimes Usually Always

10.	Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 6 months? 0 Worst health care possible 1 2 3 4 5 6 7 8 9 10 Best health care possible	10.	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 Worst health care possible 1 2 3 4 5 6 7 8 9 10 Best health care possible
11.	In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, oxygen equipment, or diabetic supplies and equipment? Yes No → If No, Go to Question 13	11.	In the last 6 months, did you have a health problem for which you needed special medical equipment, such as a cane, a wheelchair, oxygen equipment, or diabetic supplies and equipment? Yes No If No, Go to Question 13
12.	In the last 6 months, how often was it easy to get the medical equipment you needed through Medicare? Never Sometimes Usually Always	12.	In the last 6 months, how often was it easy to get the medical equipment you needed through Medicare? Never Sometimes Usually Always
You	r Personal Doctor	Your	Personal Doctor
13.	A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor? Yes No → If No, Go to Question 23	13.	A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor? Yes No → If No, Go to Question 23
14.	In the last 6 months, how many times did you visit your personal doctor to get care for yourself? None → If None, Go to Question 23 1 2 3 4 5 to 9 10 or more	14.	In the last 6 months, how many times did you visit your personal doctor to get care for yourself? None → If None, Go to Question 23 1 2 3 4 5 to 9 10 or more

15.	In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand? Never Sometimes Usually Always	15.	In the last 6 months, how often did your personal doctor explain things in a way that was easy to understand? Never Sometimes Usually Always
16.	In the last 6 months, how often did your personal doctor listen carefully to you? Never Sometimes Usually Always	16.	In the last 6 months, how often did your personal doctor listen carefully to you? Never Sometimes Usually Always
17.	In the last 6 months, how often did your personal doctor show respect for what you had to say? Never Sometimes Usually Always	17.	In the last 6 months, how often did your personal doctor show respect for what you had to say? Never Sometimes Usually Always
18.	In the last 6 months, how often did your personal doctor spend enough time with you? Never Sometimes Usually Always	18.	In the last 6 months, how often did your personal doctor spend enough time with you? Never Sometimes Usually Always
19.	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? O Worst personal doctor possible 1 2 3 4 5 6 7 8 9 10 Best personal doctor possible	19.	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? O Worst personal doctor possible 1 2 3 4 5 6 7 8 9 10 Best personal doctor possible
20.	In the last 6 months, did you see your personal doctor for a specific illness or for	20.	In the last 6 months, did you see your personal doctor for a specific illness or for any

	any health conditions?	health conditions?
	·	
	Yes No → If No, Go to Question 22	Yes No If No, Go to Question 22
21.	In the last 6 months, how often did your personal doctor give you easy to understand instructions about what to do to take care of this illness or health condition? Never Sometimes Usually Always	21. In the last 6 months, how often did your personal doctor give you easy to understand instructions about what to do to take care of this illness or health condition? Never Sometimes Usually Always
22.	In the last 6 months, how often did your personal doctor ask you to describe how you were going to follow these instructions? Never Sometimes Usually Always	22. In the last 6 months, how often did your personal doctor ask you to describe how you were going to follow these instructions? Never Sometimes Usually Always
This	question was moved from Specialist section to Personal Doctor Session	23. How satisfied are you with the help you received to coordinate your care in the last 6 months? Very dissatisfied
		Somewhat dissatisfied Neither dissatisfied nor satisfied Somewhat satisfied Very satisfied
Getti	ing Health Care From Specialists	Getting Health Care From Specialists
23.	Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you try to make any appointments to see a specialist? Yes No → If No, Go to Question 28	24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 6 months, did you try to make any appointments to see a specialist? Yes No → If No, Go to Question 29
24.	In the last 6 months, how often was it easy to get appointments with specialists? Never Sometimes Usually Always	25. In the last 6 months, how often was it easy to get appointments with specialists? Never Sometimes Usually Always
25.	How many specialists have you seen in the last 6 months? None → If None, Go to Question 28 1 specialist	26. How many specialists have you seen in the last 6 months? None → If None, Go to Question 29 1 specialist

