

**2020 Michigan Home and
Community-Based Services (HCBS)
Consumer Assessment of Healthcare
Providers and Systems (CAHPS)
Member Experience Report**

November 2020



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1. Introduction

The Michigan Department of Health and Human Services (MDHHS) assesses the perceptions and experiences of members enrolled in the MDHHS Integrated Care Organization (ICO) health plans as part of its process for evaluating the quality of health care services provided to eligible adult members in the ICO Program (also referred to as MI Health Link Program). MDHHS contracted with Health Services Advisory Group, Inc. (HSAG) to administer and report the results of the Consumer Assessment of Healthcare Providers and Systems Home and Community-Based Services (HCBS CAHPS®) survey for members that received a qualifying personal care service or were currently enrolled in the MI Health Link HCBS waiver.¹⁻¹

This report presents the 2020 HCBS CAHPS results of adult members that received a qualifying personal care service or were currently enrolled in the MI Health Link HCBS waiver. A statewide sample of 2,000 adult members was selected across the health plans. The survey instrument selected was the HCBS CAHPS survey without the Supplemental Employment module. The surveys were completed by adult members from July to August 2020. Seven MI Health Link health plans participated in the 2020 survey as listed in Table 1-1 below.

Table 1-1—Participating Health Plans

Plan Name	Plan Name Abbreviation
Aetna Better Health Premier Plan	Aetna Better Health Premier Plan
AmeriHealth Caritas VIP Care Plus	AmeriHealth Caritas
HAP Empowered	HAP Empowered
Meridian Complete	Meridian Complete
Michigan Complete Health	Michigan Complete Health
Molina Dual Options MI Health Link Medicare-Medicaid Plan	Molina Dual Options
Upper Peninsula Health Plan MI Health Link Medicare-Medicaid Plan	Upper Peninsula Health Plan

Report Overview

Results presented in this report include:

- Three global ratings: *Rating of Personal Assistance and Behavioral Health Staff*, *Rating of Homemaker*, and *Rating of Case Manager*.
- Seven composite measures: *Reliable and Helpful Staff*, *Staff Listen and Communicate Well*, *Helpful Case Manager*, *Choosing the Services that Matter to You*, *Transportation to Medical Appointments*, *Personal Safety and Respect*, and *Planning Your Time and Activities*.

¹⁻¹ CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

- Three recommendation measures: *Recommend Personal Assistance/Behavioral Health Staff*, *Recommend Homemaker*, and *Recommend Case Manager*.
- Five unmet need measures: *Unmet Need in Dressing/Bathing*, *Unmet Need in Meal Preparation/Eating*, *Unmet Need in Medication Administration*, *Unmet Need in Toileting*, and *Unmet Need with Household Tasks*.
- One physical safety measure, *Hit or Hurt by Staff*.

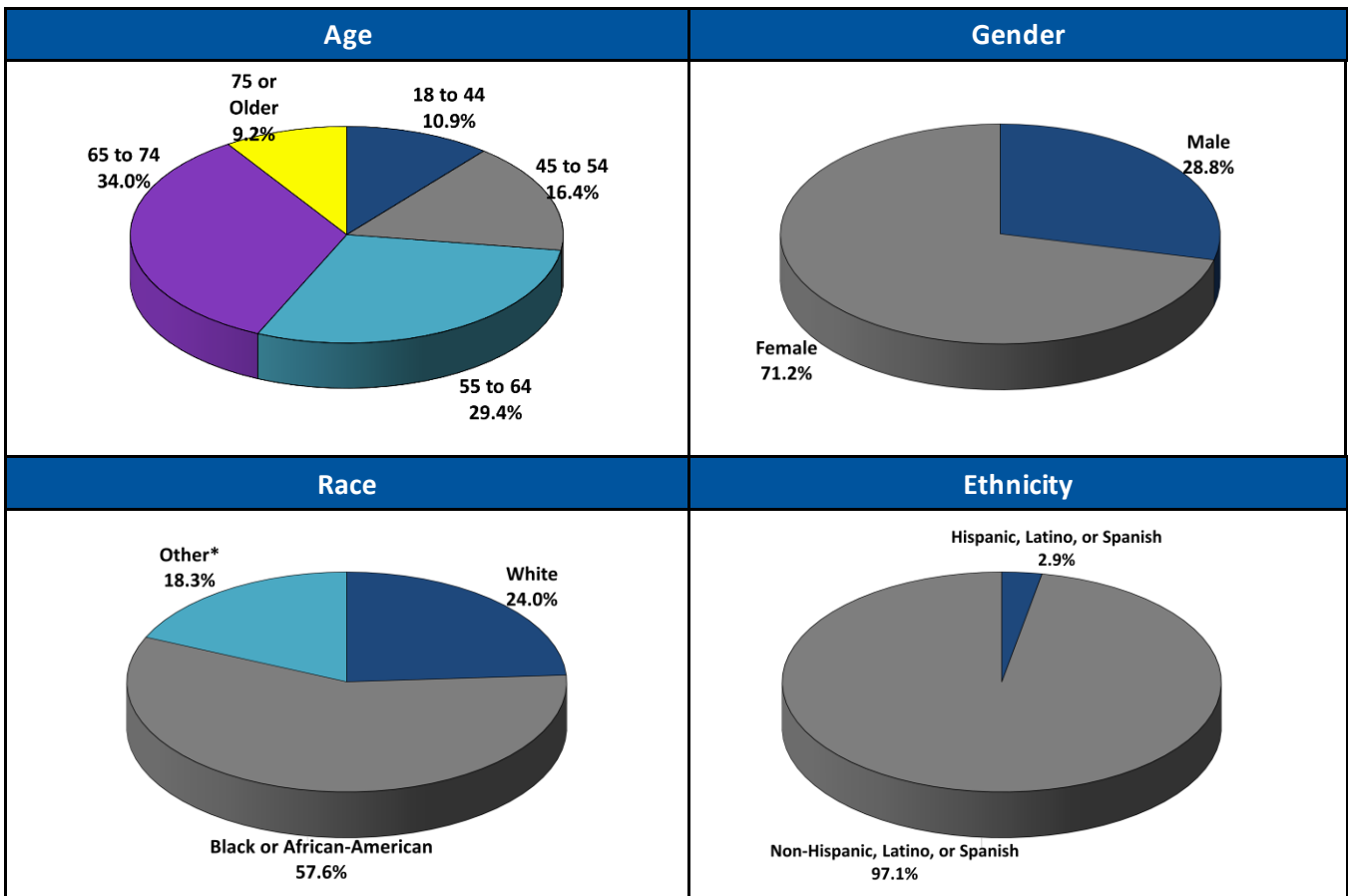
HSAG presents aggregate statewide results (i.e., the MI Health Link Program) throughout the report.

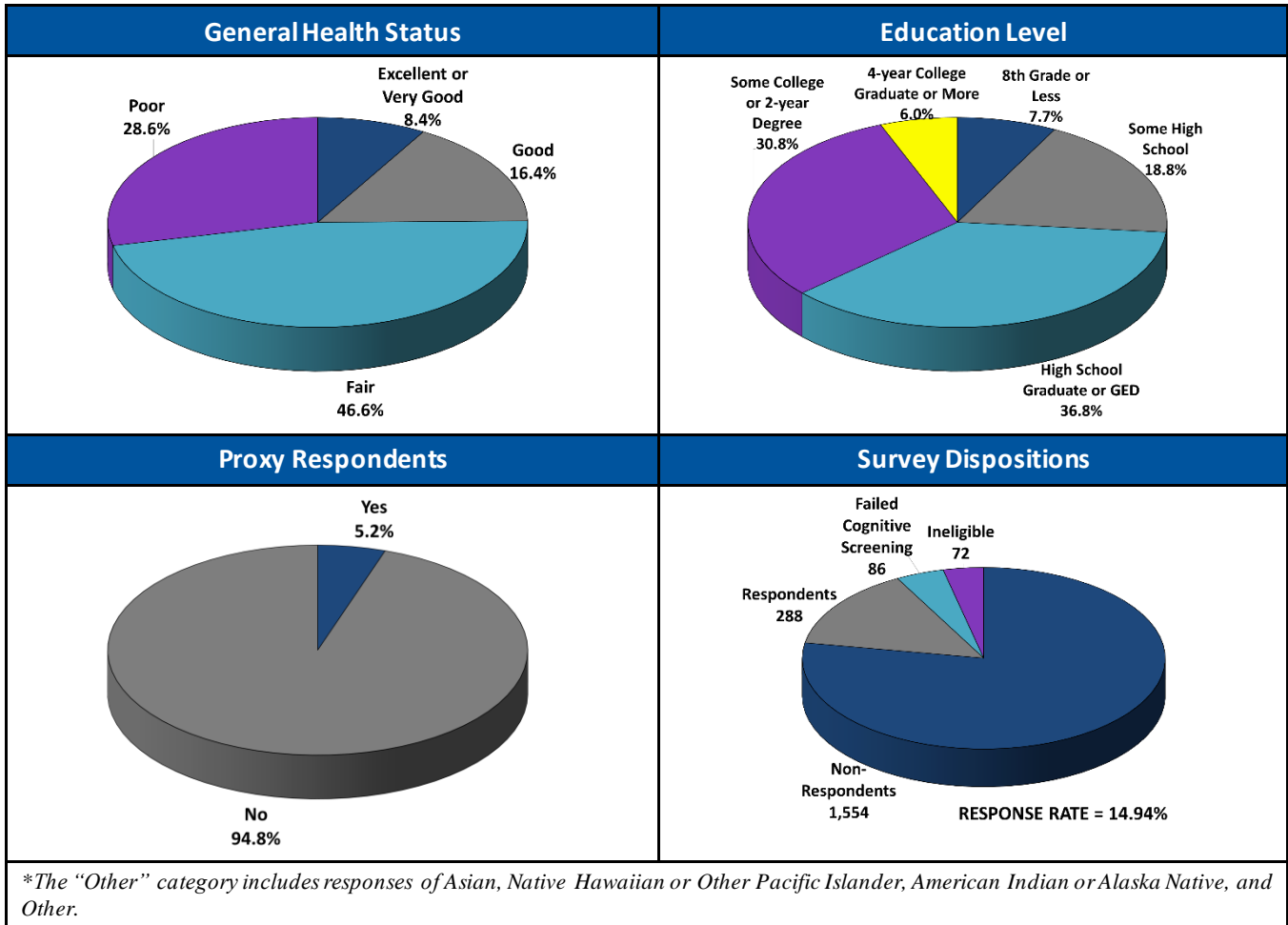
Key Findings

Survey Demographics and Dispositions

Table 1-2 provides an overview of the adult member demographics and survey dispositions for the MI Health Link Program. Please note, some percentages displayed in the table below may not total 100 percent due to rounding.

Table 1-2— Member Demographics and Survey Dispositions





Survey Results

HSAG identified the following measures that had low scores compared to other measures:

- *Planning Your Time and Activities* composite measure (73.9 mean score)
- *Transportation to Medical Appointments* composite measure (87.3 mean score)

In addition, HSAG evaluated the items (i.e., survey questions) that make up each composite measure to determine if there were any composite items that had a lower score (i.e., performed poorer) than the other composite items as shown in Table 1-3.

Table 1-3— Composite Item Mean Scores

Composite Measure	Mean Scores
<i>Reliable and Helpful Staff</i>	90.0
Informed if staff cannot come	70.1
<i>Staff Listen and Communicate Well</i>	92.7
Staff easy to understand	70.4
Homemakers easy to understand	82.2*
<i>Transportation to Medical Appointments</i>	87.3
Timely pickup	80.5*
<i>Personal Safety and Respect</i>	94.7
Someone to talk to	84.1
<i>Planning Your Time and Activities</i>¹⁻²	73.9
Community	48.5
Together with friends	61.7
* Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.	

