

Health Care Continuity and Trust

ID NUMBER:	CONTACT YEAR: 0 9	FORM CODE: HCT VERSION B 12/10/2008
LAST NAME:	INITIALS:	
"The next set of questions are about your hea	lth care."	
 Is there a particular place that you usually you are sick or need advice about your he 		1
	Go to Item 4 No	2
2a. What kind of place is it that you usually g	o?	
	. Walk-in clinic	Α
	- HMO clinic	В
	- Hospital clinic	С
Go to Item 3	- Neighborhood health center	D
	– Hospital emergency room	E
	Public health department clinic	F
	- Company or industry clinic	G
	Doctor's office	Н
	Other	1
If "Other", specify [DO NOT ENTER]:		
2a1. Name:		
2a2. Street Address:		
2b. Facility Code:		

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Thinking about the place you usually go for help with your medical problems, in general, how much do you trust them to take good care of you? Do you trust them very much, somewhat, not very much, or not at all? Very much
 Somewhat
 Not very much
 Not at all

We are interested in understanding how much you trust your doctor or health care provider, the health care system, and your health insurance plan.

The following items refer to the doctor or health care provider that you see most often. If you do not have a regular doctor or other health care provider please think of the last health care provider you saw.

[Don't Missing	Know = 7, Refused = 8, g = 9]	COMPLETELY MOSTLY		SOMEWHAT	A LITTLE	NOT AT <u>ALL</u>
4. How much do you trust your doctor to:						
4a.	Offer you high-quality medical care.	1	2	3	4	5
4b.	Do all necessary medical tests and procedures regardless of cost	1	2	3	4	5
4c.	4c. Do only medically necessary test and procedures		2	3	4	5
4d.	How much do you trust your doctor's judgement about your health care?	1	2	3	4	5
[Don't Know = 7, Refused = 8, Missing = 9]		EXCELLENT	GOOD	<u>FAIR</u>	POOR	VERY <u>POOR</u>
5a.	How would you rate how well your doctor listens to you?	1	2	3	4	5
5b.	How would you rate how well your doctor explains things to you in a way you can understand?	1	2	3	4	5

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[Don't Missin	Know = 7, Refused = 8, g = 9]	COMPLETELY	MOSTLY	<u>SOMEWHAT</u>	A LITTLE	NOT AT <u>ALL</u>
6. These next items rate how much you trust people and the health care system in general.						
6a.	Generally, how much do you trust doctors and other health care providers?	1	2	3	4	5
6b.	Generally, how much do you trust other people?	1	2	3	4	5
6c.	How much do you trust the health care system?	1	2	3	4	5
6d.	How much do you trust hospitals?	1	2	3	4	5

[Don't Know = 7, Refused = 8, Missing = 9]

7. These questions refer to your health insurance plan or company. If you do not have health insurance, tell us about your feelings about health insurance plans or companies in general.

[Don't Know = 7, Refused = 8, Missing = 9]		STRONGLY <u>AGREE</u>	<u>AGREE</u>	<u>NEUTRAL</u>	DISAGREE	STRONGLY <u>DISAGREE</u>	
7a.	I have complete trust in my health insurance plan or company	1	2	3	4	5	
7b.	I worry there are a lot of loopholes in my health insurance plan that I do not know about	1	2	3	4	5	
7c.	My plan cares more about saving money than about getting me the treatment I need.	1	2	3	4	5	

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HEALTH CARE ACCESS

П	ALTH CARE ACCESS		
8.	When was the last time you saw a hea	alth care provider for treatment of a medical pr	roblem?
		Within the past year	1
		At least 1 year, but less than 2 years ago	2
		At least 2 years, but less than 4 years ago	3
		5 or more years ago	4
		Never	5
		Don't know	7
		Refused	8
		Missing	9
9.		alth care provider for a routine physical exam of ick or pregnant? [HAND RESPONSE CARD]	or general
		Within the past year	1
		At least 1 year, but less than 2 years ago	2
		At least 2 years, but less than 4 years ago	3
		5 or more years ago	4
		Never	5
		Don't know	7
		Refused	8
		Missing	9
10	o. Overall how hard has it been for you has been <u>very hard, fairly hard, not</u>	I to get the health services you have needed? ' too hard, or <u>not hard at all</u> ?	Would you say it
		Very hard	1
		Fairly hard	2
		Not too hard	3
		Not hard at all	4
		Don't know	7
		Refused	8

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9

Missing

ADMINISTRATIVE INFORMATION

11.	Date of data collection:			/		/						
		m	m		d	d		_	У	У	У	У
12.	Method of data collection:					 Co	ompu	ıter		1		
						Pa	per f	orm		2		
13.	Data collected:					 In	Clin	ic		1		
						Of	f Site	9		2		
14.	Code number of person completing this	s fori	n <i>:</i>			 						

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