2018 Arizona Home and Community-Based Services (HCBS) Consumer Assessment of Healthcare Providers and Systems (CAHPS) Member Satisfaction Report

August 2018





Table of Contents

1.	Introduction	1-1
2.	Survey Administration	2-1
	Survey Administration and Response Rates	
	Survey Administration	
	Response Rates	2-2
	Respondent Demographics	2-4
3.	Results	3-1
	Statewide Results	3-3
	Alternate Response Questions and Responses	3-3
	Global Ratings	3-4
	Composite Measures	
	Recommendation Measures	3-7
	Unmet Need Measures	3-8
	Physical Safety Measure	3-9
	Flu Shot	3-10
	Employment Module Items	3-11
4.	Reader's Guide	4-1
	Survey Administration	4-1
	Survey Overview	4-1
	Sampling Procedures	4-4
	Survey Protocol	4-4
	Methodology	4-6
	Response Rates	4-6
	Respondent Demographics	
	Alternative Scale Transformation of Data	
	Statewide Results	4-8
	Limitations and Cautions	
	Non-Response Bias	
	Causal Inferences	
	Low Number of Responses	
	Survey Mode	4-9
5.	Survey Instrument	5-1



1. Introduction

The State of Arizona required the administration of member satisfaction surveys to Medicaid members enrolled in the Arizona Health Care Cost Containment System (AHCCCS) and receiving home and community-based services (HCBS) in the long-term managed care organizations (MCOs) and the Developmental Disabilities (DD) program. AHCCCS contracted with Health Services Advisory Group, Inc. (HSAG) to administer and report the results of the HCBS Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey. 1-1 The goal of the HCBS CAHPS Survey is to provide performance feedback that is actionable and that will aid in improving overall member satisfaction.

The survey instrument selected was the HCBS CAHPS Survey with the Supplemental Employment Module.¹⁻² Members from the MCOs and DD program completed the survey from March to May 2018. Table 1-1 provides a list of the entities that participated in the HCBS CAHPS Survey for the AHCCCS HCBS Program.

Table 1-1—Participating Entities

Entity Name
Banner - University Family Care
Mercy Care Plan
United Healthcare
DD Program

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

¹⁻² AHCCCS added an additional question to the survey asking if members had a flu shot since July 1, 2017.



2. Survey Administration

Survey Administration and Response Rates

Survey Administration

Members eligible for sampling must have met the following criteria to be included in the survey:

- Were 18 years of age or older as of December 31, 2017.
- Were developmentally disabled or had a recognized disability.
- Received at least one qualifying HCBS service (i.e., personal care, behavioral health support, homemaker services, case management, or medical transportation).
- Were enrolled in one of the long-term MCOs or DD Program at the time the sample was drawn.
- Were continuously enrolled during the last three months of the measurement period (October through December 2017).

A total of 420 members was selected from each health plan/program, except for Banner-University Family Care. The sample size for Banner-University Family Care was 105 members, which was the health plan's entire eligible population.

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 sponsored by the federal government and endorsed by AHCCCS. The pre-notification letter provided to members was in English with a Spanish back side containing the same information. After the pre-notification letters were mailed out, Computer Assisted Telephone Interviewing (CATI) was conducted for members to complete the survey over the telephone. Up to five CATI calls were made to each member. Additional information on the survey protocol is included in the Reader's Guide section beginning on page 4-4.



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.²⁻¹ 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 eligible population criteria), had a language barrier, or were mentally or physically incapacitated.

Table 2-1 depicts the sample distribution and response rates for each participating health plan/program. Please note, the number of failed cognitive screening surveys are presented as a reference.

Plan/Program Name	Total Sample	Ineligible Records	Eligible Sample	Failed Cognitive Screening	Total Respondents	Response Rate
Program Aggregate	1,365	130	1,235	49	87	7.04%
Banner - University Family Care	105	9	96	3	10	10.42%
Mercy Care Plan	420	37	383	12	33	8.62%
United Healthcare	420	33	387	18	33	8.53%
DD Program	420	51	369	16	11	2.98%

Table 2-1—Sample Distribution and Response Rate

Recommendations to Increase Response Rates

If AHCCCS chooses to administer the HCBS CAHPS survey in future years, HSAG recommends the following areas that AHCCCS should focus on to assist with increasing the number of completed surveys:²⁻²

- If possible, increase the sample size for each reporting unit in order to obtain an adequate number of
 responses to the survey and reliably compare scores. Surveying MCOs with approximately 400
 members or less may not yield enough completed responses to produce reliable results for some
 measures.
- Continue to allow respondents to ask for an un-paid proxy respondent to complete the survey on the member's behalf.

²⁻¹ Eligible questions included any question in the survey between Question 4 and Question 124.

²⁻² Stokes T, Smith M, Lida K, et al. Truven Health Analytics: January TEFT Grantee Training: Part I. January 2017. Available at: https://www.medicaid.gov/medicaid/ltss/downloads/teft-program/transcript-011017training.pdf. Accessed on: August 6, 2018.



- Perform an additional round of calls toward the end of the survey field for all cases initially coded as incapacitated. This allows respondents another opportunity to offer a proxy respondent or set a callback appointment for when a proxy respondent would likely be available.
- Send a reminder postcard to non-respondents four to 10 days after the first CATI is conducted to remind them to expect a telephone call to complete the survey.



