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Evaluating Iowa Medicaid Managed Care Plans: the Consumer Perspective. Results from the 2002 Survey of Iowa Medicaid Managed Care Enrollees. Final Report to the Iowa Department of Human Services

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Evaluating Iowa Medicaid Managed Care Plans: the Consumer Perspective

Results from the 2002 Survey of Iowa Medicaid Managed Care Enrollees

Final Report to the
Iowa Department of Human Services

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Preface

This report presents the results of a study of how Iowa Medicaid managed care enrollees rated their health plans in which they were enrolled during 2000. It was conducted at the request of the Iowa Department of Human Services as part of their continuing quality assurance activities with health plans participating in Medicaid.

This study began as part of a demonstration project of the Consumer Assessment of Health Plans Study (CAHPS) that was being conducted in Iowa. CAHPS is a national effort to develop a method to provide consumers and purchasers with information about the quality of health plans.

CAHPS is sponsored by the Agency for Health Care Research and Quality. The three primary developers of the CAHPS survey and report are Harvard University, RAND and the Research Triangle Institute. The surveys and aspects of the consumer report used in this project were modified by researchers at the University of Iowa Public Policy Center in collaboration with the Iowa Department of Human Services and researchers at RAND who are part of the CAHPS team. The core CAHPS survey instrument was modified to include additional questions about access to care, dental care and where respondents received information if they had questions about their health plan.

Researchers at The University of Iowa Public Policy Center conducted this study with funding provided by the Iowa Department of Human Services and the US Department of Health and Human Services Center for Medicare and Medicaid Services (CMS). Researchers from RAND, who are members of the CAHPS development team, also collaborated and provided technical assistance with this project.

Information and conclusions presented in this report are the responsibility of the authors and do not represent the views of the Iowa Department of Human Services, The CMS, the health plans or the University of Iowa.

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EVALUATING IOWA MEDICAID MANAGED CARE PLANS: THE CONSUMER PERSPECTIVE
RESULTS FROM THE 2002 SURVEY OF IOWA MEDICAID MANAGED CARE ENROLLEES

EXECUTIVE SUMMARY

As part of the quality assurance activities of Iowa's Medicaid Managed Care Program, the Iowa Department of Human Services contracted with the University of Iowa Public Policy Center to conduct a survey of adults and children enrolled in Iowa's Medicaid HMOs. Each respondent was enrolled in one of four HMOs: John Deere Health Care, Iowa Health Solutions, Coventry Health Care, or MediPASS (the state-administered Medicaid HMO program).

The survey included the CAHPS® 2.0 questionnaire as well as other items designed to elicit respondents' perceptions of their access to medical, dental, and behavioral health care, and the quality of their health care and health plans. Demographic data were also requested. The initial sample was comprised of households with current Medicaid enrollees: 2831 children and 2428 adults. Data were obtained for 953 adults and 1226 children. This represents combined phone and mail survey response rates of 39 percent for adults and 43 percent for children. Approximately two thirds of the responses were received by mail and one third by phone interview.

Child Survey Results

Demographics

1226 Child Enrollees

- 50% female
- Average age: 7 years
- 85% Caucasian, 14% African American
- Hispanic or Latino heritage: 9%
- In school or daycare: 74%
- Primary language other than English: 4%

Health Status

- Special health care need: 24%
- Current health status: 79% *very good to excellent*, 18% *good*, 3% *fair to poor*

Access to Care and Use of Services

- 83% of children were reported to have a primary health care provider (PCP)
- 29% had gotten a new primary care provider since enrollment
  — Of these, 21% had at least some problems finding a PCP
- 84% had a preventive health visit within the last year

In the last six months…

- 86% had no problems getting health care for their children, which was better than national averages
- Problems Getting Needed Care: 5% *big problem*, 10% *small problem*, 86% *no problem*
- 62% said their child *always* got care as quickly as they wanted, 25% *usually* did, 13% *sometimes or never* did. This was also better than national averages

- 67% of respondents had made a routine appointment for the child
- 21% of the children had needed specialty care
- 29% of the children had seen a specialist
  - — Of those who needed a specialist, 14% had an unmet need
  - — 18% of those who needed a specialist had problems getting a referral
- 24% of children had been treated in an Emergency Room at least once
- 38% of children had needed care for an illness or injury
- 83% had at least one outpatient visit in the last 6 months
  - — 34% of all children had three or more outpatient visits
- 60% of respondents had called a doctor's office or clinic during office hours for help or advice regarding the child
  - — 72% of these *always* got needed help when they called the clinic
- 3% of children had an unmet need for health care in the last 6 months
  - — Most common reasons: trouble finding a doctor who accepted Medicaid (34%), trouble getting appointments (31%)

Dental Care

- 58% saw a dentist in the last year, compared to 74% statewide
- 83% had a single source of dental care
- 37% of children needed dental care in the last 6 months
  - — Common reasons: couldn't find a dentist who accepted Medicaid (70%), transportation problems (28%)
  - — Of the 37% who needed dental care in the last six months, 18% had an unmet need. This is higher than the statewide figure of 8%.

Quality of Children's Health Care

Care Delivery Issues

- Average Quality of Care Rating: **8.6** on a 0 to 10 scale
- Average Rating of Primary Care Provider: **8.8** on a 0 to 10 scale
- Average Rating of Specialist: **8.3** on a 0 to 10 scale
- Health Care Provider Communicates Well *10% never/sometimes*, *22% usually*, *68% always*
  - — Below average: Iowa Health Solutions
  - — Above average: Coventry Health Care
- 32% reported getting prevention advice for their children (e.g, nutrition, car seats or bicycle helmets) from their plan or provider in the last 6 months
  - — Of the 84% who had a preventive visit in the last year, 37% had gotten prevention advice for their children.
- Medical Office Staff is Courteous and Helpful: 8% *never/sometimes*, 18% *usually*, 74% *always*
  - — below average: Iowa Health Solutions
  - — Above average: Coventry Health Care

Health Plan Issues

- Average Overall Plan Rating: **8.4** on a 0 to 10 scale
- 48% of respondents were aware of the Medicaid helpline,
  - — 15% of these had called the helpline for information or help
  - — 33% had problems getting needed assistance from helpline
  - — 9% had called with a complaint or problem
  - — 63% of those whose complaints had been resolved were happy with the outcome

- Problems with Customer Service, Information or Paperwork: 10% big problem, 29% small problem, 71% no problem.

