



3975 Research Park Drive Ann Arbor Michigan 48108-2219
734/994 0540 ■ Fax 734/663 9084 ■ www.datastat.com

October 11, 2013

Roberta Wagner
West Virginia Department of Administration
Purchasing Division
2019 Washington St E
Charleston WV 25305

Dear Ms Wagner,

DataStat is very pleased to have this opportunity to offer our quote to the State of West Virginia in response to the RFQ BMS14056, issued September 12, 2013, for administration of the Adult Medicaid CAHPS HEDIS survey to a statewide sample of enrollees.

DataStat possesses the organizational experience, expertise, and capacity to conduct this survey for the State of West Virginia. We meet—and surpass—the minimum qualifications. We are certified by NCQA to conduct the HEDIS CAHPS survey for 2013, have been for over 10 years, and will renew our certification for 2014. We have a long and broad history of working on CAHPS survey projects for a wide range of clients, including health plans and state governments. The attached one-page executive summary highlights these qualifications.

As the Health Care Research Manager at DataStat, I am authorized to sign this bid and bind DataStat in contractual relationship, as also attested on the attached Certification and Signature Page.

DataStat will be happy to obtain licensure in West Virginia, upon award, and to remain in good standing throughout the term of the contract. Proof of the required insurance is available upon request. The documentation requested in the RFQ follows this letter of transmittal, in order:

- Pricing page
- Current NCQA certificate (2013)
- Sample Report
- Vendor Preference Certificate (no preference requested)
- Purchasing Affidavit, notarized
- Certification and Signature Page
- Acknowledgement and Title Page of Addendum #1, signed

We have enclosed one original and five convenience copies of our bid documents.

We trust that you will find our bid suitable for your Adult Medicaid CAHPS survey project. We would be very pleased to work with the State of West Virginia and believe that our services are a good fit for this project.

Thank you very much for this opportunity to offer our proposal in what promises to be a very interesting project. We look forward to hearing from you.

Very truly yours,

Ellen Johnson
Health Care Research Manager

10/15/13 04:16:43 PM
West Virginia Purchasing Division

DataStat: Executive Summary

DataStat specializes in survey data collection services and advanced reporting, specifically in support of health services research and public policy research. No other survey organization in the country exceeds our combined level of quality and efficiency in this area.

- Founded by professional researchers from the Institute for Social Research and the School of Public Health at the University of Michigan
- Specialists in health services research and public policy research
- 24+ years experience in complex and large scale survey research
- Managed by original founders who direct research projects on a day-to-day basis
- 100+ highly qualified professional staff
- Extensive in-house automated mailing, CATI, web, and IVR facilities

CAHPS®-specific Experience

- Primary contributor to CAHPS® Consortium pilots and development (GCAHPS®, PCAHPS®, ACAHPS®, now referred to as Clinician and Group CAHPS®)
- Conducted more complex CAHPS® projects than any other vendor, from stand alone to state-wide
- Certified by NCQA for 500 samples; NCQA certified for more than 10 years
- Certified by NCQA for the PCMH CAHPS and by CMS for the MA-CAHPS
- Consistently achieve optimal response rates and superior levels of data quality
- 10+ years experience in National CAHPS® Benchmark Database and NCQA reporting requirements

Other Experience

- Routinely conduct projects from 900 to 200,000 respondents
- Production and project management systems in place to manage work of all magnitudes
- Clients include the original Picker Institute, Harvard Medical School, the RAND Corporation, the Centers for Disease Control and Prevention, the National Institutes of Health, and NCQA/CMS.
- Certified by NCQA for 200 HOS (Health Outcomes Survey) samples
- Only vendor certified by NCQA to conduct the complex HOS-M projects reported to CMS

Standards of Quality Assurance – The DataStat Advantage

- Full academic rigor applied to all sampling tasks, from intake through final sample selection
- All mail materials produced by in-house commercial printing plant
- Laser printing systems able to produce 400 fully customized pages per minute
- Automated insertion process that produces customized mail packets with 100% video scan matching
- Proprietary CATI software: developed in-house; most advanced system in use today
- 100-station CATI facility in-house; full-time Spanish-speaking interviewers on staff
- Full-time interviewers with thorough research training and native Spanish speaking capabilities
- Extensive interviewer assessment based on professional conduct, never on raw productivity
- Full audio and video ongoing monitoring of all professional interviewing staff
- In-house CATI facility with supervisory ratios of 3:1; in-house web and IVR systems
- Proprietary response rate booster: designed in-house, uses neural network rulebase call patterning to reach hard-to-contact respondents

Commitment to the Project

- We have an intimate understanding of project requirements
- We have more than adequate capacity to conduct all aspects of the project without qualification

REQUEST FOR QUOTATION
BMS14056
National Committee for Quality Assurance ("NCQA") Certified
Healthcare Effectiveness Data and Information Set ("HEDIS") Survey Vendor

Exhibit A: Pricing Page

All inclusive price for each survey conducted using the Mail Only Methodology:

				Total Cost for Survey 1
Total Cost Survey 1 for Calendar Year December 2012 – November 2013				(A) \$ 20,251.00

Renewal Periods:

				Total Cost for Survey 2
Total Cost Survey 2 for Calendar Year December 2013 – November 2014				(B) \$ 20,251.00

Grand Total (Cost A + B Surveys)

\$ \$ 40,502.00

INCLUDES, FOR EACH CALENDAR YEAR:

- CUSTOMIZED SUMMARY REPORT (\$1225)
- TRAVEL-TRIP 1 - KICK OFF MTG (\$2500)
- TRAVEL-TRIP 2 - WALK-THRU OF DELIVERABLES (\$2500)

Notes

1. The Vendors Grand Total will include all general and administrative staffing (secretarial, clerical, etc.), travel, supplies and other resource costs necessary to perform all services within the scope of this procurement.
2. The Contract will be awarded to the Vendor with the lowest Grand Total meeting specifications.

DATASTAT INC.

(Company)

ELLEN JOHNSON, HEALTHCARE RESEARCH MANAGER

(Representative Name, Title)

P: 734.994.0540 x158 F: 734.663.9084

(Contact Phone/Fax Number)

10 OCTOBER 2013

(Date)



National Committee for Quality Assurance

recognizes

DataStat, Inc.

for fulfilling all necessary requirements to conduct NCQA HEDIS® Surveys



MARGARET E. O'KANE
PRESIDENT

NATIONAL COMMITTEE FOR QUALITY ASSURANCE

November 1, 2012

DATE GRANTED

October 31, 2013

EXPIRATION DATE



Peninsula Health

Peninsula Health Plan, Inc.

CAHPS® 5.0H
Adult Commercial
Summary Report

[Report Date]



SAMPLE

Peninsula Health Plan, Inc.

CAHPS® 5.0H Adult Commercial Summary Report

[Report Date]

Introduction. Results from fielding the HEDIS®/CAHPS® 5.0H Survey for Peninsula Health Plan, Inc. (PHP) provide a comprehensive tool for assessing consumers' experiences with the health plan. This report is designed to allow the health plan to look at summaries of members' experiences, using two types of presentation. First, this executive summary presents a brief description of the survey methodology, a graphic presentation of key results for rating questions, composites and Effectiveness of Care Measures and a sample disposition. Second, member responses are presented by question, including information about the response options used for scoring achievements. A copy of the questionnaire is found as an appendix.