2 3 4 5 or more specialists	2 3 4 5 or more specialists
26. We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist? 0 Worst specialist possible 1 2 3 4 5 6 7 8 9 10 Best specialist possible	27. We want to know your rating of the specialist you saw most often in the last 6 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist? 0 Worst specialist possible 1 2 3 4 5 6 7 8 9 10 Best specialist possible
27. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from specialists? Never Sometimes Usually Always I do not have a personal doctor I did not visit my personal doctor in the last 6 months	28. In the last 6 months, how often did your personal doctor seem informed and up-to-date about the care you got from specialists? Never Sometimes Usually Always I do not have a personal doctor I did not visit my personal doctor in the last 6 months
xx. How satisfied are you with the help you received to coordinate your care in the last 6 months? Very dissatisfied Somewhat dissatisfied Neither dissatisfied nor satisfied Somewhat satisfied Very satisfied	This question was moved to the primary doctor section of the survey
Medicare Experience	Medicare Experience
28. In the last 6 months, did you try to get any kind of care, tests, or treatment through your health plan? Yes	29. In the last 6 months, did you try to get any kind of care, tests, or treatment through your health plan? Yes
No → If No, Go to Question 30	No \rightarrow If No, Go to Question 31

29.	In the last 6 months, how often was it easy to get the care, tests, or treatment you thought you needed through Medicare? Never Sometimes Usually Always	30.	In the last 6 months, how often was it easy to get the care, tests, or treatment you thought you needed through Medicare? Never Sometimes Usually Always
30.	In the last 6 months, did you try to get information or help from Medicare's customer service? Yes No → If No, Go to Question 34	31.	In the last 6 months, did you try to get information or help from Medicare's customer service? Yes No → If No, Go to Question 35
31.	In the last 6 months, how often did Medicare's customer service give you the information or help you needed? Never Sometimes Usually Always	32.	In the last 6 months, how often did Medicare's customer service give you the information or help you needed? Never Sometimes Usually Always
32.	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	33.	In the last 6 months, how often did Medicare's customer service staff treat you with courtesy and respect? Never Sometimes Usually Always
33.	In the last 6 months, did your Medicare give you any forms to fill out? Yes No → If No, Go to Question 35	34.	In the last 6 months, did Medicare give you any forms to fill out? Yes No → If No, Go to Question 36
34.	In the last 6 months, how often were the forms from your health plan easy to fill out? Never Sometimes Usually Always	35.	In the last 6 months, how often were the forms from Medicare easy to fill out? Never Sometimes Usually Always
35.	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 Medicare? 0 Worst health plan possible 1 2 3 4 5	36.	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 Medicare? 0 Worst health plan possible 1 2 3 4 5

	6	6
	7	7
	8	8
	9	9
	10 Best health plan possible	10 Best health plan possible
36.	Each fall your health plan sends you a notice that describes any changes in covered services. Since September 2010, has your health plan sent you this kind of notice? Yes No Don't know	This question was dropped in revised survey
37.	When you sign up for a health plan, you are given a document that describes your specific benefits under the plan. This document also describes whether there are any limits on how much or what type of care you can have in a year, what care or treatment is included in your health plan, and your rights as a plan member. Has your health plan ever given you a document with this kind of information? Yes No Don't know	This question was dropped in revised survey
38.	An insurance agent or broker sells insurance for your health, your home, or your car. Did an insurance agent or broker ever call you without your asking them to, to tell you about insurance for health care or prescription medicines? Yes No	This question was dropped in revised survey
39.	Did an insurance agent or broker ever <u>visit your home</u> you without your asking them to, to tell you about insurance for health care or prescription medicines? Yes No	This question was dropped in revised survey
40.	Did an insurance agent or broker ever switch you to a different health care plan without your permission? Yes No	This question was dropped in revised survey

You	r Medicare Rights	Your Medicare Rights
41.	Was there ever a time when you believed you needed care or services that your health plan decided not to give you? Yes No → If No, Go to Question 44	37. Was there ever a time when you believed you needed care or services that your health plan decided not to give you? Yes No → If No, Go to Question 43
42.	Have you ever asked anyone at your health plan to reconsider a decision not to provide or pay for health care or services? Yes No → If No, Go to Question 47 Don't know → If Don't know, Go to Question 47	38. Have you ever asked anyone at your health plan to reconsider a decision not to provide or pay for health care or services? Yes No → If No, Go to Question 43 Don't know → If Don't know, Go to Question 43
43.	When you spoke to your health plan about the decision not to provide care or services, did they	39. When you spoke to your health plan about the decision not to provide care or services, did they
Plea	se mark one or more. Tell you that you can file an appeal Offer to send you forms that you need to file an appeal Suggest how to resolve your complaint Listen to your complaint but did not help resolve it Discourage you from taking action Do none of these things	Please mark one or more. Tell you that you can file an appeal Offer to send you forms that you need to file an appeal Suggest how to resolve your complaint Listen to your complaint but did not help resolve it Discourage you from taking action Do none of these things
44.	In the last 6 months, have you called or written your health plan with a complaint or problem? Yes No → If No, Go to Question	 40. In the last 6 months, have you called or written your health plan with a complaint or problem? Yes No → If No, Go to Question 43
45.	How long did it take for your health plan to resolve your complaint? Same day 1 week 2 weeks 3 weeks 4 or more weeks I am still waiting for it to be settled	41. How long did it take for your health plan to settle your complaint? Same day 1 week 2 weeks 3 weeks 4 or more weeks I am still waiting for it to be settled
46.	Was your complaint or problem settled to your satisfaction? Yes No I am still waiting for it to be settled	42. Was your complaint or problem settled to your satisfaction? Yes No I am still waiting for it to be settled

