Access to Care (AC) Section

LOOP_01

FOR EACH ELEMENT IN THE RU-MEMBERS-ROSTER, ASK AC01-END_LP01

LOOP DEFINITION: LOOP_01 COLLECTS THE NAME OF THE USUAL SOURCE OF CARE PROVIDER, IF ANY, FOR EACH CURRENT RU MEMBER. THIS LOOP CYCLES ON PERSONS WHO MEET THE FOLLOWING CONDITIONS:

- PERSON IS A CURRENT RU MEMBER
- PERSON IS NOT DECEASED
- PERSON IS NOT INSTITUTIONALIZED

AC01

====

PRND.HAVE_USC DOES PERSON HAVE A USC PROVIDER?

{PERSON'S FIRST MIDDLE AND LAST NAME}

Is there a particular doctor's office, clinic, health center, or other place that (PERSON) usually (go/goes) if (PERSON) (are/is) sick or (need/needs) advice about (PERSON)'s health?

 YES
 1 {AC05}

 NO
 2 {AC03}

 MORE THAN ONE PLACE
 3

 REF
 -7 {END_LP01}

 DK
 -8 {END_LP01}

[Code One]

PRESS F1 FOR DEFINITION OF USUAL SOURCE OF HEALTH CARE.

====

PRND.GOTOFRST WOULD PERS GOTO USC FRST/MOST IF SICK?	
------------------------------------------------------	--

{PERSON'S FIRST MIDDLE AND LAST NAME}

Would (PERSON) go to one of these places first or most often if (PERSON) (are/is) sick?

YES	1	{AC05}
NO	2	
REF	-7	{END_LP01}
DK	-8	{END LP01}

AC03

====

PRND.Y_NO_USC MAIN REASON PERS DOESN'T HAVE A USC

{PERSON'S FIRST MIDDLE AND LAST NAME}

What is the **main** reason (PERSON) (do/does) not have a usual source of health care?

SELDOM OR NEVER GETS SICK	1	{AC04}
RECENTLY MOVED INTO AREA	2	{AC04}
DON'T KNOW WHERE TO GO FOR CARE	3	{AC04}
USUAL SOURCE OF MEDICAL CARE IN THIS		
AREA IS NO LONGER AVAILABLE	4	{AC04}
CAN'T FIND A PROVIDER WHO SPEAKS		
(PERSON)'S LANGUAGE	5	{AC04}
LIKES TO GO TO DIFFERENT PLACES FOR		
DIFFERENT HEALTH NEEDS	6	{AC04}
JUST CHANGED INSURANCE PLANS	7	{AC04}
DON'T USE DOCTORS/TREAT MYSELF	8	{AC04}
COST OF MEDICAL CARE	9	{AC04}
OTHER REASON	91	
REF	-7	{END_LP01}
DK	-8	{END_LP01}

[Code One]

PRESS F1 FOR DEFINITION OF USUAL SOURCE OF HEALTH CARE.

AC030V

=====

PRND.NO_USCOS	MAIN REASON NO USC: OTHER SPECIFY
ENTER	OTHER REASON:
[1	Enter Other Specify]
RI	EF7
DI	

AC04

====

PRND.NOREASON	OTH REAS NO USC: NO OTHER REASONS
PRND.SELDSICK	OTH REAS NO USC: SELDOM OR NEVER SICK
PRND.NEWAREA	OTH REAS NO USC: RECENTLY MOVED TO AREA
PRND.DKWHERE	OTH REAS NO USC: DK WHERE TO GO FOR CARE
PRND.USC_NA	OTH REAS NO USC: USC NO LONGER AVAILABLE
PRND.PERSLANG	OTH REAS NO USC: PROV DOESN'T SPEAK LANG
PRND.DIFFPLCS	OTH REAS NO USC: GOTO DIFF PLCS/DIFF NEE
PRND.INSPLAN	OTH REAS NO USC: JUST CHANGED INS PLANS
PRND.MYSELF	OTH REAS NO USC: DON'T USE/TREAT MYSELF
PRND.CARECOST	OTH REAS NO USC: COST OF MED CARE
PRND.OTH_REAS	OTH REAS NO USC: OTHER REASON

{PERSON'S FIRST MIDDLE AND LAST NAME}

What are the other reasons (PERSON) (do/does) not have a usual source of health care?

CODE ALL THAT APPLY.

NO OTHER REASONS	0
SELDOM OR NEVER GETS SICK	1
RECENTLY MOVED INTO AREA	2
DON'T KNOW WHERE TO GO FOR CARE	3
USUAL SOURCE OF MEDICAL CARE IN THIS	
AREA IS NO LONGER AVAILABLE	4
CAN'T FIND A PROVIDER WHO SPEAKS	
(PERSON)'S LANGUAGE	5
LIKES TO GO TO DIFFERENT PLACES FOR	
DIFFERENT HEALTH NEEDS	6
JUST CHANGED INSURANCE PLANS	7
DON'T USE DOCTORS/TREAT MYSELF	8
COST OF MEDICAL CARE	9
OTHER REASON	91
REF	-7
DK	-8

[Code All That Apply]

PRESS F1 FOR DEFINITION OF USUAL SOURCE OF HEALTH CARE.