Assessing consumers' experience in this report is accomplished with the use of achievement scores and composite scores. Member responses to survey questions are summarized as achievement scores. Responses indicating a positive experience are labeled as achievements, and an achievement score is computed equal to the proportion of responses qualifying as achievements. The lower the achievement score, the greater the need for the health plan to improve. Composite scores are built from achievements for groups of survey items that make up broad domains of members' experience: Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Customer Service, Claims Processing, Shared Decision Making, and Plan Information on Costs.

Results. This report summarizes the findings of the adult commercial 5.0H CAHPS survey conducted for PHP. Attempts were made to survey 1100 member households by mail and telephone during the period [First Mail Date] through [Field End Date], using a mixed-mode procedure and standard questionnaire. The survey procedure and questionnaire were developed jointly by the Agency for Healthcare Research and Quality and the National Committee for Quality Assurance (NCQA). NCQA is an independent not-for-profit organization dedicated to measuring the quality of America's health care. Detailed information regarding protocols and methods can be found in *HEDIS® [This Year] Volume 3* and the *HEDIS® [This Year] Quality Assurance Plan*.

The survey drew as potential respondents the adult members of PHP who were continuously enrolled in the plan for at least 12 months as of December 31, [Previous Year], with no more than one enrollment gap of 45 days or less. From this sample frame, a random sample of 1100 cases was drawn. The survey was only offered in English. Questionnaires were considered complete if respondents did not answer 'No' to Q1 and provided a valid response to at least one item in the questionnaire. Complete interviews were obtained from 632 PHP members, and the response rate was 58.2%.

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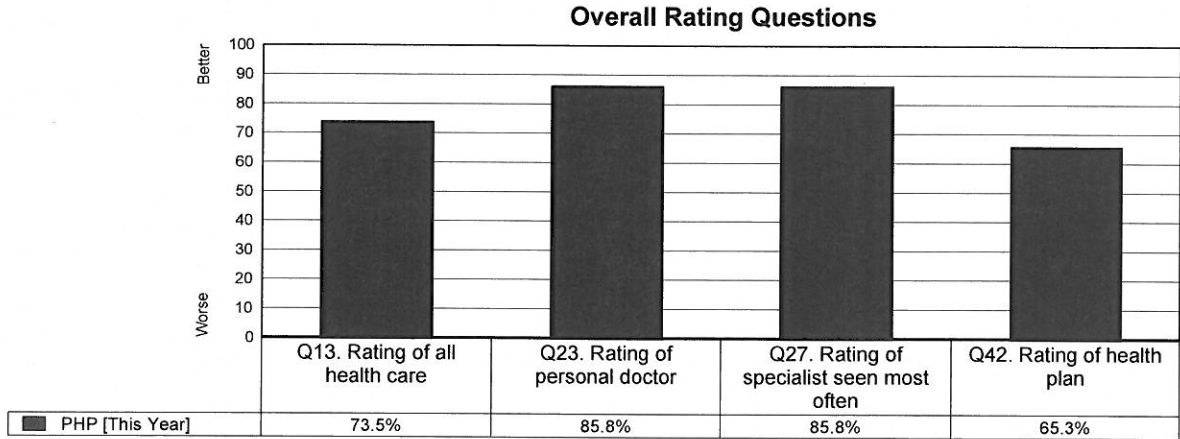
CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ).

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).

SAMPLE

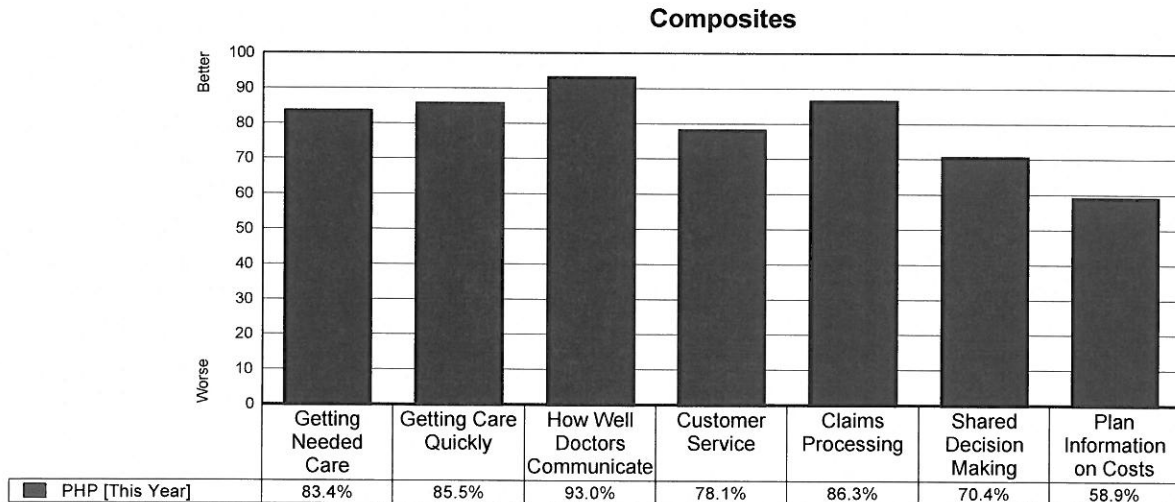
SUMMARY OF OVERALL RATING QUESTIONS

Four rating questions assess overall consumer satisfaction with health care, personal doctor, specialist seen most often, and health plan. Response options for overall rating questions range from 0 (worst) to 10 (best). In the table below, ratings of 8, 9, or 10 are considered achievements, and the achievement score is presented as the proportion of members whose response was an achievement.



SUMMARY OF COMPOSITES

A composite score is calculated for each of seven domains of member experience: Getting Needed Care, Getting Care Quickly, How Well Doctors Communicate, Customer Service, Claims Processing, Shared Decision Making, and Plan Information on Costs. The composite scores provide a summary assessment of how the plan performed across the domain. In the table below, proportions of positive responses are reported as achievement scores. Responses of "Yes", "A lot" and "Some" are considered achievements for the Shared Decision Making composite. For all other composites, responses of "Usually" or "Always" are considered achievements.

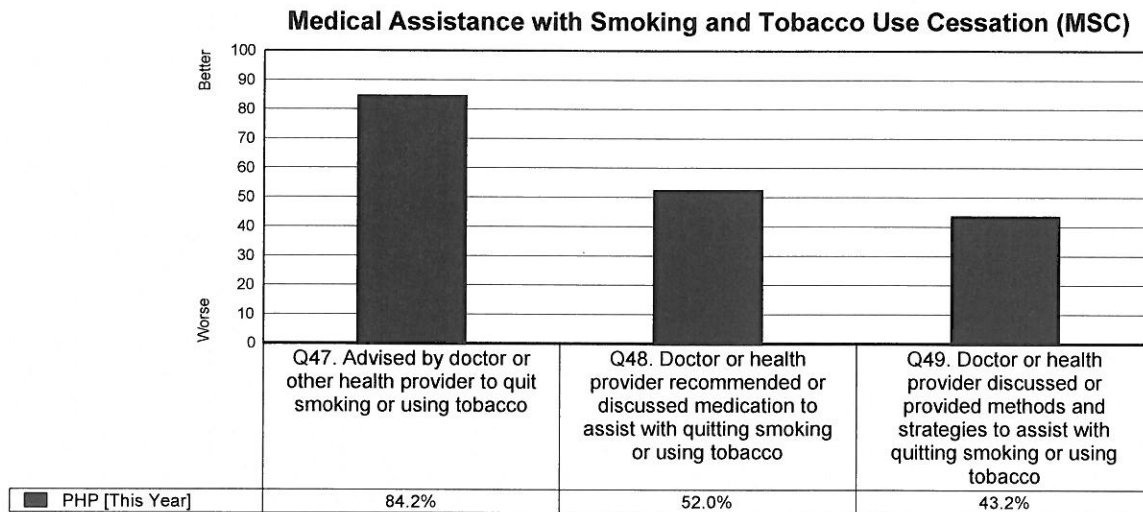


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SUMMARY OF EFFECTIVENESS OF CARE MEASURES

Three Effectiveness of Care Measures are presented below. These three measures use a rolling-average methodology, where scores are computed using two years of response data. For the purpose of this report, these measures are presented as single-year scores, rather than rolling averages.