Behavioral and Emotional Health Care

In the last six months…

- 14% of children had needed behavioral health care
  - — 25% of these had problems with access
  - — 15% of those who needed behavioral health care had an unmet need for care

Prescription Medication

In the last six months…

- 55% of children needed prescription medication
  - — 14% had problems getting prescriptions
    - 55% of these received help in getting prescriptions
    - 11% had unmet need for prescription medication

Adult Survey Results

Demographics

953 Adult Enrollees

- 87% female
- Average age: 29 years
- 87% Caucasian, 10% African American
- Hispanic or Latino heritage: 5%
- Completed high school: 85%

Health Status

- Current health status: 43% *very good to excellent*, 39% *good*, 18% *fair to poor*
- Chronic health condition: 41%

Access to Care and Use of Services

- 76% had a primary health care provider (PCP)
- 35% had gotten a new primary care provider since enrollment
  - — Of these, 27% had at least some problem finding a PCP
- 75% had a preventive health care visit within the last year

In the last six months…

- 80% had *no problem* getting needed care, 12% had a *small problem*, 8% a *big problem*
  - — More problems than average: Iowa Health Solutions
- 18% *never* or only *sometimes* got care as quickly as they wanted, 32% *usually* did, 50% *always* did
- 69% had made an appointment for routine health care
- 33% had been treated in an Emergency Room at least once
- 44% had needed care for an illness or injury
- 80% had at least one outpatient visit (excluding emergency room visits)
  - — 44% of all respondents had three or more outpatient visits
- 66% had called a doctor's office or clinic during office hours for help or advice for themselves

— 61% *always* got the help they needed when they called the clinic
- 32% of all respondents had seen a specialist
- 36% had needed specialty care
  — 83% of those who had a need for specialty care did see a specialist
  — 23% of those who needed a specialist experienced some problem getting a referral
  — 19% of those who needed it had an unmet need for specialty care at least once

Quality of Adult's Health Care

Care Delivery Issues
- Average Quality of Care Rating: **8.1** on a 0 to 10 scale
- Average Rating of Primary Care Provider: **8.4** on a 0 to 10 scale
- Average Rating of Specialist: **8.1** on a 0 to 10 scale
- 43% received prevention advice (diet or exercise) from their doctor or health plan in the last six months
- Health Care Provider Communicates Well: 14% *never/sometimes*, 29% *usually*, 57% *always*
- Medical Office Staff is Courteous and Helpful: 9% *never/sometimes*, 27% *usually*, 64% *always*

Health Plan Issues
- Average Overall Plan Rating: **7.8** on a 0 to 10 scale
- 53% of adults were aware of the Medicaid helpline
  — 29% of these had called it for information
    - 29% of callers had problems getting assistance from the helpline
  — 16% of those who were aware of the helpline had called with a complaint or problem
    - 75% of those whose complaints had been resolved were satisfied with the result
- Problems with Customer Service, Information or Paperwork: 11% *big problem*, 26% *small problem*, 63% *no problem*.
  — Fewer problems than average: John Deere Health Care

Dental Care
- Dental health status: 38% *very good to excellent*, 34% *good*, 28% *fair to poor*
- 76% had a single source of dental care
- 56% had a dental checkup within the last year, 26% had not had one for 2 years or more
- 39% needed dental care in the last 6 months
- 18% of adults had an unmet need for dental care
  — Most common reasons: problems finding a participating dentist (60%), expense (30%), transportation problems (25%)
- 26% had a problem accessing dental care
- Average Dental Care Rating: **7.6** on a 0-to-10 scale. (Only adults rated dental care)

Behavioral and Emotional Care
In the last six months…
- 18% had needed behavioral health care
  — 20% had problems with access
    - 41% of these received help from their plan or clinic to get behavioral health services

Prescription Medication

In the last six months…

- 73% had needed prescription medication
  - 19% had problems accessing prescription medicine
  - 16% had an unmet need for prescription medication

EVALUATING IOWA MEDICAID MANAGED CARE PLANS: THE CONSUMER PERSPECTIVE
RESULTS FROM THE 2002 SURVEYOF IOWA MEDICAID MANAGED CARE ENROLLEES

CHAPTER 1:
INTRODUCTION AND SURVEY METHODOLOGY

As part of the quality assurance activities of Iowa's Medicaid managed care program, the Iowa Department of Human Services (IDHS) contracted with researchers at the University of Iowa Public Policy Center to conduct a survey of adults and children enrolled in Iowa's Medicaid managed care plans. The Iowa Medicaid managed care program includes three private Health Maintenance Organizations (HMOs) and the Primary Care Case Management (PCCM) program, MediPASS. The three HMOs that coordinate health care services under contracts with the IDHS are: John Deere Health Care, Iowa Health Solutions, and Coventry Health Care. The State of Iowa administers the MediPASS program, utilizing physician case managers, in most areas of the state.

This report presents results from the 2002 Survey of Iowa Medicaid Enrollees. The survey addressed health status, access to and use of health care, and ratings of the quality of care for both adults and children in Iowa's Medicaid HMO program.

The 2002 Survey of Iowa Medicaid Enrollees included questions about:

- Health status including the identification of adults and children who may have special health care needs
- Access to and utilization of health care services including:
    - Medical care
    - Dental care
    - Behavioral and emotional health care
- Ratings of overall care, primary care providers and specialists
- Experiences with the health care plan, including
    - Overall rating of plan
    - Customer service experiences
- Communication with providers
- Treatment by office staff
- Preventive counseling or guidance

This report will provide a summary of findings from the 2002 survey as well as detailed results for each question in the survey for members of each of the health plans. Findings for children and adults are presented in Chapters 2 and 3 of this report. In Chapter 4, results for children and adults are compared. Significant differences between the health plans and between adults and children for each question are noted. Results for Iowa's Medicaid managed care plans are compared to results for Medicaid programs nationally provided by the National CAHPS® Benchmarking Database [1].

[1] The source for comparative CAHPS® survey data used in this publication is the National CAHPS® Benchmarking Database (NCBD). Any analysis, interpretation, or conclusion based on these data is solely that of the authors. The NCBD is a collaborative initiative of Westat and Shaller Consulting, with funding provided by the Agency for Healthcare Research and Quality.

Readers who wish to examine the survey results in greater detail are directed to the appendices. Results from the 2002 Child Medicaid Survey are found in Appendix A. Appendix B provides detailed results from the Adult Medicaid Survey. Appendix C contains written responses to question 75 on the Adult Survey ("Do you think you have ever been treated differently because you were covered by Medicaid? If yes, please tell us how you were treated differently.") Additional comments from survey respondents are presented in Appendix D for the Child Survey and in Appendix E for the Adult Survey.

Survey Methodology

Sample and participation rate

The 2002 Medicaid survey was conducted in the fall of 2001 and winter of 2002 with a random sample of Medicaid managed care enrollees who had been in their managed care plan for at least six months in row. A modified Dillman survey methodology[2] was used. Questionnaires were mailed to enrollees selected from administrative data provided by the Iowa Department of Human Services. Only one person per household was selected to participate in this study. Surveys were initially mailed to 2831 parents or guardians of child enrollees and 2428 adult enrollees in four health plans. A reminder postcard was sent out two weeks after the first mailing. A second survey mailing to nonrespondents was conducted three weeks after the initial mailing. Those who did not respond to the mailings were attempted to be reached by telephone to complete the survey up to five times.

Table 1: Child sample and participation rate

Plan	Number Sampled	Number of Respondents	Response Rate
John Deere	800	344	43%
Iowa Health Solutions	800	292	37%
Coventry	542	184	34%
MediPASS	798	406	51%
Total	2940	1226	42%
Adjusted Total*	2831	1226	43%

** adjusted for surveys returned undeliverable and ineligibles*

Table 2: Adult sample and participation rate

Plan	Number Sampled	Number of Respondents	Response Rate
John Deere	800	289	36%
Iowa Health Solutions	800	262	33%
Coventry	182	55	30%
MediPASS	800	347	36%
Total	2582	953	37%
Adjusted Total*	2428	953	39%

** adjusted for surveys returned undeliverable and ineligibles*

For the child sample, in households with more than one child enrolled in Medicaid, one child was selected at random as the "target" child. The survey was addressed to the parent or guardian with instructions to complete the survey based on their experiences obtaining health care for this child only.