 -	•	THER REASON) ALONE OR IN OTHER CODES, CONTINUE WITH AC040V
 -	OTHERWISE, GO TO	END_LP01

EDIT: IF CODED '0' (NO OTHER REASONS), '-7' (REFUSED), OR '-8 (DON'T KNOW) IN THE FIRST FIELD, NO OTHER REASON CATEGORY CAN BE CODED. IF CODED '0' (NO OTHER REASONS), '-7' (REFUSED), OR '-8' (DON'T KNOW), IN A FIELD OTHER THAN THE FIRST FIELD AND A SUBSEQUENT CODE IS ENTERED, DISPLAY THE FOLLOWING MESSAGE: 'INVALID RESPONSE. PRESS ENTER ON A BLANK FIELD.'

AC040V

=====

PRND.OTHRSOS OTH REASON NO USC: OTHER SPECIFY

ENTER OTHER REASON:

[Enter Other Specify]	{END_LP01}
REF7	{END_LP01}
DK8	{END_LP01}

====

USCP.USCPID	USCP ID KEY: PROVID + PRNDID
USCP.USCPRURN	ROUND STAMP: RU LETTER + ROUND NUMBER
USCP.CREATEQ	QUESTION THAT CREATED USCP SEGMENT
PROV.USC_PROV	USUAL SOURC OF CARE PROVIDER

{PERSON'S FIRST MIDDLE AND LAST NAME}

Please give me the name of the medical person, doctor's office, clinic, health center, or other place that (PERSON) usually (go/goes) if (PERSON) (are/is) sick or (need/needs) advice about (PERSON)'s health.

PRESS ENTER TO CONTINUE.

PRESS F1 FOR DEFINITION OF USUAL SOURCE OF HEALTH CARE.

В	0	X	_	0	1
_	_	_	_	_	_

ASK THE PROVIDER ROSTER (PV) SECTION

AT THE COMPLETION OF THE PROVIDER ROSTER (PV)

SECTION, CONTINUE WITH BOX_02

BOX_02

•	THE PROVIDER ADDED OR SELECTED AS THE 'USO . SOURCE OF CARE) PROVIDER' FOR THIS PERSONIS PARTICULAR ROUND.
TYPE-	S USC PROVIDER IS FLAGGED AS 'FACILITY-PROVIDER' OR 'PERSON-IN-FACILITY-PROVIDER' COE WAS NOT ALREADY ASKED FOR THIS USC DER IN AN EARLIER LOOP, CONTINUE WITH ACOE
	S USC PROVIDER IS FLAGGED AS 'PERSON-TYPE DER', GO TO AC09A

====

PROV.HSBASED	PROVIDER IS HOSPITAL BASED
PROV.PLACETYP	WHAT KIND OF PLACE IS/DOES PROV WORK AT?

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER.....}

ASK IF NOT OBVIOUS.

{Is (PROVIDER)/Does (PROVIDER) work at} a clinic in a hospital, a hospital outpatient department, an emergency room at a hospital, or some other kind of place?

HOSPITAL CLINIC OR OUTPATIENT		
DEPARTMENT	1	
HOSPITAL EMERGENCY ROOM	2	{BOX_03}
OTHER KIND OF PLACE	3	{BOX_03}
REF	-7	{BOX_03}
DK	-8	{BOX_03}

[Code One]

PRESS F1 FOR DEFINITIONS OF ANSWER CATEGORIES.

DISPLAY 'IS (PROVIDER)' IF USC PROVIDER IS FLAGGED AS 'FACILITY-TYPE-PROVIDER'. DISPLAY 'Does (PROVIDER) work at' IF USC PROVIDER IS FLAGGED AS 'PERSON-IN-FACILITY-PROVIDER'.

IF CODED '2' (HOSPITAL EMERGENCY ROOM), FLAG THIS USC PROVIDER AS 'HOSPITAL BASED'.

NOTE: FOR QUESTIONS AC06 - AC12, THE CONTEXT
HEADER WILL DISPLAY THE PERSON-PROVIDER NAME IF
THE USC PROVIDER BEING ASKED ABOUT IS FLAGGED AS
'PERSON-TYPE-PROVIDER' OR 'PERSON-IN-FACILITYPROVIDER'. IF THE USC PROVIDER BEING ASKED ABOUT
IS FLAGGED AS 'FACILITY-TYPE-PROVIDER', THE
CONTEXT HEADER WILL DISPLAY THE FACILITY-PROVIDER
NAME.