The Medical Assistance with Smoking Cessation and Tobacco Use Cessation measure is composed of three questions. Scores represent the proportion of adult members continuously enrolled during the measurement year whose provider advised them to (1) quit smoking or using tobacco; (2) recommended or discussed medication to assist with quitting smoking or using tobacco; or (3) discussed or provided methods and strategies to assist with quitting smoking or using tobacco. For each question, a response of "Sometimes", "Usually", or "Always" is considered an achievement.



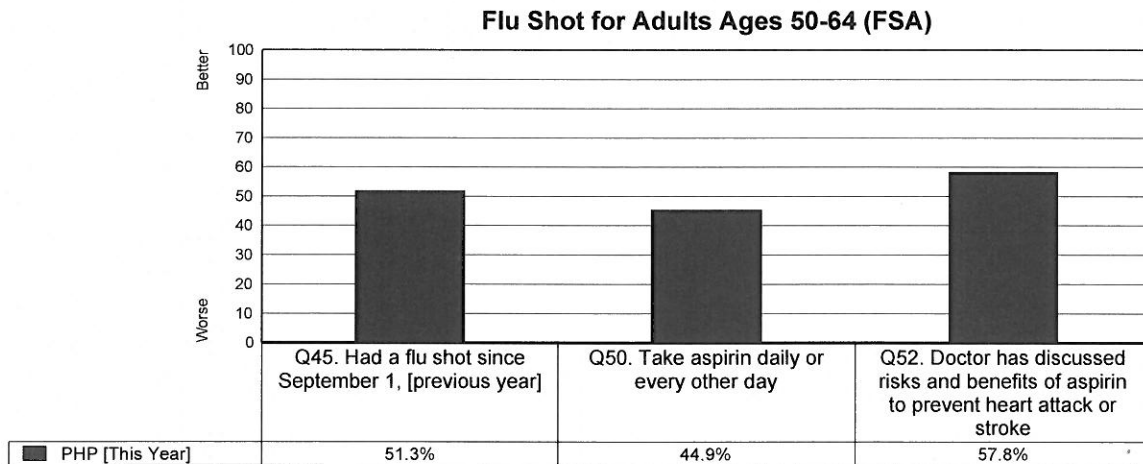
SAMPLE

The Flu Shot for Adults Ages 50-64 measure is based on a single question about getting a flu shot. The score represents the proportion of members age 50-64 who were continuously enrolled during the measurement year and who received an influenza vaccination between September of the measurement year and the date the survey was completed.

The Aspirin Use and Discussion measure assesses different facets of aspirin use in the primary prevention of cardiovascular disease. The measure is based on two questions, one assessing current aspirin use, and the other asking whether a health provider discussed the risks and benefits of taking aspirin to prevent heart attack or stroke.

The Aspirin Use component includes members in certain risk factor categories who could safely take aspirin (based on the response to Q51), had no cardiovascular disease exclusion (based on the response to Q54), and who answered Q50. The rate represents the proportion of these members who indicated they take aspirin daily or every other day.

The Discussing Aspirin Risks and Benefits component includes members in certain age/gender categories who had no cardiovascular disease exclusion (based on the response to Q54), and who answered Q52. The rate represents the proportion of these members who indicated that a health provider had discussed the risks and benefits of aspirin with them.



SAMPLE

Sample Disposition

	PHP [This Year]
First mailing - sent	1100
*First mailing - usable survey returned	313
Second mailing - sent	823
*Second mailing - usable survey returned	183
*Phone - usable surveys	136
Total - usable surveys	632
†Ineligible: According to population criteria‡	4
†Ineligible: Language barrier	5
†Ineligible: Deceased	2
†Ineligible: Mentally or physically unable to complete survey	3
Bad phone number AND bad address	8
Refusal/Returned survey blank	31
Nonresponse - Unavailable by mail or phone	415
Adjusted Response Rate	58.2%

*Included in response rate numerator

†Excluded from adjusted response rate denominator

‡Population criteria: The designated respondent must be enrolled in the health plan and meet the age requirements of the survey methodology.

Note: *Adjusted Response Rate = Total Usable Surveys / Total Eligible Cases*

SAMPLE

Responses by Question

Q1. Our records show that you are now in Peninsula Health Plan, Inc. Is that right?

	PHP [This Year]	
	N	%
Yes	623	100.0%
No	0	0.0%
Total	623	100.0%
Not Answered	9	

Your Health Care in the Last 12 Months

Q3. In the last 12 months, did you have an illness, injury or condition that needed care right away in a clinic, emergency room or doctor's office?

	PHP [This Year]	
	N	%
Yes	245	39.6%
No	373	60.4%
Total	618	100.0%
Not Answered	14	

Q4. In the last 12 months, when you needed care right away, how often did you get care as soon as you needed?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	4	1.8%
<input type="radio"/> Sometimes	22	9.8%
<input type="radio"/> Usually	62	27.7%
<input type="radio"/> Always	136	60.7%
Total	224	100.0%
Not Answered	21	
Reporting Category	Getting Care Quickly	
Achievement Score	88.4%	

Q5. In the last 12 months, did you make any appointments for check-up or routine care at a doctor's office or clinic?

	PHP [This Year]	
	N	%
Yes	531	86.6%
No	82	13.4%
Total	613	100.0%
Not Answered	19	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Care in the Last 12 Months (continued)

Q6. In the last 12 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	7	1.4%
<input type="radio"/> Sometimes	77	15.9%
<input type="radio"/> Usually	144	29.8%
<input type="radio"/> Always	255	52.8%
Total	483	100.0%
Not Answered	48	
Reporting Category	Getting Care Quickly	
Achievement Score	82.6%	

Q7. In the last 12 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

	PHP [This Year]	
	N	%
None	70	11.6%
1 time	85	14.1%
2	104	17.2%
3	102	16.9%
4	86	14.3%
5 to 9	115	19.1%
10 or more times	41	6.8%
Total	603	100.0%
Not Answered	29	

Q8. In the last 12 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

	PHP [This Year]	
	N	%
<input type="radio"/> Yes	237	45.9%
<input type="radio"/> No	279	54.1%
Total	516	100.0%
Not Answered	17	
Reporting Category	Single Items	
Achievement Score	45.9%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Care in the Last 12 Months (continued)

Q9. In the last 12 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

	PHP [This Year]	
	N	%
Yes	279	54.1%
No	237	45.9%
Total	516	100.0%
Not Answered	17	

Q10. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine?

	PHP [This Year]	
	N	%
<input type="radio"/> Not at all	89	32.1%
<input type="radio"/> A little	18	6.5%
<input type="radio"/> Some	132	47.7%
<input type="radio"/> A lot	38	13.7%
Total	277	100.0%
Not Answered	2	
Reporting Category	Shared Decision Making	
Achievement Score	61.4%	

Q11. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want to take a medicine?

