

***Early Experiences and Perceptions of MassHealth Members regarding the Massachusetts Integrated Care Demonstration***

**Results from the One Care Early Indicators Project (EIP) – Survey 1**

Prepared for MassHealth by: Alexis Henry, Jennie Fishman and Jack Gettens, University of Massachusetts Medical School, Center for Health Policy and Research, and Michele Goody, and Dorothee Alsentzer, MassHealth

**Abstract**

*A telephone survey of 300 MassHealth members who were eligible for One Care was conducted from December 16, 2013 to January 20, 2014. The purpose of the survey was to learn about members' experiences and decision-making during the first three months of One Care's implementation. Three groups of members were surveyed: those who made an active choice to enroll into One Care (N=109); those who chose not to enroll (opt-out) (N=125); and those who had not yet made a decision about One Care (waiting) (N=51). The results of the survey showed that most individuals who made a decision to voluntarily enroll in or opt out of One Care within this period felt that the informational materials they received from MassHealth about the program were easy to understand and contained the right amount of information; while many individuals who were still waiting to make a decision about enrollment did not recall receiving information about One Care from MassHealth, or if they remembered receiving information, found it confusing and lacking the information they needed to make a decision. Just over 80% of members who had chosen to enroll reported enrolling in One Care to get better services, while 76% of those who had opted out of One Care did so because they were happy with their current health care. Slightly more than 70% of members who were waiting to make a decision reported being unsure what to do next. Members who had opted out of One Care were older and more likely to be female than members in the enrolled or waiting groups. Enrolled members were significantly more likely to report needing ADL assistance than those in the other groups surveyed.*

**EIP Workgroup Members:**

Ted Chelmow, Dennis Heaphy, Jeff Kielson, Olivia Richards – One Care Implementation Council  
Dorothee Alsentzer, Michele Goody, David Healy – MassHealth  
Alexis Henry, Wendy Trafton – UMass Medical School

## I. Introduction and Background

Massachusetts is the first state in the nation to implement a demonstration project to integrate care and align financing for individuals who are dually eligible for Medicare and Medicaid. Targeted to dually eligible adults ages 21 to 64 and fully operated by the Massachusetts Executive Office of Health and Human Services' (EOHHS) Office of Medicaid (MassHealth), the demonstration is a fundamental component of the Commonwealth's broader effort to transform its health care system by restructuring how care is delivered and how providers are reimbursed. Massachusetts' reform efforts include initiatives to develop patient-centered medical homes, bundled payments, and Accountable Care Organizations, among other efforts. Through these initiatives, Massachusetts seeks to ensure access to appropriate services, integrate comprehensive services at the person level, improve care coordination across the health care and long term support delivery systems, and create payment systems that hold providers accountable for the care they deliver. Massachusetts aims to reward quality care, improve health outcomes, and more effectively spend health care dollars. With the combination of Medicare and Medicaid funding, the integrated care demonstration is designed to offer a broader menu of services to better meet the needs of the dually eligible individuals in the most cost effective way.

Enrollment in the demonstration – known as ***One Care: MassHealth plus Medicare*** – began in October 2013. Offered by three health care plans<sup>1</sup> in the state, One Care is available to dually eligible MassHealth members living in nine Massachusetts counties<sup>2</sup>, and provides integrated care for members' primary, acute, specialty, and behavioral health needs, as well as prescription medications and long-term services and supports, using a person-centered approach. In addition, One Care plans provide enrollees with a Care Coordinator, and when appropriate and desired, an independent living/long term

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<sup>1</sup> One Care is currently offered by Commonwealth Care Alliance, Fallon Total Care and Network Health

<sup>2</sup> One Care is currently available in Essex, Franklin, Hampden, Hampshire, Middlesex, Norfolk, Plymouth, Suffolk and Worcester counties. Coverage in Plymouth County excludes the towns of East Wareham, Lakeville, Marion, Mattapoisett, Wareham, and West Wareham.

services and supports coordinator (LTS Coordinator.) Enrollment began with an initial period of voluntary enrollment, followed by waves of passive enrollment. Members may opt-out of One Care at any time. As of July 1, 2014, there were 18,836 members enrolled in One Care.

The One Care Implementation Council, a representative group of 21 stakeholders including people with disabilities and community organizations, was convened by EOHHS to assist with monitoring the implementation of One Care, including monitoring members' access to and quality of services under One Care, providing support and input to EOHHS, and promoting accountability and transparency. In August 2013, the Council recommended that MassHealth undertake efforts to assess the experiences of members during the initial roll-out of One Care.

The goal of the ***One Care Early Indicators Project*** (EIP) is to assess the early perceptions and experiences of MassHealth members who are eligible for One Care, with a focus on collecting actionable information that is available during the very early stages of the implementation in order to inform any needed course corrections. Thus, the EIP effort is distinct from longer-term efforts to evaluate quality of care provided to members under One Care or other programmatic evaluations. The EIP uses a mixed-methods (qualitative and quantitative) approach to understand the perceptions and experiences of One Care eligible members in different One Care enrollment statuses, including those:

- Voluntarily enrolled in One Care
- Choosing not to enroll – i.e. to opt-out – of One Care
- Passively enrolled (or auto-assigned) into One Care

Through focus groups and surveys, as well as by tracking enrollment data and other available metrics, the EIP explores members' experiences across multiple domains, including their experiences with:

- One Care enrollment information and the enrollment process
- Their care team and the care planning process under One Care
- Their care plan and initial experiences with getting services under One Care
- Overall perceptions of, concerns about and satisfaction with One Care

The EIP is carried out by a nine-member, multi-stakeholder EIP Workgroup comprised of representatives from MassHealth and the One Care Implementation Council, as well as policy research staff from the University of Massachusetts Medical School (UMMS). The EIP Workgroup began its work in October 2013, meets twice monthly, and is responsible for developing EIP data collection methods, tools and related materials; collecting and analyzing data; and developing reports of findings. This report presents findings from an initial survey of One Care-eligible MassHealth members conducted in December 2013 and January 2014, designed to capture members' experiences during the initial enrollment period – The ***One Care Survey 1***.

## **II. Methods**

### **A. One Care Survey 1 – Target Members, Domains and Questions**

The goal of the One Care Survey 1 (Survey 1) was to understand members' perceptions and experiences of One Care during the initial enrollment period. Survey 1 was targeted to One Care-eligible MassHealth members, who were responsible for making their own healthcare decisions, and who were in one of three target enrollment groups based on One Care enrollment status as of December 7, 2013<sup>3</sup>. The three enrollment groups included members who had:

- Voluntarily enrolled into One Care (referred to here as the Opt-in group)
- Chosen to opt-out of One Care (referred to as the Opt-out group)
- Neither enrolled in nor opted-out of One Care (referred to as the Waiting group)

Survey 1 was developed by the EIP Workgroup in the fall of 2013. The survey included an introduction explaining the purpose of the survey and 46 core questions covering five domains, with specific sets of questions for members in each of the three target enrollment groups (opt-in, opt-out or waiting). The five domains included:

- MassHealth One Care Enrollment Information and Process
- Getting Answers to Questions About One Care

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<sup>3</sup> No members who had been passively enrolled (auto-assigned) into One Care were included in the Survey 1 sample.