Abo	<mark>ut You</mark>	Abou	it You
47.	In general, how would you rate your overall health? Excellent Very good Good Fair Poor	43.	In general, how would you rate your overall health? Excellent Very good Good Fair Poor
48.	In general, how would you rate your overall mental health? Excellent Very good Good Fair Poor	44.	In general, how would you rate your overall <u>mental</u> health? Excellent Very good Good Fair Poor
49.	In the past 12 months, have you seen a doctor or other health provider 3 or more times for the same condition or problem? Yes No → If No, Go to Question 51	45.	In the past 12 months, have you seen a doctor or other health provider 3 or more times for the same condition or problem? Yes No → If No, Go to Question 47
50.	Is this a condition or problem that has lasted for at least 3 months? Yes No	46.	Is this a condition or problem that has lasted for at least 3 months? Yes No
51.	Do you now need or take medicine prescribed by a doctor? Yes No → If No, Go to Question 53	47.	Do you now need or take medicine prescribed by a doctor? Yes No → If No, Go to Question 49
52.	Is this to treat a condition that has lasted for at least 3 months? Yes No	48.	Is this to treat a condition that has lasted for at least 3 months? Yes No
53.	In the last 6 months, how often was it easy to get the medicines your doctor prescribed? Never Sometimes Usually Always My doctor did not prescribe any medicines for me in the last 6 months.	49.	In the last 6 months, how often was it easy to get the medicines your doctor prescribed? Never Sometimes Usually Always My doctor did not prescribe any medicines for me in the last 6 months.

54	Do you have insurance that pays part or all of the cost of your prescription medicines? Yes No Don't know	50. Do you have insurance that pays part or all of the cost of your prescription medicines? Yes No Don't know
55.	In the last 6 months, did you ever delay or not fill a prescription because you felt that you could not afford it? Yes No My doctor did not prescribe any medicines for me in the last 6 months	51. In the last 6 months, did you ever delay or not fill a prescription because you felt that you could not afford it? Yes No My doctor did not prescribe any medicines for me in the last 6 months
56.	How confident are you that you can identify when it is necessary for you to get medical care? Very confident Confident Somewhat confident Not at all confident	This question was dropped in revised survey
57.	Because of any impairment or health problem, do you need the help of other persons with your personal care needs, such as eating, dressing, or getting around the house? Yes No	This question was dropped in revised survey
58.	Because of any impairment or health problem, do you need help with your routine needs, such as everyday household chores, doing necessary business, shopping, or getting around for other purposes? Yes	This question was dropped in revised survey
59.	Do you have a physical or medical condition that seriously interferes with your independence, participation in the community, or quality of life? Yes No	This question was dropped in revised survey

60.	Has a doctor ever told you that you had any	52.	Has a doctor ever told you that you had
	of the following conditions?		any of the following conditions?
	No		No
a.	A heart attack?	a.	A heart attack?
b.	Angina or coronary heart disease?	b.	Angina or coronary heart disease?
c.	A stroke?	c.	A stroke?
d.	Cancer, other than skin cancer?	d.	Cancer, <u>other than skin cancer</u> ?
e.	Emphysema, asthma or	e.	Emphysema, asthma or
	COPD (chronic obstructive pulmonary		COPD (chronic obstructive pulmonary
f.	disease)? Any kind of diabetes or high blood sugar?	f.	disease)? Any kind of diabetes or high blood sugar?
1.	Any kina of diabetes of high blood sugar:	1.	Any kind of diabetes of high blood sugar:
61.	Did you get a flu shot since September 1,	53.	Have you had a flu shot since September
	2010?		1, 2010?
	Yes		Yes
	No Don't know		No Don't know
	Doll t kilow		Doli t Kilow
62.	Have you ever had a pneumonia shot? This	54.	Have you ever had a pneumonia shot?
	shot is usually given only once or twice in a		This shot is usually given only once or
	person's lifetime and is different from the		twice in a person's lifetime and is
	flu shot. It is also called the pneumococcal		different from the flu shot. It is also
	vaccine.		called the pneumococcal vaccine.
	Yes		Yes No
	No		Don't know
	Don't know		Don't know
63.	Do you now smoke cigarettes or use	55.	Do you now smoke cigarettes or use
	tobacco every day, some days, or not at all?		tobacco every day, some days, or not at
	Every day		all?
	Some days		Every day
	Not at all \rightarrow If No, Go to Question 68 Don't know \rightarrow If Don't know, Go to		Some days Not at all → If No, Go to Question 57
	Question 68		Don't know → If Don't know, Go to
	Question 66		Question 57
64.	In the last 6 months, how often were you	56.	In the last 6 months, how often were you
	advised to quit smoking or using tobacco by		advised to quit smoking or using tobacco
	a doctor or other health provider?		by a doctor or other health provider?
	Never Sometimes		Never Sometimes
	Usually		Usually
	Always		Always
	I had no visits in the last 6 months.		I had no visits in the last 6 months.
65.	What is your age?	57.	What is your age?
	18 to 24		18 to 24
	25 to 34		25 to 34