	PHP [This Year]	
	N	%
<input type="radio"/> Not at all	18	6.5%
<input type="radio"/> A little	2	0.7%
<input type="radio"/> Some	38	13.7%
<input type="radio"/> A lot	219	79.1%
Total	277	100.0%
Not Answered	2	
Reporting Category	Shared Decision Making	
Achievement Score	92.8%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Care in the Last 12 Months (continued)

Q12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

	PHP [This Year]	
	N	%
<input type="radio"/> Yes	159	57.0%
<input type="radio"/> No	120	43.0%
Total	279	100.0%
Not Answered	0	
Reporting Category	Shared Decision Making	
Achievement Score	57.0%	

Q13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 12 months?

	PHP [This Year]	
	N	%
<input type="radio"/> Worst health care possible	2	0.4%
<input type="radio"/> 1	0	0.0%
<input type="radio"/> 2	2	0.4%
<input type="radio"/> 3	2	0.4%
<input type="radio"/> 4	8	1.5%
<input type="radio"/> 5	32	6.2%
<input type="radio"/> 6	20	3.9%
<input type="radio"/> 7	71	13.7%
<input type="radio"/> 8	104	20.1%
<input type="radio"/> 9	134	25.9%
<input type="radio"/> Best health care possible	142	27.5%
Total	517	100.0%
Not Answered	16	
Reporting Category	Ratings	
Rating (8, 9 and 10)	73.5%	

Q14. In the last 12 months, how often was it easy to get the care, tests, or treatment you needed?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	10	2.5%
<input type="radio"/> Sometimes	53	13.4%
<input type="radio"/> Usually	126	31.8%
<input type="radio"/> Always	207	52.3%
Total	396	100.0%
Not Answered	12	
Reporting Category	Getting Needed Care	
Achievement Score	84.1%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Personal Doctor

Q15. A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

	PHP [This Year]	
	N	%
Yes	564	92.2%
No	48	7.8%
Total	612	100.0%
Not Answered	20	

Q16. In the last 12 months, how many times did you visit your personal doctor to get care for yourself?

	PHP [This Year]	
	N	%
None	62	11.7%
1 time	100	18.8%
2	121	22.7%
3	102	19.2%
4	60	11.3%
5 to 9	70	13.2%
10 or more times	17	3.2%
Total	532	100.0%
Not Answered	32	

Q17. In the last 12 months, how often did your personal doctor explain things in a way that was easy to understand?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	2	0.4%
<input type="radio"/> Sometimes	23	4.9%
<input type="radio"/> Usually	100	21.4%
<input type="radio"/> Always	342	73.2%
Total	467	100.0%
Not Answered	3	
Reporting Category	Communication	
Achievement Score	94.6%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Personal Doctor (continued)

Q18. In the last 12 months, how often did your personal doctor listen carefully to you?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	3	0.6%
<input type="radio"/> Sometimes	29	6.2%
<input type="radio"/> Usually	112	23.9%
<input type="radio"/> Always	324	69.2%
Total	468	100.0%
Not Answered	2	
Reporting Category	Communication	
Achievement Score	93.2%	

Q19. In the last 12 months, how often did your personal doctor show respect for what you had to say?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	1	0.2%
<input type="radio"/> Sometimes	25	5.4%
<input type="radio"/> Usually	81	17.4%
<input type="radio"/> Always	359	77.0%
Total	466	100.0%
Not Answered	4	
Reporting Category	Communication	
Achievement Score	94.4%	

Q20. In the last 12 months, how often did your personal doctor spend enough time with you?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	8	1.7%
<input type="radio"/> Sometimes	40	8.6%
<input type="radio"/> Usually	113	24.4%
<input type="radio"/> Always	303	65.3%
Total	464	100.0%
Not Answered	6	
Reporting Category	Communication	
Achievement Score	89.7%	

Q21. In the last 12 months, did you get care from a doctor or other health provider besides your personal doctor?

	PHP [This Year]	
	N	%
Yes	282	60.8%
No	182	39.2%
Total	464	100.0%
Not Answered	6	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Personal Doctor (continued)

Q22. In the last 12 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	20	7.5%
<input type="radio"/> Sometimes	42	15.8%
<input type="radio"/> Usually	82	30.9%
<input type="radio"/> Always	121	45.7%
Total	265	100.0%
Not Answered	17	
Reporting Category	Single Items	
Achievement Score	76.6%	

Q23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

	PHP [This Year]	
	N	%
<input type="radio"/> Worst personal doctor possible	1	0.2%
<input type="radio"/> 1	0	0.0%
<input type="radio"/> 2	2	0.4%
<input type="radio"/> 3	4	0.8%
<input type="radio"/> 4	5	0.9%
<input type="radio"/> 5	19	3.6%
<input type="radio"/> 6	16	3.0%
<input type="radio"/> 7	28	5.3%
<input type="radio"/> 8	101	19.1%
<input type="radio"/> 9	128	24.2%
<input type="radio"/> Best personal doctor possible	225	42.5%
Total	529	100.0%
Not Answered	35	
Reporting Category	Ratings	
Rating (8, 9 and 10)	85.8%	

Getting Health Care From Specialists

Q24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care. In the last 12 months, did you try to make any appointments to see a specialist?

	PHP [This Year]	
	N	%
Yes	320	52.5%
No	289	47.5%
Total	609	100.0%
Not Answered	23	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Getting Health Care From Specialists (continued)

Q25. In the last 12 months, how often did you get an appointment to see a specialist as soon as you needed?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	8	2.6%
<input type="radio"/> Sometimes	46	14.7%
<input type="radio"/> Usually	94	30.1%
<input type="radio"/> Always	164	52.6%
Total	312	100.0%
Not Answered	8	
Reporting Category	Getting Needed Care	
Achievement Score	82.7%	

Q26. How many specialists have you seen in the last 12 months?

	PHP [This Year]	
	N	%
None	7	2.2%
1 specialist	152	48.6%
2	95	30.4%
3	39	12.5%
4	12	3.8%
5 or more specialists	8	2.6%
Total	313	100.0%
Not Answered	7	

Q27. We want to know your rating of the specialist you saw most often in the last 12 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

	PHP [This Year]	
	N	%
<input type="radio"/> Worst specialist possible	1	0.3%
<input type="radio"/> 1	2	0.7%
<input type="radio"/> 2	1	0.3%
<input type="radio"/> 3	4	1.3%
<input type="radio"/> 4	2	0.7%
<input type="radio"/> 5	12	4.0%
<input type="radio"/> 6	6	2.0%
<input type="radio"/> 7	15	5.0%
<input type="radio"/> 8	46	15.2%
<input type="radio"/> 9	59	19.5%
<input type="radio"/> Best specialist possible	154	51.0%
Total	302	100.0%
Not Answered	4	
Reporting Category	Ratings	
Rating (8, 9 and 10)	85.8%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Plan

Q28. In the last 12 months, did you look for any information in written materials or on the Internet about how your health plan works?

	PHP [This Year]	
	N	%
Yes	167	27.6%
No	437	72.4%
Total	604	100.0%
Not Answered	28	

Q29. In the last 12 months, how often did the written materials or the Internet provide the information you needed about how your health plan works?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	7	4.3%
<input type="radio"/> Sometimes	52	32.1%
<input type="radio"/> Usually	69	42.6%
<input type="radio"/> Always	34	21.0%
Total	162	100.0%
Not Answered	5	
Reporting Category	Single Items	
Achievement Score	63.6%	

Q30. Sometimes people need services or equipment beyond what is provided in a regular or routine office visit, such as care from a specialist, physical therapy, a hearing aid, or oxygen. In the last 12 months, did you look for information from your health plan on how much you would have to pay for a health care service or equipment?