¹⁻² The coronavirus (COVID-19) pandemic may have had an impact on these measures’ scores; therefore, caution should be exercised when evaluating these results.

This section provides a comprehensive overview of the HCBS CAHPS survey administration protocol and analytic methodology. It is designed to provide supplemental information to the reader that may aid in the interpretation and use of the HCBS CAHPS results presented in this report.

Survey Overview

The survey instrument selected was the HCBS CAHPS survey. The Centers for Medicare & Medicaid Services (CMS) developed the HCBS CAHPS survey for voluntary use by state Medicaid programs. As part of the Testing Experience and Functional Tools (TEFT) Demonstration, CMS funded the development and testing of the survey, which took place from 2010 through 2016. The survey was developed to be administered by an interviewer in person or by telephone.²⁻¹ The HCBS CAHPS survey received the CAHPS trademark on June 22, 2016.²⁻²

The goal of the HCBS CAHPS survey is to gather direct feedback from Medicaid members receiving HCBS about their experiences and the quality of the long-term services and supports (LTSS) they receive. The survey provides state Medicaid agencies with standard individual experience metrics for HCBS programs that are applicable to all populations served by these programs, including frail elderly and people with one or more disabilities, such as physical disabilities, cognitive disabilities, intellectual impairments, or disabilities due to mental illness.

2020 HCBS CAHPS Performance Measures

The survey includes 96 core questions that yield 19 measures. These measures include three global ratings, seven composite measures, three recommendation measures, five unmet need measures, and one physical safety measure. The global ratings reflect overall member experience with the personal assistance and behavioral health staff, homemaker, and case manager. The composite measures are sets of questions grouped together to address different aspects of care (e.g., “*Helpful Case Manager*” or “*Personal Safety and Respect*”). The recommendation measures evaluate whether a member would recommend their personal assistance and behavioral health staff, homemaker, or case manager to family and friends. The unmet need measures assess whether certain needs are not being met due to lack of staff. The physical safety measure evaluates whether any staff hit or hurt the member.

²⁻¹ HSAG only administered the HCBS CAHPS survey by telephone.

²⁻² Centers for Medicare & Medicaid Services. CAHPS Home and Community-Based Services Survey. *Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey*. November 2019. Available at: <https://www.medicare.gov/medicaid/quality-of-care/performance-measurement/cahps-hcbs-survey/index.html>. Accessed on: August 18, 2020.

Table 2-1 lists the measures included in the survey.

Table 2-1—HCBS CAHPS Measures

Global Ratings	Composite Measures	Recommendation Measures	Unmet Need Measures	Physical Safety Measure
<i>Rating of Personal Assistance and Behavioral Health Staff</i>	<i>Reliable and Helpful Staff</i>	<i>Recommend Personal Assistance/Behavioral Health Staff</i>	<i>Unmet Need in Dressing/Bathing</i>	<i>Hit or Hurt by Staff</i>
<i>Rating of Homemaker</i>	<i>Staff Listen and Communicate Well</i>	<i>Recommend Homemaker</i>	<i>Unmet Need in Meal Preparation/Eating</i>	
<i>Rating of Case Manager</i>	<i>Helpful Case Manager</i>	<i>Recommend Case Manager</i>	<i>Unmet Need in Medication Administration</i>	
	<i>Choosing the Services that Matter to You</i>		<i>Unmet Need in Toileting</i>	
	<i>Transportation to Medical Appointments</i>		<i>Unmet Need with Household Tasks</i>	
	<i>Personal Safety and Respect</i>			
	<i>Planning Your Time and Activities</i>			

Table 2-2 presents the survey language and response options for each measure. There are two types of response options for some survey questions: standard response options and alternative response options. Respondents were first provided the standard response options; however, if respondents were unable to respond to the question using the standard response options, respondents were provided the alternative response options. The alternative response options were developed to enable more members to participate in the survey.

Table 2-2—Question Language and Response Options

Question Language	Response Options	
	Standard	Alternative
Global Ratings		
<i>Rating of Personal Assistance and Behavioral Health Staff</i>		
35. Using any number from 0 to 10, where 0 is the worst help from personal assistance/behavioral health staff possible and 10 is the best help from personal assistance/behavioral health staff possible, what number would you use to rate the help you get from personal assistance/behavioral health staff?	0–10 Scale	Excellent, Very good, Good, Fair, Poor
<i>Rating of Homemaker</i>		

Question Language	Response Options	
	Standard	Alternative
46. Using any number from 0 to 10, where 0 is the worst help from homemakers possible and 10 is the best help from homemakers possible, what number would you use to rate the help you get from homemakers?	0–10 Scale	Excellent, Very good, Good, Fair, Poor
Rating of Case Manager		
54. Using any number from 0 to 10, where 0 is the worst help from case manager possible and 10 is the best help from case manager possible, what number would you use to rate the help you get from case manager?	0–10 Scale	Excellent, Very good, Good, Fair, Poor
Composite Measures and Composite Items		
Reliable and Helpful Staff		
13. In the last 3 months, how often did personal assistance/behavioral health staff come to work on time? (Staff on time to work)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
14. In the last 3 months, how often did personal assistance/behavioral health staff work as long as they were supposed to? (Staff work time supposed to)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
15. In the last 3 months, when staff could not come to work on a day that they were scheduled, did someone let you know that personal assistance/behavioral health staff could not come that day? (Informed if staff cannot come)	Yes, No	
19. In the last 3 months, how often did personal assistance/behavioral health staff make sure you had enough personal privacy when you dressed, took a shower, or bathed? (Privacy [dressing, showering, bathing])	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
37. In the last 3 months, how often did homemakers come to work on time? (Homemaker on time to work)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
38. In the last 3 months, how often did homemakers work as long as they were supposed to? (Homemaker work time supposed to)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
Staff Listen and Communicate Well		
28. In the last 3 months, how often did personal assistance/behavioral health staff treat you with courtesy and respect? (Staff courteous and respect)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
29. In the last 3 months, how often were the explanations personal assistance/behavioral health staff gave you hard to understand because of an accent or the way personal assistance/behavioral health staff spoke English? (Staff easy to understand)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
30. In the last 3 months, how often did personal assistance/behavioral health staff treat you the way you wanted them to? (Treated the way you want by staff)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
31. In the last 3 months, how often did personal assistance/behavioral health staff explain things in a way that was easy to understand? (Staff explain things in easy to understand way)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
32. In the last 3 months, how often did personal assistance/behavioral health staff listen carefully to you? (Staff listen to you)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no

Question Language	Response Options	
	Standard	Alternative
33. In the last 3 months, did you feel personal assistance/behavioral health staff knew what kind of help you needed with everyday activities, like getting ready in the morning, getting groceries, or going places in your community? (Staff know kind of help you need)	Yes, No	
41. In the last 3 months, how often did homemakers treat you with courtesy and respect? (Homemakers courteous and respectful)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
42. In the last 3 months, how often were the explanations homemakers gave you hard to understand because of an accent or the way the homemakers spoke English? (Homemakers easy to understand)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
43. In the last 3 months, how often did homemakers treat you the way you wanted them to? (Treated the way you want by homemakers)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
44. In the last 3 months, how often did homemakers listen carefully to you? (Homemakers listen)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
45. Do you feel homemakers know what kind of help you need? (Homemakers know kind of help you need)	Yes, No	
Helpful Case Manager		
49. In the last 3 months, could you contact this case manager when you needed to? (Contact case manager)	Yes, No	
51. In the last 3 months, did this case manager work with you when you asked for help with getting or fixing equipment? (Helped getting or fixing equipment)	Yes, No	
53. In the last 3 months, did this case manager work with you when you asked for help with getting other changes to your services? (Helped getting other changes to services)	Yes, No	
Choosing the Services that Matter to You		
56. In the last 3 months, did your service plan include none, some, most, or all of the things that are important to you? (Plan included important things)	None, Some, Most, All	
57. In the last 3 months, did you feel personal assistance/behavioral health staff knew what's on your service plan, including the things that are important to you? (Staff knows plan and important things)	Yes, No	
Transportation to Medical Appointments		
59. In the last 3 months, how often did you have a way to get to your medical appointments? (Way to get to appointments)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
61. In the last 3 months, were you able to get in and out of this ride easily? (In/out of ride easily)	Yes, No	
62. In the last 3 months, how often did this ride arrive on time to pick you up? (Timely pickup)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
Personal Safety and Respect		
64. In the last 3 months, was there a person you could talk to if someone hurt you or did something to you that you didn't like? (Someone to talk to)	Yes, No	

Question Language	Response Options	
	Standard	Alternative
65. In the last 3 months, did any personal assistance/behavioral health staff, homemakers, or your case managers take your money or your things without asking you first? (Staff did not take any money or things)	Yes, No	
68. In the last 3 months, did any staff yell, swear, or curse at you? (Staff do not yell, swear, or curse)	Yes, No	
Planning Your Time and Activities		
75. In the last 3 months, when you wanted to, how often could you get together with these family members who live nearby? (Together with family)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
77. In the last 3 months, when you wanted to, how often could you get together with these friends who live nearby? (Together with friends)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
78. In the last 3 months, when you wanted to, how often could you do things in the community that you like? (Community)	Never, Sometimes, Usually, Always	Mostly yes, Mostly no
79. In the last 3 months, did you need more help than you get from personal assistance/behavioral health staff to do things in your community? (Help doing things in community)	Yes, No	
80. Do you take part in deciding what you do with your time each day? (What to do with time)	Yes, No	
81. Do you take part in deciding when you do things each day – for example, deciding when you get up, eat, or go to bed? (What to do things)	Yes, No	
Recommendation Measures		
Recommend Personal Assistance/Behavioral Health Staff		
36. Would you recommend the personal assistance/behavioral health staff who help you to your family and friends if they needed help with everyday activities?	Definitely no, Probably no, Probably yes, Definitely yes	
Recommend Homemaker		
47. Would you recommend the homemakers who help you to your family and friends if they needed homemaker services?	Definitely no, Probably no, Probably yes, Definitely yes	
Recommend Case Manager		
55. Would you recommend the case manager who helps you to your family and friends if they needed case management services?	Definitely no, Probably no, Probably yes, Definitely yes	
Unmet Need Measures		
Unmet Need in Dressing/Bathing		
18. In the last 3 months, was this [dressing/bathing] because there were no personal assistance/behavioral health staff to help you?	Yes, No	
Unmet Need in Meal Preparation/Eating		

Question Language	Response Options	
	Standard	Alternative
22. In the last 3 months, was this [meal preparation/eating] because there were no personal assistance/behavioral health staff to help you?	Yes, No	
Unmet Need in Medication Administration		
25. In the last 3 months, was this [medication administration] because there were no personal assistance/behavioral health staff to help you?	Yes, No	
Unmet Need in Toileting		
27. In the last 3 months, did you get all the help you needed with toileting from personal assistance/behavioral health staff when you needed it?	Yes, No	
Unmet Need with Household Tasks		
40. In the last 3 months, was this [household tasks] because there were no homemakers to help you?	Yes, No	
Physical Safety Measure		
Hit or Hurt by Staff		
71. In the last 3 months, did any staff hit or hurt you?	Yes, No	

How Results Were Collected

Sampling Procedures

MDHHS provided HSAG with a list of all eligible adult members for the sampling frame. HSAG inspected the file records to check for any apparent problems with the files, such as missing address elements. HSAG sampled adult members who met the following criteria:

- Were 21 years of age or older as of April 30, 2020.
- Had been continuously enrolled in a plan during the last 3 months of the measurement period (i.e., February 1, 2020 to April 30, 2020), with no gaps in enrollment.
- Were currently enrolled in the MI Health Link program and had received at least one qualifying personal care service **or** were currently enrolled in the MI Health Link HCBS waiver. The qualifying services were as follows:
 - Personal care services include assistance in activities of daily living (ADLs) or instrumental activities of daily living (IADLs).
 - ADLs: eating, toileting, bathing, grooming, dressing, mobility, and transferring
 - IADLs: personal laundry, light housekeeping, shopping, meal preparation and cleanup, and medication administration
 - To determine if a member received a personal care service, all claims were considered with the following process and procedure codes:

- Procedure code T1019
- Procedure code T1019 with “CG” modifier
- Place of Service code 14 (Group Home)
- Diagnosis codes V60.89, V60.4, Z74.1, or Z74.2

One stratified sample of 2,000 members at the plan level was selected.