Respondent Demographics

Table 2-2 shows respondents' self-reported age, gender, race, ethnicity, education level, general health status, and proxy responses for the Program Aggregate, MCO Program Aggregate, three MCOs, and DD Program.

Table 2-2—Respondent Demographics

	Program Aggregate	MCO Program Aggregate	Banner - University Family Care	Mercy Care Plan	United Healthcare	DD Program
Age						
64 or Younger	50.7%	43.5%	S	41.4%	53.8%	S
65 or Older	49.3%	56.5%	S	58.6%	46.2%	S
Gender						
Male	39.7%	36.5%	S	44.8%	S	S
Female	60.3%	63.5%	S	55.2%	S	S
Race						
Other	47.7%	50.9%	S	48.0%	S	S
White	52.3%	49.1%	S	52.0%	S	S
Ethnicity						
Hispanic, Latino, or Spanish	34.7%	35.5%	S	S	S	S
Non-Hispanic, Latino, or Spanish	65.3%	64.5%	S	S	S	S
Education Level						
High School Graduate or Less	54.4%	48.3%	S	42.9%	50.0%	S
Some College or College Graduate	45.6%	51.7%	S	57.1%	50.0%	S
General Health Status						
Excellent	S	S	S	S	S	S
Very Good	S	S	S	S	S	S
Good	20.5%	S	S	S	S	S
Fair	31.5%	34.9%	S	41.4%	S	S
Poor	30.1%	31.7%	S	S	40.7%	S
Proxy Responses						
Yes	31.0%	23.7%	S	S	S	S
No	69.0%	76.3%	S	S	S	S

Please note: Percentages may not total 100% due to rounding.



3. Results

The following presents the HCBS CAHPS results for the AHCCCS HCBS Program. The results presented in this section represent an assessment of the members' home and community-based experiences with the MCO Program Aggregate and DD Program.³⁻¹

Table 3-1 displays the HCBS CAHPS measures that were evaluated in this section. In addition, HSAG evaluated the additional flu shot question that AHCCCS added to the survey. Table 3-2, on the following page, displays the areas evaluated with the supplemental employment module.

Table 3-1—HCBS CAHPS Measures

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

³⁻¹ The MCO Program Aggregate scores presented in this section are derived from the combined results of the three MCOs.



Table 3-2—Employment Module Items

Help Finding Employment	Selection of Employment	Reliability and Helpfulness of Job Coach	Ability of Job Coach to Listen and Communicate Well	Satisfaction with and Recommendations for Job Coach
Worked for pay at a job	Respondent helped chose the job he/she has	Had a paid job coach	Job coach treated respondent with courtesy and respect	Rating of job coach
Wanted to work for pay at a job	Work as an unpaid volunteer	Respondent hired job coach	Job coach explain things in a way that is easy to understand	Recommend job coach to family and friends if they needed employment services
Asked for help in getting a job for pay		Job coach was available the entire time while working	Job coach listened carefully	
Knew could get help to find a job for pay		Job coach gave help needed	Job coach encouraged respondent to do things for himself/herself	
Had paid help to get a job				
Got all the help needed to find a job				



Statewide Results

For purposes of calculating the results, mean scores were calculated for each global rating, composite measure, recommendations measure, unmet need measure, physical safety measure, and employment module item. In addition, HSAG calculated mean scores for the flu shot question. Mean scores were calculated in accordance with the Centers for Medicare & Medicaid Services' (CMS') Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey.³⁻² 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 fewer 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 MCOs and DD Program, HSAG combined the MCOs results to form an MCO Program Aggregate and did not perform any statistical comparisons of the results across the MCO Program Aggregate and DD Program.

Alternate Response Questions and Responses

Respondents were provided alternative questions and response options for those respondents who found the standard response scale cognitively challenging. For response options of "Never," "Sometimes," "Usually," and "Always," if the respondent could not use that scale, the alternative version of the survey with response options of "Mostly yes" and "Mostly no" were used. For response options of 0 to 10, if the respondent could not use that scale, the alternative version of the survey with response options of "Excellent," "Very good," "Good," "Fair," or "Poor" were used. 3-3 Additional information on how the responses were scored is included in the Reader's Guide section beginning on page 4-6.

³⁻² Centers for Medicare & Medicaid Services. CAHPS Home and Community Bases Services Survey. Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey. October 2017. Available at: https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/cahps-hcbs-survey/index.html. Accessed on: July 11, 2018.

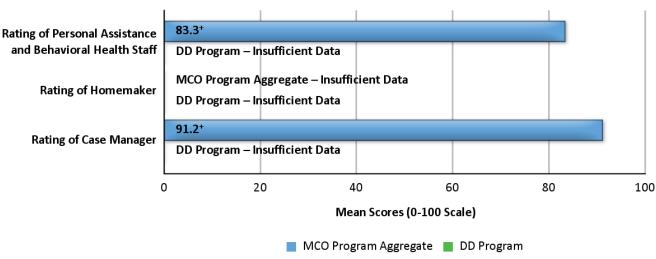
³⁻³ Ibid.



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 2018 mean scores for the MCO Program Aggregate and DD Program for the three global ratings.

Figure 3-1—Global Ratings Mean Scores



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



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 managers 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 knew 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.