	PHP [This Year]	
	N	%
Yes	102	16.9%
No	500	83.1%
Total	602	100.0%
Not Answered	30	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Plan (continued)

Q31. In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	17	17.5%
<input type="radio"/> Sometimes	24	24.7%
<input type="radio"/> Usually	27	27.8%
<input type="radio"/> Always	29	29.9%
Total	97	100.0%
Not Answered	5	
Reporting Category	Plan Info on Costs	
Achievement Score	57.7%	

Q32. In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy. In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

	PHP [This Year]	
	N	%
Yes	120	20.0%
No	481	80.0%
Total	601	100.0%
Not Answered	31	

Q33. In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	13	11.3%
<input type="radio"/> Sometimes	33	28.7%
<input type="radio"/> Usually	32	27.8%
<input type="radio"/> Always	37	32.2%
Total	115	100.0%
Not Answered	5	
Reporting Category	Plan Info on Costs	
Achievement Score	60.0%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Plan (continued)

Q34. In the last 12 months, did you get information or help from your health plan's customer service?

	PHP [This Year]	
	N	%
Yes	184	30.7%
No	415	69.3%
Total	599	100.0%
Not Answered	33	

Q35. In the last 12 months, how often did your health plan's customer service give you the information or help you needed?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	12	6.7%
<input type="radio"/> Sometimes	45	25.0%
<input type="radio"/> Usually	49	27.2%
<input type="radio"/> Always	74	41.1%
Total	180	100.0%
Not Answered	4	
Reporting Category	Customer Service	
Achievement Score	68.3%	

Q36. In the last 12 months, how often did your health plan's customer service staff treat you with courtesy and respect?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	5	2.8%
<input type="radio"/> Sometimes	17	9.4%
<input type="radio"/> Usually	46	25.4%
<input type="radio"/> Always	113	62.4%
Total	181	100.0%
Not Answered	3	
Reporting Category	Customer Service	
Achievement Score	87.8%	

Q37. In the last 12 months, did your health plan give you any forms to fill out?

	PHP [This Year]	
	N	%
Yes	112	18.7%
No	488	81.3%
Total	600	100.0%
Not Answered	32	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Plan (continued)

PQ38. In the last 12 months, how often were the forms from your health plan easy to fill out? [NOTE: Response of 'Always' padded with Q37 = 'No', based on NCQA scoring guidelines.]

	PHP [This Year]	
	N	%
<input type="radio"/> Never	4	3.7%
<input type="radio"/> Sometimes	16	14.8%
<input type="radio"/> Usually	54	50.0%
<input type="radio"/> Always	34	31.5%
Total	108	100.0%
Not Answered	4	
Reporting Category	Single Items	
Achievement Score	81.5%	

Q39. Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you. In the last 12 months, did you or anyone else send in any claims for your care to your health plan?

	PHP [This Year]	
	N	%
Yes	248	49.2%
No	256	50.8%
Don't Know	99	
Total	504	100.0%
Not Answered	29	

Q40. In the last 12 months, how often did your health plan handle your claims quickly?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	6	3.0%
<input type="radio"/> Sometimes	26	13.2%
<input type="radio"/> Usually	69	35.0%
<input type="radio"/> Always	96	48.7%
Don't Know	49	
Total	197	100.0%
Not Answered	2	
Reporting Category	Claims Processing	
Achievement Score	83.8%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

Your Health Plan (continued)

Q41. In the last 12 months, how often did your health plan handle your claims correctly?

	PHP [This Year]	
	N	%
<input type="radio"/> Never	1	0.5%
<input type="radio"/> Sometimes	21	10.7%
<input type="radio"/> Usually	61	31.1%
<input type="radio"/> Always	113	57.7%
Don't Know	49	
Total	196	100.0%
Not Answered	3	
Reporting Category	Claims Processing	
Achievement Score	88.8%	

Q42. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

	PHP [This Year]	
	N	%
<input type="radio"/> Worst health plan possible	2	0.3%
<input type="radio"/> 1	4	0.7%
<input type="radio"/> 2	4	0.7%
<input type="radio"/> 3	6	1.0%
<input type="radio"/> 4	12	2.0%
<input type="radio"/> 5	54	9.0%
<input type="radio"/> 6	37	6.2%
<input type="radio"/> 7	88	14.7%
<input type="radio"/> 8	119	19.9%
<input type="radio"/> 9	166	27.8%
<input type="radio"/> Best health plan possible	105	17.6%
Total	597	100.0%
Not Answered	35	
Reporting Category	Ratings	
Rating (8, 9 and 10)	65.3%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

About You

Q43. In general, how would you rate your overall health?

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Excellent	118	19.5%
<input checked="" type="radio"/> Very Good	264	43.7%
<input checked="" type="radio"/> Good	180	29.8%
<input checked="" type="radio"/> Fair	38	6.3%
<input checked="" type="radio"/> Poor	4	0.7%
Total	604	100.0%
Not Answered	28	
Reporting Category	Single Items	
Achievement Score	63.2%	

Q44. In general, how would you rate your overall mental or emotional health?

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Excellent	264	43.7%
<input checked="" type="radio"/> Very Good	180	29.8%
<input checked="" type="radio"/> Good	38	6.3%
<input checked="" type="radio"/> Fair	4	0.7%
<input checked="" type="radio"/> Poor	118	19.5%
Total	604	100.0%
Not Answered	28	
Reporting Category	Single Items	
Achievement Score	73.5%	

Q45. Have you had a flu shot since September 1, [previous year]?

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Yes	134	51.3%
<input checked="" type="radio"/> No	127	48.7%
Don't Know	2	
Total	261	100.0%
Not Answered	9	
Reporting Category	Flu Shot for Adults	
Achievement Score	51.3%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

About You (continued)

Q46. Do you now smoke cigarettes or use tobacco every day, some days or not at all?

	PHP [This Year]	
	N	%
Every day	38	6.4%
Some days	39	6.5%
Not at all	521	87.1%
Don't Know	3	
Total	598	100.0%
Not Answered	31	

Q47. In the last 12 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Never	12	15.8%
<input checked="" type="radio"/> Sometimes	23	30.3%
<input checked="" type="radio"/> Usually	17	22.4%
<input checked="" type="radio"/> Always	24	31.6%
Total	76	100.0%
Not Answered	1	
Reporting Category	Medical Assistance with Smoking Cessation	
Achievement Score	84.2%	

Q48. In the last 12 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco? Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Never	36	48.0%
<input checked="" type="radio"/> Sometimes	15	20.0%
<input checked="" type="radio"/> Usually	11	14.7%
<input checked="" type="radio"/> Always	13	17.3%
Total	75	100.0%
Not Answered	2	
Reporting Category	Medical Assistance with Smoking Cessation	
Achievement Score	52.0%	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

About You (continued)

Q49. In the last 12 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Never	42	56.8%
<input checked="" type="radio"/> Sometimes	12	16.2%
<input checked="" type="radio"/> Usually	9	12.2%
<input checked="" type="radio"/> Always	11	14.9%
Total	74	100.0%
Not Answered	3	
Reporting Category	Medical Assistance with Smoking Cessation	
Achievement Score	43.2%	

Q50. Do you take aspirin daily or every other day? [NOTE: Data presented for eligible respondents determined by NCQA scoring guidelines.]

