

# RAND

*Summary of RAND Medicaid-Targeted Focus  
Groups for Consumer Assessment of Health  
Plans Study (CAHPS)*

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*DRU-1431-AHCPR*

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## **Summary of RAND Medicaid-Targeted Focus Groups for Consumer Assessment of Health Plans Study (CAHPS)**

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In October 1995, the Agency for Health Care Policy and Research (AHCPR) announced a major new initiative to develop a reliable and valid consumer assessment of health plans survey. For this project, The Consumer Assessment of Health Plans Study (CAHPS), AHCPR awarded three five-year cooperative agreements to researchers at RAND, the Research Triangle Institute, and Harvard University. These three institutions are working together during the first phase of the project to develop consumer surveys, supporting material for survey administrators, and effective ways of disseminating survey results to consumers. During the second phase, each of the institutions will work with a variety of health care plans and delivery settings to test, evaluate, and refine the surveys, users manuals, and consumer reports developed during the first phase of the study.

The basic CAHPS goal for questionnaire development is to produce and test a practical, flexible, standardized, integrated system of questionnaire components (a "tool kit" of tested questions) that includes thorough and user-friendly guidance on how to use them for different types of surveys with different target populations. Specifically, the questionnaire system must be usable with privately insured and Medicaid enrollees, with all care delivery systems from gatekeeper HMOs through fee-for-service, and will all ages.

This document is a summary of three focus groups conducted with Medicaid eligibles. Information obtained from these focus groups and from previous work was used to draft consumer satisfaction items targeted at AFDC mothers and their children. Cognitive testing of the Medicaid-targeted items occurred in June of 1996, and the items were then revised in preparation for a field test to be conducted in July, 1996. We welcome any comments about these focus group summaries.

Please convey your comments to Ron Hays by FAX (310-393-4818), Email (Ronald\_Hays@rand.org), or voice (310-393-0411, extension 7581).

## **FOCUS GROUP #1 - MEDI-CAL MOTHERS RECEIVING AFDC BENEFITS**

### **PARTICIPANT RECRUITMENT**

Participants were drawn from a file provided by XXXXXX Health Plan (The 1 XXXXX Health Foundation, Inc., is the umbrella organization which conducts business as XXXXXX Health Plan). The XXXXXX Health Plan (XXX) file was limited to adults and children covered by MediCal. A sample of 172 names was drawn from the XXX file. The sample was limited to: 1) children under age 13 (targeted individual was the child's mother) 2) women age 18-64

XXX members with Hispanic surnames, and adult participants with obviously male names were dropped from the sample. The sample was contacted by telephone and screened for ability to communicate in English, presence of a child under age 13 in the household, and current participation in the Aid to Families with Dependent Children program (AFDC).

Once 13 eligible women agreed to participate in a group to be conducted on January 9th from 10:00 a.m. to noon, calls to the sample stopped.

### **ABOUT THE PARTICIPANTS**

Eleven women took part in the group. Of the 11, 1 was currently married and 10 were not; 7 were African American or Black, 2 White, 1 Asian or Pacific Islander, and 1 other; 7 were high school graduates, 3 had completed some high school, and 1 had completed 8th grade or less. The number of children participants had ranged from 1-6 with a mean of 2.45. Only 1 participant was working and she was working part-time. Length of enrollment in XXXXXX Health Plan varied from 4 months to 10 years. At least one participant (and perhaps two) had previously disenrolled from this plan and had been persuaded to re-enroll by sales staff.

### **SUMMARY OF GROUP**

Almost all of the participants expressed strong dissatisfaction with their current health plan. Most if not all, shared one or more story to illustrate their unhappiness. For example, participant S tried to seek care from the emergency room. She "went back to King Hospital and that's when they denied me (she had missed a scheduled appointment for a gynecological condition). Her mother took her to at least 2 emergency rooms later that same day. Each ER had to contact XXX who denied coverage for the ER visit. S reported that XXX denied coverage because she had missed her appointment that day: "I (finally) seen a doctor but it was way after 12." She later received a bill from one of the physicians who denied her treatment. "It took me all day and all night to get care." She has been trying for a year to disenroll from the plan and return to MediCal.

Participant N had a usual provider who was familiar with her medical history and conditions: diabetes and hypertension. She found herself under the care of a new physician:

"I'm telling him what I need . . . they supposed to take blood from me every so often to run tests and see what my sugar level is. I would have to tell him, when you gonna test my sugar? . . . And one time two years ago a roach had gone down in my ear and I told him my ear was hurting. A doctor at (location) had got it out, but my gland was swollen. He gave me some antibiotics, OK that did not

do it. I was telling him the medicine did not work . . . He gonna tell me "Ms. X, that was all in your mind."

(As a result of her interactions with this physician, participant G transferred to a different provider within the plan. She reports that her new provider reviewed her chart and told her she should report this previous physician to the plan because his treatment was not appropriate.) "This doctor don't know nothing about me . . . I had an appointment to see my doctor, but I don't never see him so I had to see this doctor."

Participant G had a tubal ligation last August. In her words "they called [for approval] before the surgery was scheduled, they called [for approval the day before I went in the hospital, they called [for approval] before they wheeled me in for surgery. . . and then had the nerve to send me a bill [and say the procedure was not covered]." In summing up the plan and the care she receives, she said, you get no response, you get no respect, you get no service." Participant L is very dissatisfied with the care she has received.

All participants receive care at one of four clinics. All are able to name their clinic or provider (it appears accurately), and most if not all have a usual or regular doctor. All report that they see a doctor, but it is not clear if participants know and would distinguish a physician's assistant from a physician. At least one participant (G) reported receiving some care from a nurse-practitioner. Participant Z did report that her pediatrician has recently left or quit and therefore her children must see an "adult doctor." As a result, she says she will not take her child back for care; she will go outside Xxxxxx Health Plan for care for her child. It should be noted that she has also encountered problems with immunizations that may contribute to this decision.

Almost all participants say their provider is located near their home, and they like that. With only one exception (participant J), all report that their provider is located within "10 minutes" of their home. Participant J was promised a provider at a nearby location, but after enrolling in the plan she found that she was assigned to a clinic far from her home. Transportation is still an issue for at least 4 participants (T, S, K, and J). When she enrolled in the plan participant S had been told that transportation would be no problem.

"[I was told] that they would pick you up an hour before my appointment ... I waited and I waited. I get up, I eat my breakfast ... My appointment is at 9 o'clock and they pick me up at 11-something. I'm like what's going on? And then what it was. The bus to the health plan that I go to didn't pick me up. This bus come way from the plan in the east of Xxxxx, but since I had an appointment he was [gonna help me out]. . . They come knocking on your door, and they make it (the plan) sound so good."

Participant T was also attracted to the plan because it offered transportation. Unfortunately, transportation is only available from her plan on Tuesdays while her physician only works Thursdays.

All participants were aware that they are part of Xxxxxx Health Plan. This may be because of the enrollment calls we made, but it also seems that many (if not all) of the participants have contacted Xxxxxx Health Plan regarding problems with coverage, services, or bills. Despite this

knowledge, the question "Do you know the name of your health plan?" drew a blank. Some participants still volunteered the name of the group they go to for care. Others knew we were asking for something other than provider name, but they did not identify Xxxxxx Health Plan as their health plan.

Despite the strongly voiced complaints about the plan, all participants like the physician they see. "The doctors are fine. It's just the plan and some of the rules and regulations you have to go through to get the care is what really ticks you off," said participant T. Participant M: "the doctor's no problem." "The doctor is good with my baby once I get in there" (Participant S). All rated the facilities positively, and a few like the nurses. One participant (N) likes "that you get your medications at Sav-on."

It is important to note that at least 3 respondents report that the quality of the care provided from under the plan is good enough for them, but not for their children. Care for their children seems to be held to a higher standard than their own care. Participant A, for example, reports that she will go outside the plan for care for her kids. Participant G: "I had signed up once before and I was so disgusted I quit. And then some lady came around saying it's changed and we made improvements ... I did not put my son on it. I will not take that chance with him." Participant L has had trouble transferring her infant from MediCal to Xxxxxx Health Plan, but has decided to leave her child on MediCal because she is "very dissatisfied" with the health care.