HSAG tried to obtain new addresses by processing sampled members’ addresses through the United States Postal Service’s National Change of Address (NCOA) system. Prior to initiating Computer Assisted Telephone Interviewing (CATI), HSAG used the Telematch telephone number verification service to locate and/or update telephone numbers for all members.

Survey Protocol

Prior to survey administration, a pre-notification letter was sent out to members alerting them to expect a telephone call to complete the survey, and assured members that the survey was endorsed by MDHHS. The pre-notification letter provided to members was in English with a Spanish back side containing the same letter text. After the pre-notification letters were mailed out, CATI was conducted for members to complete the survey over the telephone in either English or Spanish. A series of up to six CATI calls was made to each non-respondent. Table 2-3 shows the timeline used for the survey administration.

Table 2-3—Survey Timeline

Task	Timeline
Send pre-notification letters to members.	0 days
Initiate CATI interviews for members approximately 7 days after mailing the pre-notification letters.	7 days
Initiate systematic contact for all non-respondents such that up to six telephone calls are attempted at different times of the day, on different days of the week, and in different weeks.	7–52 days
Complete telephone follow-up sequence (i.e., completed interviews obtained or maximum calls reached for all non-respondents).	52 days

While HSAG attempted to obtain responses to the survey directly from members, proxy respondents were allowed to answer the questions on behalf of the member. Proxy respondents were allowed if the member was unable to participate in the survey and offered a specific individual to respond to the survey questions on their behalf. If a paid caregiver responded to the survey on behalf of the members, these completed surveys were not included in the analysis.

How Results Were Calculated and Displayed

HSAG used the scoring approach recommended by CMS in the *Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey* document. This section provides an overview of each analysis. If a cell size was fewer than 11, the measure's results were suppressed in full. Suppressed results are noted in the report as "Insufficient Data."

Response Rates

The response rate is the total number of completed surveys divided by all eligible members of the sample. A survey was assigned a disposition code of "completed" if at least one eligible question was answered, excluding the three cognitive screening questions that were administered at the beginning of the interview and the six interviewer questions used to determine survey eligibility.²⁻³ Members who were unable to answer the open-ended cognitive screening items with correct or appropriate responses did not proceed with the interview and were excluded from the survey analysis. Eligible members included the entire sample minus ineligible members. Ineligible members met at least one of the following criteria: they were deceased, were invalid (did not meet the criteria described on page 2-6), had a language barrier, or were mentally or physically incapacitated and did not have a proxy.

$$\text{Response Rate} = \frac{\text{Number of Completed Surveys}}{\text{Sample} - \text{Ineligibles}}$$

Respondent Demographics

The demographics analysis evaluated demographic information of respondents. Respondent demographic information included age, gender, race, ethnicity, education level, general health status, and proxy responses.

Alternative Scale Transformation of Data

Some survey questions in the HCBS CAHPS survey allowed respondents to complete an alternate question:

1. "How Often" questions with responses options of "Never," "Sometimes," "Usually," or "Always" were provided an alternate question with a two-point "Mostly yes" or "Mostly no" response options. For example:
 - a. *Standard question*: "In the last 3 months, how often did personal assistance/behavioral health staff work as long as they were supposed to? Would you say, Never, Sometimes, Usually, or Always?"

²⁻³ Eligible questions included any question in the survey between Question 4 and Question 96.

- b. *Alternate question:* “In the last 3 months, did personal assistance/behavioral health staff work as long as they were supposed to? Would you say, Mostly yes or Mostly no?”
- 2. Global rating questions that asked for ratings of 0–10 responses were provided an alternate five-point “Excellent,” “Very good,” “Good,” “Fair,” or “Poor” response options. For example:
 - a. *Standard question:* “Using any number from 0 to 10, where 0 is the worst help from case manager possible and 10 is the best help from case manager possible, what number would you use to rate the help you get from case manager?” Members provide a response on a 0 to 10 scale.
 - b. *Alternate question:* “How would you rate the help you get from the case manager? Would you say, Excellent, Very good, Good, Fair, or Poor?”
- 3. For age, respondents were allowed to complete an alternate question, as seen below:
 - a. *Standard question:* “What is your age?” Members provide a response based on an age category (e.g., 18 to 24 years, 25 to 34 years, etc.).
 - b. *Alternate question:* “In what year were you born?” Members respond with the year they were born.

In order to evaluate the two response options, data were recoded (i.e., transformed) into standardized response values for analysis. Table 2-4 illustrates the standard and alternative response options and the response values assigned.

Table 2-4—Response Options and Response Values

Standard Responses	Alternative Responses	Response Values
Composite Measures, Recommendations Measures, and Unmet Need and Physical Safety Measures		
Never	Mostly no	1 (Least positive option)
Sometimes		2 (Second least positive option)
Usually		3 (Third least positive option)
Always	Mostly yes	4 (Most positive option)
Global Ratings		
0–2	Poor	1 (Least positive option)
3–4	Fair	2 (Second least positive option)
5–6	Good	3 (Third least positive option)
7–8	Very Good	4 (Fourth least positive option)
9–10	Excellent	5 (Most positive option)
Age Demographic		
18 to 24 years	Years 1996–2002	18 to 44
25 to 34 years	Years 1986–1995	
35 to 44 years	Years 1976–1985	
45 to 54 years	Years 1966–1975	45 to 54
55 to 64 years	Years 1956–1965	55 to 64
65 to 74 years	Years 1946–1955	65 to 74
75 years or older	Years 1945 and below	75 or Older

Reverse Coding

HSAG reverse coded certain HCBS CAHPS Survey items to ensure that the most positive responses of each question were given the highest values according to the topic and wording. For example, Question 29 has the standard response options of Never, Sometimes, Usually, or Always. The most positive response to this question is Never, which indicates that the respondent never had a hard time understanding explanations from their personal care assistant because of an accent or the way they spoke English. The values of the responses to this question are reverse coded so that Never has the highest value of “4” rather than a value of “1” based on the original coding.

Table 2-5 displays the response options to the questions that were reverse coded.

Table 2-5—Reverse Coded Response Options and Response Values

Question Numbers	Standard Responses	Alternative Responses	Response Values
29, 42	Always	Mostly yes	1 (Least positive option)
	Usually		2 (Second least positive option)
	Sometimes		3 (Third least positive option)
	Never	Mostly no	4 (Most positive option)
18, 22, 25, 40, 71	Yes		0 (Least positive option)
	No		1 (Most positive option)
65, 68, 79	Yes		1 (Least positive option)
	No		4 (Most positive option)

Scoring Calculations

HSAG calculated mean scores for each measure. Mean scores were transformed to a 0 to 100 scale for each measure. HSAG used the following formula to transform scores:

$$\frac{v - \text{min}_{old}}{\text{max}_{old} - \text{min}_{old}} \times 100$$

The values in the formula are defined as follows:

- max_{old} = the maximum value of the old scale (e.g., 4)
- min_{old} = the minimum value of the old scale (e.g., 1)
- v = respondent’s score on the old scale (e.g., value of 1 to 4)

Limitations and Cautions

The findings presented in this report are subject to some limitations in the survey design, analysis, and interpretation. MDHHS should consider these limitations when interpreting or generalizing the findings.

Non-Response Bias

The experiences of the survey respondent population may be different than that of non-respondents with respect to their health care services and may vary by plan. Therefore, MDHHS should consider the potential for non-response bias when interpreting HCBS CAHPS results.

Low Number of Responses

The 2020 HCBS CAHPS survey administration yielded a low number of completed surveys. There are known challenges with the populations surveyed (e.g., members who failed the cognitive screening questions), which may contribute to a low number of responses. HSAG was unable to report results at the MI Health Link health plan level, as well as results for some measures for the ICO Program Aggregate. Please exercise caution when interpreting results due to the low number of completed surveys.

Survey Mode

During the development of the HCBS CAHPS survey, stakeholders recommended that the in-person mode be utilized for these populations; however, a telephone mode was also found to be acceptable. HSAG used a telephone-only survey mode (with a pre-notification letter) for survey administration. The selected survey mode should be taken into consideration when evaluating results.

COVID-19 Impact

Due to the coronavirus (COVID-19) pandemic in the United States beginning in March 2020, the number of completed surveys may have been impacted as well as members' perceptions of and experiences with the health care system; therefore, caution should be exercised when evaluating the results.

Response Rates

Table 3-1 depicts the sample distribution and response rates for the MI Health Link Program. The survey response rate is the total number of completed surveys divided by all eligible members of the sample. Please note, the number of failed cognitive screening surveys are presented as a reference.

Table 3-1—Sample Distribution and Response Rate

Total Sample	Ineligible Sample	Eligible Sample	Failed Cognitive Screening	Total Respondents	Response Rate
2,000	72	1,928	86	288	14.94%

Respondent Demographics

Table 3-2 shows the demographic characteristics of members who completed a survey for the MI Health Link Program.

Table 3-2—MI Health Link Program Member Demographics

Age	
18 to 44	10.9%
45 to 54	16.4%
55 to 64	29.4%
65 to 74	34.0%
75 or Older	9.2%
Gender	
Male	28.8%
Female	71.2%
Race	
White	24.0%
Black or African-American	57.6%
Other*	18.3%
Ethnicity	
Hispanic, Latino, or Spanish	2.9%
Non-Hispanic, Latino, or Spanish	97.1%
General Health Status	
Excellent or Very Good	8.4%
Good	16.4%
Fair	46.6%
Poor	28.6%

Education Level	
8th Grade or Less	7.7%
Some High School	18.8%
High School Graduate or GED	36.8%
Some College or 2-year Degree	30.8%
4-year College Graduate or More	6.0%
Proxy Respondents	
Yes	5.2%
No	94.8%
<i>Please note: Percentages may not total 100% due to rounding. *The "Other" category includes responses of Asian, Native Hawaiian or Other Pacific Islander, American Indian or Alaska Native, and Other.</i>	

Mean Scores

HSAG calculated mean scores for each measure in accordance with the CMS’ *Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey*.³⁻¹ Mean scores were transformed to a 0- to 100-point scale for each measure.