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Yes	35	44.9%
<input checked="" type="radio"/> No	43	55.1%
Don't know	0	0.0%
Total	78	100.0%
Not Answered	0	
Reporting Category	Aspirin Use and Discussion	
Achievement Score	44.9%	

Q51. Do you have a health problem or take medication that makes taking aspirin unsafe for you?

	PHP [This Year]	
	N	%
Yes	38	6.6%
No	534	93.4%
Don't know	27	
Total	572	100.0%
Not Answered	33	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

About You (continued)

Q52. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke? [NOTE: Data presented for eligible respondents determined by NCQA scoring guidelines.]

	PHP [This Year]	
	N	%
<input checked="" type="radio"/> Yes	111	57.8%
<input checked="" type="radio"/> No	81	42.2%
Total	192	100.0%
Not Answered	0	
Reporting Category	Aspirin Use and Discussion	
Achievement Score	57.8%	

Q53.1. Are you aware that you have any of the following conditions? Response: High cholesterol

	PHP [This Year]	
	N	%
Yes	154	24.4%
No	478	75.6%
Total	632	100.0%
Not Answered	0	

Q53.2. Are you aware that you have any of the following conditions? Response: High blood pressure

	PHP [This Year]	
	N	%
Yes	155	24.5%
No	477	75.5%
Total	632	100.0%
Not Answered	0	

Q53.3. Are you aware that you have any of the following conditions? Response: Parent or sibling with heart attack before the age of 60

	PHP [This Year]	
	N	%
Yes	74	11.7%
No	558	88.3%
Total	632	100.0%
Not Answered	0	

Response scored as: Achievement Room for improvement

SAMPLE

Responses by Question

About You (continued)

Q54.1. Has a doctor ever told you that you have any of the following conditions? Response: A heart attack

	PHP [This Year]	
	N	%
Yes	18	2.8%
No	614	97.2%
Total	632	100.0%
Not Answered	0	

Q54.2. Has a doctor ever told you that you have any of the following conditions? Response: Angina or coronary heart disease

	PHP [This Year]	
	N	%
Yes	12	1.9%
No	620	98.1%
Total	632	100.0%
Not Answered	0	

Q54.3. Has a doctor ever told you that you have any of the following conditions? Response: A stroke

	PHP [This Year]	
	N	%
Yes	6	0.9%
No	626	99.1%
Total	632	100.0%
Not Answered	0	

Q54.4. Has a doctor ever told you that you have any of the following conditions? Response: Any kind of diabetes or high blood sugar

	PHP [This Year]	
	N	%
Yes	60	9.5%
No	572	90.5%
Total	632	100.0%
Not Answered	0	

Q55. In the last 12 months, did you get health care 3 or more times for the same condition or problem?

	PHP [This Year]	
	N	%
Yes	188	31.5%
No	408	68.5%
Total	596	100.0%
Not Answered	36	

SAMPLE

Responses by Question

About You (continued)

Q56. Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy or menopause.

	PHP [This Year]	
	N	%
Yes	164	88.6%
No	21	11.4%
Total	185	100.0%
Not Answered	3	

Q57. Do you now need or take medicine prescribed by a doctor? Do not include birth control.

	PHP [This Year]	
	N	%
Yes	359	60.1%
No	238	39.9%
Total	597	100.0%
Not Answered	35	

Q58. Is this medicine to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.

	PHP [This Year]	
	N	%
Yes	322	91.7%
No	29	8.3%
Total	351	100.0%
Not Answered	8	

Q59. What is your age?

	PHP [This Year]	
	N	%
18 to 24	51	8.5%
25 to 34	87	14.5%
35 to 44	103	17.2%
45 to 54	137	22.8%
55 to 64	191	31.8%
65 to 74	27	4.5%
75 or older	4	0.7%
Total	600	100.0%
Not Answered	32	

SAMPLE

Responses by Question

About You (continued)

Q60. Are you male or female?

	PHP [This Year]	
	N	%
Male	246	40.9%
Female	355	59.1%
Total	601	100.0%
Not Answered	31	

Q61. What is the highest grade or level of school that you have completed?

	PHP [This Year]	
	N	%
8th grade or less	3	0.5%
Some high school but did not graduate	20	3.4%
High school graduate or GED	102	17.1%
Some college or 2-year degree	242	40.5%
4-year college graduate	142	23.8%
More than 4-year college degree	88	14.7%
Total	597	100.0%
Not Answered	35	

Q62. Are you of Hispanic or Latino origin or descent?

	PHP [This Year]	
	N	%
Yes, Hispanic or Latino	68	11.5%
No, Not Hispanic or Latino	525	88.5%
Total	593	100.0%
Not Answered	39	

Q63.1. What is your race? Response: White.

	PHP [This Year]	
	N	%
Yes	465	73.6%
No	167	26.4%
Total	632	100.0%
Not Answered	0	

SAMPLE

Responses by Question

About You (continued)

Q63.2. What is your race? Response: Black or African-American.

	PHP [This Year]	
	N	%
Yes	23	3.6%
No	609	96.4%
Total	632	100.0%
Not Answered	0	

Q63.3. What is your race? Response: Asian.

	PHP [This Year]	
	N	%
Yes	55	8.7%
No	577	91.3%
Total	632	100.0%
Not Answered	0	

Q63.4. What is your race? Response: Native Hawaiian or other Pacific Islander.

	PHP [This Year]	
	N	%
Yes	6	0.9%
No	626	99.1%
Total	632	100.0%
Not Answered	0	

Q63.5. What is your race? Response: American Indian or Alaskan Native.

	PHP [This Year]	
	N	%
Yes	11	1.7%
No	621	98.3%
Total	632	100.0%
Not Answered	0	

Q63.6. What is your race? Response: Other.

	PHP [This Year]	
	N	%
Yes	50	7.9%
No	582	92.1%
Total	632	100.0%
Not Answered	0	

SAMPLE

Responses by Question

About You (continued)

Q64. Did someone help you complete this survey?

	PHP [This Year]	
	N	%
Yes	22	3.5%
No	608	96.5%
Total	630	100.0%
Not Answered	2	

Q65.1. How did that person help you? Response: Read the questions to me.

	PHP [This Year]	
	N	%
Yes	7	31.8%
No	15	68.2%
Total	22	100.0%
Not Answered	0	

Q65.2. How did that person help you? Response: Wrote down the answers I gave.

	PHP [This Year]	
	N	%
Yes	6	27.3%
No	16	72.7%
Total	22	100.0%
Not Answered	0	

Q65.3. How did that person help you? Response: Answered the questions for me.

	PHP [This Year]	
	N	%
Yes	7	31.8%
No	15	68.2%
Total	22	100.0%
Not Answered	0	

Q65.4. How did that person help you? Response: Translated the questions into my language.

	PHP [This Year]	
	N	%
Yes	3	13.6%
No	19	86.4%
Total	22	100.0%
Not Answered	0	

SAMPLE

Responses by Question

About You (continued)

Q65.5. How did that person help you? Response: Helped in some other way.

	PHP [This Year]	
	N	%
Yes	8	36.4%
No	14	63.6%
Total	22	100.0%
Not Answered	0	



Your privacy is protected. All information that would let someone identify you or your family will be kept private. DataStat will not share your personal information with anyone without your OK.

You may choose to answer this survey or not. If you choose not to, this will not affect the benefits you get. You may notice a number on the cover of this survey. This number is ONLY used to let us know if you returned the survey so we don't have to send you reminders.

If you want to know more about this study, please call 1-888-XXX-XXXX.

SURVEY INSTRUCTIONS

- Please be sure to fill the response circle completely. Use only black or blue ink or dark pencil to complete the survey.

