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Medicare Current Beneficiary Survey

Section Specifications for R63 PAQ 2012

PATIENT ACTIVATION SUPPLEMENT

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BOX PA1

BOX INSTRUCTIONS

GO TO PAINTRO - PAINTRO.

PAINTRO

No Entry

QUESTION TEXT

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.

FIELD 1: PAINTRO**FIELD 1 ROUTING**

| Value | Label | Route |
|-------|----------|----------------|
| 1 | CONTINUE | PA1 - PANECESS |
| | Empty | PA1 - PANECESS |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| TEMP | 1 |

PA1

Code 1

QUESTION TEXT

SHOW CARD PA1

Please tell me how confident you are that you can identify when it is necessary for you to get medical care.

FIELD 1: PANECESS**FIELD 1 ROUTING**

| Value | Label | Route |
|-------|----------------------|-----------------|
| 1 | VERY CONFIDENT | PA2 - PASIDEXFX |
| 2 | CONFIDENT | PA2 - PASIDEXFX |
| 3 | SOMEWHAT CONFIDENT | PA2 - PASIDEXFX |
| 4 | NOT AT ALL CONFIDENT | PA2 - PASIDEXFX |
| | Don't Know | PA2 - PASIDEXFX |
| | Refused | PA2 - PASIDEXFX |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PANECESS | 1 |

PA2

Code 1

QUESTION TEXT

SHOW CARD PA1

[How confident are you that you can...]

Identify when you are having side effects from your medications?

FIELD 1: PASIDEX

FIELD 1 ROUTING

| Value | Label | Route |
|-------|----------------------|----------------|
| 1 | VERY CONFIDENT | PA3 - PAINSTRC |
| 2 | CONFIDENT | PA3 - PAINSTRC |
| 3 | SOMEWHAT CONFIDENT | PA3 - PAINSTRC |
| 4 | NOT AT ALL CONFIDENT | PA3 - PAINSTRC |
| 5 | NOT APPLICABLE | PA3 - PAINSTRC |
| | Don't Know | PA3 - PAINSTRC |
| | Refused | PA3 - PAINSTRC |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PASIDEX | 1 |

PA3

Code 1

QUESTION TEXT

SHOW CARD PA1

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?

FIELD 1: PAINSTRC

FIELD 1 ROUTING

| Value | Label | Route |
|-------|----------------------|----------------|
| 1 | VERY CONFIDENT | PA4 - PAMEDREC |
| 2 | CONFIDENT | PA4 - PAMEDREC |
| 3 | SOMEWHAT CONFIDENT | PA4 - PAMEDREC |
| 4 | NOT AT ALL CONFIDENT | PA4 - PAMEDREC |
| 5 | NOT APPLICABLE | PA4 - PAMEDREC |
| | Don't Know | PA4 - PAMEDREC |
| | Refused | PA4 - PAMEDREC |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PAINSTRC | 1 |

PA4

Code 1

QUESTION TEXT

SHOW CARD PA1

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?

FIELD 1: PAMEDREC

FIELD 1 ROUTING

| Value | Label | Route |
|-------|----------------------|----------------|
| 1 | VERY CONFIDENT | PA5 - PACHGDRS |
| 2 | CONFIDENT | PA5 - PACHGDRS |
| 3 | SOMEWHAT CONFIDENT | PA5 - PACHGDRS |
| 4 | NOT AT ALL CONFIDENT | PA5 - PACHGDRS |
| | Don't Know | PA5 - PACHGDRS |
| | Refused | PA5 - PACHGDRS |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PAMEDREC | 1 |

PA5

Code 1

QUESTION TEXT

SHOW CARD PA2

Please use this card to respond to the following statements.

How likely are you to change doctors if you are dissatisfied with the way you and your doctor communicate?