The number one dislike among participants seems to be "the wait. You can wait 3 hours to see the doctor," according to participant S.

"It's the period of time you have to wait, and how spaced out they are ... I don't like it when my baby is sick and I have to wait an hour for a doctor to see my baby. I don't like that wait."

"If your appointment is at 1 you won't see the doctor 'til 3" said participant M. Participant N and others have had similar experiences. Of those who report long waits, about half report that staff tell them they will have to wait and why (usually because the physician is in surgery or not available). Not all participants shared this experience of long waits. Participants, L and J do not have to wait a long time.

Participant S also dislikes the amount of time it takes to get an appointment. She says:

"You know what, I put up a big fuss once when I took my baby to the clinic ... you see my baby got to be seen so I got to kiss ass a little bit. My daughter, shots is due next month (February). My last appointment was last month (December). And they tell me call next month to get an appointment for your baby. I call this month -- at the beginning of the month -- and they tell me they can't see my baby until February. February? Why? I tell them my baby is high risk and they tell me there's nothing they can do... That ticks me off."

In contrast, participant T can get same day appointments "if I call today they will squeeze me in." "I can't get that" said participant M.

Participant G doesn't like "the way it's conducted, the way it's handled. The procedures that you have to go through". Participant S doesn't like "the wait ... to see the doctor. You can wait 3 hours to see the doctor." Participant M doesn't like "that they say they cover all prescriptions at Sav-on, but they don't cover many at all." She did not fill a prescription for an antibiotic because it was not covered by the plan. Participant S doesn't like that prescriptions she has received from ER physicians must be filled at the pharmacy located within her XXX provider. "I have to go all the way to (location) and either they stamp it or they sign it, and then I can get it filled," she said.

"There's things that you can do with medical care, when you need it you need it and it disappoints you" participant M.

"Sometimes they have you disenrolled, and you have no knowledge of not being enrolled. When you signed up you were eligible, and you go in to see the doctor and they tell you you're not eligible this month. But why? How did this happen? And how long until I can see a doctor?" (Participant G) Only one other participant -- N -- had a similar experience.

At least 3 participants (K, S, and J) report conflicting medical diagnoses from plan doctors. Participant K was asked by one doctor why she wasn't getting seasonal treatment for her asthma. Her usual provider had never mentioned the condition to her. "I knew something wrong with my baby for her to have a fever." One MD said nothing was wrong, while another said she had an ear infection," said participant S. When participant J joined the plan:

"They checked me out, and told me I had a heart murmur and everything. When I went to my baby's doctor -- we were still on MediCal. And they checked me out. They checked my ears and my heart and said there is nothing wrong with you."

In terms of the services available through the plan. No one reports that prenatal care is not available. Some have received care from the plan, and satisfaction with this care varies.

At least seven of the participants (T, J, L, A, M, Z, S) have infants or young toddlers. When asked about "well-baby care" no one seemed to know what this meant. When asked specifically about immunizations (or shots" as the mothers call them), participant K takes her babies to a different place for shots, participant Z had so much trouble getting shots for her children that she now takes them to the county clinic, and participant T has one child that can't receive shots from her provider because of a problem with his transfer from MediCal to XXXXXX Health Plan. She has one or two other children who receive shots from her usual provider without trouble. Participant A's children have to repeat all of their shots, because her medical records and her children's medical records were lost in a transfer between her provider and XXXXXX Health Plan. This is an extra burden because shots are not provided at her clinic.

Family planning and birth control services appear to be available.

Respondents voice no complaints about the choice of doctors and health professionals available during the last 6 months. Participant K prefers to be treated by a female physician and has always had one available to her through the plan.

Respondents no problems with access to medical specialists. (Except for participant G, who would like to be able to get her periodic eye exam without a referral from her medical doctor.) But this may be because they don't know what we mean by specialists. (One participant brought up dental care.) I should have probed on this topic, and it would be good to add prompts for specific types of specialists to the protocol.

Some participants report problems getting a new baby coverage under their current plan -- although it is not clear if the problem lies with the state or with the plan. "I have not gotten a card and she's 9 months old" said participant L. Her baby is on MediCal and she's staying on MediCal. There seems to be some confusion about what must be done to get a newborn transferred from MediCal to the Xxxxxx Plan. Participant T:

"Xxxxxx said that it would take 2 months for them to have everything in line. The only problem I have is MediCal. MediCal said oh we sent one out in August. I still don't have it."

Her baby is 7 months old and she still does not have her child's MediCal card and is unable to transfer his care to Xxxxxx. At least 2 other participants have been told it would take 2 months and it took longer.

Only one person reported being treated differently by a doctor because she was on MediCal. G, whose child is on MediCal but not enrolled in her plan, had an experience with a doctor who told her that a medication was probably too expensive for her. Some participants -- those who expressed strong dissatisfaction -- express the opinion that MediCal is better than their current plan. But participant M did state early in the group that she "joined because it's hard to find a doctor who will take MediCal."

In terms of prescriptions, participants find fault with the coverage or pharmacy staff. Not with their doctor. Participant M is allergic to penicillin and says that the plan "really only covers things everyone would take." Her doctor recently prescribed a penicillin alternative that is not covered by the plan. She can't afford it and is going without it. But participant T is also allergic to penicillin and her doctor prescribes a medication that is covered. So it appears that some providers don't take the coverage formulary into account when writing prescriptions. In terms of cost, prescriptions that are covered by the plan have a cost of \$0 to the patient. Prescriptions that aren't covered are the problem:

"You know your baby's real sick, and a prescription costs \$60 and you don't have it. What you supposed to do then?" said participant N.

"You don't get it" said participant M.



## **FOCUS GROUP #2 - MEDI-CAL MOTHERS RECEIVING AFDC BENEFITS (SPANISH LANGUAGE)**

Participants: 5 women

### **Participant Profile:**

Sunny Mid forties, Mexican immigrant. English language ability: understands English well, but cannot speak it well.

Hallie Mid thirties, Mexican immigrant. English language ability: understands English well, spoken English average.

Whiskey Mid thirties, Central American immigrant. English language ability: understands English well, spoken English average.

Lenexa Late twenties, Mexican immigrant. English language ability: understands English well, spoken English average. Most assertive participant.

Barbara Late thirties, Mexican immigrant. English language ability: understands and speaks English well. Has been in the US. for many years. Most acculturated of the group.

### **General Notes-**

Although only 5 women showed up for the focus group, the discussion went extremely well. All five of the women that showed up participated actively in the discussion and did not seem to notice or care that there was a Xz representative sitting in on the discussion. While all of the women in the group except for Sunny speak English well enough to participate in a discussion in English, it was still better to conduct the focus group in Spanish, as I don't think they would have been as spontaneous or at ease if they had to communicate solely in English instead of in Spanish.

### **Discussion:**

#### ***Last time received medical care-***

All of the participants had received medical care within the last two weeks except for Barbara. Sunny goes to her medical provider regularly (almost weekly) because she has asthma. Hallie went to the clinic two weeks ago, because her baby girl was sick. Whiskey went to the clinic two weeks ago because her child was sick, Lenexa went to the clinic the week before for a checkup for herself, and Barbara hasn't been to the doctor since she had her baby 3 months ago.

#### ***How often visited doctor in the last six months-***

Sunny: Goes often because she has asthma. Sometimes she goes two or three times a week.

Hallie: Hallie enrolled with Xz in September, got sick (kidney infection) in October and went to the doctor for 10 days in a row. Now she goes about twice a week. She estimates that in the last six months, she's gone to the doctor about 30-35 times for herself and about 6 times for her kids.

Whiskey: Whiskey estimates that in the last six months, she's been to the doctor three times for her and 4 times for her son.

Lenexa: Lenexa estimates that in the last six months, she's been to the doctor nine times for her and six times for her kids.