State of Arizona

Figure 3-2 shows the 2018 mean scores for the MCO Program Aggregate and DD Program for the seven composite measures.

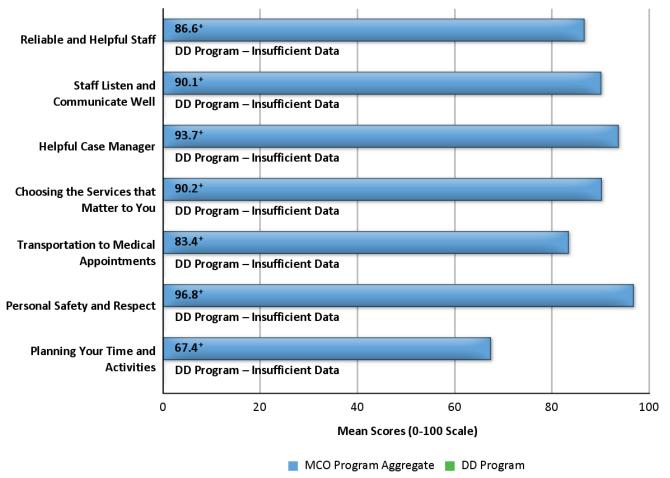


Figure 3-2—Composite Measures Mean Scores

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



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 3-3 shows the 2018 mean scores for the MCO Program Aggregate and DD Program for the three recommendation measures.

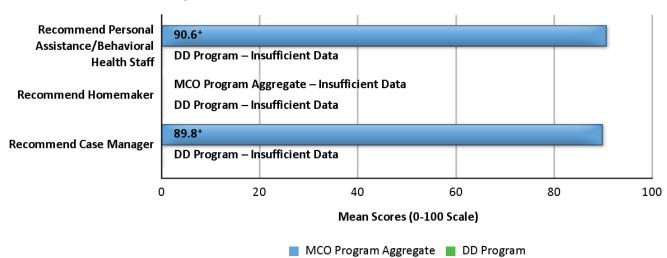


Figure 3-3—Recommendation Measures Mean Scores

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



Unmet Need Measures

The unmet need measures evaluate whether the needs listed above 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.
- **Toileting**—with toileting.
- Medicines—taking their medicines and taking their medicines when they were supposed to.
- **Household Tasks**—completing household tasks, like cleaning and laundry.

Figure 3-4 shows the 2018 mean scores for the MCO Program Aggregate and DD Program for the five unmet need measures. 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.

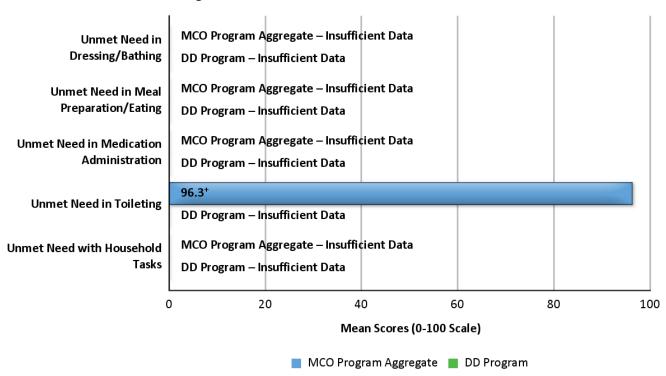


Figure 3-4—Unmet Need Measures Mean Scores

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



Physical Safety Measure

Members were asked if any personal assistance/behavioral health staff hit or hurt them. Figure 3-5 shows the 2018 mean scores for the MCO Program Aggregate and DD Program for the one physical safety measure. This measure is scored so that higher values indicate better care; therefore, a higher mean score indicates a positive response (i.e., not hit or hurt by staff) and a lower mean score indicates a negative response.

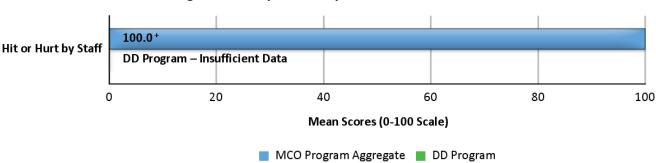


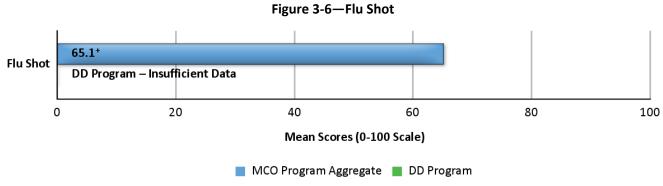
Figure 3-5—Physical Safety Measure Mean Scores

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



Flu Shot

Members were asked if they have had a flu shot since July 1, 2017. Figure 3-6 depicts the 2018 mean scores for the flu shot question (i.e., members that indicated they have had a flu shot) for the MCO Program Aggregate and DD Program.



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



Employment Module Items

AHCCCS elected to include the 22 supplemental employment module items in the HCBS CAHPS survey. The supplemental employment module covers the following areas:

- Help finding employment
- Selection of employment
- Reliability and helpfulness of job coach
- Ability of job coach to listen and communicate well
- Satisfaction with and recommendations for job coach

The mean scores for the MCO Program Aggregate and DD Program for the reportable questions (i.e., 18 out of 22 questions) are presented in Table 3-3.³⁻⁴ A higher mean score for these questions indicates a more positive response to the question (i.e., a response of "Yes" or "Always").