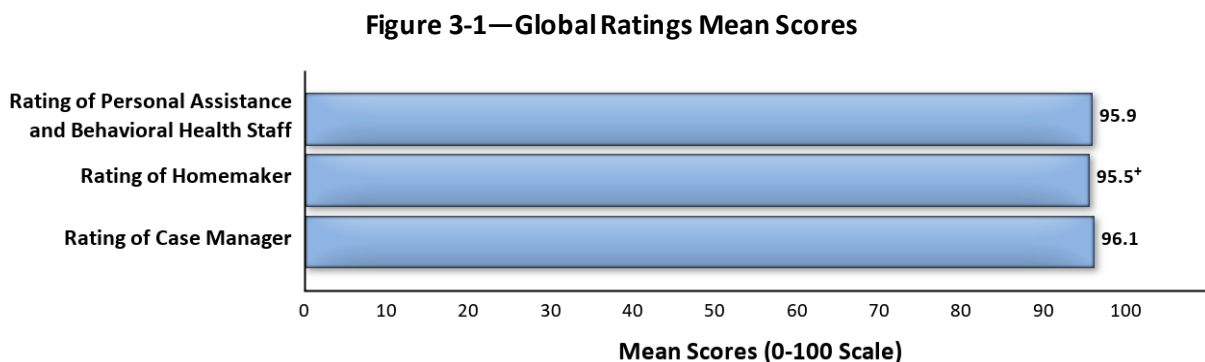
For purposes of reporting members’ experience with care results, CMS requires a minimum of 11 respondents per measure (i.e., a minimum cell size of 11). If a cell size was less than 11, the measure’s results were suppressed. Suppressed results are noted in the figures as “Insufficient Data.” Due to the lower number of responses to the survey for the MI Health Link health plans, HSAG combined the MI Health Link health plans’ results to form a MI Health Link Program and did not perform any statistical comparisons of the results.

³⁻¹ Centers for Medicare & Medicaid Services. CAHPS Home and Community-Based Services Survey. *Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey*. November 2019. Available at: <https://www.medicare.gov/medicaid/quality-of-care/performance-measurement/cahps-hcbs-survey/index.html>. Accessed on: August 18, 2020.

Global Ratings

Members were asked to rate the help they received from personal assistance and behavioral health staff, homemakers, and their case manager on a scale of 0 to 10, with 0 being the worst and 10 being the best.

Figure 3-1 shows the 2020 mean scores for the three global ratings.



+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

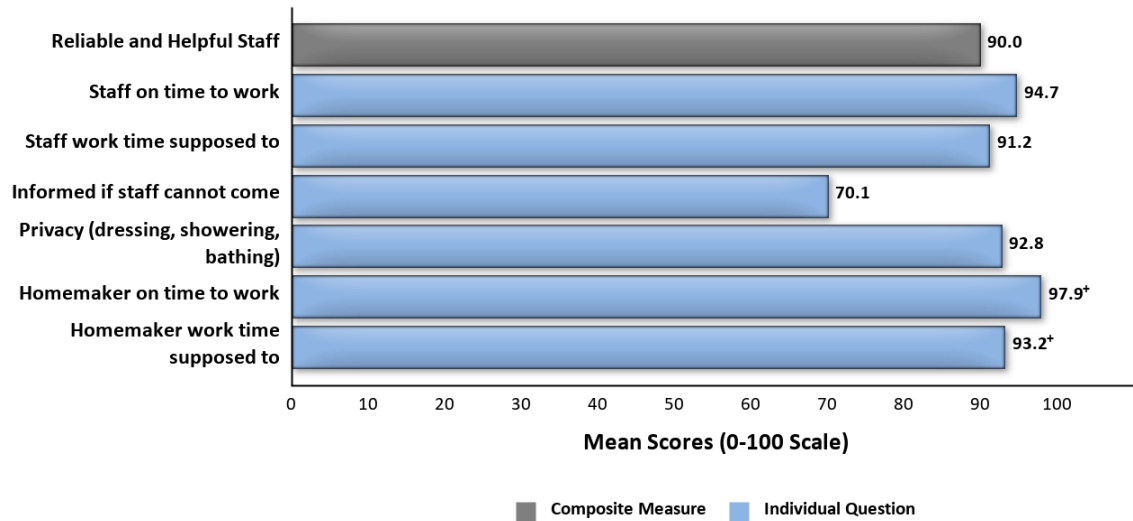
Composite Measures

Members were asked a series of questions that were grouped into seven composite measures:

- **Reliable and Helpful Staff (6 questions)**—measures how reliable and helpful staff were for members.
- **Staff Listen and Communicate Well (11 questions)**—measures how often staff listened and communicated well with members.
- **Helpful Case Manager (3 questions)**—measures how helpful members’ case manager were.
- **Choosing the Services that Matter to You (2 questions)**—measures if a member’s service plan included things that were important to him or her and if a member’s personal assistance/behavioral health staff know what was on the service plan, including the things that were important to the member.
- **Transportation to Medical Appointments (3 questions)**—measures how often members were able to get transportation to their medical appointments.
- **Personal Safety and Respect (3 questions)**—measures members’ perspective of their personal safety and if their personal assistance/behavioral health staff treated them with respect.
- **Planning Your Time and Activities (6 questions)**—measures how often members could get together with family and friends who live nearby, and could do things in the community that they like; if members needed more help doing things in their community; and if members took part in deciding what they do with their time and when they do things each day.

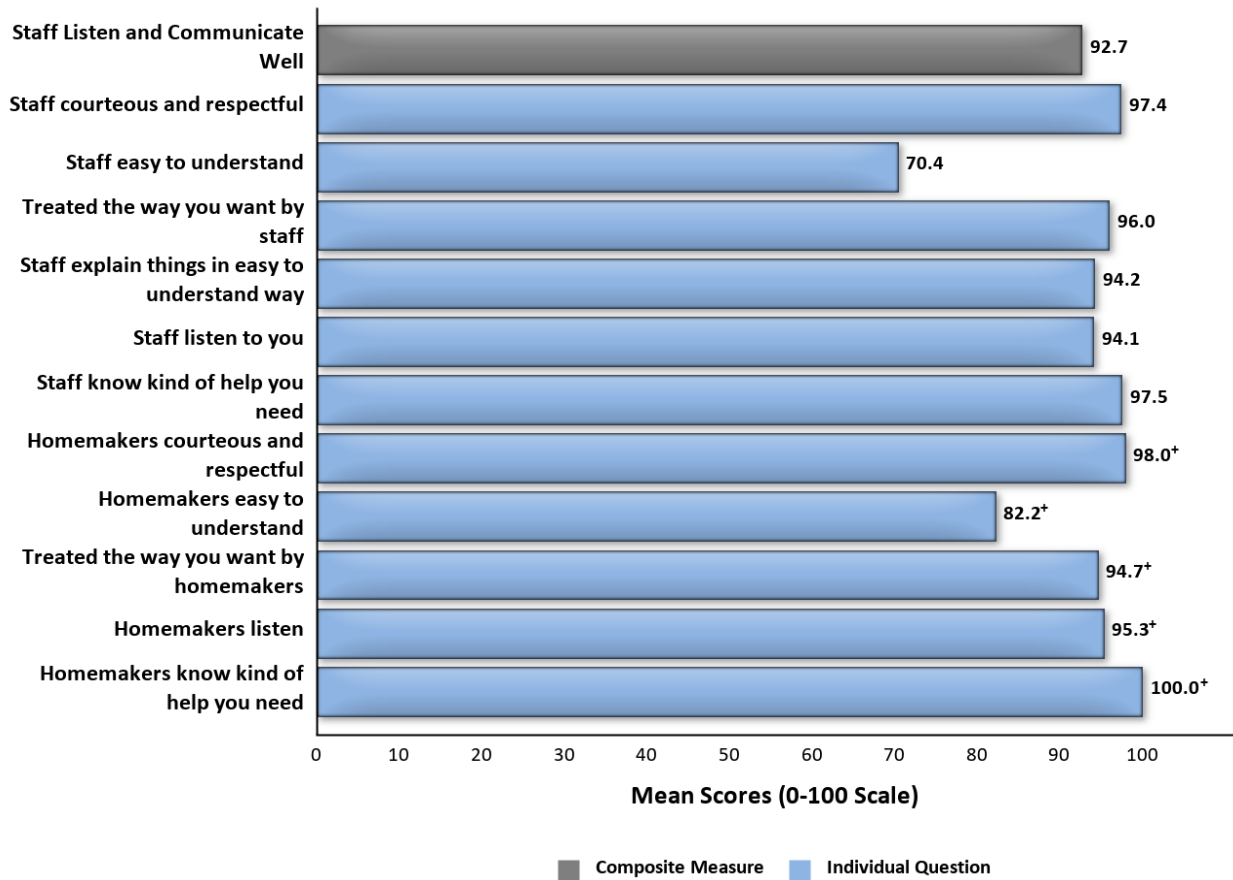
Figure 3-2 through Figure 3-8 show the 2020 mean scores for the seven composite measures and the items within each composite measure.

Figure 3-2—Reliable and Helpful Staff Composite Measure Mean Scores



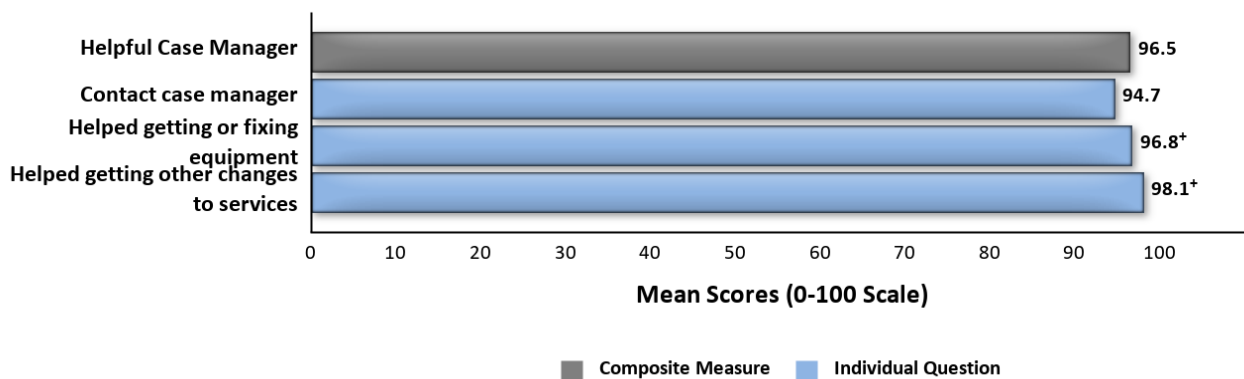
+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Figure 3-3—Staff Listen and Communicate Well Composite Measure Mean Scores



+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Figure 3-4—Helpful Case Manager Composite Measure Mean Scores



+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Figure 3-5—Choosing the Services that Matter to You Composite Measure Mean Scores