- Making Decisions about One Care
  - Reasons for enrolling/opting-in
  - Reasons for opting-out
  - Reasons for waiting
- Early Experiences in One Care (for those enrolled)
- Background Demographic and Disability Information

#### B. One Care Survey 1 – Survey Administration

Survey 1 was administered via telephone interview by trained interviewers from UMMS' Office of Survey Research (OSR). MassHealth provided UMMS with contact information for One Care eligible members in the three target groups, with groupings based on MassHealth's currently available (as of December 7, 2013) information regarding members' enrollment status (i.e. opt-in; opt-out; or waiting). Randomly-selected members were contacted via telephone by OSR interviewers and invited to participate in the survey, with the goal of completing 100 interviews with members in each of the three target groups (for a total of 300). Telephone interviews were completed between December 16<sup>th</sup>, 2013 and January 20<sup>th</sup>, 2014. The average time to complete an interview was 15 minutes.

During the introduction to the survey, interviewers explained the survey's purpose, confirmed that the member makes his/her own healthcare decisions, and confirmed the member's willingness to participate. Additionally, an initial screening question asked members to identify their enrollment status relative to One Care – i.e. whether they had enrolled (opt-in group), had chosen not to enroll (opt-out group), or were still deciding whether or not to enroll (waiting group), allowing us to verify their current One Care enrollment status and to reclassify their enrollment group (if necessary). Members were then asked the set of questions corresponding to the enrollment group in which they identified themselves.

#### C. One Care Survey 1 – Responding Members

Interviews were completed with a total of 300 One Care-eligible MassHealth members. Although the original goal had been to complete 100 interviews with members in each of the three enrollment groups, we found during the initial screening question that a number of members identified

their One Care enrollment status in a way that differed from how they were categorized by MassHealth. This was particularly true for members who were categorized by MassHealth as “waiting”; a number of these members reported that they had made a decision about One Care. Thus, survey respondents were distributed across the three enrollment groups as follows: 109 members in the Opt-in group; 125 members in the Opt-out group; and 51 members in the Waiting group. In addition, 15 members who agreed to the interview were unsure of or declined to identify their One Care enrollment status. Among the 97 members contacted who were classified by MassHealth as waiting, 37% were reclassified as opt-out; 8% were reclassified as opt-in; and 10% were reclassified as unsure/declined (based on members’ self-identified enrollment status). Again, members were asked questions corresponding to the group in which they identified themselves; we made no subsequent effort to verify members’ enrollment status against MassHealth data.

Table 1 shows characteristics of members responding to Survey 1 for the total group of respondents (N=300) and for each of the enrollment groups (including unsure/declined). The average age of the 300 responding members was 51.5 years (ranging from 22 – 64); of those respondents who identified their gender, 39.3% were men and 55.7% were women. Seventy-two percent of responding members identified their race as white, 10% identified their race as Black, and 7.3% identified as Hispanic/Latino. Just over 10% of members reported being currently employed for wages or self-employed. Over 50% of members reported having some college education or higher and 32% reporting having a high school education or completing a GED. About 10% of members reported having less than a high school education.

The primary disabling conditions most commonly reported by members were physical/mobility disability (27.3%), psychiatric disability (25.7%), and long term medical condition (19%). Just over 40% of members reported using some type of medical equipment, and 23% reported needing assistance with personal care or activities of daily living (ADL). A small number of members (3.7%) reported

experiencing homelessness in the past year.

Members in the three target enrollment groups (excluding unsure/declined) differed significantly in age, gender and need for ADL assistance. Members in the Opt-out group were significantly older<sup>4</sup> and more likely to be female than those in either the Opt-in or Waiting groups. Members in the Opt-in group were significantly more likely to report needing ADL assistance<sup>5</sup> than those in the Opt-out or Waiting groups. Otherwise, there were no significant differences in member characteristics across the enrollment groups – that is, members did not differ in terms of sexual orientation, race, ethnicity, employment status, level of education, primary disability, use of medical equipment, or experience of homelessness.

### **III. Major Findings**

#### **A. MassHealth Enrollment Information and Getting Answers to Questions about One Care**

Survey questions asked members about their perceptions of the One Care information packet developed and disseminated by MassHealth, including the One Care Enrollment Guide and Decision Form, and also asked about members' general experiences getting information about One Care. Table 2 shows members' experiences with and perceptions of the MassHealth enrollment information. Across all three enrollment groups, a large majority of members recalled receiving the enrollment packet, with the highest percentage in the Opt-in group. Among those who recalled receiving the packet, approximately 90% of members in both the Opt-in and Opt-out groups reported reviewing the information; however, only 65% of those in the Waiting group reported reviewing the information.

For the most part, members in both the Opt-in and Opt-out groups found the One Care Enrollment Guide and the Enrollment Form easy to understand, with over 70% of members in both groups describing the guide and the form as very easy or somewhat easy to understand. However, only 58% of members in the Waiting group found the enrollment information easy to understand. The

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<sup>4</sup> p<.05

<sup>5</sup> p<.05

majority of members in the Opt-in group (73%) described the Enrollment Guide as including “the right amount of information”, but only about 50% of members in the Opt-out and Waiting groups described the guide in this way. Across all groups, most members described the information from MassHealth as important in helping them decide about One Care.

Table 3 shows members’ efforts to obtain information about One Care from a variety of sources. Members in the Opt-in group most often sought information directly from a One Care plan, from a doctor or other provider, and/or from MassHealth Customer Service. Those in the Opt-out group also frequently sought information from a doctor and/or from MassHealth Customer Service, and to a lesser extent, from a One Care plan. Across the three enrollment groups, members in the Waiting group were much less likely to report seeking information about One Care than members in the other two groups. Also shown in Table 3, members in the Opt-in group were much more likely than members in the other two groups to seek specific information about One Care. About 72% of members in the Opt-in group reported trying to find out if their provider and their medications would be covered under One Care. Members in both the Opt-in and Opt-out groups identified the One Care plans, MassHealth Customer Service and their doctor/other provider as the most useful in helping them to understand One Care (data not shown).

#### B. Making Decisions about One Care: The Opt-in and Opt-out Groups

Survey 1 also sought to examine members’ reasons for their decisions regarding One Care. Table 4 shows the reasons for decisions about One Care among members in the Opt-in and Opt-out groups. Among members in the Opt-in group, the most common reasons for enrolling in One Care were to get better services (80.7%) or additional services (76.2%), to get less complicated health care (71.6%) and to lower health care costs (71.6%). Additionally, just over half of the members in Opt-in group reported enrolling in One Care in order to have a care coordinator.



Among members in the Opt-out group, a large majority (76%) reported that a reason for not enrolling is that they are happy with their care and are concerned that One Care will not be as good as their current health care (Table 4). Members in the Opt-out group were also concerned that they might lose an important provider or service if they enrolled in One Care, and over half (51%) expressed the concern that their care might become more complicated. About 1 in 4 members in the Opt-out group felt that they did not find answers to all the questions they have about One Care. And, almost 1 in 4 thought that they might have to pay more for care under One Care.

