

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
			<b>SATISFACTION WITH CARE QUESTIONNAIRE SPECIFICATIONS</b>  <u>CRITERIA</u> INTTYPE=C001, C002, C003, C004, C005, C006 SPALIVE=1 SEASON=FALL SPPROXY=SP or PROXY until BOX SC2 Other: N/A  <u>PLACEMENT</u> Administer after NAQ.		
MCQUALTY	SC1	code one	SHOW CARD SC1  We're interested in how you feel about the health care [you have/(SP) has] received [over the past year/since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)] from doctors and hospitals. Please tell me how satisfied or dissatisfied you have been with the following:  The overall quality of the health care [you have /(SP) has] received [over the past year/since (TODAY'S DATE - 12 MONTHS)]. Have you been very satisfied, satisfied, dissatisfied, or very dissatisfied?	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC2 - MCAVAIL
MCAVAIL	SC2	code one	SHOW CARD SC1  [Please tell me how satisfied or dissatisfied you have been with . . .]  The availability of health care at night and on weekends.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC3 - MCEASE
MCEASE	SC3	code one	SHOW CARD SC1  [Please tell me how satisfied or dissatisfied you have been with . . .]  The ease and convenience of getting to a doctor or other health professional from where [you/(SP)] [live/lives].	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC4 - MCCOSTS
MCCOSTS	SC4	code one	SHOW CARD SC1  [Please tell me how satisfied or dissatisfied you have been with . . .]  The out-of-pocket costs [you/(SP)] paid for health care.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC7-MCCONCRN
MCCONCRN	SC7	code one	SHOW CARD SC1  [Please tell me how satisfied or dissatisfied you have been with . . .]  The concern of doctors or other health professionals for [your/(SP's)] overall health rather than just for an isolated symptom or disease.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC8 - MCSAMLOC
MCSAMLOC	SC8	code one	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .]  Getting all [your/(SP's)] health care needs taken care of at the same location.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC8A - MCSPECAR

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MCSPECAR	SC8A	code one	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .]  The availability of care by specialists when [you/(SP)] [feel/feels] [you/(SP)] [need/needs] it.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC8B - MCANSWER
MCANSWER	SC8B	code one	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .]  The ease of obtaining answers to questions about [your/(SP's)] treatment or prescriptions.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC9-MDISSFY
MDISSFY	MDISSFY	verbatim text	Please think about all of the health care services [you/(SP)] [receive/receives], including services provided by doctors or other health professionals, hospitals and pharmacies.  What things, if anything, about the health care services [you/(SP)] [receive/receives] are you dissatisfied with?	(01) RESPONDENT IS NOT DISSATISFIED WITH ANYTHING (91) RESPONDENT IS DISSATISFIED (RECORD VERBATIM IN THE NEXT SCREEN) (-8) Don't Know (-9) Refused	(01) BOX SC1 (91) SC9 - MCDISVB (-8) BOX SC1 (-9) BOX SC1
MCDISVB	MCDISVB	verbatim text	[Please think about all of the health care services [you/(SP)] [receive/receives], including services provided by doctors or other health professionals, hospitals and pharmacies.  What things, if anything, about the health care services [you/(SP)] [receive/receives] are you dissatisfied with?]	(01) continuous answer	BOX SC1
	BOX SC1		If INTTYPE in (C003), GO TO SCWORRY. ELSE, GO TO BOX SCEND.		
SCWORRY	SC10A	list	Please tell me whether each of the following statements is true or false.  [You/(SP)] [worry/worries] about [your/(SP's)] health more than other people [your/(SP's)] age.  [Is this statement true or false?]	(01) TRUE (02) FALSE (-8) Don't Know (-9) Refused	SC10A - SCDRSOON
SCDRSOON	SC10A	list	[Please tell me whether each of the following statements is true or false.]  Usually, [you/(SP)] [go/goes] to the doctor or other health professional as soon as [you/(SP)] [start/starts] to feel bad.	(01) TRUE (02) FALSE (-8) Don't Know (-9) Refused	BOX SC2
	BOX SC2		IF IN4-SPPROXY=1/SP then go to SCINTRO. ELSE GO TO BOX SCEND		
SCINTRO	SCINTRO	no entry	Now I have some questions about how you make health care decisions. Answers to questions like these will help Medicare better understand how people use medical services.  Please keep in mind that there are no right or wrong answers to these questions. Your opinions and experiences are important to us.	(01) CONTINUE (-7) Empty	SCINSTRC
SCINSTRC	SCINSTRC	code one	SHOW CARD SC2 Doctors often give instructions about how you should care for yourself at home, like changing a bandage, taking medicines on schedule, or applying ice packs. How confident are you that you can follow instructions to care for yourself at home?	(01) VERY CONFIDENT (02) CONFIDENT (03) SOMEWHAT CONFIDENT (04) NOT AT ALL CONFIDENT (-8) Don't Know (-9) Refused	SCMEDREC
SCMEDREC	SCMEDREC	code one	SHOW CARD SC2 Doctors also often give instructions about changing your habits or lifestyle, such as changing your diet, stopping smoking, or getting regular exercise. How confident are you that you can follow this kind of instruction, to change your habits or lifestyle?	(01) VERY CONFIDENT (02) CONFIDENT (03) SOMEWHAT CONFIDENT (04) NOT AT ALL CONFIDENT (-8) Don't Know (-9) Refused	SCCHGDRS