Correct Mark 

Incorrect Marks



- You are sometimes told to skip over some questions in the survey. When this happens you will see an arrow with a note that tells you what question to answer next, like this:

Yes → *Go to Question 1*
 No

↓ **START HERE** ↓

1. Our records show that you are now in [HEALTH PLAN NAME]. Is that right?

- Yes → *Go to Question 3*
- No

2. What is the name of your health plan? (Please print)



YOUR HEALTH CARE IN THE LAST 12 MONTHS

These questions ask about your own health care. Do not include care you got when you stayed overnight in a hospital. Do not include the times you went for dental care visits.

3. In the last 12 months, did you have an illness, injury, or condition that needed care right away in a clinic, emergency room, or doctor's office?

- Yes
- No → *Go to Question 5*

4. In the last 12 months, when you needed care right away, how often did you get care as soon as you needed?

- Never
- Sometimes
- Usually
- Always

5. In the last 12 months, did you make any appointments for a check-up or routine care at a doctor's office or clinic?

- Yes
- No → *Go to Question 7*

6. In the last 12 months, how often did you get an appointment for a check-up or routine care at a doctor's office or clinic as soon as you needed?

- Never
- Sometimes
- Usually
- Always

7. In the last 12 months, not counting the times you went to an emergency room, how many times did you go to a doctor's office or clinic to get health care for yourself?

- None → *Go to Question 15*
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

8. In the last 12 months, did you and a doctor or other health provider talk about specific things you could do to prevent illness?

- Yes
- No

9. In the last 12 months, did you and a doctor or other health provider talk about starting or stopping a prescription medicine?

- Yes
- No → *Go to Question 13*

10. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might want to take a medicine?

- Not at all
- A little
- Some
- A lot

11. When you talked about starting or stopping a prescription medicine, how much did a doctor or other health provider talk about the reasons you might not want to take a medicine?

- Not at all
- A little
- Some
- A lot

12. When you talked about starting or stopping a prescription medicine, did a doctor or other health provider ask you what you thought was best for you?

- Yes
- No

13. Using any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible, what number would you use to rate all your health care in the last 12 months?

- 0
 - 1
 - 2
 - 3
 - 4
 - 5
 - 6
 - 7
 - 8
 - 9
 - 10
- Worst Health Care Possible Best Health Care Possible



14. In the last 12 months, how often was it easy to get the care, tests, or treatment you needed?

- Never
- Sometimes
- Usually
- Always

YOUR PERSONAL DOCTOR

15. A personal doctor is the one you would see if you need a check-up, want advice about a health problem, or get sick or hurt. Do you have a personal doctor?

- Yes
- No → Go to Question 24

16. In the last 12 months, how many times did you visit your personal doctor to get care for yourself?

- None → Go to Question 23
- 1 time
- 2
- 3
- 4
- 5 to 9
- 10 or more times

17. In the last 12 months, how often did your personal doctor explain things in a way that was easy to understand?

- Never
- Sometimes
- Usually
- Always

18. In the last 12 months, how often did your personal doctor listen carefully to you?

- Never
- Sometimes
- Usually
- Always

19. In the last 12 months, how often did your personal doctor show respect for what you had to say?

- Never
- Sometimes
- Usually
- Always

20. In the last 12 months, how often did your personal doctor spend enough time with you?

- Never
- Sometimes
- Usually
- Always

21. In the last 12 months, did you get care from a doctor or other health provider besides your personal doctor?

- Yes
- No → Go to Question 23

22. In the last 12 months, how often did your personal doctor seem informed and up-to-date about the care you got from these doctors or other health providers?

- Never
- Sometimes
- Usually
- Always

23. Using any number from 0 to 10, where 0 is the worst personal doctor possible and 10 is the best personal doctor possible, what number would you use to rate your personal doctor?

○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○ ○

0 1 2 3 4 5 6 7 8 9 10

Worst Best

Personal Doctor Personal Doctor

Possible Possible



GETTING HEALTH CARE FROM SPECIALISTS

When you answer the next questions, do not include dental visits or care you got when you stayed overnight in a hospital.

24. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.

In the last 12 months, did you make any appointments to see a specialist?

- Yes
- No → Go to Question 28

25. In the last 12 months, how often did you get an appointment to see a specialist as soon as you needed?

- Never
- Sometimes
- Usually
- Always

26. How many specialists have you seen in the last 12 months?

- None → Go to Question 28
- 1 specialist
- 2
- 3
- 4
- 5 or more specialists

27. We want to know your rating of the specialist you saw most often in the last 12 months. Using any number from 0 to 10, where 0 is the worst specialist possible and 10 is the best specialist possible, what number would you use to rate that specialist?

0 1 2 3 4 5 6 7 8 9 10

Worst Specialist Possible Best Specialist Possible

YOUR HEALTH PLAN

The next questions ask about your experience with your health plan.

28. In the last 12 months, did you look for any information in written materials or on the Internet about how your health plan works?

- Yes
- No → Go to Question 30

29. In the last 12 months, how often did the written materials or the Internet provide the information you needed about how your health plan works?

- Never
- Sometimes
- Usually
- Always

30. Sometimes people need services or equipment beyond what is provided in a regular or routine office visit, such as care from a specialist, physical therapy, a hearing aid, or oxygen.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for a health care service or equipment?

- Yes
- No → Go to Question 32

31. In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for a health care service or equipment?

- Never
- Sometimes
- Usually
- Always



32. In some health plans the amount you pay for a prescription medicine can be different for different medicines, or can be different for prescriptions filled by mail instead of at the pharmacy.

In the last 12 months, did you look for information from your health plan on how much you would have to pay for specific prescription medicines?

- Yes
- No → Go to Question 34

33. In the last 12 months, how often were you able to find out from your health plan how much you would have to pay for specific prescription medicines?

- Never
- Sometimes
- Usually
- Always

34. In the last 12 months, did you get information or help from your health plan's customer service?

- Yes
- No → Go to Question 37

35. In the last 12 months, how often did your health plan's customer service give you the information or help you needed?

- Never
- Sometimes
- Usually
- Always

36. In the last 12 months, how often did your health plan's customer service staff treat you with courtesy and respect?

- Never
- Sometimes
- Usually
- Always

37. In the last 12 months, did your health plan give you any forms to fill out?

- Yes
- No → Go to Question 39

38. In the last 12 months, how often were the forms from your health plan easy to fill out?

- Never
- Sometimes
- Usually
- Always

39. Claims are sent to a health plan for payment. You may send in the claims yourself, or doctors, hospitals, or others may do this for you.

In the last 12 months, did you or anyone else send in any claims for your care to your health plan?

- Yes
- No → Go to Question 42
- Don't know → Go to Question 42

40. In the last 12 months, how often did your health plan handle your claims quickly?

- Never
- Sometimes
- Usually
- Always
- Don't know

41. In the last 12 months, how often did your health plan handle your claims correctly?

- Never
- Sometimes
- Usually
- Always
- Don't know

42. Using any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible, what number would you use to rate your health plan?

-
- 0 1 2 3 4 5 6 7 8 9 10
- Worst Health Plan Possible Best Health Plan Possible



ABOUT YOU

43. In general, how would you rate your overall health?

- Excellent
- Very good
- Good
- Fair
- Poor

44. In general, how would you rate your overall mental or emotional health?

- Excellent
- Very good
- Good
- Fair
- Poor

45. Have you had a flu shot since September 1, 2012?

- Yes
- No
- Don't know

46. Do you now smoke cigarettes or use tobacco every day, some days, or not at all?

- Every day
- Some days
- Not at all → *Go to Question 50*
- Don't know → *Go to Question 50*

47. In the last 12 months, how often were you advised to quit smoking or using tobacco by a doctor or other health provider in your plan?