Table 3-3—Employment Module Items Mean Scores

		Mean Scores		
Question Number	Description	MCO Program Aggregate	DD Program	
Q87	Worked for pay at a job	0.0+	S	
Q88	Wanted to work for pay at a job	20.0+	S	
Q91	Asked for help in getting a job for pay	+0.0	S	
Q92	Knew could get help to find a job for pay	66.7+	S	
Q93	Had paid help to get a job	S	S	
Q94	Got all the help needed to find a job	S	S	
Q96	Respondent helped chose the job he/she has	S	S	
Q97	Had a paid job coach	S	S	
Q99	Respondent hired job coach	S	S	
Q100	Job coach was available the entire time while working	S	S	
Q101	Job coach gave help needed	S	S	
Q102	Job coach treated respondent with courtesy and respect	S	S	
Q103	Job coach explained things in a way that is easy to understand	S	S	
Q104	Job coach listened carefully	S	S	
Q105	Job coach encouraged respondent to do things for himself/herself	S	S	
Q106	Rating of job coach	S	S	

Page 3-11

³⁻⁴ The other four employment module items are not reportable because the questions contain open-ended responses or multiple responses; therefore, a mean score could not be calculated for these items.



		Mean	Scores
Question Number	Description	MCO Program Aggregate	DD Program
Q107	Recommend job coach to family and friends if they needed employment services	S	S
Q108	Work as an unpaid volunteer	S	S
+ Indicates fewer than 100 respondents. Caution should be exercised when evaluating these results.			

An "S" indicates responses were suppressed.



4. Reader's Guide

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 Administration

Survey Overview

The survey instrument selected was the HCBS CAHPS Survey with the Supplemental Employment Module.⁴⁻¹ 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.⁴⁻² The HCBS CAHPS Survey received the CAHPS trademark on June 22, 2016.⁴⁻³

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.

The HCBS CAHPS Survey includes a maximum of 69 core items that yield 19 measures of satisfaction. 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 satisfaction 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. In addition, a flu shot question and a 22-item supplemental employment module were added to the survey.

⁴⁻¹ AHCCCS added an additional question to the survey asking if members had a flu shot since July 1, 2017.

⁴⁻² HSAG only administered the HCBS CAHPS survey by telephone.

⁴⁻³ Centers for Medicare & Medicaid Services. CAHPS Home and Community Bases Services Survey. Technical Assistance Guide for Analyzing Data From the CAHPS Home and Community-Based Services Survey. October 2017. Available at: https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/cahps-hcbs-survey/index.html. Accessed on: July 11, 2018.



Table 4-1 lists the core measures included in the HCBS CAHPS Survey.

Table 4-1—HCBS CAHPS Measures

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

Table 4-2 lists the items that comprise the composite measures.

Table 4-2—Items within Composite Measures

	Composite Measures			
Reliable and Helpfu	l Staff			
Q13	In the last 3 months, how often did personal assistance/behavioral health staff come to work on time?			
Q14	In the last 3 months, how often did personal assistance/behavioral health staff work as long as they were supposed to?			
In the last 3 months, when staff could not come to work on a day that they were scheduled, disomeone let you know that personal assistance/behavioral health staff could not come that day				
In the last 3 months, how often did personal assistance/behavioral health staff make sure you enough personal privacy when you dressed, took a shower, or bathed?				
Q37	In the last 3 months, how often did homemakers come to work on time?			
Q38	In the last 3 months, how often did homemakers work as long as they were supposed to?			
Staff Listen and Communicate Well				
Q28	In the last 3 months, how often did personal assistance/behavioral health staff treat you with courtesy and respect?			



	Composite Measures	
Q29	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?	
Q30	In the last 3 months, how often did personal assistance/behavioral health staff treat you the way you wanted them to?	
Q31	In the last 3 months, how often did personal assistance/behavioral health staff explain things in a way that was easy to understand?	
Q32	In the last 3 months, how often did personal assistance/behavioral health staff listen carefully to you?	
Q33	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?	
Q41	In the last 3 months, how often did homemakers treat you with courtesy and respect?	
Q42	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?	
Q43	In the last 3 months, how often did homemakers treat you the way you wanted them to?	
Q44 In the last 3 months, how often did homemakers listen carefully to you?		
Q45	Do you feel homemakers know what kind of help you need?	
Helpful Case Manag	ger	
Q49	In the last 3 months, could you contact this case manager when you needed to?	
Q51	In the last 3 months, did this case manager work with you when you asked for help with getting or fixing equipment?	
Q53	In the last 3 months, did this case manager work with you when you asked for help with getting other changes to your services?	
Choosing the Service	es that Matter to You	
Q56	In the last 3 months, did your service plan include none, some, most, or all of the things that are important to you?	
Q57	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?	
Transportation to N	Nedical Appointments	
Q59	In the last 3 months, how often did you have a way to get to your medical appointments?	
Q61	In the last 3 months, were you able to get in and out of this ride easily?	
Q62	In the last 3 months, how often did this ride arrive on time to pick you up?	
Personal Safety and	Respect	
Q64	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?	