[2] Dillman DA. 1978. *Mail and Telephone Surveys: The total design method*. New York: Wiley and Sons.

The information presented in this report is based on responses for 953 adult and 1226 child enrollees. These figures represent combined mail and phone response rates of 39 percent for adults and 43 percent for children. About 2/3 of the responses were received by mail and 1/3 were completed by telephone.

Description of the Survey Instrument

The foundation for the survey instrument used in this study was the CAHPS® 2.0 Questionnaire[3]. The use of CAHPS® in Iowa is part of a national demonstration of the Consumer Assessment of Health Plans Study (CAHPS® 2.0), an effort to develop standardized measures for assessing the quality of health plans from the consumer perspective. The instrument also included questions from the Foundation for Accountability (FACCT) and the National Health Interview Survey (NHIS). Questions developed by FACCT called the "Living with Illness" measures were included in the child survey. The Adult Survey contained a section on adult enrollees' experience with their Medicaid health plan in comparison with their perception of private health coverage.

CAHPS® 2.0 Survey

The CAHPS® 2.0 survey is designed to evaluate access to health care and the quality of health plans and care from the consumer's perspective. In order to examine consumer perspectives on both adult and child health care, two versions of the survey were developed. The child version differs from the adult version in that it addresses child-specific areas, such as the child's ability to communicate with providers, providers' support of caregivers' efforts, education of caregivers about children's health needs, and items addressing cooperation between health care personnel and daycare or schools.

In addition to the individual questions in the survey, the CAHPS survey includes two ways to more broadly evaluate the health plans: 1) global ratings and 2) composites or scale scores. For the global ratings, a 0–10 scale is used to evaluate the health plan overall, the health care overall, the primary health care provider (if they have one), and the specialist (if they have one).

Several questions are scored together to develop a composite score for five topic areas: 1) ability to get needed care, ability to get care quickly, 3) doctors' ability to communicate, 4) experience with medical office staff and 5) the plan's customer service. The composites *getting needed care* and *customer service* are measured on a 3-point scale indicating how much of a problem the respondent had in obtaining care or assistance (1=a big problem, 2=a small problem, and 3=not a problem). *Getting care without long waits*, *doctors' ability to communicate*, and *courtesy and helpfulness of office staff* are evaluated in terms of how often the respondent had positive experiences in these areas (1=never, 2=sometimes, 3=usually, and 4=always). Thus, for all composites a higher score is preferable. ("Sometimes" and "never" responses are combined in the tables for display purposes, but average scores are reported based on a range of one to four).

Each composite and the questions included in that topic area is described below:

1) *Getting care when you need it* is an average of scores on the following four items, measured on the 3-point problem scale described above:

[3] CAHPS Products. CAHPS-Survey Users Network. Accessed most recently November 7, 2002. http://www.cahps-sun.org/Products/Products.asp. Internet

- With the choices your health plan gave you, how much of a problem, if any, was it to find a personal doctor or nurse you are happy with?
- In the last six months, how much of a problem, if any, was it to get a referral to a specialist that you needed to see?
- In the last six months, how much of a problem, if any, was it to get the care you or a doctor believed necessary?
- In the last six months, how much of a problem, if any, were delays in health care while you waited for approval from your health plan?

2) *Getting care quickly* is a composite of the following four items indicating how often respondents reported that they received care in a timely manner (never, sometimes, usually or always).
In the last 6 months…
- when you called the doctor's office or clinic during regular office hours, how often did you get the help or advice you needed?
- how often did you get an appointment for regular or routine health care as soon as you wanted?
- when you needed care right away for an illness or injury, how often did you get care as soon as you wanted?
- how often did you wait in the doctor's office or clinic more than 15 minutes past your appointment time to see the person you went to see? (This is reverse-coded so that a higher score indicates less experience with long waits).

3) *How well doctors communicate* is comprised of the following items:
In the last 6 months…
- how often did doctors or other health providers listen carefully to you?
- how often did doctors or other health providers show respect for what you had to say?
- how often did doctors or other health providers spend enough time with you?
- how often did doctors or other health providers explain things in a way you could understand?
- how often did doctors or other health providers explain things in a way your child could understand? (Child survey only).

4) *Courtesy and helpfulness of office staff* is measured by two items:
In the last 6 months…
- how often did office staff treat you with courtesy and respect?
- how often were office staff as helpful as you thought they should be?

5) Experience with *customer service, information and paperwork* is evaluated with a composite of the following three items, measured on the 3-point problem scale:
In the last 6 months…
- how much of a problem, if any, was it to find or understand information in the written materials?
- how much of a problem, if any, was it to get the help you needed when you called your health plan's customer service?
- how much of a problem, if any, did you have with paperwork for your health plan?

CAHPS® 2.0 items were analyzed with the SAS statistical package using the CAHPS® 2.0 protocol, which takes into account any plan differences in enrollees' current health status, age, and educational level. Differences among health plans were analyzed using the CAHPS® 2.0 methodology. The statistical methods used by the CAHPS® 2.0

program are described in some detail in the *CAHPS® 2.0 Survey and Reporting Kit*.[4] Briefly, plan differences on the composite scores and the global ratings are evaluated for statistical significance using t- and F-tests for differences in means (averages). For statistical significance, the probability level was set at .05; that is, the probability that an observed difference is due solely to sampling error is less than five percent. Practical significance was evaluated according to the CAHPS® 2.0 protocol. For this project, differences between plans were determined to have substantive significance if the plan's mean score varied from the overall mean by an amount equal to 15 percent or more of the absolute difference between the overall mean and the nearest extreme score. (In our sample, the nearest extreme was always the highest possible score, (i.e., 10 on a 0–10 scale, 3 on a 1–3 scale, and 4 on a 1–4 scale). In order for a plan to rate above or below average on a CAHPS® 2.0 measure, the difference between the plan mean and the overall mean was required to meet criteria for *both* statistical and substantive (practical) significance.

As suggested in the CAHPS® 2.0 manual, we used age, educational level (for children, this was the parent's or guardian's educational level), and current health status as case mix adjusters. This technique holds constant the effects of the adjuster variables to allow a clearer picture of the main effects of plan membership on respondents' assessment of their health care experiences.

Special needs screening instrument and barriers to care

Both the adult and child versions of the survey included an instrument developed by the Foundation for Accountability (FACCT) to identify individuals with a special health care need.[5]

Individuals are classified as having special health care needs if they are reported to have:

a) a health condition, that
b) has lasted or is expected to last at least one year, and
c) has resulted in either 1) use of prescription medication, 2) functional limitations, or 3) need for or use of specialized (e.g., PT, OT, etc.) therapies mental health services, or more medical or other services than usual for people of the same age.

Questions about barriers to care and unmet need for care were based on questions in the National Health Interview Survey (NHIS).[6] Unmet need is defined as any time when a person was unable to get needed care in the last 6 months.

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[4] CAHPS® 2.0 Survey and Reporting Kit, Agency for Health Care Research and Quality, US Department of Health and Human Services, Public Health Service, Washington, DC, 1999.

[5] Foundation for Accountability, Child and Adolescent Health Measurement Initiative, January, 2000.