FIELD 1: PACHGDRS

FIELD 1 ROUTING

| Value | Label | Route |
|-------|---------------|----------------|
| 1 | VERY LIKELY | PA6 - PADISAGR |
| 2 | LIKELY | PA6 - PADISAGR |
| 3 | UNLIKELY | PA6 - PADISAGR |
| 4 | VERY UNLIKELY | PA6 - PADISAGR |
| | Don't Know | PA6 - PADISAGR |
| | Refused | PA6 - PADISAGR |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PACHGDRS | 1 |

PA6

Code 1

QUESTION TEXT

SHOW CARD PA2

How likely are you to tell your doctor when you disagree with him or her?

FIELD 1: PADISAGR

FIELD 1 ROUTING

| Value | Label | Route |
|-------|---------------|----------------|
| 1 | VERY LIKELY | PA9 - PAHCONDS |
| 2 | LIKELY | PA9 - PAHCONDS |
| 3 | UNLIKELY | PA9 - PAHCONDS |
| 4 | VERY UNLIKELY | PA9 - PAHCONDS |
| | Don't Know | PA9 - PAHCONDS |
| | Refused | PA9 - PAHCONDS |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PADISAGR | 1 |

PA9

Code 1

QUESTION TEXT

SHOW CARD PA4

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 about health conditions in newspapers, magazines, or on the Internet?

FIELD 1: PAHCONDS

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|-----------------|
| 1 | ALWAYS | PA10 - PARXINFO |
| 2 | USUALLY | PA10 - PARXINFO |
| 3 | SOMETIMES | PA10 - PARXINFO |
| 4 | NEVER | PA10 - PARXINFO |
| | Don't Know | PA10 - PARXINFO |
| | Refused | PA10 - PARXINFO |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PAHCONDS | 1 |

PA10

Code 1

QUESTION TEXT

SHOW CARD PA4

[Do you always, usually, sometimes, or never...]

Read information about a new prescription, such as side effects and precautions?

FIELD 1: PARXINFO

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|-----------------|
| 1 | ALWAYS | PA11 - PADRQUEX |
| 2 | USUALLY | PA11 - PADRQUEX |
| 3 | SOMETIMES | PA11 - PADRQUEX |
| 4 | NEVER | PA11 - PADRQUEX |
| | Don't Know | PA11 - PADRQUEX |
| | Refused | PA11 - PADRQUEX |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PARXINFO | 1 |

PA11

Code 1

QUESTION TEXT

SHOW CARD PA4

[Do you always, usually, sometimes, or never...]

Bring with you to your doctor visits a list of questions or concerns you want to cover?

FIELD 1: PADRQUEX

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|----------------|
| 1 | ALWAYS | PA12 - PAANSWR |
| 2 | USUALLY | PA12 - PAANSWR |
| 3 | SOMETIMES | PA12 - PAANSWR |
| 4 | NEVER | PA12 - PAANSWR |
| | Don't Know | PA12 - PAANSWR |
| | Refused | PA12 - PAANSWR |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PADRQUEX | 1 |

PA12

Code 1

QUESTION TEXT

SHOW CARD PA4

[Do you always, usually, sometimes, or never...]

Leave your doctor's office feeling that all of your concerns or questions have been fully answered?

FIELD 1: PAANSWR**FIELD 1 ROUTING**

| Value | Label | Route |
|-------|------------|-----------------|
| 1 | ALWAYS | PA13 - PALISTRX |
| 2 | USUALLY | PA13 - PALISTRX |
| 3 | SOMETIMES | PA13 - PALISTRX |
| 4 | NEVER | PA13 - PALISTRX |
| | Don't Know | PA13 - PALISTRX |
| | Refused | PA13 - PALISTRX |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PAANSWR | 1 |

PA13

Code 1

QUESTION TEXT

SHOW CARD PA4

[Do you always, usually, sometimes, or never...]

Take a list of all of your prescribed medicines to your doctor visits?