AC07

====

PROV.HSBASED PROVIDER IS HOSPITAL BASED	
PROV.HSOWNED	IS CLINIC/OP DEPT OWNED BY HS OR PRIVATE

 $\{ \texttt{PERSON'S FIRST MIDDLE AND LAST NAME} \} \quad \{ \texttt{NAME OF MEDICAL CARE PROVIDER.....} \}$

Is this clinic or outpatient department owned and operated by the hospital or is this a private doctor's office located at the hospital?

OWNED AND OPERATED BY HOSPITAL	1
PRIVATE DOCTOR'S OFFICE	2
REF	-7
DK	-8

[Code One]

if CODED '1' (OWNED AND OPERATED BY HOSPITAL) OR
'-8' (DON'T KNOW), FLAG THIS USC PROVIDER AS
'HOSPITAL BASED'.

BOX_03

| IF THIS USC PROVIDER IS FLAGGED AS 'HOSPITAL | BASED', CONTINUE WITH AC08

OTHERWISE, GO TO AC09A

====

USCP.YGOTOUSC	MAIN REASON PERS GOES TO USC PROV
,	

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE PROVIDER.....}

What is the **main** reason (PERSON) usually (go/goes) to (PROVIDER), that is, {someone who works at} a {hospital emergency room/hospital clinic or outpatient department}, for health care?

PREFERS/LIKES THIS AS A SOURCE OF CARE	1	{AC09}
DON'T KNOW WHERE ELSE TO GO	2	{AC09}
CAN'T AFFORD TO GO ELSEWHERE	3	{AC09}
MY DOCTOR HAS AN OFFICE AT THE OUTPATIENT		
DEPARTMENT/CLINIC	4	{AC09}
ONLY CARE AVAILABLE WHEN (PERSON) HAS		
TIME TO GO	5	{AC09}
CONVENIENCE	6	{AC09}
BEST PLACE TO GET CARE FOR MY HEALTH		
CONDITION	7	{AC09}
OTHER REASON	91	
REF	-7	{AC09A}
DK	-8	{AC09A}

[Code One]

DISPLAY 'someone who works at' IF THIS USC
PROVIDER IS FLAGGED AS 'PERSON-IN-FACILITY-

PROVIDER IS FLAGGED AS 'PERSON-IN-FACILITY-PROVIDER'. OTHERWISE, USE A NULL DISPLAY.

DISPLAY 'hospital emergency room' IF AC06 WAS CODED '2' (HOSPITAL EMERGENCY ROOM) DURING ANY LOOP FOR THIS USC PROVIDER. DISPLAY 'hospital clinic or outpatient department' IF AC07 WAS CODED '1' (OWNED AND OPERATED BY HOSPITAL) OR '-8' (DON'T KNOW) DURING ANY LOOP FOR THIS USC PROVIDER.

AC080V

=====

USCP.GOTORSOS	MAIN REAS PERS GOES TO USC: OTH SPECIFY

ENTER OTHER REASON:

[Enter Other Sp	ecify]	
REF		 -7
DK		 -8

AC09

====

USCP.NOREASON	OTH REAS GOTO USC: NO OTHER REASONS
USCP.LIKESUSC	OTH REAS GOTO USC: PREFERS/LIKES USC
USCP.DKELSEWH	OTH REAS GOTO USC: DK WHERE ELSE TO GO
USCP.AFFORD	OTH REAS GOTO USC: CAN'T AFFORD ELSEWHER
USCP.OFFICE	OTH REAS GOTO USC: OFFICE AT OP DEPT
USCP.AVAILTIM	OTH REAS GOTO USC: ONLY CARE AVLBL/TIME
USCP.CONVENNC	OTH REAS GOTO USC: CONVENIENCE
USCP.BSTPLACE	OTH REAS GOTO USC: BEST PLACE FOR COND
USCP.OTHREAS	OTH REAS GOTO USC: OTHER REASON

 $\{ \texttt{PERSON'S FIRST MIDDLE AND LAST NAME} \} \quad \{ \texttt{NAME OF MEDICAL CARE PROVIDER.....} \}$

What are the other reasons (PERSON) usually (go/goes) to (PROVIDER) for health care?

CODE ALL THAT APPLY.