Over 40% of members in the Opt-in group and 16% of members in the Opt-out group reported that someone recommended enrolling, or not enrolling, in One Care (Table 4). For both groups, these recommendations most often came from family members or friends, or from primary care or behavioral health care providers (data not shown). Members in the Opt-in and Opt-out groups were also asked whether they felt that they had made the decision to or not to enroll entirely on their own or were influenced by someone else. As shown in Table 4, the majority of members in both groups reported that they had made the decision to enroll, or not to enroll, on their own.

Table 5 provides additional information on the hopes for and concerns about access to services and providers under One Care for members in both the Opt-in and Opt-out groups. In the Opt-in group, members who reported enrolling in One Care to get better or additional services (n=83) were asked a series of questions about specific services that they might obtain under One Care. A large majority of these members reported hoping to gain access to dental and vision services with enrollment in One Care. Help with long-term community services and supports, transportation services, behavioral health services, and care coordination were also often identified by these members as services they hoped to gain under One Care.

In the Opt-out group, members who reported opting-out of One Care because they were concerned about losing access to a provider (n=86) were asked a series of questions about the specific

providers they were concerned about losing. Seventy-nine percent of these members reported being concerned about losing access to a primary care provider, 65% were concerned about losing access to a specialist, and 56% were concerned about losing access to a behavioral health provider.

#### C. Making Decisions about One Care: The Waiting Group

Members in the Waiting group were asked to identify the reasons they had not yet made a decision about One Care. As shown in Table 6, 84.3% of these members reporting needing more time to decide, and 68.6% of members reported needing more information about One Care. Notably, over 70% of these members reported not being sure what to do next.

Members in the Waiting group who reported needing more information (n=35) were asked about the types of information that would help them make a decision about One Care. As shown in Table 8, virtually all (97.1%) of these members reported needing information about whether they can keep their current providers under One Care. Additionally, most of these members reported needing information about the providers, services and benefits available under One Care. Medications and behavioral health providers, as well as information about the role of Care Coordinator and LTS Coordinator, were most frequently identified as topics about which these members needed additional information.

#### D. Early Experiences in One Care (For Opt-in Group)

For those in the Opt-in group, Survey 1 asked a small number of questions about members' experiences with One Care thus far. Of members in the Opt-in group, 39% had been enrolled since October 1; 36% had been enrolled since November 1; and 22% had been enrolled since December 1, 2013 (3% were not sure how long they had been enrolled). Among members in the Opt-in group, 46% reported that they had met with a One Care representative to begin the assessment process, and 43% reported that they had experienced a change in services since enrolling in One Care.

Overwhelmingly, members who experienced a change since enrolling in One Care described the change as “positive” (72%). Approximately 16% described the change as “negative” and 11.6% described the change as “neither positive nor negative”. Common examples of positive changes reported by members included:

- The lack of co-payments for prescription medications (by far the most common positive change)
- Access to dental services
- Getting a Primary Care Provider and the “personal approach” of the Care Coordinator

Examples of negative changes reported by members included the loss of or being unable to find a primary care or other provider and the loss of or reduction in services.

#### **IV. Discussion**

On the whole, findings from One Care Survey 1 suggest that members in the Opt-in and Opt-out group found MassHealth’s information materials on One Care, including the Enrollment Guide and Enrollment Decision Form, easy to understand and found this information very important to their decision-making about One Care. Members who had not yet decided whether or not to enroll in One Care (the Waiting group) were less likely to have reviewed the MassHealth information about One Care; notably those who did tended to describe the material as more difficult to understand than members who had already voluntarily enrolled in or opted-out of One Care.

Survey 1 findings also suggest that members who voluntarily enrolled were quite active in seeking additional information and answers to their questions about One Care in comparison to those who had opted out or were waiting. In particular, it appears that these members actively sought to confirm that their providers and important services (e.g. prescription medications) would be covered under One Care. Findings suggest that members who voluntarily enrolled were motivated by several of the key features in One Care, including being able to access additional services (particularly dental and vision services), and being able to get less complicated care at potentially lower costs. Notably, the

majority of members who reported experiencing a change since enrolling in One Care described the change as positive, and the most commonly identified positive change was the lack of co-payments for prescription medication. Additionally, getting access to care coordination services and getting help accessing long-term services and supports, behavioral health services, and transportation services were also attractive features of One Care among those voluntarily enrolling.

Not surprisingly, the majority of members who had elected not to enroll in One Care reported being happy with their current care and were primarily concerned that One Care would not be as good as current care. In particular, members who had opted-out of One Care were concerned that they might lose a primary care provider, medical specialist or behavioral health provider if they enrolled in One Care. In a previous focus group study conducted by UMMS researchers to help inform the development of MassHealth's integrated care demonstration, participants voiced concerns about a change to their health care team, especially if they had already invested considerable time and effort in establishing relationships with trusted primary and specialty care providers (Gettens, Mitra, Long-Bellil & Henry, 2011).

About half of the members who were initially identified by MassHealth as having neither enrolled nor opted-out of One Care (i.e. the Waiting group) reported during the Survey 1 interview that they had made a decision, with most reporting that they had decided to opt-out of One Care. In general, members who were still waiting to make a decision about One Care appeared to be much less active in seeking out information about One Care than members in the other two groups, and as noted above, these members were more likely than members who had enrolled or opted-out to describe information about One Care as difficult to understand. It is notable that over 70% of members who were still waiting to make a decision about One Care reported not being sure what to do next. Given

that waiting members who live in the four auto-assignment counties<sup>6</sup> may be passively enrolled (i.e. auto-assigned) as the One Care implementation continues, ongoing efforts to make information about One Care available and accessible to these members will be important.

**V. Next Steps in Early Indicators Project – One Care Survey 2**

The EIP Workgroup will field a second, more comprehensive survey examining enrolled members' early experiences getting care under One Care. Beginning in June, 2014, One Care Survey 2 (Survey 2) will be administered to approximately 6,000 currently enrolled members (both actively and passively enrolled), with the goal of a 50% response rate (3,000 responding members). Survey 2 will seek to understand members' experiences in One Care relative to:

- The One Care enrollment process
- Their care team
- The assessment and care planning processes
- Overall satisfaction with the care plan
- The extent to which members' needs for care are being met under One Care
- The transition into One Care
- Overall perceptions of One Care

A report of findings from Survey 2 is expected to be available in March 2015.

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<sup>6</sup> Hampden, Hampshire, Suffolk and Worcester Counties each have multiple One Care Plans. Eligible members in these counties who have not yet opted-in or opted-out may be passively enrolled into a One Care Plan.

