

# EVALUATION OF COVERAGE TO CARE

## Appendix D

Case Study: Explanation of Consent, Short Survey, and Focus Group  
Facilitation Guide

(CMS-10632: 0938-New)

*NOTE: This interview protocol is annotated to show (1) headers for each module and the objective for that section; and (2) question numbers and instructions to the interviewer.*

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## **EXPLANATION AND INFORMED CONSENT FOR FOCUS GROUP**

The Centers for Medicare & Medicaid Services (CMS) Office of Minority Health (OMH) within the Department of Health and Human Services (DHHS) is funding a study to evaluate From Coverage to Care, or C2C. C2C was developed to help individuals understand health insurance, find a doctor, and better understand why seeing a doctor is important. The RAND Corporation is conducting this study. The objectives of this focus group are to:

1. Learn who has used C2C materials and how; and
2. Learn if C2C helped people understand health insurance and seek health care.

### **Purpose of the study**

This study will provide CMS OMH with a picture of how C2C is currently being spread and used within communities and the impact it is having, as well as identifying opportunities for improvement or expansion of C2C.

### **Procedures**

As part of this study, we are speaking with consumers about their experiences seeking health care and their interaction with C2C, if any. CMS is also interested in learning more about how C2C materials are being used in communities like yours where English is not the primary language. As a result, we are speaking with you to gain a better understanding of how C2C is being used in your community and the impact it is having. This focus group will take about one hour.

### **Potential risks and discomforts**

The risk to participation in this study is minimal. In any written reports from this project, your responses will be combined with others and reported together. If quotations are used, they will not be connected to an individual or organization. Identifiable information that you provide will not be shared with anyone outside of the RAND project staff without your permission, except as required by law. At the end of the study, we will destroy any information that identifies you as a participant.

### **Potential benefits**

Although there are no immediate benefits to you for joining this focus group, your participation in this study will provide important information that will help CMS OMH improve C2C moving forward.

### **Confidentiality**

Your participation is voluntary and you do not have to answer each of the questions. We will keep everything you say confidential. We will take notes, but will not link your name with any comments. We also ask that you respect the privacy of other participants by not sharing with anyone outside of this group who was here or what was said. While we ask everyone in the group to do this, we can't guarantee this so please don't say things in the group that you want to keep private. If there is anything that you would like to share with us that you do not feel comfortable talking about in the group, we will be here afterwards and can speak with you in private.

## **Compensation**

You will receive a \$75 (size to be determined according to site location) gift card after the session ends to thank you for your time.

## **Right to withdraw and ask questions**

Your participation in this research is completely voluntary. You may choose not to participate at all. If you decide to join this focus group, you can stop and leave at any time.

## **Participant rights**

If you have any questions or comments about the study please contact Tom Concannon (tconcann@rand.org, 703-413-1100 x 8615). If you have any questions about your rights as a research participant, you may the RAND Human Subjects Protection Committee by phone at (310) 393-0411 or by email: [hspcadmin@rand.org](mailto:hspcadmin@rand.org).

Do you agree to participate in this study?

Yes → proceed to survey

No → Thank you for your consideration

## FOCUS GROUP SURVEY

1. **How old are you?**
  - a. 18-29
  - b. 30-49
  - c. 50-64
  - d. 64+
  - e. Prefer not to say
  
2. **What is your race or ethnicity? Select all that apply**
  - a. White
  - b. Black or African American
  - c. Hispanic, Latino or Spanish
  - d. Asian or Pacific Islander
  - e. Native American
  - f. Other
  - g. Prefer not to say
  
3. **What is the primary language you speak at home? \_\_\_\_\_**
  
4. **Is there a place that you usually go to when you are sick or need advice about your health?**
  - a. Yes
  - b. No
  