Barbara: Barbara estimates that in the last six months she's been to the doctor about 10 times because she recently gave birth (3 months ago) and twice each for each of her two kids.

***Usual source/place for medical care-***

Whiskey: The clinic she goes to is a "complete clinic" meaning that it has everything including a dentist and an eye doctor. The clinic is located on the corner of Chevy and Chase.

Sunny: The clinic she goes to is called Bz and is on Primrose Lane. This clinic also has a dental clinic which is across the street.

Barbara: Barbara goes to a Managed Care Clinic in Terrance City. She indicated that this clinic has doctors who treat adults as well as children and that it has many doctors from which she can choose according to her health problem, for example, a doctor she saw about an ulcer and other doctors she sees for other types of care.

Hallie: Hallie could not recall the name of her current clinic. She did explain, however, that when she enrolled, she thought she was enrolling for the clinic on Xandu, but that they ended up sending her to another one. She also stated that at her current clinic there are 3-4 doctors which take Medi-Cal as well as other health plans. She always goes to the same doctor (a woman) for both herself and for her children.

***Person usually seen for medical care-***

Sunny: "There is someone who checks your pressure, your weight, and then I see the doctor".

Lenexa: "I see the doctor. And there's nurses that also help him."

Whiskey: "I see a woman doctor. She's a pediatrician."

Hallie: "My doctor is a general doctor."

Barbara: "A general doctor."

All of the women saw doctors in their visits to their usual source of medical care, in addition to nurses or physician's assistants (they didn't seem to know the difference) who examine them before the doctor comes in to the consult room to see them. These nurses or assistants typically

weigh them and check their blood pressure. All of the women indicated that they see the same doctor at each visit, and except for Whiskey, who sees a pediatrician, the rest of the women see general practitioners.

Of the five women, all of them saw male doctors except for Whiskey who sees a female doctor, and Lenexa who sees both a male and a female doctor. When asked whether it mattered to them whether they saw a male or female doctor, all of the women except for Sunny indicated that they would prefer to go to a female doctor. Sunny indicated that she didn't care either way, and that she liked and trusted her current doctor. Lenexa, on the other hand, stated that her preference depended on the type of exam she was going to have, and that for a gyn exam, she definitely preferred a woman, because she trusts women more.

How long it takes to get to medical care provider-

All of the women except for Sunny have cars and drive to their healthcare provider. All of the women indicated that it took them between five and 15-20 minutes to get to their health care provider, by car. It takes Sunny 15 minutes to get to her provider on foot. Lenexa also indicated that it took her 25 minutes to get to her health plan's dentists office, but that she didn't mind because one doesn't go to the dentist as often as one goes to the doctor.

All of the women indicated that the amount of time it takes them to get to their doctor was adequate and had never caused them a problem.

## **HEALTH INSURANCE**

### ***Name of Health Plan***

All of the five participants knew the name of their current health plan (Xz).

Sunny: "All the women know [the name of their health plan]."

Hallie: "We all know. When you enroll, they tell you that you are going to be enrolled in Xz."

Whiskey: "The cards they give you have the name of the plan, Xz, on them."

How long have you been covered by that plan-

Of the five participants, two have been covered by Xz for less than a year, one has been covered with Xz for two years, and two have had Xz for six years:

Whiskey: Has been enrolled with Xz for two years, prior to which she had Medi-Cal.

Lenexa: Enrolled with Xz in August 1995, prior to which she had Medi-Cal.

Barbara: Has been with Xz for six years, prior to which she had Medi-Cal.

Sunny: Has been with Xz for six years, although her kids have been with Xz for about 10 years. She stated that prior to enrolling with Xz she used to go to the General Hospital for medical care.

Hallie: Hallie enrolled with Xz in September 1995.

***What do you like about the medical care you have received-***

All five of the participants seemed to like the medical care, attention and service that they have been receiving with Xz. Almost all agreed that the quality of care and service was better than when they had been on Medi-Cal. As stated before, the participants seemed to forget about the fact that a Xz representative was present, and I believe their responses were not biased by her being there. Their responses were spontaneous and genuine.

Whiskey: "Now they wait on me more quickly."

Lenexa: "I like Xz because they wait on you better."

Sunny: "Now it's much better. Before I would go at 7 in the morning and wouldn't get back till 6 in the afternoon."

Lenexa: "I go to the clinic on Tempura and Vine. I don't have any complaints about them, they talk to you in your own language."

***What do you dislike about the medical care you have received-***

Of the five participants, only Hallie and Barbara had any complaints about Xz. The rest of the participants seemed to be very satisfied with the quality of care and services they have been receiving. Hallie dissatisfaction with Xz seems to stem from difficulty getting assigned to a clinic near her house, and was also having problems getting her newborn baby enrolled. At different times during the focus group, she indicated her dissatisfaction, and in fact, her first comment once the focus group started was to complain about the fact that she had to wait from 9:30am to 2:30 pm the last time she took a sick child in to see the doctor (she didn't have an appointment). Barbara, on the other hand, was dissatisfied with the fact that her plan did not cover her hearing aid, which she had asked about specifically when they came to her house to get her to enroll, and which she had been assured would be covered.

Hallie: "Before, I used to see another doctor, but then these people showed up to my house [to get me to enroll in Xz] and they told me that transportation would be provided. Before, one could go to any doctor with Medi-Cal."

Barbara: "Sometimes they take a long time to give you an appointment, up to two weeks sometimes."

Hallie: "When I enrolled with Xz they told me that I was going to be assigned to a clinic near my house, but the card they sent me says another clinic. I've been calling since October to get the card changed. Also, I'm missing one card for one of my kids."

Lenexa: "...But at the dentist on Pico and Pickle though, [the office staff] are really racist. I wanted to go into the consult room to see how they treated my child but the receptionist wouldn't let me in. American women would come in and she would let them go into the consult room with their kids."

In spite of their complaints, however, when probed, even Hallie and Barbara agreed that they were more satisfied with Xz than with Medi-Cal.

Almost all the women mentioned that when Xz representatives had come to their house to get them to enroll in the plan, they had been told that transportation to the clinics was a service that was regularly provided by Xz. Several of the participants laughed at this, and indicated that of course it wasn't true, but did not seem too upset by this, although they also indicated that this had been one of the primary reasons they had signed on. One of the participants explained that in fact, there was transportation available but only one day a week during certain hours, at which several of the participants again laughed, and a couple of them stated that this did not help much since they couldn't always anticipate when their kids would get sick. The participants acted like they should have known that it was too good to be true and again, did not seem to care. It's possible that Latino immigrant women have more tolerance for this type of "false promises", or perhaps this group of women was particularly tolerant because they all drive and have cars. Perhaps for a group of women for whom transportation was a big issue, this would have been a huge disappointment.

***Would you recommend your doctor and the medical care you received to family and friends-***

When asked whether they would recommend their doctor and the medical care they've been receiving to family and friends all of the participants stated that they would. Hallie indicated, that she would recommend Xz, but a different clinic. She stated that the one that she liked the best was the one by the airport, to which she had been sent a couple of times when she was sick.

***What is most important to you when you received medical care-***

All of the women seemed to agree that thorough checkups of their children are an important issue.

Whiskey: "That they give you the medicine that they know will cure you."

Barbara: "That they check the kids really well."

Hallie: "That they check the children well and that they be nice/ courteous to you."

Whiskey: "And that they don't keep you waiting for a long time."

When asked what the most important consideration is for them in terms of the medical care they receive, all of the women agreed that it was the quality of the care received, above everything else. One of the women stated that it did her absolutely no good if a clinic or doctor was within walking distance if he or she was no good; she prefers to drive in order to get better quality of care.

***How many of you got to make a choice to join Xz Health Plan-***

Of the five participants, four had been contacted at home, in person, and sometimes without prior notice by Xz representatives. All four had voluntarily dropped their previous health plan, and enrolled with Xz. Two of the four participants had been with BIGBO prior to switching to Xz. Of the five, only Lenexa had been enrolled in Xz by her caseworker, without her informed consent.