## References

Gettens, J., Mitra, M., Long-Bellil, L., & Henry, A. (2011). *MassHealth's Initiative to Create an Integrated Health Care Model for Dually Eligible Members: A Report from Member Focus Groups*. Center for Health Policy and Research, University of Massachusetts Medical School

## Appendix A – Tables

**Table 1. Characteristics of Members Responding to One Care Survey 1**

Characteristics	Enrollment Group				Total Group (N=300)
	Opt-In (N=109)	Opt-Out (N=124)	Waiting (N=51)	Unsure/ Declined (N=15)	
<u>Age*</u>					
Mean (Range)	50.0 (22-64)	53.4 (26-64)	49.8 (22-63)	52.9 (31-63)	51.5 (22-64)
	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>	<u>%</u>
<u>Gender *</u>					
Male	46.8	24.8	52.9	60.0	39.3
Female	49.5	67.2	47.1	33.3	55.7
Transgender	0.9	0.0	0.0	0.0	0.3
Declined to answer	2.8	8.0	0.0	6.7	4.7
<u>Sexual Orientation</u>					
Heterosexual (straight)	78.9	71.2	78.4	80.0	75.7
Gay or Lesbian	9.2	4.8	3.9	0.0	6.0
Bisexual	0.9	1.6	2.0	0.0	1.3
Asexual	0.9	1.6	0.0	0.0	1.0
Unsure/declined to answer	10.0	20.8	15.7	20.0	13.3
<u>Race</u>					
White	67.9	74.4	74.5	73.3	72.0
Black	11.0	9.6	9.8	6.7	10.0
Asian	1.8	0.8	2.0	0.0	1.3
Native Hawaiian/Pacific Islander	1.8	0.0	0.0	0.0	0.7
American Indian/Alaska Native	3.7	0.8	2.0	6.7	2.3
Other	13.8	5.6	11.8	20.0	10.3
Unsure/declined to answer	5.5	11.2	3.9	6.7	16.0
<u>Ethnicity</u>					
Hispanic/Latino	10.1	4.0	9.8	6.7	7.3
<u>Employment status</u>					
Employed	10.1	8.0	13.7	20.0	10.3
Out of work	13.8	14.4	13.7	6.7	13.7
Homemaker	0.9	0.8	2.0	0.0	1.0
Student	2.8	1.6	2.0	0.0	1.0
Retired	2.8	1.6	0.0	0.0	1.7
Unable to work	65.1	61.6	62.8	53.3	62.7
Unsure/declined to answer	4.6	12.0	5.9	20.0	8.7
<u>Education</u>					
8 <sup>th</sup> Grade or less	3.7	0.8	3.9	6.7	2.7
Some high school	11.9	4.0	9.8	0.0	7.7



High school or GED	32.1	28.8	37.3	46.7	32.3
Some college or 2 yr. degree	31.2	34.4	29.4	33.3	32.3
4 yr. college graduate	11.9	12.8	13.7	0.0	12.0
More than 4 yr. college degree	7.3	8.8	2.0	6.7	7.0
Declined to answer	1.8	10.4	3.9	6.7	6.0
<u>Primary Disability</u>					
Physical/mobility disability	33.0	25.6	15.7	40.0	27.3
Psychiatric disability	22.9	28.8	27.5	13.3	25.7
Long-term medical condition	19.3	16.8	23.5	20.0	19.0
Developmental disability	1.8	1.0	2.0	0.0	1.3
Blind/visually impaired	2.8	1.6	3.9	6.67	2.7
Deaf/hard-of-hearing	0.0	1.6	2.0	0.0	1.0
Other	12.8	6.4	7.8	0.0	8.7
Declined to answer	7.3	18.4	17.7	20.0	14.3
<u>Use of Medical Equipment</u>					
Uses wheelchair, crutch, cane	46.8	37.6	31.2	53.3	40.7
<u>Activities of Daily Living (ADL)*</u>					
Receives assistance with ADL	33.0	17.6	17.7	13.3	23.0
<u>Homelessness</u>					
Homeless in past 12 months	3.7	2.4	3.9	13.3	3.7

*Note. All values other than age are percentages. Data derived from survey questions Y1-10.*

*\*Age, gender, and receipt of ADL assistance differ significantly across enrollment groups ( $p < .05$ ).*

**Table 2. Members' Perceptions of MassHealth One Care Enrollment Information and Process**

	<b>Enrollment Group</b>		
	<b>Opt-In (N=109)</b>	<b>Opt-Out (N=125)</b>	<b>Waiting (N=51)</b>
	<b>%</b>	<b>%</b>	<b>%</b>
<u>MassHealth One Care Enrollment Packet</u>			
Recalled receiving packet	90.8	86.4	72.6
	<b>Opt-In (N=99)</b>	<b>Opt-Out (N=108)</b>	<b>Waiting (N=37)</b>
Reviewed information	90.9	88.9	64.9
	<b>Opt-In (N=90)</b>	<b>Opt-Out (N=96)</b>	<b>Waiting (N=24)</b>
<u>Ease of understanding One Care Enrollment Guide</u>			
Very easy/somewhat easy	83.3	72.9	58.3
Somewhat difficult/very difficult	12.2	21.9	37.5
Don't Know/not sure/declined	4.4	5.2	4.2
<u>One Care Enrollment Guide included</u>			
Too much information	13.3	15.6	16.7
The right amount of information	73.3	47.9	50.0
Too little information	7.8	27.1	29.2
Don't Know/not sure/declined	5.6	9.4	4.2
<u>Ease of understanding One Care Enrollment Decision Form</u>			
Very/somewhat easy	81.1	72.9	58.3
Somewhat difficult/very difficult	6.7	15.6	29.2
Don't Know/not sure/declined	12.2	11.5	12.5
<u>Importance of information in deciding about One Care</u>			
Very/somewhat important	88.9	84.4	91.7
Not very/not at all important	8.9	14.6	0.0
Don't Know/not sure/declined	2.2	1.0	8.3

*Note. All values are percentages. Data derived from survey questions E1-E5 and E8.*

**Table 3: Members' Efforts to Get Information about One Care**

	<b>Enrollment Group</b>		
	<b>Opt-In</b> (N=109)	<b>Opt-Out</b> (N=125)	<b>Waiting</b> (N=51)
<b>*Did you do the following to get general information about One Care:</b>			
	<u>%</u>	<u>%</u>	<u>%</u>
Speak to a representative from a One Care plan	56.9	16.0	3.9
Speak to your doctor or other provider	41.3	34.4	21.6
Call MassHealth Customer Service	33.9	34.4	7.8
Call or meet with a SHINE counselor	19.3	6.4	0.0
Get information from someone else	12.8	14.4	5.9
Attend a One Care community info session/health fair	6.4	7.2	3.9
None of the above	12.8	36.8	62.8
<b>Did you try to find out the following specific information about One Care:</b>			
If your provider is part of One Care	71.6	35.2	21.6
If your prescription medications are covered by One Care	72.5	17.6	15.9
If your preferred pharmacy is part of One Care	19.3	6.4	0.0

*Note. All values are percentages. Data derived from survey questions A1 and A3.*

*\*Respondents could identify more than one effort to get information, so totals exceed 100%*