	Composite Measures
Q65	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?
Q68	In the last 3 months, did any staff yell, swear, or curse at you?
Planning Your Time	and Activities
Q75	In the last 3 months, when you wanted to, how often could you get together with these family members who live nearby?
Q77	In the last 3 months, when you wanted to, how often could you get together with these friends who live nearby?
Q78	In the last 3 months, when you wanted to, how often could you do things in the community that you like?
Q79	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?
Q80	Do you take part in deciding what you do with your time each day?
Q81	Do you take part in deciding when you do things each day – for example, deciding when you get up, eat, or go to bed?

Sampling Procedures

Members eligible for sampling must have met the following criteria to be included in the survey:

- Were 18 years of age or older as of December 31, 2017.
- Were developmentally disabled or had a recognized disability.
- Received at least one qualifying HCBS service (i.e., personal care, behavioral health support, homemaker services, case management, or medical transportation).
- Were enrolled in one of the long-term MCOs or DD Program at the time the sample was drawn.
- Were continuously enrolled during the last three months of the measurement period (October through December 2017).

A total of 420 members was selected from each health plan/program, except for Banner-University Family Care. The sample size for Banner-University Family Care was 105 members, which was the health plan's entire eligible population.

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 sponsored by the federal government and endorsed by AHCCCS. 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 five CATI calls was made to each non-respondent.

HSAG inspected a sample of the file records to check for any apparent problems with the files, such as missing address elements. After the sample was determined, records from each population were passed through the United States Postal Service's National Change of Address (NCOA) system to obtain new addresses for members who had moved (if they had given the Postal Service a new address). Prior to initiating CATI, HSAG employed the Telematch telephone number verification service to locate and/or update telephone numbers for all members.

Table 4-3 shows the timeline used in the administration of the HCBS CAHPS Survey.

Task

Send pre-notification letters to members.

Initiate CATI interviews for members approximately 14 days after mailing the pre-notification letters.

Initiate systematic contact for all non-respondents such that up to five telephone calls are attempted at different times of the day, on different days of the week, and in different weeks.

Complete telephone follow-up sequence (i.e., completed interviews obtained or maximum calls reached for all non-respondents).

Timeline

14 days

14 - 78 days

Table 4-3—HCBS CAHPS Survey Timeline

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.



Methodology

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" and "S."

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. ⁴⁻⁴ 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 4-4), had a language barrier, or were mentally or physically incapacitated.

Response Rate = $\underbrace{Number\ of\ Completed\ Surveys}_{Sample\ - Ineligibles}$

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 at long as they were supposed to? Would you say, Never, Sometimes, Usually, or Always?"

⁴⁻⁴ Eligible questions included any question in the survey between Question 4 and Question 124.



- 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?"

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

Table 4-4—Response Options and Response Values

Standard Responses	Alternative Responses	Response Values
Composite Measures, Recommendations Measures Employment Module Items ⁴⁻⁵	ires, Unmet Need and Physical Sa	fety Measures, Flu Shot, and
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
3 – 4	Fair	2
5-6	Good	3
7 – 8	Very Good	4
9 – 10	Excellent	5

-

⁴⁻⁵ For some standard responses and alternative responses, the least positive response option and most positive response option are the opposite of what is displayed in the table. Please refer to the *Technical Assistance Guide for Analyzing Data from the CAHPS HCBS Survey* for additional information.



Statewide Results

For purposes of the Statewide Results analysis, 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:

$$\frac{v - min_{old}}{max_{old} - min_{old}} \times 100$$

The values in the formula are defined as follows:

- max_{old} = the maximum value of the old scale (i.e., 3)
- min_{old} = the minimum value of the old scale (i.e., 1)
- max_{new} = the maximum value of the new scale (i.e., 100)
- min_{new} = the minimum value of the new scale (i.e., 0)
- v = respondent's score on the old scale (i.e., value of 1 to 3)

Limitations and Cautions

The findings presented in this report are subject to some limitations in the survey design, analysis, and interpretation. These limitations should be considered carefully when interpreting or generalizing the findings. These limitations are discussed below.

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 MCO/DD program. Therefore, the potential for non-response bias should be considered when interpreting the HCBS CAHPS results.

Causal Inferences

Members may report differences in satisfaction with various aspects of their health care experiences; however, these differences may not be completely attributable to the MCOs/DD program. The survey by itself does not necessarily reveal the exact cause of these differences.

Low Number of Responses

The 2018 HCBS CAHPS survey administration yielded a low number of completed surveys since the preliminary sample sizes were small as well as known challenges with the populations surveyed (e.g., members who failed the cognitive screening questions, paid proxies who provided responses on behalf



of the member). HSAG was unable to report results at the MCO-level, as well as results for some measures for the MCO Program Aggregate. In addition, HSAG was unable to report any results for the DD Program. 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.



5. Survey Instrument

The survey instrument administered was the HCBS CAHPS Survey with the Supplemental Employment Module. 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 \rightarrow 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

something else?