35 to 44		35 to 44
45 to 54		45 to 54
55 to 64		55 to 64
65 to 69		65 to 69
70 to 74		70 to 74
75 to 79		75 to 79
80 to 84		80 to 84
85 or older		85 or older
Are you male or female?	58.	Are you male or female?
Male		Male
Female		Female
What is the highest grade or level of school	59.	What is the highest grade or level of
9 9		school that you have completed?
•		8th grade or less
8		Some high school, but did not graduate
•		High school graduate or GED
•		Some college or 2-year degree
		4-year college graduate
		More than 4-year college degree
more than I year conege degree		more than I year conege degree
Are you of Hispanic or Latino origin or	60.	Are you of Hispanic or Latino origin or
descent?		descent?
Yes, Hispanic or Latino		Yes, Hispanic or Latino
No, not Hispanic or Latino		No, not Hispanic or Latino
What is your race?	61.	What is your race?
se mark one or more.	Pleas	e mark one or more.
White		White
Black or African-American		Black or African-American
Asian		Asian
Native Hawaiian or other Pacific Islander		Native Hawaiian or other Pacific Islander
American Indian or Alaska Native		American Indian or Alaska Native
Did someone help you complete this	62.	Did someone help you complete this
survey?		survey?
Yes		Yes
No \rightarrow If No, Go to Question 72		No \rightarrow If No, Go to Question 64
How did that person help you? Please mark	63.	How did that person help you? Please
one or more.		mark one or more.
Read the questions to me		Read the questions to me
	1	Wrote down the answers I gave
Wrote down the answers I gave		wrote down the answers I gave
<u>-</u>		Answered the questions for me
Wrote down the answers I gave		<u> </u>
Wrote down the answers I gave Answered the questions for me		Answered the questions for me
	45 to 54 55 to 64 65 to 69 70 to 74 75 to 79 80 to 84 85 or older Are you male or female? Male Female What is the highest grade or level of school that you have completed? 8th grade or less Some high school, but did not graduate High school graduate or GED Some college or 2-year degree 4-year college graduate More than 4-year college degree Are you of Hispanic or Latino origin or descent? Yes, Hispanic or Latino No, not Hispanic or Latino What is your race? Se mark one or more. White Black or African-American Asian Native Hawaiian or other Pacific Islander American Indian or Alaska Native Did someone help you complete this survey? Yes No → If No, Go to Question 72 How did that person help you? Please mark	45 to 54 55 to 64 65 to 69 70 to 74 75 to 79 80 to 84 85 or older Are you male or female? Male Female What is the highest grade or level of school that you have completed? 8th grade or less Some high school, but did not graduate High school graduate or GED Some college or 2-year degree 4-year college graduate More than 4-year college degree Are you of Hispanic or Latino origin or descent? Yes, Hispanic or Latino No, not Hispanic or Latino What is your race? se mark one or more. White Black or African-American Asian Native Hawaiian or other Pacific Islander American Indian or Alaska Native Did someone help you complete this survey? Yes No → If No, Go to Question 72 How did that person help you? Please mark 63.

72.	Do you live alone?	64.	Do you live alone?
	Yes, I live alone		Yes, I live alone
	No, I live with others		No, I live with others
70	TI M. P Decision is to be a large	6	The Mark the second of the sec
73.	The Medicare Program is trying to learn	65.	υ υ υ
	more about the health care or services		about the health care or services provided to
	provided to people with Medicare. May we		people with Medicare. May we contact you
	contact you again about the health care		again about the health care services that you
	services that you received?		received?
	Yes		Yes
	No		No