Whiskey: "They called me and then came to the house. They explained it [the plan] to me and I liked it."

Lenexa: "The worker assigned me against my will, but afterward, I liked it."

When I asked the participants whether they had minded that Xz representatives had approached them at home, or whether they had felt distrust in being approached in this manner, only Barbara, answered yes, and then went on to say, that she chatted with them for a while to find out what they were all about. All the women indicated that this was fairly common, and that they have also been approached at home by BIGBO representatives as well. The rest of the participants did not seem to mind this approach, and one even stated that she had been impressed by the fact that the representative had waited for a long time for while she went to pick up her kids from school. Whiskey also stated that they carry an ID, which lets one know that they are legitimate.

***What was important to you in choosing Xz-***

When asked what had been most important for them in choosing or switching over to Xz, the participants gave a variety of responses which clearly indicate that they had given their decision to switch over, serious thought and consideration.

Sunny: "Transportation." (She's the only participant who doesn't drive or have a car).

Whiskey: "The clinic had everything together in the same place, the dentist, a general doctor, etc.."

Sunny: "Having everything in one place is important...Sometimes, after I check in with the receptionist, I have time to go into the pharmacy, or across the street to ask for an appointment with the dentist."

Hallie: "[Xz] covers more things, more medicines."

Whiskey: "You have more privileges. You can go more times."

Barbara: "They have several clinics in case you move. I looked at a map they had which showed where they have clinics, and they have clinics all over. That's good because you never know if you're going to have to move and where."

Lenexa: "I have more trust in doctors that are assigned to a certain plan. One time I went to this Chinese doctor that is no good. Any child that went in there had either asthma or bronchitis."

***How important is the proximity of the clinic-***

When asked about proximity, all of the participants agreed that this had been a very important consideration for them.

***What is the most important consideration for you when choosing a health plan-***

This was a low yield question, as all the participants indicated that all the things mentioned were important. Sunny stated that the quality of care was the most important for her, to which the rest of the participants agreed.

***Is prenatal care available to you at the place you go to for care now-***

All five of the participants indicated that prenatal care was available to them with their current health plan and at their clinic.

***Have you ever received prenatal care at the place you go to now-***

Only Barbara and Lenexa had used the prenatal care provided to date. Sunny also stated that she was too old to use this type of care, and that she didn't need it because she has been "operated." Lenexa in particular, stated that she had been pleased with the quality of the care she received, particularly because the doctor who had seen her during her prenatal care visits also delivered her baby.

***Have you ever taken your child to the place you go to now for shots- (For a checkup when he she wasn't sick?)***

All of the women indicated that their clinics did offer immunization services for children, and that they had all used this service. When asked whether they ever take their children in for checkups even when they are not sick, all of the women stated that they had ("just to make sure they are okay"). Their responses to this question however, seemed a little less genuine, and may have been motivated by their perception of what is a socially appropriate response, (they are all mothers and all want to appear as good responsible mothers in front of the group).

***Are family planning or birth control services available to you?***

All five of the participants indicated that family planning services are available to them through Xz.

***Have you ever received birth control or family planning from the place you go to now?***

Of the five participants, Whiskey and Sunny have been sterilized and therefore have not sought or received any type of birth control from Xz. The other three participants are taking birth control pills. Hallie indicated that she herself asked for them because she had been taking them before; Barbara stated that her doctor recommended them to her, and Lenexa stated that they gave her a choice between getting infections or taking birth control pills, and she chose the latter.

All three of the participants receiving birth control services from Xz indicated that they were satisfied with the service.

***Do you ever have problems when you call to schedule an appointment?***

Of the five participants, only Barbara indicated that she had ever had a problem scheduling an appointment, once because they had forgotten to record her appointment and at other times because she has to wait up to two weeks to get an appointment. The other four participants stated that they did not have any problems scheduling appointments:

Hallie: "I call in the morning and they tell me whether they can see me that afternoon or the next day."

***How long do you have to wait after you arrive for an appointment before you are seen by the doctor or nurse?***

Although Hallie had complained about having to wait for a long time to be seen by a doctor at a Xz clinic, she didn't seem to have this problem at the other clinic she has been going to. She stated however, that if you walk-in without an appointment, on average you have to wait 1-1.5 hours. Sunny indicated that she usually only had to wait around 5 minutes, whereas Whiskey, Lenexa and Barbara indicated that they usually had to wait between 30 and 45 minutes.

***How do you feel about the choice of doctors and other health professionals that have been available to you during the last 6 months?***

All five of the participants indicated that they were satisfied with the choice of doctors and health professionals available to them at the Xz clinics where they seek health care. Both Barbara and Hallie indicated however, that they would switch to a female doctor if they were given the opportunity.

***Medical Specialist-***

All of the participants stated that they knew what a medical specialist is.

Whiskey: "For example, a heart specialist, or an ear specialist."

Barbara: "...or a foot specialist."

All of the women stated that gynecologists, pediatricians and ophthalmologists are specialists. When asked whether they had ever gone to a specialist, only Sunny had gone to one for her asthma. Lenexa indicated that she had wanted to but did not know where to go.

***Do you ever have trouble understanding your doctor or other health care providers when they talk to you?***

None of the participants reported having any difficulty understanding their doctor or other health providers.



Whiskey: "She speaks to me in Spanish, she's black and she makes an effort."

Lenexa: "We communicate in English because I speak English."

Barbara: "[We speak] in English."

Hallie: "We speak in both English and Spanish."

Sunny: "He's black [the doctor]. We speak in both."

***Does your doctor speak Spanish?***

Of the five participants, three of them reported that their primary doctor sometimes spoke to them in Spanish. Although their doctors are not fluent Spanish speakers, they apparently can speak enough Spanish to communicate with their patients. The participants seemed to appreciate that even though their Spanish is very rudimentary, their doctors make an effort to speak to them in their language.

***Have you ever had trouble getting the medical care you or your children need?***

Of the five participants, only Hallie reported having trouble getting medical care for her children. Her trouble seems to revolve around the fact that she recently (although not usually) had to wait for several hours for her child to be seen, when she went to the clinic without an appointment, and around the fact that she has not yet received the insurance card for her youngest child. This however, does not mean that her child is not covered under the plan, but that she has to wait until the receptionist at the clinic calls Xz to verify that the child is enrolled.

***Have you ever had trouble getting a new baby coverage under your current health plan?***

None of the participants reported having difficulty in getting a new baby covered under their current health plan.

***Have you ever been treated differently by your doctor or other health care providers because you are on Medi-Cal?***

None of the participants reported ever having been treated differently because they are on Medi-Cal. The complaints that Lenexa had about the dental clinic to which she has to go under her plan, has more to do with being treated differently because of her ethnicity than because she is on Medi-Cal.

***Does your doctor always write you a prescription when you think you need one?***

All five participants responded yes, and did not have any complaints in this regard.

***Do you ever have trouble getting a prescription filled?***

None of the participants reported ever having problems getting a prescription filled, and all of them indicated using the clinic's pharmacy.

***Have you ever been told that a medicine or drug was not covered?***

Of the five participants, only Barbara reported ever having been told that a medicine that had been prescribed was not covered. She also indicated however, that she called her doctor and he switched the medicine for one that was covered under the plan.

***Are you satisfied with the coverage your plan provides for prescription drugs?***

All five of the women reported being satisfied with the coverage provided for prescription drugs. When I asked whether there was any medicine they routinely used which was not covered, several of the participants indicated that it did not cover Tylenol, which they use regularly when their children get sick. They did not seem to expect their health plan to cover this type of medicine, however. Aside from that, all five participants indicated that all their prescription medicines were covered.

The only complaint about coverage came from Barbara who complained that the plan did not cover her hearing aid, although she had been assured when she signed up with the plan that it would be covered.

***Are you satisfied with the amount you have to pay?***

None of the participants have to pay anything for prescriptions.

***How much do you pay for prescriptions?***

Nothing.