[6] National Health Interview Survey, National Center for Health Statistics, US Department of Health and Human Services. Accessed most recently November 7, 2002. http://www.cdc.gov/nchs/nhis.htm. Internet.

CHAPTER 2:
CHILDREN'S RESULTS FROM THE 2002 MEDICAID SURVEY

Below is a summary of the results of the 2002 Survey of Iowa Medicaid Enrollees for children enrolled in the four Medicaid managed care plans: the three Medicaid HMOs and MediPASS . Responses for children to each item in the survey questionnaire are presented by plan in Appendix A.

Demographics of the 2002 Child Medicaid Sample

Child respondents

The children on who survey data were obtained ranged in age from under one to 17 years, with an average age of 7 years. The sample was evenly divided between boys and girls. The majority of children (85%) were Caucasian, with 14 percent Black, and 0 to 2 percent other ethnic identifications. Nine percent were of Hispanic or Latino heritage. Four percent spoke a language other than English as their primary language in the home. Three quarters (74%) were attending school or day care at the time of the survey.

Table 3: Child respondent demographics by health plan

Demographic	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
% female	47%	51%	42%	48%	50%
Mean age of child*	6.6	6.4	7.3	7.8	7.1
Child race (marked one or more)*					
% Caucasian	83%	88%	68%	92%	85%
% African American	16%	9%	35%	7%	14%
% Asian	2%	3%	0%	1%	1%
% Pacific Islander/Native Hawaiian	0.3%	0%	0%	0%	0.1%
% American Indian/ Alaska Native	2%	1%	1%	1%	1%
% Hispanic only (no other race noted)	2%	3%	1%	2%	2%
% Other race	1%	0.4%	0%	0.3%	0.3%
% with Hispanic/Latino heritage	8%	11%	6%	8%	9%
% in school or daycare*	74%	67%	76%	79%	74%
% primary language not English	3%	5%	7%	3%	4%
Total N	344	292	184	406	1226

* *statistically significant difference ($p < .05$)*

Compared to the National CAHPS® Benchmarking Database Medicaid samples, children in the Iowa Medicaid sample were more likely to be Caucasian, more likely to be age 12 and older, and were in better overall health.

There were some demographic differences between respondents for each of the plans. Children in MediPASS were a little older than the average (7.8 vs. 7.1). Coventry had a higher proportion of African American children than average for all plans combined (35% vs. 14%) and children in Iowa Health Solutions were less likely to be attending school or day care.

Parent/guardian respondents

Most child survey respondents were either the child's mother (89%) or a grandparent (7%). A fifth were under age 25 and 57 percent were under 35. Eighteen percent had less than a high school diploma. Demographic characteristics were similar to those of respondents of CAHPS surveys nationally, except that parents in Iowa were more likely to be Caucasian.

Children's Health Status

Global Health Rating

Most children (79%) in Iowa's Medicaid program were reported to be in excellent or very good health. Three percent were in fair to poor health. This is slightly better than children nationally where 72 percent of children were in very good to excellent health, and seven percent were in fair to poor health.

Special Health Care Needs

Based on the FACCT screening instrument, 24 percent of the children in the Iowa Medicaid sample were identified as having a special health care need. This is greater than the 17 percent of children found to have a special health care need statewide using the FACCT instrument in the Iowa Statewide Child and Family Household Health Survey conducted in 2000. [7] It is important to note that the Medicaid managed care population only includes children from the TANF program and does not include children enrolled through the Supplemental Security Income (SSI) Program who are more likely to become eligible in part because of a special health care need.
There were differences in the proportion of children with a special care need between the health plans. Children in Iowa Health Solutions were a little less likely than average to meet the criteria for having a special health care need (18% vs. 24%), while those in MediPASS were a little more likely (29% vs. 24%).

Table 4. Children with Special Health Care Needs, by health plan

FACCT Screening Areas	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total	% of CSHCN
Total Children with a Special Health Care Need*	25%	18%	23%	29%	24%	100%
use more services than others*‡	10%	8%%	9%	15%	11%	46%
need special therapy‡	3%	1%	2%	3%	2%	9%
mental health condition*‡	11%	8%	11%	14%	11%	46%
functional limitations*‡	7%	3%	4%	8%	6%	24%

** statistically significant difference (p < .05)* *‡ Categories are not mutually exclusive*

Enrollment and Plan Information

Although survey participants had to be enrolled in their current health plan for the six months prior to the selection of the sample for this study, most (74%) had been in the same plan for at least one year Nearly all (94%) of the respondents were using their current Medicaid plan for all or most of their child's health care. Over half (59%)

[7] Damiano PC, Willard JC, Momany ET, Tyler MC, Schor E, Hageman G, Lobas J, Penziner A, Khal B. *Children with Special Health Care Needs in Iowa*. University of Iowa, Public Policy Center, Iowa City, October 2002.

indicated they had gotten information about their plan prior to enrolling. Eighty-nine percent of those who had received prior information said that all (59%) or most (30%) of this prior information had proven to be correct. John Deere enrollees were more likely (65%) and those in MediPASS were less likely (53%) to report having received pre-enrollment information ($p < .05$) with similar percentages from all plans reporting this information to be correct.

Access and Utilization

Primary Care Providers

Eighty-three percent of children were reported to have a personal doctor or nurse, which is slightly lower than reported for children statewide (90%). [8] Twenty-nine percent had gotten a new primary care provider for their child at some point since enrolling in Medicaid. Of those who got a new provider, 21 percent had at least a small problem finding a primary care provider that they liked who was affiliated with their health plan. The four Medicaid plans did not differ on these findings.

Phone Calls to Provider

Over the previous six months, 60 percent of respondents had called a doctor's office or clinic during office hours to get help or advice regarding their child. Of those who called, nearly three quarters (72%) said they always got the help they needed, and another 20 percent said they usually did.

Routine and Preventive Health Care

Two thirds (67%) of respondents had made an appointment for their child to get routine health care in the last six months. Of those who made an appointment, 90 percent said they always (64%) or usually (26%) got in as soon as they wanted. Three quarters reported waiting no more than three days for routine care. Children in Iowa were significantly more likely than children nationally to get routine care the same day (35% vs. 27% nationally).

In the year prior to the survey, 84 percent of children had a preventive health visit. This compares favorably to the 77 percent of children statewide found to have had a preventive visit in the previous year.[6] Eleven percent had a checkup between one and two years ago while five percent of children had their last preventive visit over two years ago. Three percent reported that their child had needed a preventive visit in the last six months but could not get one for some reason.

Specialty Care

Twenty-one percent of the children had needed specialty care at some time in the last six months. Nineteen percent did see a specialist during that time. Eighteen percent had either a big (7%) or small (11%) problem getting a referral. For nine percent of the children, the specialist was also considered the child's personal doctor. Of the 21 percent who needed a specialist, 14 percent had at least one time when they were unable to see one. There were no significant plan differences in access to or use of specialty care.

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[8] Damiano PC, Willard JC, Momany ET, Tyler MC, Schor E, Hageman GA, Lobas J, Penziner A, Khal B. *The 2000 Iowa Child and Family Household Health Survey*. University of Iowa, Public Policy Center, Iowa City, October 2001.