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

	[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	ACTION
IF Q4 OR Q6 = YES (PERSONAL ASSISTANCE OR BEHAVIORAL HEALTH SPECIALIST SERVICES),	ASK Q13–Q36, AND Q48 ONWARD
AND	ONWARD
Q8 = NO, DON'T KNOW, REFUSE, UNCLEAR (HOMEMAKER SERVICES)	
IF Q4 OR Q6 = YES (PERSONAL ASSISTANCE OR BEHAVIORAL HEALTH SPECIALIST SERVICES),	ASK Q13 ONWARD
AND	
Q8 = YES (HOMEMAKER SERVICES)	
IF Q4 AND Q6 = NO (PERSONAL ASSISTANCE OR	SKIP Q13–36, Q57 AND Q79
BEHAVIORAL HEALTH SPECIALIST SERVICES)	5KII Q13-30, Q37 AND Q77
IF Q8 = YES (HOMEMAKER SERVICES)	ASK Q37 ONWARD
IF Q10 = YES (HOMEMAKER AND PERSONAL	ASK Q13–Q36, Q39, Q40,
ASSISTANCE STAFF SAME)	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?
	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
	-1 DON'T KNOW
	-2 REFUSED
	-3 UNCLEAR RESPONSE
40	
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?
	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 REFLISED → 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
	$^{2}\overline{\square}$ 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 \rightarrow GO TO Q28
	-1 DON'T KNOW \rightarrow 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
	$^{2}\overline{\square}$ NO
	-1 DON'T KNOW
	-2 REFUSED

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

12

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
	Never, Never,
	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
	Never, Never, Usually, or 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,
	□ Good,
	Fair, or
	□ Poor?
	-1 DON'T KNOW
	-2 REFUSED
	□ NET OSED
	ONCEAN 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
GET1	TING NEEDED SERVICES FROM HOMEMAKERS
	ext several questions are about the {homemakers}, the staff who are paid to help you do 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
	$^{2}\overline{\square}$ 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 -1DON'T KNOW -2REFUSED -3UNCLEAR RESPONSE
	ALTERNATE VERSION: How would you rate the help you get from {homemakers}? Would you say
	Excellent, Very good, Good, Fair, or DON'T KNOW REFUSED 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}
	Definitely no, Probably no, Definitely yes, or Definitely yes? DON'T KNOW REFUSED UNCLEAR RESPONSE
YOU	IR CASE MANAGER
	I would like to talk to you about your {case manager}, the person who helps make sure nave 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
CH	-3 UNCLEAR RESPONSE OOSING 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,

	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]
	CASE MANAGER CA
TRA	INSPORTATION
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
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
This i We a HERE altho	next few questions ask if <u>anyone</u> paid to help you treated you badly in the last 3 months. Includes {personal assistance/behavioral health staff, homemakers, or your case manager} are asking everyone the next questions—not just you. [ADD STATE-SPECIFIC LANGUAGE REGARDING MANDATED REPORTING, IF APPROPRIATE—"I want to remind you that, bugh your answers are confidential, I have a legal responsibility to tell {STATE} if I hear ething 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 \rightarrow 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 \rightarrow 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
	□ 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]
	FAMILY MEMBER OR FRIEND CASE MANAGER AGENCY SOMEONE ELSE, PLEASE SPECIFY
CON	MMUNITY 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

family members who live nearby? Would you say . . .

75.

In the last 3 months, when you wanted to, how often could you get together with these

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
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
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
	-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

82.	In the last 3 months, are any of the staff that help you family [members]?
	¹ YES
	² NO
	-1DON'T KNOW
	⁻² REFUSED
	-3UNCLEAR RESPONSE
83.	Sometimes staff cannot come to work on a day that they are scheduled. In the last 3
moi	nths, when staff could not come to work on a day that they were scheduled, did you receive
care	e per your contingency plan?
	¹ YES
	$^{2}\square$ NO
	-1 DON'T KNOW
	-2 REFUSED
	-3 UNCLEAR RESPONSE
84.	Do you think your caregiver is properly trained or receives enough training?
	¹ YES
	² NO
	-1 DON'T KNOW
	-2 REFUSED
	-3 UNCLEAR RESPONSE
85.	In the last 3 months, if you contacted your case manager, did they follow up in a timely
	manner?
	¹ YES
	² NO
	-1 DON'T KNOW
	-2 REFUSED
	-3 UNCLEAR RESPONSE
86.	Does your Case Manager understand your personal goals?
	¹ YES
	² NO
	-1 DON'T KNOW
	-2 REFUSED
	-3 UNCLEAR RESPONSE

SUPPLEMENTAL EMPLOYMENT MODULE

87.	In the last 3 months, did you work for pay at a job?
	1 YES → GO TO EM9 2 NO
	$^{-1}$ DON'T KNOW $ ightarrow$ GO TO THE ABOUT YOU SECTION
	-2 REFUSED → GO TO THE ABOUT YOU SECTION
	-3 UNCLEAR RESPONSE → GO TO THE ABOUT YOU SECTION
88.	In the last 3 months, did you want to work for pay at a job?
	¹ YES
	2 NO → GO TO EM4
	$^{-1}$ DON'T KNOW $ ightarrow$ GO TO THE ABOUT YOU SECTION
	⁻² REFUSED → GO TO THE ABOUT YOU SECTION
	$^{-3}$ UNCLEAR RESPONSE → GO TO THE ABOUT YOU SECTION
89.	Sometimes people feel that something is holding them back from working when they want to. In the last 3 months, was this true for you? If so, what has been holding you back from working? (INTERVIEWER LISTENS AND MARKS ALL THAT APPLY)
	1 BENEFITS → GO TO EM5
	2 HEALTH CONCERNS \rightarrow GO TO EM5
	3 DON'T KNOW ABOUT JOB RESOURCES \rightarrow GO TO EM5
	⁴ ADVICE FROM OTHERS → GO TO EM5
	⁵ TRAINING/EDUCATION NEED → GO TO EM5
	6 LOOKING FOR AND CAN'T FIND WORK → GO TO EM5
	7 ISSUES WITH PREVIOUS EMPLOYMENT $ ightharpoonup$ GO TO EM5
	8 TRANSPORTATION → GO TO EM5
	9 CHILD CARE → GO TO EM5
	¹⁰ OTHER () \rightarrow GO TO EM5
	¹¹ NOTHING IS HOLDING ME BACK \rightarrow GO TO EM5
	$^{-1}$ DON'T KNOW → GO TO EM5
	⁻² REFUSED → GO TO EM5
	-3 UNCLEAR RESPONSE → GO TO EM5