How much do you pay when you visit a doctor?

None of the participants pay anything for doctor's visits.

***Have you ever belonged to an HMO?***

There is clearly some confusion about what an HMO is and does because when asked this question, all five participants responded that they had never belonged to an HMO but that they had belonged to other plans such as BIGBO and OMEGA.

***Have you ever belonged to any kind of health plan where you had to choose a doctor from a list of doctors in a health plan?***

Of the five participants, only three reported ever having belonged to a health plan where they had to select a doctor from a list.

**Conclusion**

Although only five of the 10-12 participants recruited to the focus group showed up, the focus group went extremely well. Although they at first seemed to be feeling a bit awkward, the fact

that I could speak to them as a native Spanish speaker and that both the note taker and the Xz representative were also native Spanish speakers put them at ease right away. Although all five of the women are immigrants, it was clear from their manner, dress and confidence that they have been living in the US. for several years and are comfortable negotiating unfamiliar situations with English speakers. Except for Sunny, and particularly Barbara, all four of the women were extremely acculturated and indicated that they spoke English fairly well. In addition, all five of the participants seem to have a fairly high level of "system literacy", meaning they understand how the healthcare system in the US. works, how to get what they want, and what they are entitled to. They all seemed to have a clear understanding of the purpose of the focus group, and they were all clearly motivated by the monetary incentive provided at the end of the focus group.

The fact that all five of the women have been living in the U.S. for many years and are highly acculturated needs to be taken into consideration when reviewing their responses to questions (particularly questions about language barriers with their providers, and transportation problems). It is precisely this type of participant, (who doesn't have transportation problems and who can negotiate unfamiliar situations well because they can speak English and are highly acculturated), who is more likely to come to a focus group in the first place. The discussion might have been very different if the focus group participants had been living in the US. for less time and if they had been less acculturated. It would be interesting to do another focus group with less acculturated, more recent immigrants and compare their responses.

### **FOCUS GROUP #3 – MEDI-CAL MOTHERS RECEIVING AFDC BENEFITS**

#### **Description of Focus Group Participants**

A total of 12 African-American women participated in the group, held in a xx focus group facility. All were recruited by Focus xx, a xx vendor using specifications provided by RAND. These specifications included: current MediCal coverage, current AFDC benefits, mother of a child under age 13, not a member of xxx. xxx Plan was the source of participants for two prior focus groups. Despite the screening interview, one participant in the group reported xxx as her health plan.

Four participants (C, M, Tr, Cy) have one child (participant Tr was 7 months pregnant at the time of the group; 5 participants have two children (T, S, So, P, D), and the remaining 3 participants have 3 children (L, M, Mi).

#### **Purpose of the Group**

A copy of the group protocol is attached to this memo. The purpose of the group was to test the draft self-administered version of the CAHPS Core Adult Questionnaire in a large-group setting. Specifically, the purpose of the group was to determine: if a respondent could report on her own health care experiences without taking into account the care received by her children or other family members, how a respondent defined key terms such as "specialist," "mental health provider," if any of the items in the draft questionnaire were confusing or misinterpreted, and what experiences respondents thought of when answering specific items.

#### **Method**

The questionnaire included 75 items and was divided into five sections: last visit to office or clinic, medical care in the last 6 months, getting medical care, overall rating of medical care in the last 6 months, and a demographic section. The demographic section was identical to the demographic survey completed by participants in two previous CAHPS focus groups, and did not contain the demographic data proposed for the CAHPS Core Adult Questionnaire. Completion of section five was voluntary.

Participants take varying amounts of time to complete sections and we did not want anyone to get ahead of the group and complete the next section before we had discussed the current section. To prevent this, we handed out the questionnaire in sections rather than a single document. Sections were distributed in order, completed by participants, and then reviewed and discussed by the group. A copy of the questionnaire is also attached to this memo. All of the sections completed in the group were data entered. The data was not reviewed in writing up this report.

#### **Summary of Group - Section One: Last Visit to Doctor's Office or Clinic**

Only one participant's (P) most recent visit was 7 or more months ago. In her words "it wasn't hard" for her to remember that visit in answering the last visit items. For others in the group it was "easy" to remember the visit. For some participants the visit was memorable because of an acute illness "I had the flu," said L. Participant Cy had had a miscarriage. For others, the visit was for routine care or preventive care (Depo-provera shots, Pap smear, physical, ongoing care for gynecological problems).

Participants S and Mi reported on a dental visit (as most recent medical care visit).

One participant was treated by a nurse-practitioner. The remaining participants were treated by a doctor and also saw a nurse during the most recent visit. In answering question 13B (how well doctor or nurse listened to you), most of the patients who saw both a doctor and a nurse on the last visit answered for the doctor. One participant (T) answered for both the doctor and the nurse. When asked how she came up with a rating, she said "I've used to this HMO for 5 years, and I've never encountered any problem with the nurses or with the doctors. . . Whatever it is they listen." Instead of answering for just the last visit, her response was based on her overall care experience. Participant Mi's rating was also based on overall experience rather than the last visit. She is a large woman and does not like to be weighed. If a nurse doesn't give her a hard time about this, she perceives that as listening to and addressing her concerns. In discussing this item, it seems that only 5 of the 12 participants gave a rating that was based solely on the last visit. Later in the group we discussed how we could have made it easier to report on just the last 6 months. Participant D said the phrase last six months made her think about other visits (this time frame doesn't appear in the section until question 18, and is the only "6 month" item in the section). At least 3 respondents pointed out that it was confusing to them to switch from last visit to 6 months (in Q.18) and back to last visit. Capitalizing or underlining "last visit" in each question may have made it easier. A few participants did admit that they "rushed" through the questions and may not have read them carefully.

Participant M "put OK, because at times they do interrupt they don't want to hear everything. They just want to know what are the problems and whatever else . . . " "They just want you to get to the point" interrupted another participant. About half the participants endorsed this observation.

Another participant (Mo) seemed to include the care her children have received in her rating for this item.

Discussing the last visit prompted some respondents to report on visits that were outstanding in their memory because care was very poor or the provider was not experienced. For example, Mi had a nurse-trainee use the wrong blood pressure cuff on her arm and get a reading that was too high. So complained of staff that don't have a lot of experience drawing blood.

No one reported that any of the questions in this section were confusing or did not make sense.

### **Summary of Group - Section Two: Medical Care in the Last 6 Months**

One participant (P) had not had a visit in the last 6 months.

When asked, at least 3 participants reported that it was hard for them to separate their own care from their children's care and just report on their own use. As with the first RAND focus group, participants expect a higher standard of care for their children, and have a lower standard for their own care. "I focus on their care differently than I focus on care I receive for myself," said M.

These same 3 participants report that while they may see one doctor regularly, their children see a lot of different doctors. "I've seen four or five pediatricians," said M "just trying to find" a good doctor. Participant S endorsed this experience.

"Other mental health professional" in question 35 meant "counseling" to Participant C. She included the "therapist" she sees at [A LOCAL MENTAL HEALTH CENTER] in answering this item. (When probed, C reported that her therapist is a psychologist.) In reading the question, none of the participants thought of a social worker as a mental health professional. When asked specifically if a social worker is an other mental health professional, several of the participants laughed heartily. In further discussion, at least one participants did report that social workers at a hospital do mental health counseling.

Participant M said, "I talk to my doctor some times in a visit. So I think a doctor is a mental health person." But she did not report thinking of her doctor when she answered the question. Participant Ma said "my doctor knows me very well" and notices when she is not her usual self.

Participants without any visits or experience receiving mental health care, did not seem to think deeply about the question before responding. They did not stop to think about who an "other health professional" might be before answering "No visits to a mental health professional."

In thinking about "specialist" care (question 36), participant P included podiatrist, others included neurologist, ophthalmologist, allergist, gerontologist, chiropractor. When asked if a gynecologist was a specialist one participant said "Oh no!" while 4 others said yes. All agreed that a pediatrician is a specialist. No one reported seeing more than one specialist.