**Table 4. Members' Reasons for and Influences on Decisions about One Care**

	<b>Enrollment Group</b>	
	<b>Opt-In (N=109)</b>	<b>Opt-Out (N=125)</b>
	<b>%</b>	<b>%</b>
<b>*Reasons for Enrolling (Opt –in)</b>		
To get better services	80.7	-
To get additional services	76.2	-
To get less complicated health care	71.6	-
To lower my health care costs	71.6	-
To have a care coordinator	52.3	-
Someone recommended it	43.1	-
Other reason	31.2	-
<b>*Reasons for not enrolling (Opt-out)</b>		
Happy with health care/One Care won't be as good	-	76.0
Would lose an important provider	-	68.8
Would lose an important service	-	56.0
Care would be more complicated	-	51.2
Didn't find answers to my questions about One Care	-	24.8
Would have to pay more for health care	-	23.2
Someone recommended it	-	16.0
Other reason	-	33.6
<b>Thinking of your decision, would you say it was:</b>		
Made entirely by you	59.2	75.9
Made with a little influence from someone else	28.6	18.8
Made with a lot of influence from someone else	4.1	4.5
Made entirely by someone else	7.1	-

*Note. All values are percentages. Data derived from survey questions I1, I3, O1 and O3.*

*\*Respondents could identify more than one reason, so totals exceed 100%*

**Table 5. Members' Hopes and Concerns about Access to Services and Providers under One Care**

	<b>Enrollment Group</b>	
	<b>Opt-In (N=83)</b>	<b>Opt-Out (N=86)</b>
<b>Access to Services</b>	<b>%</b>	<b>%</b>
<b><u>Hopes about Gaining Access to Services (Opt-In)</u></b>		
Dental services	85.5	-
Vision services	81.9	-
Someone to help you get the long-term community services and supports you need	69.9	-
Transportation services	68.7	-
Behavioral health or mental health services	63.9	-
Someone to help coordinate your health care	60.2	-
Other	27.7	-
<b><u>Concerns about Losing Access to Providers (Opt-out)</u></b>		
A primary medical care provider, such as your doctor or nurse practitioner	-	79.1
A medical specialist, such as an orthopedist neurologist, rheumatologist, or gynecologist	-	65.1
A behavioral health or mental health provider, such as a psychiatrist, counselor or therapist	-	55.8
A community-based services provider or program, such as day habilitation program, personal care attendant, or other community provider	-	20.9
Other	-	22.1

*Note. All values are percentages. Data derived from survey questions I4 and O4.*

**Table 6. Members' Reasons for Waiting to Decide about Enrolling in One Care (n=51)**

<b>*Reasons for waiting</b>	<b>%</b>
Need more time to decide	84.3
Not sure what to do next	70.6
Need more information	68.6
Want to discuss with someone first	68.6
Other reason	29.4

*Note. All values are percentages. Data derived from survey question W1.*

*\*Respondents could identify more than one reason, so totals exceed 100%.*

**Table 7: Need for Additional Information among Members in the Waiting Group (n=35)**

<b>*Types of information that would help you make a decision:</b>	<b>%</b>
If you can keep your current providers	97.1
The medical providers under One Care – doctors, nurses, or physical therapists	94.3
The services and benefits available under One Care	94.3
If you can keep same services and benefits that you have now under One Care	94.3
The prescription drugs available under One Care	91.4
The behavioral health providers available under One Care – psychologist, psychiatrist, therapist	85.7
The role of the Care Coordinator under One Care	77.1
The Community based providers available under One Care – such as PCAs	71.4
The role of the LTS Coordinator under One Care	65.1
Some other information	28.6

*Note. All values are percentages. Data derived from survey question W2.*

*\*Respondents could identify more than one type of information, so totals exceed 100%.*

**Appendix B – One Care Survey 1**

**One Care Early Indicators Project Survey 1**  
**OSR FINAL VERSION – TELEPHONE INTEVIEW SCRIPT 12/1/13**

**Introduction**

*Hello, this is \_\_\_\_\_, and I am calling from UMass Med School. May I please speak with Mr./Ms. \_\_\_\_\_.*

1. IF YES ON THE LINE, continue to script [1]
2. IF YES COMING TO THE LINE, continue to script [2]
3. IF “s/he cannot come to the phone, but you can talk to me, I am Mr./Ms. \_\_\_\_\_’s guardian/caretaker” - continue with Caretaker Script [3]
4. IF NOT AVAILABLE/NOT AT HOME – *Could you let me know what day and time is best for us to call back?”* If asked what this is about. *Response: This is about participating in a survey about health insurance coverage and health care services.*

**Script [1]:** *I’m calling on behalf of MassHealth to learn your opinions about One Care, a new health care program in Massachusetts. This interview is completely confidential and voluntary and will not affect your health care or benefits. Do you have time now to talk and answer some questions?*

[Interviewer Instruction: If respondent asks how long the interview will take, respond: *The interview usually lasts about 10 – 15 minutes.*]

**Script [2]:** *Hello, this is \_\_\_\_\_, from UMass Med School. I’m calling on behalf of MassHealth to learn your opinions about One Care, a new health care program in Massachusetts. This interview is completely confidential and voluntary and will not affect your health care or benefits. Do you have time now to talk and answer some questions?* [Interviewer Instruction: If respondent asks how long the interview will take, respond: *The interview usually lasts about 10 – 15 minutes.*]



IF YES to Script [1 or 2]: *Thank you. This call may be recorded for quality assurance.* [continue to A]

IF MEMBER MAY NOT BE INTERESTED: *MassHealth would like to make sure you receive the best service possible. By sharing your opinions, you can help make MassHealth programs work better.*

**A.** *Do you make your own decisions about your healthcare and health insurance?*

If YES, [continue to B]

IF NO, DON'T KNOW, or REFUSAL, [END: *Thank you for your time. If you would like more information about One Care I have a phone number that I can give you to call where you can learn more about what One Care offers. Would you like that number?*]

If YES, [It is XXX-XXX-XXXX. Thank you and have a good day.]

If NO, [Thank you and have a good day.]

**B.** *Have you heard about One Care?*

[If asked what it is, respond: *One Care is a new health care program in Massachusetts that covers the full set of services provided by MassHealth and Medicare for certain people with disabilities.*]

IF YES, [continue with SI]

IF NO/DON'T KNOW/REFUSAL, [END: *Thank you for your time. If you would like more information about One Care I have a phone number that I can give you to call where you can learn more about what One Care offers. Would you like that number?*]

If YES, [It is XXX-XXX-XXXX. Thank you and have a good day.]

If NO, [Thank you and have a good day.]

**Caretaker Script [3]:** *Are you the person who has the responsibility of making healthcare decisions for Mr./Ms. \_\_\_\_\_?*

IF YES, [END: *For this survey, we are gathering information from individuals who make their own decisions about their healthcare. However, we will be offering future opportunities for caregivers to share their thoughts on One Care and may call you again in the future. Thank you for your time.*]

IF NO/DON'T KNOW/REFUSAL, [*Could you please ask Mr./Ms. \_\_\_\_\_ to contact us at 888-368-7157 about participating in the survey?*]

**Answering Machine:** *Hello. This is {INTERVIEWER NAME} calling from UMASS Medical School. We are trying to reach {Mr./Ms. \_\_\_\_} to complete a brief interview over the phone about health insurance and health care. Please call the Office of Survey Research toll-free at 888-368-7157. Again, our number is 888-368-7157. Thank you and have a good day.*

Opt-In

Opt-Out

Waiting

All

### Screening Questions

All

**S1.** We would like to know whether or not you are enrolled in One Care or if you are still deciding whether or not to enroll. Which of the following best describes you?