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SCCHGDRS	SCCHGDRS	code one	SHOW CARD SC3 How likely are you to change doctors or other health professionals if you are dissatisfied with the way you and your doctor or other health professional communicate? [Would you say very likely, likely, unlikely, or very unlikely?]	(01) VERY LIKELY (02) LIKELY (03) UNLIKELY (04) VERY UNLIKELY (-8) Don't Know (-9) Refused	SCDISAGR
SCDISAGR	SCDISAGR	code one	SHOW CARD SC3 How likely are you to tell your doctor or other health professional when you disagree with them?	(01) VERY LIKELY (02) LIKELY (03) UNLIKELY (04) VERY UNLIKELY (-8) Don't Know (-9) Refused	SCRXINFO
SCRXINFO	SCRXINFO	code one	SHOW CARD SC4 These next questions are about practices sometimes associated with receiving medical care. Please tell me if you always, usually, sometimes, or never do the following:  Do you always, usually, sometimes, or never read information about a new prescription, such as side effects and precautions?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	SCDRQUEX
SCDRQUEX	SCDRQUEX	code one	SHOW CARD SC4 Do you always, usually, sometimes, or never...  Bring with you to your doctor or other health professional visits a list of questions or concerns you want to cover?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	SCANSWR
SCANSWR	SCANSWR	code one	SHOW CARD SC4 [Do you always, usually, sometimes, or never...]  Leave your doctor or other health professional's office feeling that all of your concerns or questions have been fully answered?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	SCLISTRX
SCLISTRX	SCLISTRX	code one	SHOW CARD SC4 [Do you always, usually, sometimes, or never...]  Take a list of all of your prescribed medicines to your doctor or other health professional visits?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SCTRSLT
SCTRSLT	SCTRSLT	code one	SHOW CARD SC4 [Do you always, usually, sometimes, or never...]  Make sure you understand the results of any medical test or procedure such as an x-ray, blood test, or EKG for heart conditions?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	SCOPTION
SCOPTION	SCOPTION	code one	SHOW CARD SC4 [Do you always, usually, sometimes, or never...]  Talk with your doctor or other health professional about your options if you need tests, follow-up care, or a referral for care by a medical specialist?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	SCADVICE
SCADVICE	SCDVICE	code one	SHOW CARD SC4 [Do you always, usually, sometimes, or never...]  Contact your doctor or other health professional's office to get medical advice when you need it.	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	BOX SCEND
	BOX SCEND	routing	GO TO CMQ.		