5. **Do you have health insurance?**
  - a. Yes
  - b. No
  - c. I don't know
  
6. **If yes Question 5, which is your primary insurance?**
  - a. Private insurance plan e.g. Kaiser, Blue Cross Blue Shield, Oscar, etc.
  - b. Medicare
  - c. Medicaid e.g. MediCal
  - d. TRICARE/VA
  - e. Other \_\_\_\_\_
  
7. **When was your last doctor's exam?**
  - a. In the last six months
  - b. 6 months to one year ago
  - c. 1-2 years ago
  - d. It has been over two years since I visited a doctor
  
8. **Do you have a primary care doctor you can call for check-ups or when you're sick?**
  - a. Yes
  - b. No

## LEARN ABOUT C2C

**OBJECTIVE OF MODULE A. To obtain information about how consumers learned of C2C and to help answer the research questions:**

- **How did organizations use the materials with consumers and what are best practices?**
- **Which C2C materials/messages did consumers know about/receive?**

**Facilitator:** I would like to start our discussion by talking about how you first learned about C2C.

A1. Where did you hear about C2C or where did you first see it?

*Probe:*

- *Did you pick it up on your own (where) or did someone give it to you? Who?*
- *What products did you get/see/find?*

## CONSUMER PERCEPTIONS OF C2C MATERIALS and IMPACT

**OBJECTIVE OF MODULE B. To obtain information about consumer perceptions of C2C materials and to help answer the research questions:**

- **Which of the materials/messages did consumers find helpful and why?**
- **Did C2C contribute to a change in consumer knowledge and understanding of health insurance coverage and how it works?**
- **Did C2C contribute to a change in consumer knowledge or understanding of how to access care as a result of C2C messages and materials?**
- **To what extent is C2C associated with changes in care utilization?**

**Facilitator:** I would now like to ask you a few questions about the C2C materials. [Pass around Roadmap or other example products]. I am going to pass these around to help refresh your memory of the materials, but I would like you to talk about how you have been using the C2C materials or information since you received it or first learned about C2C.

B1. Since you first got/saw the C2C materials, how have you used them? For example, do you look up definitions of insurance terms or remind yourself of what to bring to a doctor appointment?

B2. Did you find the C2C materials helpful? Why or why not?

*Probe:*

- *Which materials or part of the materials were most helpful?*

B3. Was there a specific part of C2C, like a step in the roadmap or a table or chart that you found particularly helpful? How?

*Probe (if not covered, or group need prompts/clarification):*

- *Valuing health/prevention*
- *Understanding health insurance*
- *How to find a provider who speaks your language*
- *Where to go for care*
- *How to make an appointment and prepare for your visit*
- *What to ask when you are there*
- *What to do if you don't like your provider*
- *Glossary*

B4. Did you learn something about health insurance that you didn't know or understand before? Or did it help to clarify what you did know?

B5. Did you learn something about getting health care that you didn't know or understand before? Or did it help to clarify what you did know?

B6. In addition to talking about what you learned, we are also interested in knowing if any of you changed where or when you go for care. Did any of you make an appointment to see your doctor or perhaps had a health screen or flu shot because of something you read or heard in this booklet?

B7. What about going to the emergency department or urgent care clinic? Did this information help you to figure out where to go for care and when?

## AREAS FOR IMPROVEMENT

**OBJECTIVE OF MODULE F. To assess opportunities for strengthening C2C moving forward.**

**Facilitator:** I would like to conclude our time together by asking you about ways you think the C2C program could be strengthened or improved.

F1. In thinking about the C2C resources you have seen or used, do you have recommendations to improve them or how CMS can get this information out to other people like you?

*Probe:*

- *How could CMS make C2C better?*
- *Is there information you would like to have that is not in C2C?*
- *Would you rather get this information in a different format? What format?*

**Facilitator:** Thank you again for taking the time to speak with us today. Does anyone have any final thoughts they would like to share? If not, remember that we will be here for a while and would be happy to talk to any of you in private. Please remember to turn in your survey and get your gift card. Thank you very much for your time today, we really appreciate it.