90.	Sometimes people would like to work for pay, but feel that something is holding them back. In the last 3 months, was this true for you? If so, what has been holding you back from wanting to work? (INTERVIEWER LISTENS AND MARKS ALL THAT APPLY)
	1 BENEFITS → GO TO THE ABOUT YOU SECTION 2 HEALTH CONCERNS → GO TO THE ABOUT YOU SECTION
	³ DON'T KNOW ABOUT JOB RESOURCES → GO TO THE ABOUT YOU SECTION
	⁴ ADVICE FROM OTHERS → GO TO THE ABOUT YOU SECTION
	5 TRAINING/EDUCATION NEED → GO TO THE ABOUT YOU SECTION
	6 LOOKING FOR AND CAN'T FIND WORK → GO TO THE ABOUT YOU SECTION
	7 ISSUES WITH PREVIOUS EMPLOYMENT → GO TO THE GO TO THE ABOUT YOU SECTION
	$^8\Box$ TRANSPORTATION $ ightarrow$ GO TO THE GO TO THE ABOUT YOU SECTION
	9 CHILD CARE $ ightarrow$ GO TO THE ABOUT YOU SECTION
	10 OTHER () $ ightarrow$ GO TO THE ABOUT YOU SECTION
	¹¹ NOTHING/DON'T WANT TO WORK \rightarrow GO TO THE ABOUT YOU SECTION
	⁻¹ DON'T KNOW→ GO TO THE ABOUT YOU SECTION
	⁻² REFUSED→ GO TO THE ABOUT YOU SECTION
	$^{-3}$ UNCLEAR RESPONSE \rightarrow GO TO THE ABOUT YOU SECTION
91.	In the last 3 months, did you ask for help in getting a job for pay?
	1 YES → GO TO EM7
	² NO
	-1 DON'T KNOW
	⁻² REFUSED
	-3UNCLEAR RESPONSE
92.	In the last 3 months, did you know you could get help to find a job for pay?
	1 YES → GO TO THE ABOUT YOU SECTION
	2 NO \rightarrow GO TO THE ABOUT YOU SECTION
	$^{-1}$ DON'T KNOW \rightarrow GO TO THE ABOUT YOU SECTION
	-2 REFUSED → GO TO THE ABOUT YOU SECTION
	$^{-3}$ UNCLEAR RESPONSE $ ightarrow$ GO TO THE ABOUT YOU SECTION
93.	Help getting a job can include help finding a place to work or help getting the skills that you need to work. In the last 3 months, was someone paid to help you get a job?
	1 YES → GO TO EM8
	2 NO \rightarrow GO TO THE ABOUT YOU SECTION
	$^{-1}$ DON'T KNOW $ ightarrow$ GO TO THE ABOUT YOU SECTION
	-2 REFUSED → GO TO THE ABOUT YOU SECTION
	-3 LINCLEAR RESPONSE -> GO TO THE AROUT VOLL SECTION

94.	In the last 3 months, did you get all the help you need to find a job?
	1 YES → GO TO THE ABOUT YOU SECTION 2 NO → GO TO THE ABOUT YOU SECTION $^{-1}$ DON'T KNOW → GO TO THE ABOUT YOU SECTION $^{-2}$ REFUSED → GO TO THE ABOUT YOU SECTION $^{-3}$ UNCLEAR RESPONSE → GO TO THE ABOUT YOU SECTION
95.	Who helped you find the job that you have now? [MARK ALL THAT APPLY]
	1 EMPLOYMENT/VOCATIONAL STAFF/JOB COACH 2 CASE MANAGER 3 OTHER PAID PROVIDERS 4 OTHER CAREER SERVICES 5 FAMILY/FRIENDS 6 ADVERSTISEMENT 7 SELF-EMPLOYED → GO TO EM11 8 OTHER () 9 NO ONE HELPED ME—I FOUND IT MYSELF → GO TO EM11 -1 DON'T KNOW → GO TO EM11 -2 REFUSED → GO TO EM11 -3 UNCLEAR RESPONSE → GO TO EM11
96.	Did you help choose the job you have now?
	1 YES 2 NO -1 DON'T KNOW -2 REFUSED -3 UNCLEAR RESPONSE
97.	Sometimes people need help from other people to work at their jobs. For example, they may need help getting to or getting around at work, help getting their work done, or help getting along with other workers. In the last 3 months, was someone paid to help you with the job you have now?
	1 YES 2 NO → GO TO THE ABOUT YOU SECTION $^{-1}$ DON'T KNOW → GO TO THE ABOUT YOU SECTION $^{-2}$ REFUSED → GO TO THE ABOUT YOU SECTION $^{-3}$ UNCLEAR RESPONSE → GO TO THE ABOUT YOU SECTION