Acute Care

Over the previous six months, 38 percent of children had needed care right away for an illness or injury. Of those who needed it, 92 percent said they either 'always' (78%) or 'usually' (14%) got this care as soon as they wanted. Care was provided the same day in over three-quarters of the cases (78%), 12 percent waited a day, and seven percent got care in two to three days. There were no significant plan differences.

Outpatient Visits

Most children (83%) had at least one visit to a doctor's office or clinic in the previous six months. Nearly a quarter (23%) had one visit, and another 26 percent had two. Thirty-four percent had three or more visits over the last six months.

Emergency Room Visits

Twenty-four percent of children had at least one emergency room visit in the last six months. Sixteen percent had one, five percent had two, while three percent had three or more visits.

Ability to Get Needed Care (CAHPS® 2.0 Composite)

The vast majority of respondents (86%) reported no problems in getting health care for their children. Ten percent had a small problem, and five percent reported a big problem with getting care their children needed. The four plans were nearly identical on this measure. Compared to the NCBD national figures, Iowans had less difficulty getting care for their Medicaid-enrolled children: Fifteen percent in Iowa had some degree of problem getting needed care, compared to 27% nationally.

Ability to Get Care Quickly (CAHPS® 2.0 Composite)

In general, the majority of parents were able to get care for their children as quickly as they wanted. Nearly two-thirds (62%) "always" got care as quickly as they wanted, and another 25 percent "usually" did. This compares favorably with the national figures where 54 percent reported they "always" got care quickly.

Unmet Need for Health Care

Three percent of respondents (29) reported that there had been a time in the last six months when their child needed health care but could not get it. Among those who were stopped from getting medical care for their children, the most commonly mentioned problems were trouble finding a doctor who accepts Medicaid (34%) and trouble getting an appointment (31%). Eight percent had a problem with delays in care resulting from having to wait for plan approval.

Dental Care

Eighty-one percent of children in Medicaid were reported to have a regular source of dental care. Fifty-eight percent had seen a dentist within the last year, and another 10 percent had last seen a dentist 1 to 2 years ago. This is lower than for children statewide (74% had a visit in the previous year). Twenty-eight percent had never visited a dentist, however, the child was age three or younger in 93 percent of these cases.

Thirty-seven percent of children had needed dental care at some time in the last six months. Nine percent overall could not get dental care when needed at least once over the last six months. Of those who were reported to have needed dental care in the last six months, 18% were stopped from getting it at least once in the previous six months.

This is also higher than for children statewide where eight percent of all Iowa children who needed dental care had unmet need in the previous year. By far the most frequently indicated reason for not getting dental care was the inability to find a dentist who accepted Medicaid patients. This was a problem for 70 percent of those who were stopped from getting dental care. Also important were transportation or distance problems (28%), inability to afford dental care (22%), and trouble getting appointments (20%).

Mental health care

Fourteen percent of the children needed mental health care at some time in the last six months. During those six months, 15 percent had at least one incident in which they were unable to get mental health care at all. One in four of those needing care (25%) had either a big (9%) or small (16%) problem getting it. There were no differences between plans.

Prescription medications

Over half (55%) of all children needed a prescription medication in the previous six months. Of those who needed prescription medicine, 11% had at least one time in the previous six months when they were unable to get their medication. Fourteen percent had either a big (4%) or small (10%) problem obtaining them. There were no differences by plan.

Health Care Delivery for Children

Overall rating of child's health care

Overall ratings of the health care for children were fairly high, with an average score of 8.6 on a scale of 0 to 10. All four plans performed equally well on this measure. The care ratings in Iowa were consistent with national ratings by Medicaid enrollees.

Overall rating of primary care provider

Average ratings of the child's primary care doctor or nurse were also high, averaging 8.8 on a 0 to 10 scale. There were no differences between plans. These ratings were similar to national ratings.

Overall rating of specialist

Ratings of specialists for children were also fairly high, receiving an average score of 8.3. Again, no plan differences were found, and the Iowa ratings reflect the national scores.

Anticipatory Guidance

About a third (32%) of respondents reported having received anticipatory guidance or preventive counseling on such topics as nutrition, bicycle and car safety, smoking, or drug or alcohol use from either their health plan or provider in the previous six months. Of the 84 percent of children who had a preventive health care visit in the last year, 35% had gotten anticipatory guidance in the last 6 months. Those in Iowa Health Solutions were somewhat more likely (37%), and those in MediPASS were less likely (27%) to report preventive advice. The average was higher than for children in Iowa generally where 30% of those with a preventive visit had received anticipatory guidance.

Communication with providers (CAHPS® 2.0 Composite)

Most respondents felt their child's health care providers usually or always communicated well with them and treated them with respect. Those in Coventry health plan were more likely than average to say their provider always communicated well, while parents with children in Iowa Health Solutions reported their doctors communicated well less often than average.

Family-centered care and care coordination

Specific questions were asked regarding family-centeredness of children's health care, including parental involvement in decision-making and care, communication with providers, information sharing and case coordination. Most caregivers reported that communication, involvement in decision-making, support and information were usually or always adequate.

Fourteen percent of respondents reported that their child was receiving care or services from more than one provider. Of these, 72 percent got help with coordinating these services at least some of the time.

The majority (88-89%) did not have problems getting providers to listen to and follow up on their concerns about their child's health issues. A quarter of parents of children with a special health care need, however, did report having trouble getting their doctor or other provider to help the school or day care facility understand their child's needs.

Treatment by office staff

Medical office staff received higher marks for helpfulness and courtesy than the national average for children in Medicaid programs. Three quarters (74%) of respondents said they and their children were always treated well when they visited the doctor's office, and another 18 percent said this was usually the case. Among the four Iowa plans, Iowa Health Solutions received lower than average scores on this measure, while Coventry scored above the overall average.

Consumer Perceptions of the Health Plans

Overall health plan rating (CAHPS® Rating)

Consistent with the national benchmarks, parents rated their children's Medicaid plans highly overall, with 40 percent rating their plan a 10 on a zero to ten scale. The mean score of 8.4 did not differ across the four plans.

Customer service and information

Twenty-nine percent of respondents had at least a small problem with their child's health plan customer service or information materials over the previous six months. MediPASS respondents tended to have fewer problems in this area than the average for all plans, with only 19% reporting a problem. Comparison with available national figures show that Iowa Medicaid parents were less likely to have problems with customer service than average (29% vs. 38% nationally).

Telephone hotline

About half (48%) of the respondents knew that a toll-free number was available for them to call with questions or complaints about their child's Medicaid plan. Of those who knew about this service, 15% called the number for information or help, and nine

percent called with a complaint or problem over the previous six months. Over half (55%) of these complaints were settled within a few days, although 24% were still waiting for the issue to be resolved. Sixty-three percent of those whose problem was resolved said they were satisfied with the outcome.

CHAPTER 3:
ADULT ENROLLEE RESULTS FROM THE 2002 MEDICAID SURVEY

Demographics

The majority of adult Medicaid enrollees in Iowa were female (87%), with an average age of 29 years. Most (87%) indicated Caucasian ethnicity, 10 percent were Black or African American, two percent American Indian or Alaskan Native, one percent Asian, and less than one percent Pacific Islander or other. Five percent were of Hispanic or Latino descent, and three percent listed Hispanic only and no other ethnic group. MediPASS had a slightly higher percentage of males than the overall average (18% vs. 13%), and Coventry had a higher than average percentage of African American enrollees (25% vs. 10%).