NO OTHER REASONS	0
PREFERS/LIKES THIS AS A SOURCE OF CARE	1
DON'T KNOW WHERE ELSE TO GO	2
CAN'T AFFORD TO GO ELSEWHERE	3
MY DOCTOR HAS AN OFFICE AT THE OUTPATIENT	
DEPARTMENT/CLINIC	4
ONLY CARE AVAILABLE WHEN (PERSON) HAS	
TIME TO GO	
CONVENIENCE	6
BEST PLACE TO GET CARE FOR MY HEALTH	
CONSTITUTION	7
OTHER REASON	91
REF	
DK	-8

[Code All That Apply]

IF CODED '91' (OTHER REASON) ALONE OR IN COMBINATION WITH OTHER CODES, CONTINUE WITH AC090V
OTHERWISE, GO TO AC09A
EDIT: IF CODED '0' (NO OTHER REASONS), '-7' (REFUSED), OR '-8 (DON'T KNOW) IN THE FIRST FIELD, NO OTHER REASON CATEGORY CAN BE CODED. IF CODED '0' (NO OTHER REASONS), '-7' (REFUSED), OR '-8' (DON'T KNOW), IN A FIELD OTHER THAN THE FIRST FIELD AND A SUBSEQUENT CODE IS ENTERED, DISPLAY THE FOLLOWING MESSAGE: 'INVALID RESPONSE. PRESS ENTER ON A BLANK FIELD.'
OTH DE AS COTO HOS OTHER ORESIEV
OTH REAS GOTO USC: OTHER SPECIFY ENTER OTHER REASON:
ENTER OTHER READON.
[Enter Other Specify] -7 REF -7 DK -8
HOW DOES PERSON GET TO USC PROVIDER?
How does (PERSON) usually get to (PROVIDER)?
DRIVE/IS DRIVEN 1
TAXI, BUS, TRAIN, OTHER
PUBLIC TRANSPORTATION 2
WALKS 3
REF7 DK8
DK8

AC090V =====

AC09A =====

USCP.OTHRSOS

USCP.GETTOUSC

В	0	X		0	4
_	_	_	_	_	_

_	
	IF THIS USC PROVIDER IS FLAGGED AS 'PERSON-
ĺ	TYPE-PROVIDER' OR 'PERSON-IN-FACILITY-PROVIDER'
	AND AC10 WAS NOT ALREADY ASKED FOR THIS USC
	PROVIDER IN AN EARLIER LOOP, CONTINUE WITH AC10
-	
. –	
	OTHERWISE, GO TO END_LP01

AC10

====

PROV.MEDTYPE IS PROV A MD OR SOME OTHER TYPE MED PERS

 $\{ \texttt{PERSON'S FIRST MIDDLE AND LAST NAME} \} \quad \{ \texttt{NAME OF MEDICAL CARE PROVIDER.....} \}$

Is (PROVIDER) a medical doctor?

YES	1	{AC12}
NO	2	
REF	-7	{END_LP01}
DK	-8	{END_LP01}

PRESS F1 FOR DEFINITION OF MEDICAL DOCTOR.

====

PROV.OTHTYPE

{PERSON'S	_	MIDDLE	AND	LAST	NAME }	{NAME	OF	MEDICAL	CARE
PROVIDER	}								

WHAT OTH TYPE OF MED PERS IS PROV?

Is (PROVIDER) a nurse, nurse practitioner, physician's assistant, midwife, or some other kind of person?

CODE '5' IF CHIROPRACTOR VOLUNTEERED AS TYPE OF MEDICAL PERSON.

NURSE		
NURSE PRACTITIONER		
PHYSICIAN'S ASSISTANT		
MIDWIFE	4	{END_LP01}
CHIROPRACTOR	5	{END_LP01}
OTHER	91	
REF	-7	{END_LP01}
DK	-8	{END_LP01}

[Code One]

PRESS F1 FOR DEFINITIONS OF ANSWER CATEGORIES.

AC110V

=====

PROV.MDTYPEOS	TYPE OF MEDICAL PERSON: OTHER SPECIFY
---------------	---------------------------------------

ENTER OTHER:

[Enter Other Specify]	{END_LP01}
REF7	{END_LP01}
DK8	{END_LP01}

AC12 ====	
PROV.MDSPECLT	WHAT IS PROV'S SPECIALTY?
•	RSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
Wha	t is (PROVIDER)'s specialty?
	GENERAL/FAMILY PRACTICE 1 {END_LP01} INTERNAL MEDICINE 2 {END_LP01} PEDIATRICS 3 {END_LP01} OB/GYN 4 {END_LP01} SURGERY 5 {END_LP01} CHIROPRACTOR 6 {END_LP01} OTHER 91 REF -7 {END_LP01} DK -8 {END_LP01}
	[Code One]
AC12OV ====== PROV.MDSPECOS	PROV'S SPECIALTY: OTHER SPECIFY
	ER OTHER:
	[Enter Other Specify] -7 REF -8
END_LP01	
	CYCLE ON NEXT PERSON IN THE RU-MEMBERS-ROSTER WHO MEETS THE CONDITIONS STATED IN THE LOOP DEFINITION
	IF NO OTHER PERSONS MEET THE STATED CONDITIONS, END LOOP_01 AND CONTINUE WITH BOX_05