[READ]

- 1 ..... You are already enrolled in One Care (Go To E1; **classify as Opt-in**)
- 2 ..... You have decided to enroll in One Care but have not yet informed MassHealth (Go to S2; **classify as Opt-in**)
- 3 ..... You have decided not to enroll and have already informed MassHealth (Go To E1; **classify as Opt-out**)
- 4 ..... You have decided not to enroll but have not yet informed MassHealth (Go To E1; **classify as Opt-out**)
- 5 ..... You are waiting to decide whether or not to enroll in One Care (Go to E1; **classify as Waiting**)

[DO NOT READ]

77 Not sure/Don't know (Go to A1)

99 Refused (Go to A1)

**Enrollment Information and Process**

**For All Samples**

**[READ INTRO]:** MassHealth mailed an information packet about One Care to people who are eligible for the program. The packet included several forms and a booklet about One Care. [INTERVIEWER NOTE: *These packets would have been received in late September or early October.*]

**E1.** Do you recall receiving a packet of information about One Care **from MassHealth?**

1 ..... Yes (go to E2)

2 ..... No (go to E9)

[DO NOT READ]

77 Not sure/Don't know (go to E9)

99 Refused (go to E9)

**E2.** Did you review that information?

1 ..... Yes (go to E3)

2 ..... No (go to E9)

[DO NOT READ]

77 Not sure/Don't know (go to E9)

99 Refused (go to E9)

**E3.** We are interested in whether or not the information from MassHealth about One Care was easy to understand. First I want to ask about the **One Care Enrollment Guide**. That's the booklet that described the program. It was about 28 pages long.

Overall, how easy or difficult was the One Care Enrollment Guide to understand?

[Please read:]

1 Very easy

2 Somewhat easy

3 Somewhat difficult

OR

4 Very difficult

[DO NOT READ]

77 Don't know / Not sure

99 Refused

E4. And would you say that the **One Care Enrollment Guide** included...?

[Please read:]

1 Too much information

2 The right amount of information

OR

3 Too little information

[DO NOT READ]

77 Don't know / Not sure

99 Refused

E5. How easy or difficult was the **One Care Enrollment Decision Form** to understand?

[Please read:]

1 Very easy

2 Somewhat easy

3 Somewhat difficult

OR

4 Very difficult

[DO NOT READ]

77 Don't know / Not sure

99 Refused

E6. Do you have suggestions for making the One Care information packet better?

1 ..... Yes (go to E7)

2 ..... No (go to E8)

[DO NOT READ]

77 Not sure/Don't know (go to E8)

99 Refused (go to E8)

E7. Please tell me one of your suggestions.

Specify: \_\_\_\_\_ (go to E8)

**E8.** Overall, how important do you consider the information from MassHealth in helping you decide about One Care?

*[Please read:]*

- 1 Extremely important
- 2 Somewhat important
- 3 Not very important

*OR*

- 4 Not at all important

*[DO NOT READ]*

- 77 Don't know / Not sure
- 99 Refused

**E9.** Did you receive any information **directly** from one or more of the companies offering One Care plans in Massachusetts?

[INTERVIEWER NOTE: *The 3 companies are Commonwealth Care Alliance, Fallon Total Care, and Network Health – although it is possible that not all plans are available in your area*]

- 1 ..... Yes (go to E10)
- 2 ..... No (if classified as Waiting go to **W1**; if classified as Opt-in go to **I1**; if classified as Opt-out go to **O1**)

*[DO NOT READ]*

- 77 Not sure/Don't know (if classified as Waiting go to **W1**; if classified as Opt-in go to **I1**; if classified as Opt-out go to **O1**)
- 99 Refused (if classified as Waiting go to **W1**; if classified as Opt-in go to **I1**; if classified as Opt-out go to **O1**)

**E10.** Did you choose a plan based on the information you got from the company?

- 1 ..... Yes (go to E11)
- 2 ..... No (go to E11)

*[DO NOT READ]*

- 77 Not sure/Don't know (go to E11)
- 99 Refused (if classified as Waiting go to **W1**; if classified as Opt-in go to **I1**; if classified as Opt-out go to **O1**)

**E11.** Overall, how important do you consider the information you received from these companies in helping you decide about One Care?

*[Please read:]*

- 1 Extremely important
- 2 Somewhat important
- 3 Not very important

*OR*

- 4 Not at all important

*[DO NOT READ]*

- 77 Don't know / Not sure
- 99 Refused

**If Classified as Waiting go to W1; if Opt-in go to I1; if Opt-out go to O1**

### Decision Making

#### **If Classified as Waiting**

**W1.** You mentioned earlier that you are waiting to decide whether or not to enroll in One Care. I will read a list of possible reasons why you may not have made a decision yet. Please answer yes or no to indicate if the reason applies to you.

[RANDOMIZE LIST; ANCHOR "OTHER" LAST]

		YES	NO	DK	Refused
a	You need more information	1	2	77	99
b	You want to discuss it with someone first	1	2	77	99
c	You need more time to decide	1	2	77	99
d	You're not sure what to do next	1	2	77	99
e	Other reason – SPECIFY	1	2	77	99
	<i>Other reason</i>				

**[If W1a=Yes, go to W2-W3; All else go to A1]**

**W2.** We are interested in the kinds of additional information people need to make a decision about One Care. I will read a list of different types of **information**. Please answer yes or no to indicate if that type of information would be helpful to you in making your decision.

[RANDOMIZE LIST; ANCHOR “OTHER” LAST]

		<b>YES</b>	<b>NO</b>	<b>DK</b>	<b>Refused</b>
a	The Medical providers available under One Care - for example, doctors, nurses, or physical therapists	1	2	77	99
b	The Behavioral Health providers available under One Care – for example, someone you can talk to about how you feel, like a therapist, psychologist or psychiatrist	1	2	77	99
c	The Community-based providers available under One Care - for example, personal care attendants	1	2	77	99
d	If you can keep your current providers under One Care	1	2	77	99
e	The services and benefits available under One Care	1	2	77	99
f	If you can keep the same services and benefits that you have now if you join One Care	1	2	77	99
g	The role of the Care Coordinator under One Care	1	2	77	99
h	The role of the Long Term Supports (or LTS) Coordinator under One Care	1	2	77	99
i	The prescription drugs available under One Care	1	2	77	99
j	Some other information – SPECIFY	1	2	77	99

*Other information*

---

**W3.** Do you know that you can call the MassHealth Customer Service line to get information about One Care?

- 1 ..... Yes (go to A1)
- 2 ..... No (go to A1)

[DO NOT READ]

- 77 Not sure/Don't know (go to A1)
- 99 Refused (go to A1)

[INTERVIEWER INSTRUCTION: If respondent wants the phone number, "The MassHealth Customer Service number is XXX-XXX-XXXX"]

**If Classified as Opt-In**

1. We are interested in the reasons why people choose to enroll in One Care. I will read a list of possible reasons. Please answer yes or no to indicate if that is a reason why you decided to enroll in One Care.