Table 5. Adult respondent demographics

Variable	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
% female	89%	90%	87%	82%	87%
Mean age in years	28	28	30	29	29
Race (marked one or more)					
% Caucasian*	85%	85%	75%	92%	87%
% African American*	12%	11%	25%	6%	10%
% Asian	1%	2%	0%	1%	1%
% Pacific Islander/Native Hawaiian	0.4%	1%	2%	0%	0.4%
% American Indian/ Alaska Native	3%	1%	4%	2%	2%
% Hispanic only *(no other race noted)*	3%	3%	4%	2%	3%
% Other race	0.4%	1%	0%	0%	0.3%
% with Hispanic or Latino heritage	6%	4%	8%	4%	5%
Highest education level					
% less than high school graduation	20%	20%	13%	21%	18%
% high school graduate or GED	35%	40%	54%	41%	40%
% some college or 2-year degree	38%	40%	29%	33%	36%
% college graduate or higher	7%	7%	8%	5%	6%
Total N	289	262	55	347	953

Health Status

Global Health Rating

Adult respondents rated their current health status on a one-to-five scale from excellent to poor. Forty-three percent rated their health very good to excellent, 39 percent good, and 18 percent fair to poor. Global health ratings did not differ by plan.

Special Health Care Needs

Overall, 41 percent of the adult respondents met the FACCT criteria for having a special health care need. As with health status, the prevalence of adults with a special need did not differ among plans.

Table 6. Adults with Special Health Care Needs

FACCT Screening Areas	*N*	% of adults	% of ASHCN
Total Adults with Special Health Care Needs	391	41%	100%
Use more services than others of same age‡	194	20%	50%
Need or get special therapy‡	55	6%	14%
Mental health condition‡	154	16%	39%
Functional limitations due to condition‡	151	16%	39%

‡ Categories are not mutually exclusive

Enrollment

Nearly all respondents (97%) used their current Medicaid plan for most or all of their health care and most (70%) had been in the same plan for a year or longer. Nearly two thirds (63%) stayed in the plan to which they were assigned when they enrolled in Medicaid, while 17 percent chose a different one (presumably their current plan). Forty-two percent had been covered by a private (non-Medicaid) health plan at some point in the previous five years.

Access and Utilization

Primary Care Providers

About three quarters (76%) of adult Medicaid respondents indicated they currently had someone they considered their personal doctor or nurse. The percentage of adults with a primary care provider differed significantly among the plans: Coventry and MediPASS enrollees were more likely than average to say they had a personal doctor or nurse (83% and 82% respectively), while those in Iowa Health Solutions were less likely (70%).

Overall, 35 percent had to find a new primary care provider since enrolling in Medicaid. This was less likely in John Deere (27%) and more likely in Coventry (41%) and MediPASS (40%). Of those who got a new primary care provider, over one in four (27%) had either a big problem (10%) or a small problem (17%) finding one who participated in their plan with no difference based on the plan in which they were enrolled.

Phone calls to providers

Two-thirds (66%) of adult survey respondents had called a doctor's office or clinic during office hours to get help or advice for themselves in the previous six months. Of those who called, 61 percent always got the help they needed, and another 27 percent usually did.

Routine and preventive health care

Over two-thirds of adults (69%) had made an appointment for regular or routine health care within the previous six months. Over half (58%) said they always got a routine appointment as soon as they wanted, and another 28 percent said they usually did.

Three-quarters of adult Medicaid enrollees reported that they had gone in for a preventive health visit (e.g., check-up, physical exam, mammogram, pap test) within the last year. Another 14 percent had a preventive visit between one and two years ago. Seven percent said that in the last six months, there had been a time when they had needed preventive care but had been unable to get it. Forty-three percent remembered receiving anticipatory guidance or preventive health advice (e.g., encouragement to

exercise or eat a healthy diet) from their health care provider or plan in the last six months.

Specialty care

Nearly a third (32%) of adults in the Medicaid program reported visiting a specialist in the previous six months. Thirty-six percent said either they or a health professional felt they needed to see a specialist. Of those who needed specialty care, nearly a quarter (23%) had either big (10%) or small (13%) problems getting a referral and almost one in four (19%) had an unmet need for specialty care (i.e., a time when they were unable to see a specialist) for some reason in the previous six months. Almost three-quarters of those who saw a specialist rated the care they received as an 8, 9 or 10 on a 0-10 scale.

Acute care

Forty-four percent had needed care for an injury or illness from a doctor's office or emergency room at least once in the previous six months. Nearly two-thirds of these patients said they always received illness and injury care as soon as they wanted, and another 24% usually did. Over three quarters (76%) were seen within one day, with 62% seen the same day. Another 16 percent got care in two to three days.

Outpatient visits

Eighty percent of adult respondents had visited a doctor's office or clinic at least once in the previous six months. Forty-four percent had three or more visits in the previous six months.

Emergency room visits

A third of the adults (33%) reported at least one emergency room visit, and five percent had three or more ER visits in the previous six months.

Ability to get needed care (CAHPS® 2.0 composite).

Although four out of five (80%) adults in Medicaid reported no problems getting needed health care in the previous six months, eight percent reported this to be a big problem. Enrollees in Iowa Health Solutions reported significantly more trouble getting care than the average for all plans. Compared to national figures, adults in Iowa Medicaid were slightly more likely to report a problem getting care (20% vs. 16% nationally).

Ability to get care quickly (CAHPS® 2.0 composite).

Half (51%) of those who used health care in the last six months reported that they "always" received health care in a timely manner, and an additional third (32%) said they "usually" did. The 83 percent of adults who said they usually or always got care quickly compared favorably to the 76 percent who reported this nationally.

Unmet need for medical care

Seven percent of adults indicated that they were unable to get needed care at some time during the previous six months.

Dental Care

Three quarters of adult enrollees indicated they had a usual source of dental care. Over half (56%) had a dental checkup within the last year, however, over a quarter (26%)

hadn't seen a dentist in over two years. Only 34 percent said they visit a dentist on a regular basis, while 35 percent only go if they have a problem.

Adults' self-reported dental health ratings were less positive than their global health ratings. Thirty-eight percent rated their dental health excellent or very good, 34% good, and 28% fair or poor. Twenty percent had a dentist refuse to accept their insurance at some time in the past.

Overall, 39 percent of adult enrollees had needed dental care in the last six months. Of these, 26 percent had at least some trouble obtaining the dental care they needed. Of those who indicated a need for dental care in the previous six months, 18 percent had been unable to obtain it for some reason. The most commonly cited reasons for unmet dental needs were inability to find a dentist who was accepting Medicaid patients (60%), the expense of dental care (30%), and distance or transportation problems (25%).

Adults who had received dental care in the last six months rated this care an average of 7.6 on a scale of 0 to 10. Twenty-nine percent rated it a 10, while an additional 35 percent rated it 8 or 9. Eight percent rated their dental care a three or lower.

Mental Health Care

Eighteen percent of the adult enrollees responding to the survey reported that they had needed treatment or counseling in the previous six months for an emotional or behavioral problem. Of these, 20 percent had problems getting mental health care. Forty-one percent did receive help from the plan or doctor's office to solve this problem. Fifteen percent reported being unable to get needed mental health care at some point in the previous six months.