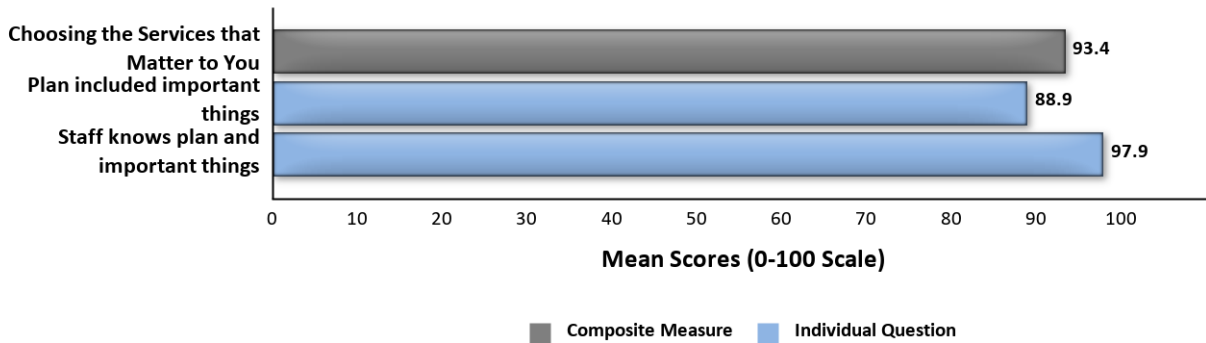
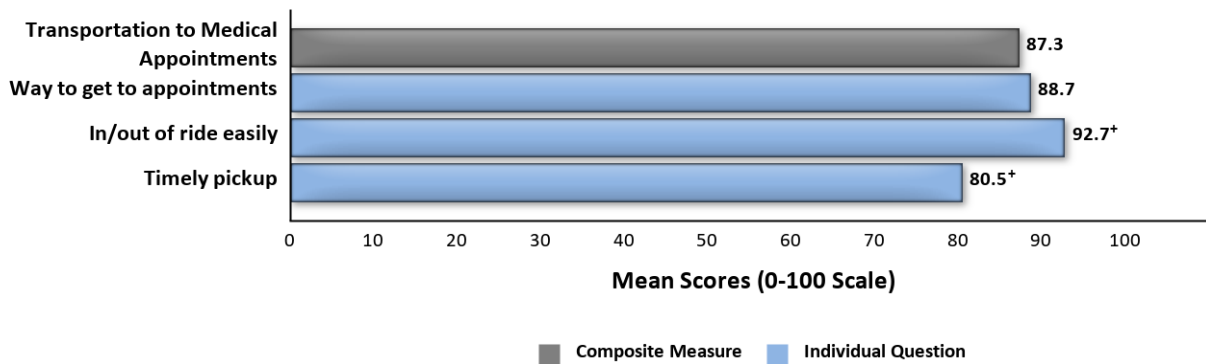


Figure 3-6—Transportation to Medical Appointments Composite Measure Mean Scores



+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Figure 3-7—Personal Safety and Respect Composite Measure Mean Scores

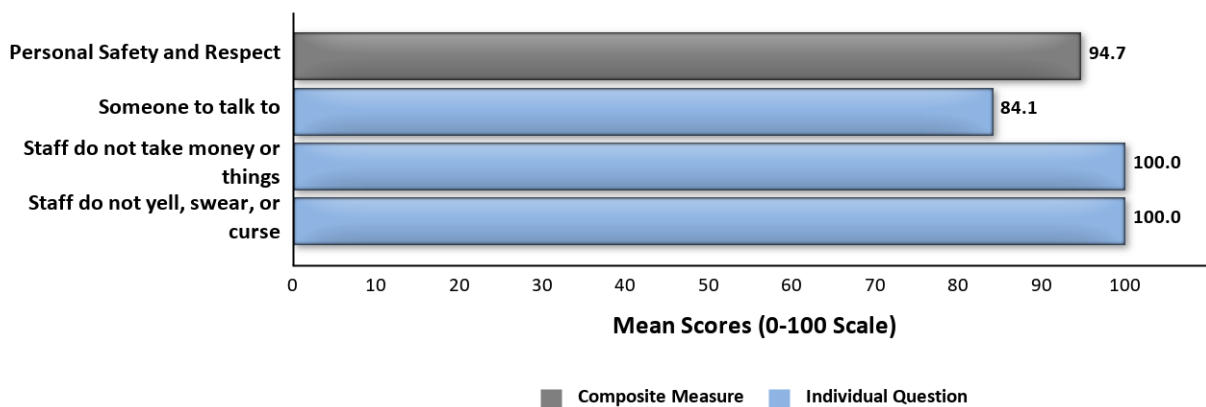
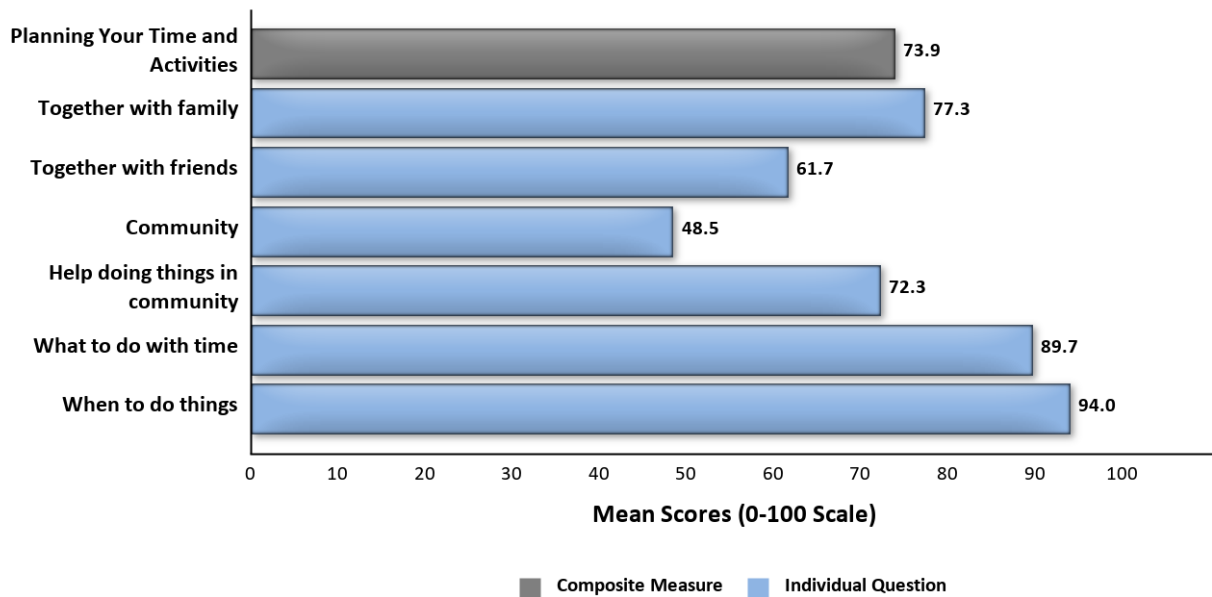


Figure 3-8—Planning Your Time and Activities Composite Measure Mean Scores



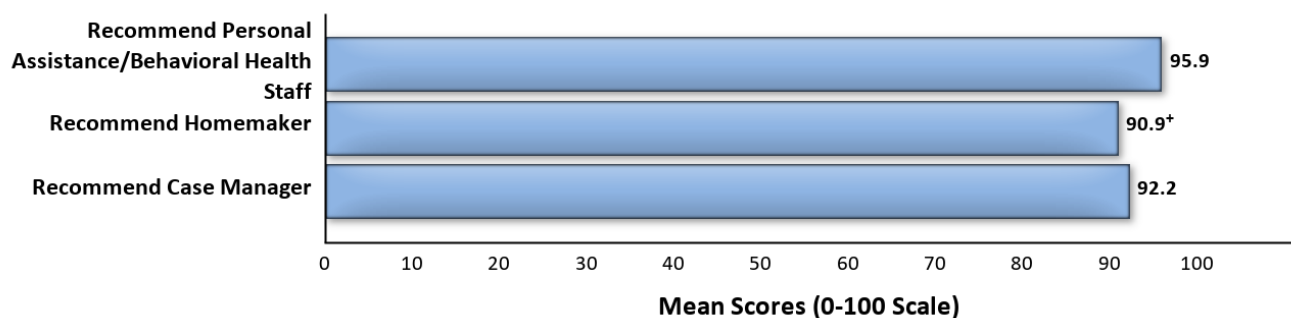
Recommendation Measures

Members were asked if they would recommend the following individuals to their family and friends:

- **Personal Assistance/Behavioral Health Staff**—the personal assistance/behavioral health staff who helped them if they needed help with everyday activities.
- **Homemaker**—the homemaker who helped them if they needed homemaker services.
- **Case Manager**—the case manager who helped them if they needed case management services.

Figure 3-9 shows the 2020 mean scores for the three recommendation measures.

Figure 3-9—Recommendation Measures Mean Scores



+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results.

Unmet Need and Physical Safety Measures

The unmet need measures evaluate whether the needs listed below were not being met because of a lack of staff. Members were asked if they needed help from personal assistance/behavioral health staff with the following needs:

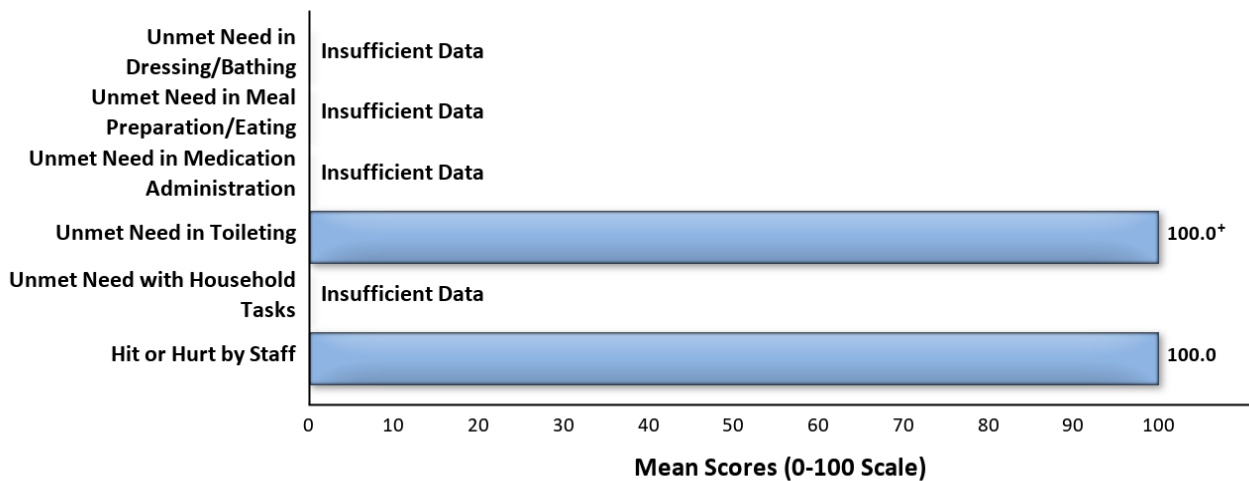
- **Dressing/Bathing**—getting dressed, taking a shower, or bathing.
- **Meal Preparation/Eating**—preparing their meals, such as help making or cooking meals, or help eating.
- **Medication Administration**—taking their medicines when they were supposed to.
- **Toileting**—with toileting.
- **Household Tasks**—completing household tasks, like cleaning and laundry.

These measures are scored so that higher values indicate better care; therefore, a higher mean score indicates a positive response (i.e., no unmet need) and a lower mean score indicates a negative response.

In addition, members were asked if any staff hit or hurt them.³⁻²

Figure 3-10 shows the 2020 mean scores for the five unmet need measures and one physical safety measure, *Hit or Hurt by Staff*. Respondents reported no unmet needs with toileting and reported that no staff hit or hurt them.

Figure 3-10—Unmet Need and Physical Safety Measures Mean Scores



+ Indicates fewer than 100 responses. Caution should be exercised when evaluating these results. Results based on fewer than 11 respondents were suppressed and noted as “Insufficient Data.”

³⁻² Staff members could be personal assistance staff, behavioral health staff, homemakers, or case managers.

4. Survey Instrument

The survey instrument administered was the HCBS CAHPS survey. This section provides a copy of the survey instrument.