В	0	X	_	0	5
=	=	=	=	=	=

IF AT LEAST ONE PROVIDER FLAGGED AS 'USC PROVIDER' ON THE RU-MEDICAL-PROVIDERS-ROSTER, CONTINUE WITH LOOP_02

OTHERWISE, GO TO AC22

LOOP_02

FOR EACH ELEMENT IN THE RU-MEDICAL-PROVIDERS-ROSTER, ASK AC13-END_LP02

LOOP DEFINITION: LOOP_02 COLLECTS DETAILED
INFORMATION ON EACH UNIQUE USUAL SOURCE OF CARE
PROVIDER IDENTIFIED FOR THIS RU. THIS LOOP CYCLES
ON PROVIDERS WHO MEET THE FOLLOWING CONDITION:

- PROVIDER FLAGGED AS 'USC PROVIDER' DURING THE CURRENT ROUND FOR A CURRENT RU MEMBER.

NOTE: IF THE USC PROVIDER BEING LOOPED ON IS
FLAGGED AS 'PERSON-TYPE-PROVIDER' OR 'PERSON-INFACILITY-PROVIDER' THE CONTEXT HEADER IN LOOP_02
WILL DISPLAY THE PERSON-PROVIDER NAME. IF THE USC
PROVIDER BEING LOOPED ON IS FLAGGED AS 'FACILITYTYPE-PROVIDER' THE CONTEXT HEADER IN LOOP_02 WILL
DISPLAY THE FACILITY-PROVIDER NAME.

AC13

{NAME OF MEDICAL CARE PROVIDER.....}

The next few questions ask about the experience (READ NAME(S) BELOW) have had with (PROVIDER). Please think about their overall experiences when answering the following questions.

TO SCROLL, USE ARROW KEYS. TO LEAVE SCREEN, PRESS ESC.

- [1. First Name, [Middle Name], Last Name-65]
- [2. First Name, [Middle Name], Last Name-65]
- [3. First Name, [Middle Name], Last Name-65]

ROSTER DEFINITION: THIS ITEM DISPLAYS ALL PERSONS ON THE RU-MEMBERS-ROSTER WHO MEET THE FOLLOWING CONDITION:

- PERSON IDENTIFIED PROVIDER BEING ASKED ABOUT AS PERSON'S USC PROVIDER FOR THE CURRENT ROUND

_	_	_	_
_	_	_	_

USCP.MINORPRB	GOTO USC FOR ROUTINE OR MINOR HLTH PROB?
USCP.PREVENTV	GOTO USC FOR PREVENTIVE HEALTH CARE?
USCP.REFERRAL	GOTO USC FOR REFERRALS?

	{NAME OF MEDICAL CARE PROVIDER}
	Is (PROVIDER) the $\{person/place\}$ they would go to for
	YES = 1 $NO = 2$
AC14_01	a. New health problems? (
AC14_02	b. Preventive health care, such as general checkups, examinations, and immunizations? (
AC14_03	c. Referrals to other health professionals when needed?
	PRESS F1 FOR DEFINITION OF PREVENTIVE HEALTH CARE AND REFERRAL

_____ DISPLAY 'person' IF THE USC PROVIDER BEING LOOPED ON IS FLAGGED AS 'PERSON-TYPE-PROVIDER' OR 'PERSON-IN-FACILITY-PROVIDER'. DISPLAY 'place' IF USC PROVIDER BEING LOOPED ON IS FLAGGED AS 'FACILITY-TYPE-PROVIDER'.

ALLOW '-7' (REFUSED) AND '-8' (DON'T KNOW) ON ALL FORM ITEMS.

IF AC06 WAS CODED '2' (HOSPITAL EMERGENCY ROOM)

FOR THIS USC PROVIDER, GO TO AC19

OTHERWISE, CONTINUE WITH AC15

AC15

====

USCP.OFFHOURS	DO	DOES USC HAVE OFFICE HRS AT NIGHT/WKEND?											
$\{\mathtt{NAME}$	OF	MEDICAL	CARE	PROVIDER}									

Does (PROVIDER) have office hours at night or on weekends?

YE	S																			1
NO																				2
RE:	F																			-7
DK																				-8

AC16

====

USCP.APPORWLK HAVE APPOINTMENT OR WALK IN?

{NAME OF MEDICAL CARE PROVIDER.....}

When they go to (PROVIDER), do they usually have an appointment ahead of time, just walk in, or sometimes have an appointment and sometimes not?