Prescription medication

Nearly three quarters of adult enrollees (73%) had needed prescription medication during the previous six months. Nineteen percent of those who needed medication had either a big (6%) or small (13%) problem obtaining it with 16% unable to get it at some point in the previous six months.

Health Care Delivery for Adults

Overall rating of health care rating (CAHPS® Rating)

Adult ratings of their overall health care averaged 8.1 on a zero to 10 scale. Ratings were consistent across plans. Forty-seven percent rated their care a 9 or 10. This compares to 52 percent rating their health care through Medicaid as a 9 or 10 nationally.

Overall rating of primary care provider (CAHPS® Rating)

Primary care providers also scored highly on the zero-to-ten scale. The average score was 8.4, with 57 percent rating their doctors either a 9 or 10. Nationally, 60 percent of adult Medicaid respondent rated their doctor a 9 or 10.

Overall rating of specialist (CAHPS® Rating)

The 32% of respondents who had seen a specialist in the last six months rated the specialist they had seen most often an average of 8.1. Fifty-one percent rated their specialist a nine or ten, compared to 59% nationally. [This difference was not statistically significant.]

Communication with provider (CAHPS® composite)

Communication with provider measured how often the respondent's doctor or nurse listened to them, explained things to them, treated them with respect, and spent enough time with them. Fifty-seven percent indicated their doctor always communicated well, while another 29% said he or she usually did. These results are similar to those obtained at the national level.

Treatment by office staff

Nearly two-thirds (64%) reported that medical office staff were always helpful and courteous, and another 27% said this was usually true. Iowa's results reflect those nationally.

Consumer Perceptions of the Health Plans

Overall rating of health plan (CAHPS® Rating)

Overall zero-to-ten ratings of the health plan averaged 7.8, with 28 percent giving their plan a rating of 10. The distribution of ratings in Iowa was similar to the national benchmarks, with 46% in Iowa rating their plans a 9 or 10, compared to 52% nationally.

Customer service and information

Over two thirds (67%) reported no problems with customer service and information from their health plans. This reflected customer service results at the national level. John Deere enrollees were significantly less likely than the overall average to report problems in this area (27% vs. 34% overall).

Telephone hotline

A little over half (53%) of the adult Medicaid enrollees were aware of the toll-free Medicaid helpline furnished to provide answers to questions about coverage, etc. Of those who knew about the helpline, 29% had called it in the last six months to get help or information. Twenty-nine percent reported either a big (13%) or small (16%) problem getting help when they called.

Of those who were aware of the Medicaid helpline, 16% had called it in the previous six months with a complaint or problem. Twenty-eight percent of the complaints were settled the same day, and another 11% were taken care of in a few days. Thirty-four percent were still waiting for their complaint to be resolved at the time of the survey. Three quarters (75%) of those whose complaints had been resolved said things had been settled to their satisfaction.

Comparisons with private health insurance

All adult respondents were asked a series of questions concerning their experiences in the Medicaid program and how they believed they compared to private insurance coverage. About four out of ten (42%) of these adults had been covered by private insurance in the past five years. Over a third of the adults (36%) thought their Medicaid coverage was "excellent" in terms of meeting their health care needs, and another 33 percent rated it "very good." Twenty-two percent rated it "good" and nine percent gave it a fair or poor rating. Over two thirds (67%) rated the types of services covered by their Medicaid plan as 'much better' (48%) or 'a little better' (19%) than those covered by most private health plans. Only seven percent thought Medicaid was worse than private insurance regarding the types of services covered.

A quarter (26%) thought they had a harder time finding a participating doctor than patients with private insurance did. On the other hand, 37 percent thought it was easier to find a Medicaid doctor, and 38 percent did not think there was any difference.

Over half (55%) felt their doctor and office staff treated them the same as they would if they were covered by private insurance. Twenty-three percent thought they were treated better, and 22 percent thought they were treated worse. A third of adults (34%)thought they had been treated differently at some point because they had Medicaid coverage.

CHAPTER 4:
COMPARISON OF CHILD AND ADULT SURVEY RESULTS

Demographics

The majority of both adults and children in the 2002 Medicaid Survey were Caucasian (85% of children, 87% of adults). Children were slightly more likely than adults to be of African-American (14% vs. 10%) or Hispanic (8% vs. 5%) heritage. The adult sample was predominantly female (89%), while the child sample was evenly split between boys and girls.

Health Status

Reported health status among children in Medicaid was significantly better than that of adults. Seventy-nine percent of children were reported to be in very good or excellent health, compared to only 43% of adults. At the other end of the scale, 18% of adults were in fair to poor health, compared to only three percent of children.

Children were also far less likely than adults in the Medicaid program to be identified as having a special health care need. Twenty-four percent of children met the criteria for having a special need, compared to 41 percent of adults. Among individuals with special health care needs, adults were more likely than children to be taking a prescription medication for the condition (80% vs. 73%), and to have functional limitations (38% vs. 24%). There were no significant differences between adult and child enrollees regarding the presence of a mental health condition, need for more than usual services, or need for specialized therapy.

Access and Utilization

Primary care providers

Children in Medicaid were significantly more likely than adults to have a personal doctor or nurse (83% vs. 76%).

Phone calls to providers

Adult enrollees were more likely than parents of child enrollees to call a doctor's office for help or advice during office hours (66% vs. 60%). Of those who called, parents of child enrollees were more likely to say they always got the help they needed over the phone (72% vs. 61%).

Routine and preventive health care

Children and adults were about equally likely to have made a routine health care appointment in the last six months (67% vs. 69%). Child enrollees were more likely to have had a preventive visit (e.g., checkup) in the past year (84% vs. 75%).

Adult enrollees were more likely to remember getting anticipatory guidance from the plan or provider in the last six months. This was true whether the enrollee had been in for a preventive visit in the last year or not. Overall, 43 percent of adults had been encouraged to exercise or eat a healthy diet. Only a third of parents of child enrollees

remembered getting advice on such topics as child nutrition, car seats, and bicycle safety.

Specialty care

Adult enrollees were more likely than children to have both needed (36% vs. 21%) and seen (32% vs. 19%) a specialist in the last six months. Of those who needed specialty care, adults and children were equally likely to have seen a specialist (83% adults, 81% children).

Acute care

Adults in Medicaid were statistically significantly more likely than children to have needed care for illness or injury in the last six months (44% adults, 38% children). Care for children was more likely to be provided the same day (78% children, 62% adults).

Outpatient visits

Adults and children were about equally likely to have had at least one outpatient visit in the previous six months: 80% of adults and 82% of children. However, adults were more likely to have had three or more outpatient visits: 44% vs. 34%.

Emergency Room visits

Adults were more likely to have had at least one emergency room visit in the last six months (33% vs. 24%).

Ability to get needed care (CAHPS® 2.0 composite)

Children were reported to have had significantly fewer problems than adults in getting needed care in the previous six months. Fifteen percent of children had at least some problem getting care compared to 20 percent of adults. Compared to national figures, adults in Iowa's Medicaid program had an easier time getting care, while children in Iowa were similar to children nationally.