CAHPS[®] Home- and Community-Based Services Survey

Version: 1.0

Population: Adult

Language: English



File name: CAHPSHcbs01192017SurvEng508
Last updated: January 19, 2017

Instructions for Vendor

- The interview is intended as an interviewer-administered survey; thus all text that appears in initial uppercase and lowercase letters should be read aloud. Text that appears in **bold, lowercase letters** should be emphasized.
- Text in *{italics and in braces}* will be provided by the HCBS program’s administrative data. However, if the interviewee provides another term, that term should be used in place of the program-specific term wherever indicated. For example, some interviewees may refer to their case manager by another title, which should be used instead throughout the survey.
- For response options of “never,” “sometimes,” “usually,” and “always,” if the respondent cannot use that scale, the alternate version of the survey with response options of “mostly yes” and “mostly no” should be used. These alternate response options are reserved for respondents who find the “never,” “sometimes,” “usually,” “always” response scale cognitively challenging.
- For response options of 0 to 10, if the respondent cannot use that scale, the alternate version of the survey with response options of “excellent,” “very good,” “good,” “fair,” or “poor” should be used. These alternate response options are reserved for respondents who find the numeric scale cognitively challenging.
- All questions include a “REFUSED” response option. In this case, “refused” means the respondent did not provide any answer to the question.
 - All questions include a “DON’T KNOW” response option. This is used when the respondent indicates that he or she does not know the answer and cannot provide a response to the question.
 - All questions include an “UNCLEAR” response option. This should be used when a respondent answers, but the interviewer cannot clarify the meaning of the response even after minor probing or the response is completely unrelated to the question, (e.g., the response to “In the last 3 months, how often did your homemakers listen carefully to what you say?” is “I like to sit by Mary”).
 - Some responses have skip patterns, which are expressed as “→ GO TO Q#.” The interviewer should be advanced to the next appropriate item to ask the respondent.
 - Not all respondents receive all home and community-based services asked about in this instrument. Items Q4 through Q12 help to confirm which services a respondent receives. The table after it summarizes the logic of which items should be used.
 - Survey users may add questions to this survey before the “About You” section. A separate supplemental employment module can be added.
- Use singular/plural as needed. In most cases, questions are written assuming there is more than one staff person supporting a respondent or it is written without an indication of whether there is more than one staff person. Based on information

collected from Q4 through Q12, it is possible to modify questions to be singular or plural as they relate to staff.

- Use program-specific terms. Where appropriate, add in the program-specific terms for staff (e.g., [*program-specific term for these types of staff*]) but allow the interviewer to modify the term based on the respondent's choice of the word. It will be necessary to obtain information for program-specific terms. State administrative data should include the following information:
 - Agency name(s)
 - Titles of staff who provide care
 - Names of staff who provide care
 - Activities that each staff member provides (this will help with identifying appropriate skip logic)
 - Hours of staff who come to the home

COGNITIVE SCREENING QUESTIONS

People might be paid to help you get ready in the morning, with housework, go places, or get mental health services. This survey is about the people who are paid to help you in your home and community with everyday activities. It also asks about the services you get.

1. Does someone come into your home to help you?

- ¹ YES
- ² NO → END SURVEY
- ⁻¹ DON'T KNOW → END SURVEY
- ⁻² REFUSED → END SURVEY
- ⁻³ UNCLEAR RESPONSE → END SURVEY

2. How do they help you?

[EXAMPLES OF CORRECT RESPONSES INCLUDE]

- HELPS ME GET READY EVERY DAY
 - CLEANS MY HOME
 - WORKS WITH ME AT MY JOB
 - HELPS ME DO THINGS
 - DRIVES ME AROUND
- ⁻¹ DON'T KNOW → END SURVEY
 - ⁻² REFUSED → END SURVEY
 - ⁻³ UNCLEAR RESPONSE → END SURVEY

3. What do you call them?

[EXAMPLES OF SUFFICIENT RESPONSES INCLUDE]

- MY WORKER
 - MY ASSISTANT
 - NAMES OF STAFF (JO, DAWN, ETC.)
- ⁻¹ DON'T KNOW → END SURVEY
 - ⁻² REFUSED → END SURVEY
 - ⁻³ UNCLEAR RESPONSE → END SURVEY

CSQPASS.

[IF ALL 3 QUESTIONS WERE ANSWERED CORRECTLY, ENTER 1 TO CONTINUE.]

1 PASS - ALL 3 QUESTIONS WERE ANSWERED CORRECTLY → GO TO Q4

2 FAIL - AT LEAST 1 QUESTION WAS NOT ANSWERED CORRECTLY → GO TO SURVEND

SURVEND.

Thank you for your time. Those are all the questions we have.

Have a nice day/evening. [ENTER 1 TO EXIT SURVEY]

IDENTIFICATION QUESTIONS

Now I would like to ask you some more questions about the types of people who come to your home.

4. In the last 3 months, did you get *{program specific term for personal assistance}* at home?

¹ YES

² NO → GO TO Q6

⁻¹ DON'T KNOW → GO TO Q6

⁻² REFUSED → GO TO Q6

⁻³ UNCLEAR RESPONSE → GO TO Q6

5. What do you call the person or people who gave you *{program-specific term for personal assistance}*? For example, do you call them *{program-specific term for personal assistance}*, staff, personal care attendants, PCAs, workers, or something else?

[ADD RESPONSE WHEREVER IT SAYS “*personal assistance/behavioral health staff*”]

6. In the last 3 months, did you get *{program specific term for behavioral health specialist services}* at home?

¹ YES

² NO → GO TO Q8

⁻¹ DON'T KNOW → GO TO Q8

⁻² REFUSED → GO TO Q8

⁻³ UNCLEAR RESPONSE → GO TO Q8

7. What do you call the person or people who gave you *{program specific term for behavioral health specialist services}*? For example, do you call them *{program-specific term for behavioral health specialists}*, counselors, peer supports, recovery assistants, or something else?

[ADD RESPONSE WHEREVER IT SAYS “*personal assistance/behavioral health staff.*” IF Q4 ALSO = YES, LIST BOTH TITLES]

8. In the last 3 months, did you get {*program specific term for homemaker services*} at home?

- ¹ YES
- ² NO → GO TO Q11
- ⁻¹ DON'T KNOW → GO TO Q11
- ⁻² REFUSED → GO TO Q11
- ⁻³ UNCLEAR RESPONSE → GO TO Q11

9. What do you call the person or people who gave you {*program specific term for homemaker services*}? For example, do you call them {*program-specific term for homemaker*}, aides, homemakers, chore workers, or something else?

[ADD RESPONSE WHEREVER IT SAYS “*homemaker*”]

10. [IF (Q4 OR Q6) AND Q8 = YES, ASK] In the last 3 months, did the same people who help you with everyday activities also help you clean your home?

- ¹ YES
- ² NO
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

11. In the last 3 months, did you get help from {*program specific term for case manager services*} to help make sure that you had all the services you needed?

- ¹ YES
- ² NO
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

12. What do you call the person who gave you {*program specific term for case manager services*}? For example, do you call the person a {*program-specific term for case manager*}, case manager, care manager, service coordinator, supports coordinator, social worker, or something else?

[ADD RESPONSE WHEREVER IT SAYS “*case manager*”]

BELOW ARE INSTRUCTIONS FOR WHICH QUESTIONS TO ASK FOR EACH RESPONSE ABOVE.

ITEM AND RESPONSE—FOLLOW ALL ROWS THAT APPLY	ACTION
IF Q4 OR Q6 = YES (PERSONAL ASSISTANCE OR BEHAVIORAL HEALTH SPECIALIST SERVICES), AND Q8 = NO, DON'T KNOW, REFUSE, UNCLEAR (HOMEMAKER SERVICES)	ASK Q13–Q36, AND Q48 ONWARD
IF Q4 OR Q6 = YES (PERSONAL ASSISTANCE OR BEHAVIORAL HEALTH SPECIALIST SERVICES), AND Q8 = YES (HOMEMAKER SERVICES)	ASK Q13 ONWARD
IF Q4 AND Q6 = NO (PERSONAL ASSISTANCE OR BEHAVIORAL HEALTH SPECIALIST SERVICES)	SKIP Q13–36, Q57 AND Q79
IF Q8 = YES (HOMEMAKER SERVICES)	ASK Q37 ONWARD
IF Q10 = YES (HOMEMAKER AND PERSONAL ASSISTANCE STAFF SAME)	ASK Q13–Q36, Q39, Q40, AND Q48 ONWARD
IF Q11 = ANY RESPONSE (CASE MANAGER)	ASK Q48 ONWARD

GETTING NEEDED SERVICES FROM PERSONAL ASSISTANT AND BEHAVIORAL HEALTH STAFF

13. First I would like to talk about the {*personal assistance/behavioral health staff*} who are paid to help you with everyday activities—for example, getting dressed, using the bathroom, taking a bath or shower, or going places. In the last 3 months, how often did {*personal assistance/behavioral health staff*} come to work on time? Would you say . . .

¹ Never,

- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: First I would like to talk about the *{personal assistance/behavioral health staff}* who are paid to help you with everyday activities—for example, getting dressed, using the bathroom, taking a bath or shower, or going places. In the last 3 months, did *{personal assistance/behavioral health staff}* come to work on time? Would you say. . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

14. In the last 3 months, how often did *{personal assistance/behavioral health staff}* work as long as they were supposed to? Would you say. . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did *{personal assistance/behavioral health staff}* work as long as they were supposed to? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

15. Sometimes staff cannot come to work on a day that they are scheduled. In the last 3 months, when staff could not come to work on a day that they were scheduled, did someone let you know that *{personal assistance/behavioral health staff}* could not come that day?

- 1 YES

- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

16. In the last 3 months, did you need help from {*personal assistance/behavioral health staff*} to get dressed, take a shower, or bathe?

- 1 YES
- 2 NO → GO TO Q20
- 1 DON'T KNOW → GO TO Q20
- 2 REFUSED → GO TO Q20
- 3 UNCLEAR RESPONSE → GO TO Q20

17. In the last 3 months, did you **always** get dressed, take a shower, or bathe when you needed to?

- 1 YES → GO TO Q19
- 2 NO
- 1 DON'T KNOW → GO TO Q19
- 2 REFUSED → GO TO Q19
- 3 UNCLEAR RESPONSE → GO TO Q19

18. In the last 3 months, was this because there were no {*personal assistance/behavioral health staff*} to help you?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

19. In the last 3 months, how often did {*personal assistance/behavioral health staff*} make sure you had enough personal privacy when you dressed, took a shower, or bathed? Would you say. . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did *{personal assistance/behavioral health staff}* make sure you had enough personal privacy when you dressed, took a shower, or bathed? Would you say. . .

- ¹ Mostly yes or
- ² Mostly no?
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

20. In the last 3 months, did you need help from *{personal assistance/behavioral health staff}* with your meals, such as help making or cooking meals or help eating?

- ¹ YES
- ² NO → GO TO Q23
- ⁻¹ DON'T KNOW → GO TO Q23
- ⁻² REFUSED → GO TO Q23
- ⁻³ UNCLEAR RESPONSE → GO TO Q23

21. In the last 3 months, were you **always** able to get something to eat when you were hungry?

- ¹ YES → GO TO Q23
- ² NO
- ⁻¹ DON'T KNOW → GO TO Q23
- ⁻² REFUSED → GO TO Q23
- ⁻³ UNCLEAR RESPONSE → GO TO Q23

22. In the last 3 months, was this because there were no *{personal assistance/behavioral health staff}* to help you?

- ¹ YES
- ² NO
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

23. Sometimes people need help taking their medicines, such as reminders to take a medicine, help pouring them, or setting up their pills. In the last 3 months, did you need help from *{personal assistance/behavioral health staff}* to take your medicines?