Participant M said that she also thought about the specialist her son had seen. Overall M was not able to report on her health care without taking into account the care her children receive. Participant D also included her children in her response. In discussing with the group how we could make it more clear that we are just asking about you, participant D said we should underline you. Participant Mi said we should say that the questions are just about your own care, participant Cy pointed out to her that that is just what the introduction does say. Many of the inclusion and exclusion instructions contained in the section introductions were not clear to participant Mi, this may be because she is not a good reader, or because she did not read the questions carefully. When probed to determine how the instruction to limit your responses to your own care, she said that it would have been helpful to have a reminder to answer for just for your own care at each item. Most of the participants in the group felt it was clear to report only on "your" care. Because most of the group understood the instruction, it may have been difficult for those who didn't to discuss this issue in a group setting.

Participant C included her therapist and a neurologist in answering this item (despite the wording "not including any visits to mental health professionals"). No one else reported seeing more than one specialist.

Probes to determine how respondents counted up their visits elicited responses like "I went twice so I said 2" (participant P), "I went once and my baby girl went once" (participant S). No other information about how visits were counted came out in the group.

No one received care in the emergency room. (Participant D's kids did receive care there but it was not clear in the group how she answered item 41).

When probed about counting visits in item 42 (total number of times you received care in last 6 months), participant D said she answered by "counting back" over the last 6 months. Participant C said she "just knew how many visits I had." Participant So included visits that her daughter had had.

Mi said the question was "too wordy", she felt it could of been "one sentence." At least one participant (S) included dental visits in her total. (Despite the instruction "It does not include going to the dentist".) She also reported a dental visit as her last visit.

Summary of Group - Section Three: Getting Medical Care That You Need Three participants (S, Tr, D) had called their doctor's office or clinic for information or advice in the last 6 months. They interpreted "regular hours" as "9 to 5" or "8 to 4" or "9 to 6". Participants who said no, thought of regular business hours as "9 to 5".

Participants (Tr and D) said it was easy to reach someone who could help, and participant S said it was neither hard nor easy. "It just depends on how busy they are at that particular time of day and who is there" she said. "And who can speak English" said another participant. "If they don't speak good English and they try to [answer your question] you'd be like, can you get me somebody that I can understand?" said Mi. Two other participants (P and Cy) report that they have had doctors they could not understand because English was a problem.

Participant S reported that she tried to get medical care on the weekend. In her case, it was dental care. She said it was easy to get care. No other respondents reported (in the group) trying to get weekend care.

In discussing item 48 (getting less care or treatment than you thought was needed), D said "When I first got here and by him not really having a background on the girls, he wasn't really willing to listen to me. . . I brought a little sheet from [PREVIOUS DOCTOR], and he was like, I can examine her and I can go on my own." She switched clinics 6 or 7 months ago as a result of this experience. (Note that it is outside of the reference period). Participant P had no visits in the last 6 months, so answered this section for her last visit. "I have taken a series of tests and they all come out negative. Something is obviously wrong with me and they say take another test. . . I think they're experimenting with me and don't know what's going on. . . They try and make out like it's in my head--I know it's not in my head." Participant P said that "when I was working and had regular insurance" doctors took more time with her, "with [Medi-Cal] they're in and out in two minutes. I notice there is a big difference, because it is right there on the chart how you are paying." "Money talks, [Medi-Cal] walks" said Mi. Participant So has been told to get over the counter medications rather than prescriptions by some providers. She thinks this is because of her MediCal coverage. Another participant had test results that were lost but she "did not want to say it was due to MediCal."

Participant Mi reported problems finding a specialist (dentist) and other doctors who would accept MediCal. For "me it's harder. For my kids it's easier. They get referrals and you got to go to the valley or wherever." Participant P said that "even today if I call a gynecologist and the first thing they ask is what type of insurance do you have? And if you say Medi-Cal they say we're not accepting any more Medi-Cal patients at this time."

In discussing item 49, Mi said yes because "they'll tell you [Medi-Cal] does not cover "certain things." And I'll say I'll be willing to pay for it and they say how?" This experience was endorsed by M. Participant S says it is "because [Medi-Cal] doesn't pay. They're paying the companies when they want to" rather than not covering a prescription or service. Participant C reported better care under her (Medi-Cal) HMO than regular Medi-Cal.

In discussing item 52 (postpone or go without care because insurance didn't cover it), Mi told of this experience, "My daughter had an infection and I took her to the doctor. She got 3 prescriptions and I took them to [PHARMACY NAME]. For some reason her Medi-Cal card . . . it said she was denied. The medicine was \$52, and you know to call your social worker and go down there when there is nothing wrong with the card. . . She had to go without her medicine for 3 days" while the problem was solved.

Two participants said yes to item 54 (confusing or contradictory information). Participant L said yes because the medication she received for the flu was not effective. Participant M also said yes because a doctor and a doctor in training gave her contradictory information. Several respondents mentioned that they listen to what the doctor says rather than what the nurse says (P, Cy, D).

In discussing item 55 (doctor who didn't know enough about your medical history), Participant C said that her psychiatrist "just wants my Medi-Cal card" and to know if she felt like committing suicide at each visit to renew a prescription. "I just go to him for my medicine," she said. This disturbed several other group participants who felt that the doctor should be getting more detailed information before giving her medications, or that the doctor should be asking her how the medication effects her.

In discussing courtesy of doctors and staff. Participant Tr reports that the office staff are rude, but she likes her doctor and would never change. "A patient can be irate, and they will disenroll you" said participant So.

A "reasonable amount of time" to wait for an appointment (item 59) was defined as "that day that you call" by participant Cy. "That's right" said So. At least 2 other participants endorsed this time frame. Participant Tr said she was told she would have to wait two months for prenatal visit. As a group, waiting 1 day for a visit when you are sick was seen as unreasonable. For a check-up or visit when you are not sick, 3 participants said "1 week" was reasonable, another 3 said "two weeks" was reasonable. No one endorsed a wait of longer than 2 weeks.

No one identified any items as confusing or not appropriate.

#### **Summary of Group - Section Four: Overall Rating of Your Medical Care in the Last 6 Months**

This section included overall rating of medical care received, experience and contact with health insurance plan in the last 6 months, and overall rating of health insurance plan.

"What's the point of the rating part" said Mi, "you ask the question twice?" Respondents appeared to answer consistently between item 61 (Very good to not good at all rating) and item 62 (0 to 10 scale). No preference for one version or the other came out in the group.



"Red tape" was defined as paperwork by Cy and others in the group. HMO members report little or no paperwork. Participant M interpreted red tape as "a problem." Participant Mi interpreted red tape as "you're in your facility but you have to go somewhere else to take a test." Participant T defined red tape as "a cut" but couldn't elaborate on what she meant by this.

When asked what they thought of as "health insurance plan" participant D said "social worker." Others thought about "customer service." Participant Cy thought of the doctor or clinic, because they call Medi-Cal if there is a problem with coverage or eligibility. This view was endorsed by participant S. It is not clear from the group, if participants correctly defined plan vs. provider.

Participant So gives an overall low rating of her health insurance plan because the clinic she must visit and the equipment the clinic uses are dirty. She is enrolled in an HMO and is trying to switch clinics.

Some participants were able to make a choice in health plans. When asked if she felt like she had a lot of choice, participant Tr said "Yeah, I did." Participant Cy chose from "4 or 5 health plans."

Participant D had no choice "because I came from another state, [the social worker] signed me up."

Many participants reported that health plan representatives approach them outside of benefits offices, and even come to their home to sign them up.

HMO enrollees had differing satisfaction with their care. Participant M felt she received better care. Participant So said that she didn't like "having to go to where they want her to go." Participant Cy felt she received better specialist care through her HMO. "They're not going to send you to no shabby doctors," she said. "I've been content with them .... I didn't have to pay for nothing." When asked by another participant about access to after-hours care, Participant So said she always had care available.