[Code One]

====

USCP.APPDIFF HOW DIFFICULT IS IT TO GET APPOINTMENTS? {NAME OF MEDICAL CARE PROVIDER.....} How difficult is it to get appointments with (PROVIDER) on short notice, for example, within one or two days? Would you say it is ... {IF ASKED WHAT IS MEANT BY 'APPOINTMENTS WITH (PROVIDER)', SAY: This refers to appointments with any medical person at (PROVIDER), not necessarily a specific medical person.} very difficult, 1 somewhat difficult, 2 not too difficult, or 3 not at all difficult? 4 REF -7 DK -8 [Code One] _____ DISPLAY 'IF ASKED ... person.' IF USC PROVIDER BEING LOOPED ON IS FLAGGED AS A 'FACILITY-TYPE-PROVIDER'. OTHERWISE, USE A NULL DISPLAY.

AC18

====

USCP.WAITTIME	HOW LONG DO THEY USUALLY HAVE TO WAIT?
---------------	----------------------------------------

{NAME OF MEDICAL CARE PROVIDER.....}

If they arrive on time for an appointment, about how long do they usually have to wait before seeing {a medical person at} (PROVIDER)?

LESS THAN 5 MINUTES	1
5 TO 15 MINUTES	2
16 TO 30 MINUTES	3
31 MINUTES TO 59 MINUTES	4
1 TO 2 HOURS	5
MORE THAN 2 HOURS	6
REF	-7
DK	-8

[Code One]

DISPLAY 'a medical person at' IF USC PROVIDER
BEING LOOPED ON IS FLAGGED AS 'FACILITY-TYPEPROVIDER'. OTHERWISE, USE A NULL DISPLAY.

====

USCP.PHONEDIF		HOW DIFF TO TALK TO PROV OVER THE PHONE?	
	{NAME (OF MEDICAL CARE PROVIDER}	
		<pre>fficult is it to contact {a medical person at} he telephone about a health problem?</pre>	(PROVIDER)
1	Would :	you say it is	
	n n n R	rery difficult,	
		[Code One]	
	<u> </u>	DISPLAY 'a medical person at' IF USC PROVIDER BEING LOOPED ON IS FLAGGED AS 'FACILITY-TYPE- PROVIDER'. OTHERWISE, USE A NULL DISPLAY.	

MEPS	FAMES	Panel	2	Round	4	Access	to	Care	(AC)	Section
April	L 30, :	1998								

AC19A	
=====	
USCP.PRLISTEN	DOES USC PROV LISTEN?
	{NAME OF MEDICAL CARE PROVIDER}
	Does (PROVIDER) generally listen to them and give them the information needed about health and health care?
	YES 1 NO 2 REF - 7 DK -8
AC19B =====	
USCP.TREATMNT	DOES USC PROV ASK ABOUT OTH TREATMENTS?
	{NAME OF MEDICAL CARE PROVIDER}
	Does (PROVIDER) usually ask about prescription medications and treatments other doctors may give them?
	YES
AC19C	
USCP.CONFIDNT	CONFIDENT IN USC PROV'S ABILITY?
	{NAME OF MEDICAL CARE PROVIDER}
	Are they confident in (PROVIDER)'s ability to help when they have a medical problem?
	YES 1

 NO
 2

 REF
 -7

 DK
 -8

AC19D ===== USCP.PROSTAFF HOW SATISFIED W/ PROFESSIONAL STAFF? {NAME OF MEDICAL CARE PROVIDER.....} How satisfied are they with the professional staff at {(PROVIDER)/(PROVIDER)'s office}? Would you say ... very satisfied, 1 somewhat satisfied, 2 not too satisfied, or not at all satisfied? 4 REF -7 DK-8 [Code One] PRESS F1 FOR DEFINITION OF PROFESSIONAL STAFF. DISPLAY '(PROVIDER)' IF USC PROVIDER BEING LOOPED ON IS FLAGGED AS 'FACILITY-TYPE-PROVIDER'. OTHERWISE, DISPLAY '(PROVIDER)'s office'. AC19E ===== USCP.USC_CARE HOW SATISFIED W/ QUALITY OF CARE FRM USC {NAME OF MEDICAL CARE PROVIDER.....} Overall, how satisfied are they with the quality of care received from (PROVIDER)? Would you say ... very satisfied, 1 somewhat satisfied, 2 not too satisfied, or 3 not at all satisfied? 4 REF -7 DK -8 [Code One]

> DISPLAY '(PROVIDER)' IF USC PROVIDER BEING LOOPED ON IS FLAGGED AS 'FACILITY-TYPE-PROVIDER'. OTHERWISE, DISPLAY '(PROVIDER)'s office'.

> _____

Ε	N	D	_	L	Ρ	0	2
_	_	_	_	_	_	_	_

| CYCLE ON NEXT PROVIDER IN THE RU-MEDICAL-| PROVIDERS-ROSTER WHO MEETS THE CONDITIONS STATED | | IN THE LOOP DEFINITION. |

IF NO OTHER PROVIDERS MEET THE STATED CONDITIONS, | END LOOP_02 AND CONTINUE WITH AC20

AC20

====

HOME.CHNG_USC HAS ANYONE CHANGED USC IN LAST 12 MNTHS?