- ¹ YES
- ² NO → GO TO Q26
- ⁻¹ DON'T KNOW → GO TO Q26
- ⁻² REFUSED → GO TO Q26

⁻³ UNCLEAR RESPONSE → GO TO Q26

24. In the last 3 months, did you **always** take your medicine when you were supposed to?

¹ YES → GO TO Q26

² NO

⁻¹ DON'T KNOW → GO TO Q26

⁻² REFUSED → GO TO Q26

⁻³ UNCLEAR RESPONSE → GO TO Q26

25. In the last 3 months, was this because there were no *{personal assistance/behavioral health staff}* to help you?

¹ YES

² NO

⁻¹ DON'T KNOW

⁻² REFUSED

⁻³ UNCLEAR RESPONSE

26. Help with toileting includes helping someone get on and off the toilet or help changing disposable briefs or pads. In the last 3 months, did you need help from *{personal assistance/behavioral health staff}* with toileting?

¹ YES

² NO → GO TO Q28

⁻¹ DON'T KNOW → GO TO Q28

⁻² REFUSED → GO TO Q28

⁻³ UNCLEAR RESPONSE → GO TO Q28

27. In the last 3 months, did you get all the help you needed with toileting from *{personal assistance/behavioral health staff}* when you needed it?

¹ YES

² NO

⁻¹ DON'T KNOW

⁻² REFUSED

⁻³ UNCLEAR RESPONSE

HOW WELL PERSONAL ASSISTANT AND BEHAVIORAL HEALTH STAFF COMMUNICATE WITH AND TREAT YOU

The next several questions ask about how *{personal assistance/behavioral health staff}* treat you.

28. In the last 3 months, how often did *{personal assistance/behavioral health staff}* treat you with courtesy and respect? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did *{personal assistance/behavioral health staff}* treat you with courtesy and respect? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

29. In the last 3 months, how often were the explanations *{personal assistance/behavioral health staff}* gave you hard to understand because of an accent or the way *{personal assistance/behavioral health staff}* spoke English? Would you say ...

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, were the explanations *{personal assistance/behavioral health staff}* gave you hard to understand because of an accent or the way *{personal assistance/behavioral health staff}* spoke English? Would you say. . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

30. In the last 3 months, how often did *{personal assistance/behavioral health staff}* treat you the way you wanted them to? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did *{personal assistance/behavioral health staff}* treat you the way you wanted them to? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

31. In the last 3 months, how often did *{personal assistance/behavioral health staff}* explain things in a way that was easy to understand? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did *{personal assistance/behavioral health staff}* explain things in a way that was easy to understand? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

32. In the last 3 months, how often did *{personal assistance/behavioral health staff}* listen carefully to you? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?

- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did {*personal assistance/behavioral health staff*} listen carefully to you?
Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

33. In the last 3 months, did you feel {*personal assistance/behavioral health staff*} knew what kind of help **you** needed with everyday activities, like getting ready in the morning, getting groceries, or going places in your community?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

34. In the last 3 months, did {*personal assistance/behavioral health staff*} encourage you to do things for yourself if you could?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

35. Using any number from 0 to 10, where 0 is the worst help from {*personal assistance/behavioral health staff*} possible and 10 is the best help from {*personal assistance/behavioral health staff*} possible, what number would you use to rate the help you get from {*personal assistance/behavioral health staff*}?

- __ 0 TO 10
- 1 DON'T KNOW
 - 2 REFUSED
 - 3 UNCLEAR RESPONSE

ALTERNATE VERSION: How would you rate the help you get from {*personal assistance/behavioral health staff*}? Would you say . . .

- 1 Excellent,
- 2 Very good,
- 3 Good,
- 4 Fair, or
- 5 Poor?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

36. Would you recommend the {*personal assistance/behavioral health staff*} who help you to your family and friends if they needed help with everyday activities? Would you say you would recommend the {*personal assistance/behavioral health staff*} . . .

- 1 Definitely no,
- 2 Probably no,
- 3 Probably yes, or
- 4 Definitely yes?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

GETTING NEEDED SERVICES FROM HOME MAKERS

The next several questions are about the {*homemakers*}, the staff who are paid to help you do tasks around the home—such as cleaning, grocery shopping, or doing laundry.

37. In the last 3 months, how often did {*homemakers*} come to work on time? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did {*homemakers*} come to work on time? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW

- 2 REFUSED
- 3 UNCLEAR RESPONSE

38. In the last 3 months, how often did {homemakers} work as long as they were supposed to? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did {homemakers} work as long as they were supposed to? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

39. In the last 3 months, did your household tasks, like cleaning and laundry, **always** get done when you needed them to? [ASK IF HOMEMAKER IS THE SAME AS PCA STAFF]

- 1 YES → GO TO Q41
- 2 NO
- 1 DON'T KNOW → GO TO Q41
- 2 REFUSED → GO TO Q41
- 3 UNCLEAR RESPONSE → GO TO Q41

40. In the last 3 months, was this because there were no {homemakers} to help you? [ASK IF HOMEMAKER IS THE SAME AS PCA STAFF]

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

HOW WELL HOMEMAKERS COMMUNICATE WITH AND TREAT YOU

The next several questions ask about how {homemakers} treat you.

41. In the last 3 months, how often did {homemakers} treat you with courtesy and respect? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did {homemakers} treat you with courtesy and respect? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

42. In the last 3 months, how often were the explanations {homemakers} gave you hard to understand because of an accent or the way the {homemakers} spoke English? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, were the explanations {homemakers} gave you hard to understand because of an accent or the way {homemakers} spoke English? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

43. In the last 3 months, how often did {homemakers} treat you the way you wanted them to? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did {homemakers} treat you the way you wanted them to? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

44. In the last 3 months, how often did {homemakers} listen carefully to you? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did {homemakers} listen carefully to you? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

45. In the last 3 months, did you feel {homemakers} knew what kind of help you needed?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

46. Using any number from 0 to 10, where 0 is the worst help from {homemakers} possible and 10 is the best help from {homemakers} possible, what number would you use to rate the help you get from {homemakers}?

- __ 0 TO 10
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: How would you rate the help you get from {homemakers}?
Would you say . . .

- 1 Excellent,
- 2 Very good,
- 3 Good,
- 4 Fair, or
- 5 Poor?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

47. Would you recommend the {homemakers} who help you to your family and friends if they needed {program-specific term for homemaker services}? Would you say you would recommend the {homemakers} . . .

- 1 Definitely no,
- 2 Probably no,
- 3 Probably yes, or
- 4 Definitely yes?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

YOUR CASE MANAGER

Now I would like to talk to you about your {case manager}, the person who helps make sure you have the services you need.

48. Do you know who your {case manager} is?

- 1 YES
- 2 NO → GO TO Q56
- 1 DON'T KNOW → GO TO Q56
- 2 REFUSED → GO TO Q56

-3 UNCLEAR RESPONSE → GO TO Q56

49. In the last 3 months, could you contact this {*case manager*} when you needed to?

1 YES

2 NO

-1 DON'T KNOW

-2 REFUSED

-3 UNCLEAR RESPONSE

50. Some people need to get equipment to help them, like wheelchairs or walkers, and other people need their equipment replaced or fixed. In the last 3 months, did you ask this {*case manager*} for help with getting or fixing equipment?

1 YES

2 NO → GO TO Q52

3 DON'T NEED → GO TO Q52

-1 DON'T KNOW → GO TO Q52

-2 REFUSED → GO TO Q52

-3 UNCLEAR RESPONSE → GO TO Q52

51. In the last 3 months, did this {*case manager*} work with you when you asked for help with getting or fixing equipment?

1 YES

2 NO

-1 DON'T KNOW

-2 REFUSED

-3 UNCLEAR RESPONSE

52. In the last 3 months, did you ask this {*case manager*} for help in getting any changes to your services, such as more help from {*personal assistance/behavioral health staff and/or homemakers if applicable*}, or for help with getting places or finding a job?

1 YES

2 NO → GO TO 54

3 DON'T NEED → GO TO Q54

-1 DON'T KNOW → GO TO Q54

-2 REFUSED → GO TO Q54

-3 UNCLEAR RESPONSE → GO TO Q54

53. In the last 3 months, did this {*case manager*} work with you when you asked for help with getting other changes to your services?

1 YES

- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

54. Using any number from 0 to 10, where 0 is the worst help from {*case manager*} possible and 10 is the best help from {*case manager*} possible, what number would you use to rate the help you get from {*case manager*}?

__ 0 TO 10

- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: How would you rate the help you get from the {*case manager*}? Would you say . . .

- 1 Excellent,
- 2 Very good,
- 3 Good,
- 4 Fair, or
- 5 Poor?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

55. Would you recommend the {*case manager*} who helps you to your family and friends if they needed {*program-specific term for case-management services*}? Would you say you would recommend the {*case manager*} . . .

- 1 Definitely no,
- 2 Probably no,
- 3 Probably yes, or
- 4 Definitely yes?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

CHOOSING YOUR SERVICES

56. In the last 3 months, did your [*program-specific term for "service plan"*] include . . .

- 1 **None** of the things that are important to you,
- 2 **Some** of the things that are important to you,

- 3 **Most** of the things that are important to you, or
- 4 **All** of the things that are important to you?
- 1 DON'T KNOW → GO TO Q58
- 2 REFUSED → GO TO Q58
- 3 UNCLEAR RESPONSE → GO TO Q58

57. In the last 3 months, did you feel {*personal assistance/behavioral health staff*} knew what's on your [*program-specific term for "service plan"*], including the things that are important to you?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

58. In the last 3 months, who would you have talked to if you wanted to change your [*program-specific term for "service plan"*]? Anyone else? [INTERVIEWER MARKS ALL THAT APPLY]

- 1 CASE MANAGER
- 2 OTHER STAFF
- 3 FAMILY/FRIENDS
- 4 SOMEONE ELSE, PLEASE SPECIFY _____
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

TRANSPORTATION

The next questions ask about how you get to places in your community.

59. Medical appointments include seeing a doctor, a dentist, a therapist, or someone else who takes care of your health. In the last 3 months, how often did you have a way to get to your medical appointments? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: Medical appointments include seeing a doctor, a dentist, a therapist, or someone else who takes care of your health. In the last 3 months, did you have a way to get to your medical appointments? Would you say . . .

- ¹ Mostly yes or
- ² Mostly no?
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

60. In the last 3 months, did you use a van or some other transportation service? Do not include a van you own.

- ¹ YES
- ² NO → GO TO Q63
- ⁻¹ DON'T KNOW → GO TO Q63
- ⁻² REFUSED → GO TO Q63
- ⁻³ UNCLEAR RESPONSE → GO TO Q63

61. In the last 3 months, were you able to get in and out of this ride easily?

- ¹ YES
- ² NO
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

62. In the last 3 months, how often did this ride arrive on time to pick you up? Would you say . . .

- ¹ Never,
- ² Sometimes,
- ³ Usually, or
- ⁴ Always?
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, did this ride arrive on time to pick you up? Would you say . . .

- ¹ Mostly yes or
- ² Mostly no?
- ⁻¹ DON'T KNOW
- ⁻² REFUSED

⁻³ UNCLEAR RESPONSE

PERSONAL SAFETY

The next few questions ask about your personal safety.

63. Who would you contact in case of an emergency? [INTERVIEWER MARKS ALL THAT APPLY]

- ¹ FAMILY MEMBER OR FRIEND
- ² CASE MANAGER
- ³ AGENCY THAT PROVIDES HOME- AND COMMUNITY-BASED SERVICES
- ⁴ PAID EMERGENCY RESPONSE SERVICE (E.G., LIFELINE)
- ⁵ 9–1–1 (FIRST RESPONDERS, POLICE, LAW ENFORCEMENT)
- ⁶ SOMEONE ELSE, PLEASE SPECIFY _____
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

64. In the last 3 months, was there a person you could talk to if someone hurt you or did something to you that you didn't like?