- Never
- Sometimes
- Usually
- Always

48. In the last 12 months, how often was medication recommended or discussed by a doctor or health provider to assist you with quitting smoking or using tobacco?

Examples of medication are: nicotine gum, patch, nasal spray, inhaler, or prescription medication.

- Never
- Sometimes
- Usually
- Always

49. In the last 12 months, how often did your doctor or health provider discuss or provide methods and strategies other than medication to assist you with quitting smoking or using tobacco? Examples of methods and strategies are: telephone helpline, individual or group counseling, or cessation program.

- Never
- Sometimes
- Usually
- Always

50. Do you take aspirin daily or every other day?

- Yes
- No
- Don't know

51. Do you have a health problem or take medication that makes taking aspirin unsafe for you?

- Yes
- No
- Don't know

52. Has a doctor or health provider ever discussed with you the risks and benefits of aspirin to prevent heart attack or stroke?

- Yes
- No

53. Are you aware that you have any of the following conditions? Mark one or more.

- High cholesterol
- High blood pressure
- Parent or sibling with heart attack before the age of 60

54. Has a doctor ever told you that you have any of the following conditions? Mark one or more.

- A heart attack
- Angina or coronary heart disease
- A stroke
- Any kind of diabetes or high blood sugar

55. In the last 12 months, did you get health care 3 or more times for the same condition or problem?

- Yes
- No → *Go to Question 57*

56. Is this a condition or problem that has lasted for at least 3 months? Do not include pregnancy or menopause.

- Yes
- No

57. Do you now need or take medicine prescribed by a doctor? Do not include birth control.

- Yes
- No → *Go to Question 59*

58. Is this medicine to treat a condition that has lasted for at least 3 months? Do not include pregnancy or menopause.

- Yes
- No

59. What is your age?

- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75 or older

60. Are you male or female?

- Male
- Female

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

- 8th grade or less
- Some high school, but did not graduate
- High school graduate or GED
- Some college or 2-year degree
- 4-year college graduate
- More than 4-year college degree

62. Are you of Hispanic or Latino origin or descent?

- Yes, Hispanic or Latino
- No, Not Hispanic or Latino

63. What is your race? Mark one or more.

- White
- Black or African-American
- Asian
- Native Hawaiian or other Pacific Islander
- American Indian or Alaska Native
- Other

64. Did someone help you complete this survey?

- Yes → *Go to Question 65*
- No → *Thank you. Please return the completed survey in the postage-paid envelope.*

65. How did that person help you? Mark one or more.

- Read the questions to me
- Wrote down the answers I gave
- Answered the questions for me
- Translated the questions into my language
- Helped in some other way

Thanks again for taking the time to complete this survey! Your answers are greatly appreciated.

When you are done, please use the enclosed prepaid envelope to mail the survey to:

**DataStat, 3975 Research Park Drive, Ann Arbor, MI
48108**





001



08

ADCOM



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Solicitation

NUMBER
BMS14056

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER
304-558-0067

VENDOR

DATASTAT, INC.
 ELLEN M. JOHNSON
 3975 RESEARCH PARK DRIVE
 ANN ARBOR, MI 48102

SHIP TO

HEALTH AND HUMAN RESOURCES
 BUREAU FOR MEDICAL SERVICES
 ROOM 251
 350 CAPITOL STREET
 CHARLESTON, WV
 25301-3709 304-558-1737

DATE PRINTED
10/02/2013

BID OPENING DATE: 10/16/2013

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 1						
ADDENDUM IS ISSUED:						
1. TO PROVIDE RESPONSES TO VENDORS' QUESTIONS REGARDING THE ABOVE SOLICITATION. QUESTION AND ANSWER PAGES ARE ATTACHED.						
2. TO PROVIDE ADDENDUM ACKNOWLEDGEMENT. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN THE DISQUALIFICATION OF YOUR BID.						
***** END OF ADDENDUM NO. 1 *****						

SIGNATURE	ELEN JOHNSON	TELEPHONE 334.994.0540 x158	DATE 10 October 2013
TITLE HEALTH CARE RESEARCH MANAGER	FEIN 38-2791120	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE IDENTIFIED 'VENDOR'



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Solicitation

NUMBER
BMS14056

PAGE
2

ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER
304-558-0067

RFQ COPY

TYPE NAME/ADDRESS HERE

VENDOR

SHIP TO

HEALTH AND HUMAN RESOURCES
 BUREAU FOR MEDICAL SERVICES
 ROOM 251
 350 CAPITOL STREET
 CHARLESTON, WV
 25301-3709 304-558-1737

DATE PRINTED
10/02/2013

BID OPENING DATE: 10/16/2013

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1,898	EA		961-60		
	CALENDAR YEAR 2012 HEDIS SURVEY					
0002	1,898	EA		961-60		
	CALENDAR YEAR 2013 HEDIS SURVEY					
***** THIS IS THE END OF RFQ BMS14056 ***** TOTAL:						

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	10 OCTOBER 2013
ADDRESS CHANGES TO BE NOTED ABOVE		

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELLED 'VENDOR'

State of West Virginia VENDOR PREFERENCE CERTIFICATE

Certification and application* is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37. (Does not apply to construction contracts). *West Virginia Code*, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

NO VENDOR PREFERENCE REQUESTED.

1. **Application is made for 2.5% resident vendor preference for the reason checked:**
 Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
 Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,
 Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,
2. **Application is made for 2.5% resident vendor preference for the reason checked:**
 Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
3. **Application is made for 2.5% resident vendor preference for the reason checked:**
 Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,
4. **Application is made for 5% resident vendor preference for the reason checked:**
 Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. **Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:**
 Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,
6. **Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:**
 Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
7. **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code* §5A-3-59 and *West Virginia Code of State Rules*.**
 Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the requirements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency or deducted from any unpaid balance on the contract or purchase order.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor any other information deemed by the Tax Commissioner to be confidential.

Under penalty of law for false swearing (*West Virginia Code*, §61-5-3), Bidder hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: DATASTAT INC

Signed: [Signature]

Date: 10 OCTOBER 2013

Title: ELLEN JOHNSON HEALTHCARE

RESEARCH MANAGER

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: DATA STAT INC.

Authorized Signature: [Signature] Date: 10 October 2013
ELLEN JOHNSON, HEALTH CARE RESEARCH MANAGER

State of Michigan

County of Washtenaw, to-wit:

Taken, subscribed, and sworn to before me this 10th day of October, 2013.

My Commission expires May 22, 2019.

AFFIX SEAL HERE

NOTARY PUBLIC [Signature]

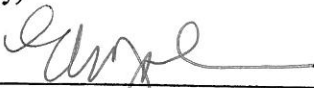
DENNIS D. TICKNOR
Commission Date May 16, 2013
Commission expires May 22, 2019
Acting and living in Washtenaw County

CERTIFICATION AND SIGNATURE PAGE

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

DATA STAT INC.

(Company)



(Authorized Signature)

ELLEN JOHNSON HEALTH CARE RESEARCH MANAGER

(Representative Name, Title)

P: 734.994.0540 x158 F: 734.663.9084

(Phone Number)

(Fax Number)

10 OCTOBER 2013

(Date)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: BMS14056

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

DATA STAT INC.

Company



Authorized Signature

10 October 2013

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.