[RANDOMIZE LIST; ANCHOR "OTHER" LAST]

		YES	NO	DK	Refused
a	Someone recommended that you enroll in One Care	1	2	77	99
b	To get better services with One Care	1	2	77	99
c	To get additional services with One Care	1	2	77	99
d	To have a Care Coordinator	1	2	77	99
e	To get less complicated health care	1	2	77	99
f	To lower the costs you pay for your health care	1	2	77	99
g	Other reason – SPECIFY	1	2	77	99
	<i>Other reason</i>				

**[Ask I2 and I3 IF I1a=Yes (someone recommended)]**

12. You mentioned that someone recommended that you enroll in One Care. Which of the following made the recommendation?



CODE ALL THAT APPLY.

- 1 Friend or family member
- 2 Physician, nurse practitioner or nurse
- 3 Psychiatrist, psychologist or therapist
- 4 Case manager or care coordinator
- 5 Staff member from a program, state agency or organization that helps you
- 6 Someone else [SPECIFY \_\_\_\_\_]

[DO NOT READ]

- 77 DON'T KNOW
- 99 REFUSED

**13.** Thinking of your decision to enroll in One Care, would you say it was a decision...?

*[Please read:]*

- 1 Made entirely by you
- 2 Made with a little influence from someone else
- 3 Made with a lot of influence from someone else

OR

- 4 Made entirely by someone else

[DO NOT READ]

- 77 Don't know / Not sure
- 99 Refused

**[Ask I4 IF I1c=Yes (additional services)]**

**14.** You mentioned that you decided to enroll in One Care to get additional services. I will read a list of possible services. Please answer yes or no to indicate if that is an additional service you hope to get under One Care.

[RANDOMIZE LIST; ANCHOR "OTHER" LAST]

		YES	NO	DK	Refused
a	Dental services	1	2	77	99
b	Vision services	1	2	77	99
c	Behavioral health or mental health services	1	2	77	99
d	Someone to help coordinate your health care	1	2	77	99
e	Someone to help you get the long-term community services and supports you need	1	2	77	99
f	Transportation services	1	2	77	99
g	Other service – SPECIFY	1	2	77	99

*Other service*

---

**IF SAMPLE FLAG=OPT-IN AND CLASSIFIED AS OPT-IN, ASK I5-7 (I8-9 based on skipping pattern); DO NOT SHOW IF CLASSIFIED AS OPT-IN BUT SAMPLE FLAG ≠OPT-IN – THESE RESPONDENTS GO TO A1**

[READ INTRO FOR I5] We are interested in the experiences people have had with One Care so far.

**I5.** How long have you been in your One Care plan?

- 1 ..... Since October 1, 2013
- 2 ..... Since November 1, 2013
- 3 ..... Since December 1, 2013

*[DO NOT READ]*

- 77 Not sure/Don't know
- 99 Refused

**I6.** Has a representative from your One Care plan met with you in person to talk about your health history and the health care and support services that you need?

- 1 ..... Yes
- 2 ..... No

*[DO NOT READ]*

- 77 Not sure/Don't know
- 99 Refused

**I7.** Have you experienced any changes in your services since you got One Care?

- 1 ..... Yes (go to **I8**)
- 2 ..... No (go to **A1**)

[DO NOT READ]

77 Not sure/Don't know (go to A1)

99 Refused (go to A1)

**[Ask I8 IF I7=Yes (experienced changes)]**

**I8.** And, overall would you say that the changes were...

*[Please read:]*

1 Positive (go to I9)

2 Negative (go to I9)

*OR*

3 Neither positive nor negative (go to A1)

*[DO NOT READ]*

77 Don't know / Not sure (go to A1)

99 Refused (go to A1)

**I9.** What were the 1 or 2 most [PROGRAMMER: PIPE IN "positive" IF I8=1; "negative" IF I8=2] changes?

RECORD RESPONSE #1 \_\_\_\_\_

RECORD RESPONSE #2 \_\_\_\_\_

**IF CLASSIFIED AS OPT-OUT**

**O1.** We are interested in the reasons why people choose **NOT** to enroll in One Care. I will read a list of possible reasons. Please answer yes or no to indicate if that is a reason why you decided **NOT** to enroll in One Care.

[RANDOMIZE LIST; ANCHOR "OTHER" LAST]

		YES	NO	DK	Refused
a	Someone recommended that you NOT enroll in One Care	1	2	77	99
b	You thought you would lose an important provider if you enrolled in One Care	1	2	77	99

c	You thought you would lose an important service if you enrolled in One Care	1	2	77	99
d	You are happy with your health care and think it would not be as good under One Care	1	2	77	99
e	You think getting health care under One Care would be more complicated	1	2	77	99
f	You think you would have to pay more for your health care	1	2	77	99
g	You didn't find answers to the questions you have about One Care	1	2	77	99
h	Other reason – SPECIFY	1	2	77	99
	<i>Other reason</i>				

---

**[Ask O2 IF O1a=Yes (someone recommended)]**

**O2.** You mentioned that someone recommended that you **NOT** enroll in One Care. Which of the following made the recommendation? [READ]

*CODE ALL THAT APPLY.*

- 1 Friend or family member
- 2 Physician, nurse practitioner or nurse
- 3 Psychiatrist, psychologist or therapist
- 4 Case manager or care coordinator
- 5 Staff member from a program, state agency or organization that helps you
- 6 Someone else [SPECIFY \_\_\_\_\_]

*[DO NOT READ]*

- 77 DON'T KNOW
- 99 REFUSED

**O3.** Thinking of your decision to **NOT** enroll in One Care, would you say it was a decision...?

*[Please read:]*

- 1 Made entirely by you
- 2 Made with a little influence from someone else
- 3 Made with a lot of influence from someone else

*OR*

- 4 Made entirely by someone else

*[DO NOT READ]*

- 77 Don't know / Not sure
- 99 Refused

**[Ask O4 IF O1b=Yes (lose provider)]**

**O4.** You mentioned that you decided **NOT** to enroll in One Care because you thought you would lose an important provider. I will read a list of different types of providers. Please answer yes or no to indicate if you were concerned about losing one of these providers under One Care.

		YES	NO	DK	Refused
a	A primary medical care provider, such as your doctor or nurse practitioner	1	2	77	99
b	A behavioral health or mental health provider, such as a psychiatrist, counselor or therapist	1	2	77	99
c	A medical specialist, such as an orthopedist, neurologist, rheumatologist, or gynecologist	1	2	77	99
d	A community-based services provider or program, such as day habilitation program, personal care attendant, or other community provider	1	2	77	99
g	Other provider – SPECIFY	1	2	77	99
	<i>Other provider</i>				

**[Ask O5 IF O1c=Yes (lose service)]**

**O5.** You mentioned that you decided **NOT** to enroll in One Care because you thought you would lose an important service. What is the most important service that you think you would lose?

*RECORD RESPONSE* \_\_\_\_\_

**[Ask O6 IF O1g=Yes (have questions about One Care)]**

**O6.** You mentioned that you decided **NOT** to enroll in One Care because you have questions you need answered. What are the one or two most important questions that you have about One Care?