- ¹ YES
- ² NO
- ⁻¹ DON'T KNOW
- ⁻² REFUSED
- ⁻³ UNCLEAR RESPONSE

The next few questions ask if anyone paid to help you treated you badly in the last 3 months. This includes {*personal assistance/behavioral health staff, homemakers, or your case manager*}. We are asking everyone the next questions—not just you. [ADD STATE-SPECIFIC LANGUAGE HERE REGARDING MANDATED REPORTING, IF APPROPRIATE—“I want to remind you that, although your answers are confidential, I have a legal responsibility to tell {STATE} if I hear something that makes me think you are being hurt or are in danger.”]

65. In the last 3 months, did **any** {*personal assistance/behavioral health staff, homemakers, or your case managers*} take your money or your things without asking you first?

- ¹ YES
- ² NO → GO TO Q68
- ⁻¹ DON'T KNOW → GO TO Q68
- ⁻² REFUSED → GO TO Q68
- ⁻³ UNCLEAR RESPONSE → GO TO Q68

66. In the last 3 months, did someone work with you to fix this problem?

- 1 YES
- 2 NO → GO TO Q68
- 1 DON'T KNOW → GO TO Q68
- 2 REFUSED → GO TO Q68
- 3 UNCLEAR RESPONSE → GO TO Q68

67. In the last 3 months, who has been working with you to fix this problem? Anyone else?
[INTERVIEWER MARKS ALL THAT APPLY]

- 1 FAMILY MEMBER OR FRIEND
- 2 CASE MANAGER
- 3 AGENCY
- 4 SOMEONE ELSE, PLEASE SPECIFY _____
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

68. In the last 3 months, did any {staff} yell, swear, or curse at you?

- 1 YES
- 2 NO → GO TO Q71
- 1 DON'T KNOW → GO TO Q71
- 2 REFUSED → GO TO Q71
- 3 UNCLEAR RESPONSE → GO TO Q71

69. In the last 3 months, did someone work with you to fix this problem?

- 1 YES
- 2 NO → GO TO Q71
- 1 DON'T KNOW → GO TO Q71
- 2 REFUSED → GO TO Q71
- 3 UNCLEAR RESPONSE → GO TO Q71

70. In the last 3 months, who has been working with you to fix this problem? Anyone else?
[INTERVIEWER MARKS ALL THAT APPLY]

- 1 FAMILY MEMBER OR FRIEND
- 2 CASE MANAGER
- 3 AGENCY
- 4 SOMEONE ELSE, PLEASE SPECIFY _____
- 1 DON'T KNOW
- 2 REFUSED

-3 UNCLEAR RESPONSE

71. In the last 3 months, did any {staff} hit you or hurt you?

1 YES

2 NO → GO TO Q74

-1 DON'T KNOW → GO TO Q74

-2 REFUSED → GO TO Q74

-3 UNCLEAR RESPONSE → GO TO Q74

72. In the last 3 months, did someone work with you to fix this problem?

1 YES

2 NO → GO TO Q74

-1 DON'T KNOW → GO TO Q74

-2 REFUSED → GO TO Q74

-3 UNCLEAR RESPONSE → GO TO Q74

73. In the last 3 months, who has been working with you to fix this problem? Anyone else?
[INTERVIEWER MARKS ALL THAT APPLY]

1 FAMILY MEMBER OR FRIEND

2 CASE MANAGER

3 AGENCY

4 SOMEONE ELSE, PLEASE SPECIFY _____

-1 DON'T KNOW

-2 REFUSED

-3 UNCLEAR RESPONSE

COMMUNITY INCLUSION AND EMPOWERMENT

Now I'd like to ask you about the things you do in your community.

74. Do you have any **family** members who live nearby? Do not include family members you live with.

1 YES

2 NO → GO TO Q76

-1 DON'T KNOW → GO TO Q76

-2 REFUSED → GO TO Q76

-3 UNCLEAR RESPONSE → GO TO Q76

75. In the last 3 months, when you wanted to, how often could you get together with these family members who live nearby? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, when you wanted to, could you get together with these family members who live nearby? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

76. Do you have any **friends** who live nearby?

- 1 YES
- 2 NO → GO TO Q78
- 1 DON'T KNOW → GO TO Q78
- 2 REFUSED → GO TO Q78
- 3 UNCLEAR RESPONSE → GO TO Q78

77. In the last 3 months, when you wanted to, how often could you get together with these friends who live nearby? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, when you wanted to, could you get together with these friends who live nearby? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

78. In the last 3 months, when you wanted to, how often could you do things in the community that you like? Would you say . . .

- 1 Never,
- 2 Sometimes,
- 3 Usually, or
- 4 Always?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In the last 3 months, when you wanted to, could you do things in the community that you like? Would you say . . .

- 1 Mostly yes or
- 2 Mostly no?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

79. In the last 3 months, did you need more help than you get from {*personal assistance/behavioral health staff*} to do things in your community?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

80. In the last 3 months, did you take part in deciding **what** you do with your time each day?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

81. In the last 3 months, did you take part in deciding **when** you do things each day—for example, deciding when you get up, eat, or go to bed?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ABOUT YOU

Now I just have a few more questions about you.

82. In general, how would you rate your overall health? Would you say . . .

- 1 Excellent,
- 2 Very good,
- 3 Good,
- 4 Fair, or
- 5 Poor?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

83. In general, how would you rate your overall mental or emotional health? Would you say . . .

- 1 Excellent,
- 2 Very good,
- 3 Good,
- 4 Fair, or
- 5 Poor?
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

84. What is your age?

- 1 18 TO 24 YEARS
- 2 25 TO 34 YEARS
- 3 35 TO 44 YEARS
- 4 45 TO 54 YEARS
- 5 55 TO 64 YEARS
- 6 65 TO 74 YEARS
- 7 75 YEARS OR OLDER
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

ALTERNATE VERSION: In what year were you born?

_____ (YEAR)

- 1 DON'T KNOW
- 2 REFUSED

-3 UNCLEAR RESPONSE

85. [IF NECESSARY, ASK, AND VERIFY IF OVER THE PHONE] Are you male or female?

1 MALE

2 FEMALE

-1 DON'T KNOW

-2 REFUSED

-3 UNCLEAR RESPONSE

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

1 8th grade or less

2 Some high school, but did not graduate

3 High school graduate or GED

4 Some college or 2-year degree

5 4-year college graduate

6 More than 4-year college degree

-1 DON'T KNOW

-2 REFUSED

-3 UNCLEAR RESPONSE

87. Are you of Hispanic, Latino, or Spanish origin?

1 YES, HISPANIC, LATINO, OR SPANISH

2 NO, NOT HISPANIC, LATINO, OR SPANISH → GO TO Q89

-1 DON'T KNOW → GO TO Q89

-2 REFUSED → GO TO Q89

-3 UNCLEAR RESPONSE → GO TO Q89

88. Which group best describes you? [READ ALL ANSWER CHOICES. CODE ALL THAT APPLY.]

1 Mexican, Mexican American, Chicano, Chicana

2 Puerto Rican

3 Cuban

4 Another Hispanic, Latino, or Spanish origin

-1 DON'T KNOW

-2 REFUSED

-3 UNCLEAR RESPONSE

89. What is your race? You may choose one or more of the following. Would you say you are. . .

1 White → GO TO Q92

2 Black or African-American → GO TO Q92

- 3 Asian → GO TO Q90
- 4 Native Hawaiian or other Pacific Islander → GO TO Q91
- 5 American Indian or Alaska Native → GO TO Q92
- 6 OTHER → GO TO Q92
- 1 DON'T KNOW → GO TO Q92
- 2 REFUSED → GO TO Q92
- 3 UNCLEAR RESPONSE → GO TO Q92

90. Which group best describes you? [READ ALL ANSWER CHOICES. CODE ALL THAT APPLY.]

- 1 Asian Indian → GO TO Q92
- 2 Chinese → GO TO Q92
- 3 Filipino → GO TO Q92
- 4 Japanese → GO TO Q92
- 5 Korean → GO TO Q92
- 6 Vietnamese → GO TO Q92
- 7 Other Asian → GO TO Q92
- 1 DON'T KNOW → GO TO Q92
- 2 REFUSED → GO TO Q92
- 3 UNCLEAR RESPONSE → GO TO Q92

91. Which group best describes you? [READ ALL ANSWER CHOICES. CODE ALL THAT APPLY.]

- 1 Native Hawaiian
- 2 Guamanian or Chamorro
- 3 Samoan
- 4 Other Pacific Islander
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

92. Do you speak a language other than English at home?

- 1 YES
- 2 NO → GO TO Q94
- 1 DON'T KNOW → GO TO Q94
- 2 REFUSED → GO TO Q94
- 3 UNCLEAR RESPONSE → GO TO Q94

93. What is the language you speak at home?

- 1 Spanish,
- 2 Some other language → Which one? _____
- 1 DON'T KNOW

- 2 REFUSED
- 3 UNCLEAR RESPONSE

94. [IF NECESSARY, ASK] How many adults live at your home, including you?

- 1 1 [JUST THE RESPONDENT] → END SURVEY
- 2 2 TO 3
- 3 4 OR MORE
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

95. [IF NECESSARY, ASK] Do you live with any family members?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

96. [IF NECESSARY, ASK] Do you live with people who are not family or are not related to you?

- 1 YES
- 2 NO
- 1 DON'T KNOW
- 2 REFUSED
- 3 UNCLEAR RESPONSE

INTERVIEWER QUESTIONS

THE FOLLOWING QUESTIONS SHOULD BE ANSWERED AFTER THE INTERVIEW IS CONDUCTED.

97. WAS THE RESPONDENT ABLE TO GIVE VALID RESPONSES?

- 1 YES
- 2 NO

98. WAS ANY ONE ELSE PRESENT DURING THE INTERVIEW?

- 1 YES
- 2 NO → END SURVEY

99. WHO WAS PRESENT DURING THE INTERVIEW? (MARK ALL THAT APPLY.)

- ¹ SOMEONE **NOT** PAID TO PROVIDE SUPPORT TO THE RESPONDENT
- ² STAFF OR SOMEONE PAID TO PROVIDE SUPPORT TO THE RESPONDENT

100. DID SOMEONE HELP THE RESPONDENT COMPLETE THIS SURVEY?

- ¹ YES
- ² NO → END SURVEY

101. HOW DID THAT PERSON HELP? [MARK ALL THAT APPLY.]

- ¹ ANSWERED **ALL** THE QUESTIONS FOR RESPONDENT
- ² ANSWERED **SOME** OF THE QUESTIONS FOR THE RESPONDENT
- ³ RESTATED THE QUESTIONS IN A DIFFERENT WAY OR REMINDED/PROMPTED THE RESPONDENT
- ⁴ TRANSLATED THE QUESTIONS OR ANSWERS INTO THE RESPONDENT'S LANGUAGE
- ⁵ HELPED WITH THE USE OF ASSISTIVE OR COMMUNICATION EQUIPMENT SO THAT THE RESPONDENT COULD ANSWER THE QUESTIONS
- ⁶ HELPED THE RESPONDENT IN ANOTHER WAY,
SPECIFY _____

102. WHO HELPED THE RESPONDENT? (MARK ALL THAT APPLY.)

- ¹ SOMEONE **NOT** PAID TO PROVIDE SUPPORT TO THE RESPONDENT
- ² STAFF OR SOMEONE PAID TO PROVIDE SUPPORT TO THE RESPONDENT