#### **Summary of Group - Section Five: Last Visit to Doctor's Office or Clinic**

Completion of this section was voluntary and the section was not reviewed by the group.

Responses to this section were data entered along with all other sections. All of the participants except one requested a copy of the study results.

**QUESTIONNAIRE USED IN THIRD FOCUS GROUP**

[Note that question numbers are not necessarily consecutive from one section to the next (items were pulled from a longer instrument).]

**Part One**

March 16, 1996 - Focus Group

The Last Visit You Made to a Doctor's Office or Clinic...

The next questions ask about your own personal use of health care services. For each question,

[Please circle the answer that is best for you.]

7. How long has it been since your last visit to a doctor's office or clinic? (If you are not sure, please give your best estimate of how long ago you last visited a doctor's office or clinic).

(Circle One)

- 1 Less than 1 month
- 2 1 month or more, but less than 3 months
- 3 3 months or more, but less than 6 months
- 4 6 months ago
- 5 7 or more months ago
- 8 Don't know

[The next questions are about the LAST VISIT you made to a doctor's office or clinic.]

8. How well do you remember this last visit to the doctor's office or clinic?

(Circle One)

- 1 Very well
- 2 Pretty well
- 3 Not very well
- 4 Not well at all

9. On your last visit to the doctor's office or clinic, were you able to get an appointment for that visit as soon as you wanted?

(Circle One)

- 0 I didn't make an appointment in advance for my last visit.
- 1 Yes
- 2 No
- 3 I don't remember

10. For your last visit, did you get there on time or were you late?  
(Getting there on time includes getting there early.)

(Circle One)

- 0 I didn't have an appointment in advance for my last visit
- 1 Got there on time (or early)
- 2 Got there late
- 3 I don't remember

11. During this last visit, did you have to spend more than 15 minutes waiting past your appointment time in the waiting room?

(Circle One)

- 0 I didn't have an appointment in advance for my last visit
- 1 Yes
- 2 No
- 8 I don't remember

12. During this last visit, did you have to spend more than 15 minutes waiting in the exam room after you were put into an exam room?

(Circle One)

- 0 I was not put into an exam room during my last visit
- 1 Yes
- 2 No
- 8 I don't remember

13b. During your last visit, how good was the doctor (or nurse) at listening to you carefully [without interrupting] - was the way he or she listened to you:

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

- 14b. During your last visit, how good was the doctor (or nurse) at explaining things to you in a way you could understand - were the explanations you got:

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

- 15b. How would you rate the amount of time you had with the doctor (or nurse) during your last visit - was it:

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

- 16b. How would you rate the thoroughness and carefulness of the examination you got from the doctor (or nurse) during your last visit?

(Circle One)

- 0 My last visit did not include any examination
- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

- 17b. How would you rate the thoroughness and carefulness of the treatment you got from the doctor (or nurse) during your last visit?

(Circle One)

- 0 My last visit did not include any treatment
- 1 Very good
- 2 Good
- 3 Okay

- 4 Not very good
- 5 Not good at all
- 8 I don't remember

18b. Did you have any blood tests, urine tests, or other kinds of tests during the last 6 months?

(Circle One)

- 1 Yes ----->
- 2 No
- 8 I don't remember

18b-2. How would you rate the follow through on telling you the results of all of the tests you had - was the follow through on test results:

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

19b. Thinking about your last visit, how would you rate the doctor's (or nurse's) ability to figure out what was wrong with you and what needed to be done?

(Circle One)

- 0 There was nothing to figure out at my last visit
- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

20b. During your last visit, how good was the doctor (or nurse) at getting you as involved in making decisions about your care as you wanted to be - was he or she:

(Circle One)

- 0 There were no decisions to be made at my last visit
- 1 Very good

- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

21b. How would you rate the courtesy, respect, and attitude of the doctor (or nurse) you saw at your last visit?

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

22b. How would you rate the courtesy, respect, and attitude of the receptionist and other office staff during your last visit?

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 I don't remember

## **Part Two**

March 16, 1996 - Focus Group

### **About Your Medical Care in the Last 6 Months**

The next questions ask about your own personal use of health care services in the last 6 months.

They include all of the visits that you have made for medical care in the last 6 months, not just your most recent visit.

35. During the last 6 months, how many visits did you make to a psychologist, psychiatrist, or other mental health professional?

If you are not sure, please give your best guess about the number of visits in the last 6 months.

(Circle One)

- 0 I didn't get any medical care in the last 6 months
- 1 No visits to a mental health professional
- 2 1 visit
- 3 2 to 4 visits
- 4 5 to 7
- 5 8 to 10
- 6 11 or more

36. During the last 6 months, how many visits did you make to a specialist, not including any visits to mental health professionals?

Specialists include doctors such as cardiologists or heart doctors, orthopedists, surgeons, allergists, dermatologists and other types of doctors who specialize in a particular area of health care.

If you are not sure, please give your best guess about the number of visits in the last 6 months.

(Circle One)

- 0 I didn't get any medical care in the last 6 months
- 1 No visits to specialists
- 3 1 visit
- 4 2 to 4 visits
- 5 5 to 7
- 6 8 to 10
- 7 11 or more

37. During the last 6 months, how many different specialists have you been to see?

If you are not sure, please give your best guess about the total number of doctors who are specialists that you have seen in the last 6 months.

(Circle One)

- 0 I haven't seen any specialists  
in the last 6 months -----> Please skip ahead to
- 1 Only 1 specialist
- 3 2 specialists
- 4 3 specialists
- 5 4 specialists
- 6 5 or more specialists

38. What is your overall rating of the specialist you have seen most often in the past 6 months?

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 No opinion

39. Using a rating scale from 0 to 10, where 0 is as bad as specialists can be, 10 is as good as they can be, and 5 is okay, what number from 0 to 10 would you use as an overall rating of the specialist you have seen most often in the last 6 months?

(Circle One Number)

| | | | | | | | | |

0 1 2 3 4 5 6 7 8 9 10

as bad as a  
specialist can be

okay or  
average

as good as  
a specialist  
can be

40. Would you recommend the specialist you have seen most often in the last 6 months to your family or friends if they needed to see this type of doctor?

(Circle One)

- 0 I haven't been to see a specialist in the last 6 months
- 1 Definitely not
- 2 Probably not
- 3 Not sure
- 4 Probably yes
- 5 Definitely yes

41. During the last 6 months, how many times did you get medical care for yourself at a hospital emergency room?

If you are not sure, please give your best guess about the number of visits in the last 6 months.

(Circle One)



- 0 I didn't get any medical care in the last 6 months
- 1 No visits to hospital emergency rooms in last 6 months
- 2 1 visit
- 3 2 to 4 visits
- 4 5 to 7
- 5 8 to 10
- 6 11 or more

42. During the last 6 months, what is the TOTAL number of times that you got medical care for yourself at a doctor's office, clinic, or hospital emergency room?

This includes visits to see doctors, nurses, or other health professionals including eye doctors, physical therapists, mental health professionals, and alcohol or drug counselors.

It includes trips to urgent care centers and hospital emergency rooms, but does not include staying overnight or longer in a hospital. It also does not include going to the dentist.

If you are not sure about the total number of visits, please give your best guess.

(Circle One)

- 1 No visits
- 2 1 visit
- 3 2 to 4 visits
- 4 5 to 7
- 5 8 to 10
- 6 11 to 15
- 7 16 or more

### Part Three

March 16, 1996 - Focus Group

#### Getting the Medical Care that You Need

The next questions ask about whether you have been able to get certain types of care if you needed them during the last 6 months. They also ask about whether you have had certain kinds of problems.