Over the last year, has anyone in the family changed the person or place they usually go if they are sick or need advice about their health?

YES																		1	
NO																		2	{AC24}
REF																		-7	{AC24}
DK																		-8	{AC24}

====

HOME.YCHNGUSC	WHY DID THIS CHANGE OCCUR?
---------------	----------------------------

Why did this change occur?

FAMILY/PERSON CHANGED INSURANCE PLANS	1	{AC24}
INSURANCE PLAN CHANGED DOCTORS IT		
COVERS	2	{AC24}
DISSATISFIED WITH QUALITY OF CARE	3	{AC24}
HEALTH CARE NEEDS CHANGED	4	{AC24}
TOO FAR AWAY	5	{AC24}
MOVED TO NEW AREA	6	{AC24}
OLD PROVIDER NO LONGER AVAILABLE	7	{AC24}
OTHER	91	
REF	-7	{AC24}
DK	-8	{AC24}

[Code One]

AC210V

=====

HOME.CHNGRSOS REASON	CHANGED USC: OTHER SPECIFY
----------------------	----------------------------

ENTER OTHER:

[Enter Other Specify]	$\{\mathtt{AC24}\}$
REF	·7 {AC24}
DK	·8 {AC24}

AC22

====

HOME.ANYUSC	HAS ANYONE HAD A USC IN LAST 12 MONTHS?
-------------	-----------------------------------------

Within the last year, has anyone in the family had a person or place they usually go if they are sick or need advice about their health?

YES	1	
NO	2	{AC24}
REF	-7	{AC24}
DK	-8	{AC24}

AC23

====

HOME.YNOMORE	WHY DON'T THEY HAVE A USC ANYMORE?
--------------	------------------------------------

Why do they not have a usual source of health care any more?

FAMILY/PERSON CHANGED INSURANCE PLANS	1	{AC24}
INSURANCE PLAN CHANGED DOCTORS IT		
COVERS	2	{AC24}
DISSATISFIED WITH QUALITY OF CARE	3	{AC24}
HEALTH CARE NEEDS CHANGED	4	{AC24}
TOO FAR AWAY	5	{AC24}
MOVED TO NEW AREA	6	{AC24}
OLD PROVIDER NO LONGER AVAILABLE	7	{AC24}
OTHER	91	
REF	-7	{AC24}
DK	-8	{AC24}

[Code One]

AC230V

=====

HOME.RSNUSCOS REASON NO USC ANYMORE: OTHER SPECIFY

ENTER OTHER:

 [Enter Other Specify]
 -7

 DK
 -8

AC24

====

HOME.NOCARE DID ANYONE GO W/OUT HEALTH CARE?

During the last year, did any family member not receive a doctor's care or prescription medications because the family needed the money to buy food, clothing, or pay for housing?

YES	5																			1
NO																				2
REF	7																			-7
DK																				-8

AC24A

=====

HOME.HCNEEDS	HOW SATISFIED THAT FAMILY CAN GET HC?

Overall, how satisfied are you that members of your family can get health care if they need it?

Would you say ...

very satisfied,	1
somewhat satisfied,	2
not too satisfied, or	3
not at all satisfied?	4
REF	-7
DK	-8

[Code One]

AC25

HOME.OBTAINHC	DID ANYONE HAVE DIFFICLTY OBT HLTH CARE?
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SHOW CARD AC-1.

In the last 12 months, did anyone in the family experience difficulty in obtaining any type of health care, delay obtaining care, or not receive health care they thought they needed due to any of the reasons listed on this card?

YES	1	
NO		
REF	-7	{BOX_06}
DK	-8	{BOX 06}

AC25A

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HOME.MAINPROB	MAIN REASON EXPERIENCED DIFFICULTY

SHOW CARD AC-1.

Which of these is the **main** problem that caused family members' difficulty, delay, or not receiving needed health care?

COULDN'T AFFORD CARE	1	
COVER, OR PAY FOR CARE	2	
PRE-EXISTING CONDITION		
INSURANCE REQUIRED A REFERRAL, BUT	J	
COULDN'T GET ONE	4	
DOCTOR REFUSED TO ACCEPT FAMILY'S	-	
INSURANCE PLAN	5	
MEDICAL CARE TOO FAR AWAY		
CAN'T DRIVE/DON'T HAVE CAR/NO PUBLIC	Ü	
TRANSPORTATION AVAILABLE	7	
TOO EXPENSIVE TO GET THERE		
HEARING IMPAIRMENT OR LOSS	-	
DIFFERENT LANGUAGE	-	
HARD TO GET INTO BUILDING		
HARD TO GET AROUND INSIDE BUILDING		
NO APPROPRIATE EQUIPMENT IN OFFICE		
COULDN'T GET TIME OFF WORK		
DIDN'T KNOW WHERE TO GO TO GET CARE		
WAS REFUSED SERVICES	16	
COULDN'T GET CHILD CARE	17	
DIDN'T HAVE TIME OR TOOK TOO LONG	18	
OTHER	91	
REF	-7 {I	30X 06}
DK		_ ,
	,	,

[Code One]

SHOW CARD AC-1 WILL HAVE TOPIC HEADINGS. ANSWER CATEGORIES WERE ABBREVIATED IN ORDER TO SAVE SCREEN SPACE.