98.	What do you call this person? A job coach, peer support provider, personal assistant, or something else?
	[USE THIS TERM WHEREVER IT SAYS {job coach} BELOW.]
99.	Did you hire your {job coach} yourself?
	¹ YES → GO TO THE ABOUT YOU SECTION ² NO ⁻¹ DON'T KNOW ⁻² REFUSED ⁻³ UNCLEAR RESPONSE
100	In the last 3 months, has your { job coach} been with you all the time that you were working?
	¹☐ YES ²☐ NO -¹☐ DON'T KNOW -²☐ REFUSED -³☐ UNCLEAR RESPONSE
101	In the last 3 months, how often did your { job coach} give you all the help you needed? 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 your {job coach} give you all the help you needed? Would you say 1 Mostly yes or 2 Mostly no? -1 DON'T KNOW -2 REFUSED -3 UNCLEAR RESPONSE

102.In the last 3 months, how often did your $\{job\ coach\}$ 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 your {job coach} 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
103.In the last 3 months, how often did your {job coach} 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 your {job coach} 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

	e last 3 months, how often did your { job coach} listen carefully to you? Would you say .
1 2 3 4 -1 -2 -3 5 3	Never, Sometimes, Usually, or Always? DON'T KNOW REFUSED UNCLEAR RESPONSE ALTERNATE VERSION: In the last 3 months, did your {job coach} listen carefully to
	you? Would you say 1 Mostly yes or 2 Mostly no? -1 DON'T KNOW -2 REFUSED -3 UNCLEAR RESPONSE
	e last 3 months, did your {job coach} encourage you to do things for yourself if you
coul 1 2 -1 -2 -3	
1 2 2 -1 -2 -3 -3 106. Usin is th	d?]YES]NO]DON'T KNOW]REFUSED

ALTERNATE VERSION: How would you rate the help you get from your {job coach}? Would you say 1 Excellent, 2 Very good, 3 Good, 4 Fair, or 5 Poor? -1 DON'T KNOW -2 REFUSED
⁻³ UNCLEAR RESPONSE 107. Would you recommend the {job coach} who helps you to your family and friends if they needed {program-specific term for employment services}? Would you say you recommend the {job coach}
Definitely no, Definitely no, Probably no, Definitely yes, or Definitely yes? REFUSED UNCLEAR RESPONSE
108.In the last 3 months, have you worked as an unpaid volunteer? 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.
109. 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
110.	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
111.	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
112.	[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
113.	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
Are you of Hispanic, Latino, or Spanish origin?
¹ YES, HISPANIC, LATINO, OR SPANISH
2 NO, NOT HISPANIC, LATINO, OR SPANISH \rightarrow GO TO Q89
$^{-1}$ DON'T KNOW → GO TO Q89
$^{-2}$ REFUSED → GO TO Q89
-3 UNCLEAR RESPONSE → GO TO Q89
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
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
⁴ Native Hawaiian or other Pacific Islander → GO TO Q91
□ Native Hawaiian of other Facilic Islander → GO TO Q31
American indian of Alaska Native 7 00 TO Q32
6 OTHER → GO TO Q92 $^{-1}$ DON'T KNOW → GO TO Q92
⁻² REFUSED → GO TO Q92 ⁻³ UNCLEAR RESPONSE → GO TO Q92
Which group best describes you? [READ ALL ANSWER CHOICES. CODE ALL THAT APPLY.]
1 Asian Indian → GO TO Q92
2 Chinese → GO TO 092

	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
118.	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
119.	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
120.	What is the language you speak at home?
	¹ Spanish,
	² Some other language \rightarrow Which one?
	-1 DON'T KNOW
	⁻² REFUSED
	-3☐UNCLEAR RESPONSE
121.	[IF NECESSARY, ASK] How many adults live at your home, including you?
	1 ☐ 1 [JUST THE RESPONDENT] \rightarrow END SURVEY
	² 2 TO 3
	³ 4 OR MORE
	-1 DON'T KNOW
	⁻² REFUSED
	-3 UNCLEAR RESPONSE

122.	[IF NECESSARY, ASK] Do you live with any family members?
	1 YES 2 NO -1 DON'T KNOW -2 REFUSED -3 UNCLEAR RESPONSE
123.	[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
124.	Have you had a flu shot since July 1, 2017? 1 YES 2 NO -1 DON'T KNOW
	⁻² REFUSED ³ UNCLEAR RESPONSE
INT	ERVIEWER QUESTIONS
THE	FOLLOWING QUESTIONS SHOULD BE ANSWERED AFTER THE INTERVIEW IS CONDUCTED.
125.	WAS THE RESPONDENT ABLE TO GIVE VALID RESPONSES? 1 YES 2 NO
126.	WAS ANY ONE ELSE PRESENT DURING THE INTERVIEW? 1 YES 2 NO \rightarrow END SURVEY
127.	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
128.	DID SOMEONE HELP THE RESPONDENT COMPLETE THIS SURVEY? 1 YES

CAHPS Home- and Community-Based Services Survey 1.0

	2 NO → END SURVEY
129.	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
130.	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