*RECORD UP TO 2 RESPONSES*

1. \_\_\_\_\_
2. \_\_\_\_\_

**O7.** Do you know that you can call the MassHealth Customer Service line to get information about One Care?

- 1 ..... Yes
- 2 ..... No

[DO NOT READ]

77 Not sure/Don't know

99 Refused

[INTERVIEWER INSTRUCTION: If respondent wants the phone number, "The MassHealth Customer Service number is XXX-XXX-XXXX"]

Answers to Questions About One Care

For All Samples

A1. There are several ways that people can get general information about One Care. Please answer yes or no to indicate if you did any of the following to get information:

[RANDOMIZE LIST; ANCHOR "OTHER" LAST]

		YES	NO	DK	Refused
a	Call MassHealth Customer Service	1	2	77	99
b	Call or meet with a SHINE counselor – Serving the Health Insurance Needs of Everyone ( <i>Interviewer: old name is Serving the Health Information Needs of Elders</i> )	1	2	77	99
c	Attend a community information session or health fair about One Care	1	2	77	99
d	Speak to or meet with a representative from a One Care plan	1	2	77	99
e	Speak to your doctor or other providers about One Care	1	2	77	99
f	Contact someone else – SPECIFY <i>Someone else</i>	1	2	77	99

---

**[Ask A2 IF more than one question in A1a – A1f=Yes (Got information about One Care from more than one source)]**

**A2.** Which was the most useful in helping you understand One Care? [READ]

*[PROGRAMMER’S NOTE: SHOW ONLY THE OPTIONS CHECKED AS “YES” IN A1a – A1f, IN SAME ORDER AS IN A1].*

- 1 MassHealth Customer Service
- 2 SHINE Program or Counselor
- 3 Community meeting, event or health fair
- 4 Representative from One Care plan
- 5 Your doctor or other provider
- 6 Someone else [SPECIFY \_\_\_\_\_]

*[DO NOT READ]*

- 77 Not sure/Don’t know
- 99 REFUSED

**[READ INTRO TO A3]** You might get services from a variety of different providers, such as your primary care doctor, a medical specialist, a mental health provider, or a provider in a community program. We are interested in knowing if you tried to find out certain information about your One Care Plan.

**A3.** Which of the following did you try to find out?

*[READ LIST; CODE ALL THAT APPLY]*

- 1 ..... If the providers you want are part of a One Care plan
- 2 ..... If your prescription medications are covered in a One Care plan
- 3 ..... If your preferred pharmacy is part of a One Care plan

*[DO NOT READ]*

- 77 Not sure/Don’t know
- 99 Refused

[ASK **A4** IF A3=1, 2 OR 3]

**A4.** There are several ways that people can find out if their providers and other services such as medications are available under One Care. To find out if your providers and other services are available under One Care, did you:

[RANDOMIZE LIST; ANCHOR “OTHER” LAST]

		YES	NO	DK	Refused
a	Call MassHealth Customer Service	1	2	77	99
b	Call or meet with a SHINE counselor – Serving the Health Insurance Needs of Everyone ( <i>Interviewer: old name is Serving the Health Information Needs of Elders</i> )	1	2	77	99
c	Speak to or meet with a representative from a One Care plan	1	2	77	99
d	Speak to your doctor or other providers	1	2	77	99
e	Speak to your pharmacist	1	2	77	99
f	Speak to someone else – SPECIFY <i>Someone else</i>	1	2	77	99

[ASK A5 IF ANY OF A4a-f=1]

A5. Overall, would you say that your questions about One Care have been answered?

- 1 ..... Yes
- 2 ..... No

[DO NOT READ]

77 Not sure/Don't know

99 Refused

**About You**

**For All Samples**

[READ INTRO] I have some last few questions about your background. **This information will help us be sure that we have gotten input on One Care from a wide variety of people.** Again, your responses will be kept confidential to protect your privacy. It is entirely up to you if you want to answer any of these questions. Feel free to tell me you want to skip a question without answering.

People who are eligible for One Care are people who receive both MassHealth and Medicare because of a disability. We would now like to ask you a few questions about your disability.

Y1. What do you consider to be your primary disability?



RECORD RESPONSE: \_\_\_\_\_

**Y2.** Do you use a wheelchair or any other equipment such as crutches or a cane to get around?

1 ..... Yes

2 ..... No

*[DO NOT READ]*

77 Not sure/Don't know

99 Refused

[INTRO TO Y11] Some people with disabilities receive assistance with personal care or daily activities from a personal care attendant (PCA), home care aide, homemaker or other direct support person.

**Y3.** Because of your disability, do you currently receive or need any help in your home with personal care or daily activities?

1 ..... Yes

2 ..... No

*[DO NOT READ]*

77 Not sure/Don't know

99 Refused

The next few questions are about your personal background. Again, feel free to skip any of them.

**Y4.** During the past 12 months, have you experienced homelessness?

1 ..... Yes

2 ..... No

*[DO NOT READ]*

77 Not sure/Don't know

99 Refused

**Y5.** Are you currently...?

*[READ]*

- 1 Employed for wages
- 2 Self-employed
- 3 Out of work for more than 1 year
- 4 Out of work for less than 1 year
- 5 A Homemaker
- 6 A Student
- 7 Retired

*Or*

- 8 Unable to work

*[DO NOT READ]*

- 77 Not Sure/Don't Know
- 99 Refused

**Y6.** What is the highest grade or level of school that you have completed?

**Is it...** [READ LIST]

- 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

*OR*

- 6 More than 4-year college degree

*[DO NOT READ]*

- 77 Not Sure/Don't Know
- 99 Refused

**Y7.** Are you of Hispanic or Latino origin or descent?

- 1 Yes, Hispanic or Latino
- 2 No, not Hispanic or Latino

*[DO NOT READ]*

77 Not sure/Don't know

99 Refused

**Y8.** Which one or more of the following would you say is your race?

*[Check all that apply]*

*[READ]*

- 1 White
  - 2 Black or African American
  - 3 Asian
  - 4 Native Hawaiian or Other Pacific Islander
  - 5 American Indian, Alaska Native, or
  - 6 Other [specify] \_\_\_\_\_
- [DO NOT READ]*
- 77 Don't know / Not sure
  - 99 Refused

**Y9.** How do you identify your sexual orientation?

- 1 ..... Heterosexual (straight)
  - 2 ..... Gay or Lesbian
  - 3 ..... Bisexual
  - 4 ..... Asexual
- [DO NOT READ]*
- 77 Not sure/Don't know
  - 99 Refused

**Y10.** What is your gender?

- 1 ..... Female
  - 2 ..... Male
  - 3 ..... Transgender
- [DO NOT READ]*
- 77 Not sure/Don't know
  - 99 Refused

*Thank you for participating in this survey. Your responses will be kept confidential. The information you shared will help MassHealth to understand why members may or may not have chosen to participate in One Care.*

*Have a good day (evening).*

[If respondent has questions about the survey, respond: *You can contact Alexis Henry at UMass Medical School at 508.856.8833 with questions about this survey;* If respondent has questions about One Care, respond: *If you have any questions about the One Care program you can contact: \_\_\_\_\_ at \_\_\_\_\_.*]