43. During the last 6 months, have you called a doctor's office or clinic during regular hours to get medical information or advice?  
(Don't include calls that were just to make an appointment)

(Circle One)

- 1 Yes
- 2 No
- 8 I don't remember

44. How hard or easy has it been to reach someone on the phone who could help you when you called the doctor's office or clinic in the last 6 months - has it been:

(Circle One)

- 0 I haven't called a doctor's office or clinic in the last 6 months
- 1 Very hard
- 2 Hard
- 3 Neither hard nor easy
- 4 Easy
- 5 Very easy
- 8 I don't remember

45. Please rate the way the people at the doctor's office or clinic have handled your calls - has it been:

(Circle One)

- 0 I haven't called the doctor's office or clinic in the last 6 months.
- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 Don't know

46. During the last 6 months, have you tried to get medical care for sickness or injury during evenings or weekends?

(Circle One)

- 1 Yes
- 2 No
- 8 I don't remember

47. How hard or easy was it to get the care you needed in the evenings or on weekends - was it:

(Circle One)

- 0 I haven't needed care in the evening or on a weekend during the last 6 months.
- 1 Very hard
- 2 Hard
- 3 Neither hard nor easy
- 4 Easy
- 5 Very easy
- 8 I don't remember

The next questions are about problems some people have with their medical care or health insurance. Please tell whether any of these has happened to you during the last 6 months.

48. In the last 6 months, has any doctor given you less care or less treatment than you thought was needed?

(Circle One)

- 0 Haven't needed any medical care in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

49. In the last 6 months, has your doctor or your health insurance plan discouraged you from getting tests or treatment that you thought were needed?

(Circle One)

- 0 Haven't needed any tests or treatment in the last 6 months
- 1 Yes
- 2 No
- 8 Don't know

50. If you have needed to see a specialist in the last 6 months, have you had any problems getting to see the specialist?

(Circle One)

- 0 Haven't needed to see a specialist in the last 6 months
- 1 Yes
- 2 No
- 8 Don't know

51. In the last 6 months, have you postponed or gone without medical care or medicine that you needed because you couldn't afford to pay for it at the time?

(Circle One)

- 0 Haven't needed any medical care or medicine in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

52. In the last 6 months, have you postponed or gone without medical care or medicine that you needed because your health insurance didn't cover it?

(Circle One)

- 0 Haven't needed any medical care or medicine in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

53. In the last 6 months, has your health insurance plan refused to approve or pay for medical care that you thought was covered by your insurance?

(Circle One)

- 0 Haven't needed any medical care in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

54. In the last 6 months, have doctors or nurses ever given you confusing or contradictory information about your care?

(Circle One)

- 0 Haven't had any medical care in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

55. Has there been anytime in the last 6 months when you saw a doctor or nurse who didn't seem to know enough about your medical history?

(Circle One)

- 0 Haven't had any medical care in the last 6 months.

- 1 Yes
- 2 No
- 8 Don't know

56. Has there been anytime in the last 6 months when you saw a doctor or nurse who didn't seem to care much about you as a person?

(Circle One)

- 0 Haven't had any medical care in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

57. Has there been anytime in the last 6 months when you were unhappy or dissatisfied enough with a doctor that you wished you could go to a different one?

(Circle One)

- 0 Haven't been to any doctors in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

58. Has there been anytime in the last 6 months when you were unhappy or dissatisfied enough with receptionists or other staff at the doctor's office or clinic that you wished you could go to a different office or clinic?

(Circle One)

- 0 Haven't been to any doctor's office or clinic in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

59. Has there been anytime in the last 6 months when you were not able to get an appointment within a reasonable amount of time?

(Circle One)

- 0 Haven't tried to get any appointments in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

60. Has there been anytime in the last 6 months when you did not trust the way a doctor or nurse was handling your medical care?

(Circle One)

- 0 Haven't had any medical care in the last 6 months.
- 1 Yes
- 2 No
- 8 Don't know

#### Part Four

March 16, 1996 - Focus Group

##### Overall Rating of Your Medical Care in the Last 6 Months

61. Please give your overall rating of the care you have received from all doctors, nurses, and other health professionals you have seen in the last 6 months - has your care been:

(Circle One)

- 0 I haven't had any medical care in the last 6 months
- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 No opinion

62. Using a rating scale from 0 to 10, where 0 is as bad as a medical care can be, 5 is okay or average, and 10 is as good as it can be, what number from 0 to 10 would you use as an overall rating of the care that you have received in the last 6 months?

(Circle One Number)

| | | | | | | | | |

0 1 2 3 4 5 6 7 8 9 10

as bad as  
medical care  
can be

okay or  
average

as good as  
medical care  
can be

OR

- [ ] Have not received any medical care in the last 6 months.

### Your Health Insurance

The following questions are about experiences related to your health insurance during the past 6 months. If other family members in your household are also covered by this same health insurance plan, include their experiences as well as your own.

63. Thinking about how much time you personally had to spend during the last 6 months on paperwork and "red tape" related to your health insurance and medical care, please give your health insurance plan an overall rating on paperwork and "red tape":

(Circle One)

- 0 There hasn't been any paperwork or "red tape" in the last 6 months.
- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 Don't know

64. During the last 6 months, have you called customer service or anyone else at your health insurance plan?

(This question asks about calls you have made to the business office of your health insurance company, not calls to your doctor's office or clinic).

(Circle One)

- 1 Yes
- 2 No
- 8 I don't remember

65. How hard or easy has it been to reach someone who could help you when you called the health insurance plan - has it been:

(Circle One)

- 0 I haven't called my health insurance plan in the last 6 months.
- 1 Very hard
- 2 Hard

- 3 Neither hard nor easy
- 4 Easy
- 5 Very easy
- 8 I don't remember

66. Please rate the way the customer service people at your health insurance plan have handled your calls -- has it been:

(Circle One)

- 0 I haven't called my health insurance plan in the last 6 months.
- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 Don't know

#### Overall Rating of Your Health Insurance Plan

67. All things considered, what is your overall rating of your health insurance plan?

(Circle One)

- 1 Very good
- 2 Good
- 3 Okay
- 4 Not very good
- 5 Not good at all
- 8 No opinion

68. Using a rating scale from 0 to 10, where 0 is as bad as a health insurance plan can be, 5 is okay or average, and 10 is as good as it can be, what number from 0 to 10 would you use as an overall rating of your current health insurance plan?

(Circle One Number)

| | | | | | | | | |

0 1 2 3 4 5 6 7 8 9 10

as bad as a  
health insurance

okay or  
average

as good as a  
health insurance  
plan can be



69. Would you recommend your health insurance plan to other family members or friends?

(Circle One)

- 1 Definitely Not
- 2 Probably Not
- 3 Not Sure
- 4 Probably Yes
- 5 Definitely Yes

70. When you enrolled in this health insurance plan, how many different health insurance plans did you have to choose from?

(Circle One)

- 1 No choice - my current health insurance plan was the only choice.
- 2 I had a choice between my current health insurance and one other kind of health insurance.
- 3 I had a choice among my current health insurance and two or more other kinds of health insurance.
- 4 I can't remember

Focus Group: Health Care Experiences of Mothers

March 16, 1996

### QUESTIONS ABOUT YOU

It would help us to know a little bit about you. Please take a moment to answer these questions.

1. How many children do you have?

(Circle One)

- 0 No children
- 1 1 child
- 2 2 children
- 3 3 children
- 4 4 children
- 5 5 or more children

2. Are you currently married?

(Circle One)

- 1 Yes
- 2 No

3. What is the highest level of school you have completed?

(Circle One)

- 1 8th grade or less
- 2 Some high school or less
- 3 High school diploma or GED
- 4 Vocational school or some college
- 5 College degree
- 6 Professional or graduate degree

4. During the last 30 days, were you . . .

(Circle as many as apply)

- 1 Working, but not for pay (volunteer work)
- 2 Working full-time (for pay)
- 3 Working part-time (for pay)
- 4 Unemployed, laid-off, or looking for work
- 5 Retired
- 6 Disabled
- 7 In school
- 8 Keeping house
- 9 None of these

5. What kind of health insurance do you have?

(Circle One)

- 1 None, I have no health insurance.
- 2 Medicare only
- 3 Medicare and any other insurance
- 4 Medicaid or Medi-Cal only
- 5 Private health insurance (through an employer)
- 6 Something else (please specify: \_\_\_\_\_)