FIELD 1: PALISTRX

FIELD 1 ROUTING

| Value | Label | Route |
|-------|----------------|----------------|
| 1 | ALWAYS | PA14 - PATRSLT |
| 2 | USUALLY | PA14 - PATRSLT |
| 3 | SOMETIMES | PA14 - PATRSLT |
| 4 | NEVER | PA14 - PATRSLT |
| 5 | NOT APPLICABLE | PA14 - PATRSLT |
| | Don't Know | PA14 - PATRSLT |
| | Refused | PA14 - PATRSLT |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PALISTRX | 1 |

PA14

Code 1

QUESTION TEXT

SHOW CARD PA4

[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?

FIELD 1: PATRSLT

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|-----------------|
| 1 | ALWAYS | PA15 - PAOPTION |
| 2 | USUALLY | PA15 - PAOPTION |
| 3 | SOMETIMES | PA15 - PAOPTION |
| 4 | NEVER | PA15 - PAOPTION |
| | Don't Know | PA15 - PAOPTION |
| | Refused | PA15 - PAOPTION |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PATRSLT | 1 |

PA15

Code 1

QUESTION TEXT

SHOW CARD PA4

[Do you always, usually, sometimes, or never...]

Talk with your doctor or other medical person about your options if you need tests, follow-up care, or a referral for care by a medical specialist?

FIELD 1: PAOPTION

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|-----------------|
| 1 | ALWAYS | PA16 - PADRLISN |
| 2 | USUALLY | PA16 - PADRLISN |
| 3 | SOMETIMES | PA16 - PADRLISN |
| 4 | NEVER | PA16 - PADRLISN |
| | Don't Know | PA16 - PADRLISN |
| | Refused | PA16 - PADRLISN |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PAOPTION | 1 |

PA16

Code 1

QUESTION TEXT

SHOW CARD PA4

Now I am going to read some statements that may describe your relationship with your doctor. Please tell me if the following statements always, usually, sometimes, or never happen.

My doctor listens to what I have to say about my symptoms and concerns. [Does that always, usually, sometimes, or never happen?]

FIELD 1: PADRLISN

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|-----------------|
| 1 | ALWAYS | PA20 - PADREXPL |
| 2 | USUALLY | PA20 - PADREXPL |
| 3 | SOMETIMES | PA20 - PADREXPL |
| 4 | NEVER | PA20 - PADREXPL |
| | Don't Know | PA20 - PADREXPL |
| | Refused | PA20 - PADREXPL |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PADRLISN | 1 |

PA20

Code 1

QUESTION TEXT

SHOW CARD PA4

My doctor explains things to me in terms that I can easily understand. Does that always, usually, sometimes, or never happen?

FIELD 1: PADREXPL

FIELD 1 ROUTING

| Value | Label | Route |
|-------|------------|----------------|
| 1 | ALWAYS | PA21 - PADVISE |
| 2 | USUALLY | PA21 - PADVISE |
| 3 | SOMETIMES | PA21 - PADVISE |
| 4 | NEVER | PA21 - PADVISE |
| | Don't Know | PA21 - PADVISE |
| | Refused | PA21 - PADVISE |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PADREXPL | 1 |

PA21

Code 1

QUESTION TEXT

SHOW CARD PA4

I can call my doctor's office to get medical advice when I need it. Does that always, usually, sometimes, or never happen?

FIELD 1: PADVICE**FIELD 1 ROUTING**

| Value | Label | Route |
|-------|------------|---------|
| 1 | ALWAYS | BOX PA2 |
| 2 | USUALLY | BOX PA2 |
| 3 | SOMETIMES | BOX PA2 |
| 4 | NEVER | BOX PA2 |
| | Don't Know | BOX PA2 |
| | Refused | BOX PA2 |

FIELD 1 ATTRIBUTES

| Cheshire Name | Answers Allowed |
|---------------|-----------------|
| PACT.PADVICE | 1 |

BOX PA2

BOX INSTRUCTIONS

GO TO NEXT SECTION