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HOME.NO_OTPRB	PROB OBT HC: NO OTHER PROBLEMS
HOME.NOAFFORD	PROB OBT HC: COULDN'T AFFORD CARE
HOME.ICNOPAY	PROB OBT HC: INS COMPANY WON'T PAY
HOME.PREEXIST	PROB OBT HC: PRE-EXISTING CONDITION
HOME.ICREQREF	PROB OBT HC: INS CO. REQUIRED REFERRAL
HOME.REFPLAN	PROB OBT HC: DR REFUSED INS PLAN
HOME.DISTANCE	PROB OBT HC: DISTANCE
HOME.PUBTRANS	PROB OBT HC: PUBLIC TRANSPORTATION
HOME.EXPENSIV	PROB OBT HC: TOO EXPENSIVE TO GET THERE
HOME.HEARING	PROB OBT HC: HEARING IMPAIRMENT/LOSS
HOME.OTHNOOBT	PROB OBT HC: OTHER
HOME.LBARRIER	PROB OBT HC: LANGUAGE BARRIER
HOME.INTOBLDG	PROB OBT HC: HARD TO GET INTO BUILDING
HOME.INSIDE	PROB OBT HC: HARD TOGET ARND INSIDE BLDG
HOME.EQUIPMNT	PROB OBT HC: NO APPR EQUIPMENT IN OFFICE
HOME.OFFWORK	PROB OBT HC: COULDN'T GET TIME OFF WORK
HOME.WHEREGO	PROB OBT HC: DIDN'T KNOW WHERE TO GO
HOME.REFSERVS	PROB OBT HC: WAS REFUSED SERVICES
HOME.CHLDCARE	PROB OBT HC: COULDN'T GET CHILD CARE
HOME.NOTIME	PROB OBT HC: NO TIME/TOOK TOO LONG

SHOW CARD AC-1.

What are the other problems that caused family members' difficulty, delay, or not receiving needed health care?

CODE ALL THAT APPLY.

NO OTHER PROBLEMS	0
COULDN'T AFFORD CARE	1
INSURANCE COMPANY WOULDN'T APPROVE,	
COVER, OR PAY FOR CARE	2
PRE-EXISTING CONDITION	3
INSURANCE REQUIRED A REFERRAL, BUT	
COULDN'T GET ONE	4
DOCTOR REFUSED TO ACCEPT FAMILY'S	
INSURANCE PLAN	5
MEDICAL CARE TOO FAR AWAY	6
CAN'T DRIVE/DON'T HAVE CAR/NO PUBLIC	
TRANSPORTATION AVAILABLE	7
TOO EXPENSIVE TO GET THERE	8
HEARING IMPAIRMENT OR LOSS	9
DIFFERENT LANGUAGE	10
HARD TO GET INTO BUILDING	11
HARD TO GET AROUND INSIDE BUILDING	12
NO APPROPRIATE EQUIPMENT IN OFFICE	13
COULDN'T GET TIME OFF WORK	14
DIDN'T KNOW WHERE TO GO TO GET CARE	15
WAS REFUSED SERVICES	16
COULDN'T GET CHILD CARE	17
DIDN'T HAVE TIME OR TOOK TOO LONG	18
OTHER	91

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	REF7 DK8
	[Code All That Apply]
	EDIT: IF CODED '0' (NO OTHER REASONS), '-7' (REFUSED), OR '-8 (DON'T KNOW) IN THE FIRST FIELD, NO OTHER REASON CATEGORY CAN BE CODED. IF CODED '0' (NO OTHER REASONS), '-7' (REFUSED), OR '-8' (DON'T KNOW), IN A FIELD OTHER THAN THE FIRST FIELD AND A SUBSEQUENT CODE IS ENTERED, DISPLAY THE FOLLOWING MESSAGE: 'INVALID RESPONSE. PRESS ENTER ON A BLANK FIELD.'
	SHOW CARD AC-1 WILL HAVE TOPIC HEADINGS. ANSWER CATEGORIES WERE ABBREVIATED IN ORDER TO SAVE SCREEN SPACE.
BOX_06 =====	
l .	GO TO NEXT QUESTIONNAIRE SECTION