Ability to get care quickly (CAHPS® 2.0 composite)

Children were also reported to have gotten care in a timely manner significantly more often than adults. Sixty-two percent of children "always" got care quickly, compared to about half (51%) of adults. However, both adults and children in Iowa's Medicaid programs were reported to get care quickly more often than enrollees nationally.

Unmet need for health care

Overall, unmet need for health care was more likely to have been a problem for adults than for children in Medicaid. Three percent of children and nine percent of adults in the Medicaid program had an unmet need for health care in the last six months.

Dental care

Dental care for adult enrollees was compared with dental care for child enrollees ages 3 and up. Adults were less likely than children to have a regular source of dental care (75% vs. 88%). Adults were also nearly twice as likely to have had an unmet need for dental care in the previous six months (18% vs. 11%). Among adults and children who had unmet need, however, the reasons were similar. Inability to find a Medicaid participating dentist was the most commonly mentioned barrier to care (73% of children, 60% of adults). Inability to afford dental expenses was also a barrier for both adults

(30%) and children (22%). Distance and transportation problems (27% of children, 25% of adults), and appointment problems (23% of children, 18% of adults) were frequently noted as barriers to dental care.

Mental health care

Adult enrollees were statistically significantly more likely to have needed mental health counseling or treatment in the last six months than child enrollees (18% of adults, 14% of children). Of those who needed mental health care, however, children and adults were not significantly different in terms of unmet need (15% of adults, 15% of children), or problems obtaining this care (20% of adults, 25% of children).

Prescription medications

Adults were significantly more likely than children (73% vs. 55%) to have needed a prescription medication in the last six months. Of those who needed a prescription, adults were more likely to have problems getting them (19% of adults vs. 14% of children). Adults were also more likely to have an unmet need for prescription drugs (16% vs. 11%).

Consumer Perceptions of Health Care Delivery

Overall rating of health care

Overall ratings of health care were significantly higher for child enrollees than for adults. Forty-three percent of parents rated their child's health care a 10, compared to 28 percent of adults. Both adult and child ratings were similar to national averages.

Overall rating of primary care providers

Primary care provider ratings were high for both children and adults, although child ratings were significantly higher than adults. Forty-eight percent of parents rated their child's primary care provider a 10, compared to 40 percent of adults. Both were comparable to national ratings.

Overall rating of specialist

Both child and adult specialist ratings were relatively high. The main difference between adult and child ratings was in the percentage rating their specialist a 10. Forty-four percent of parents rated their child's specialist a 10, while 33% of adults rated their specialist a 10. While child ratings were similar to national scores. Fifty-one percent of adults rated their specialist a 9 or 10 compared to 59 percent nationally, however, this difference was not statistically significant.

Primary care provider communication

Primary care providers were reported to communicate well significantly more often with child enrollees than with adults. In the child sample, 65% reported their child's doctor always communicated well, compared to 57% of adult enrollees. Both child and adult ratings regarding communication were comparable to national averages.

Treatment by office staff

Child enrollees were reported to have been treated well by office staff significantly more often than adult enrollees. Three quarters (74%) of parents of child enrollees said the staff at their child's clinic were always helpful and courteous, comparable to the national

average of 72 percent. Two thirds (64%) of adult enrollees said they were always treated well, similar to the national average for adults in Medicaid.

Consumer Perceptions of the Health Plan

Overall health plan rating

Overall ratings of the health plan were similar to national ratings for both adults and children. Plan ratings for child enrollees were significantly higher than those for adults however. The average score for children was 8.4, with 40 percent rating their plan a 10. This compares to an average of 7.8 for adults, with only 28 percent rating their plan a 10.

Customer service and information

About half of both adult enrollees and parents of child enrollees knew about the toll-free Medicaid helpline (48% of child enrollees, 53% of adults). Adult enrollees were more likely to call this number for help or information for themselves (29% vs. 15% for children), and to report a complaint or problem (16% vs. 9%).

Parents of child enrollees reported significantly less trouble with paperwork, information and customer service than did adult enrollees. Twenty-nine percent of child enrollees and 33% of adults had a problem with customer service or information materials in the last six months. Adult scores were similar to the national scores. Parents of Iowa Medicaid child enrollees were less likely to report customer service problems than parents nationally (29% vs. 38%).

APPENDIX A:
CHILD SURVEY RESPONSES BY QUESTION

1. Please tell us in which of the following health plans is your child currently enrolled?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
%	28%	24%	15%	33%	100%
N	344	292	184	406	1226

2. Is this the health plan you use for all or most of your child's health care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	96%	94%	94%	92%	94%
No	4%	6%	6%	8%	6%
N	340	290	180	400	1210

3. How many months or years in a row has your child been in this health plan?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Under 6 mos	3%	6%	6%	3%	4%
6-12 mos	21%	25%	28%	19%	22%
12-24 mos	27%	23%	29%	23%	25%
2-5 years	33%	30%	27%	31%	31%
5-10 years	10%	10%	7%	17%	12%
10 years +	6%	6%	3%	7%	6%
N	337	284	180	396	1197

** Statistically significant difference, $p < .05$*

Your Child's Personal Doctor or Nurse

The next questions ask about your child's health care. Do not include care your child got when he or she stayed overnight in a hospital. Do not include the times your child went for dental care visits.

4. A personal doctor or nurse is the health provider who knows your child best. This can be a general doctor, a specialist doctor, a nurse practitioner, or a physician assistant. When your child joined this health plan or at any time since then, did he or she get a new personal doctor or nurse?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	25%	29%	27%	32%	29%
No	75%	71%	73%	68%	71%
N	335	287	181	403	1206

5. With the choices your child's health plan gave you, how much of a problem, if any, was it to get a personal doctor or nurse for your child you are happy with?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	4%	8%	13%	7%	7%
Small problem	14%	17%	15%	13%	14%
No problem	83%	76%	71%	80%	78%
N	80	78	46	121	325

6. Do you have one person you think of as your child's personal doctor or nurse?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	82%	83%	78%	85%	83%
No	18%	17%	22%	15%	17%
N	333	288	180	399	1200

7. Does your child's personal doctor or nurse understand how any medical or health conditions your child has affect his or her day-to-day life?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	4%	4%	5%	4%	4%
Sometimes	7%	10%	11%	9%	9%
Usually	27%	31%	23%	31%	29%
Always	62%	56%	62%	56%	58%
N	256	221	130	309	916

8..In the last 6 months, when your child went to his or her personal doctor or nurse's office or clinic, how often did the doctor or nurse talk with you about how your child is feeling, growing, and behaving?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	7%	7%	2%	9%	7%
Sometimes	11%	13%	16%	15%	14%
Usually	16%	16%	16%	18%	17%
Always	66%	64%	65%	58%	63%
N	265	232	136	319	952

9. We want to know your rating of your child's personal doctor or nurse. If your child has more than one personal doctor or nurse, choose the person your child sees most often. Use any number from 0 to 10 where 0 is the worst personal doctor or nurse possible, and 10 is the best personal doctor or nurse possible. How would you rate your child's personal doctor or nurse now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	1%	1%	3%	1%	1%
4 to 7	14%	18%	9%	18%	15%
8 or 9	31%	39%	38%	35%	35%
10	55%	42%	51%	46%	48%
N	266	228	138	325	957

Getting Health Care from a Specialist

When you answer the next questions, do not include dental visits in your answers.

10. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care. In the last 6 months, did you or a doctor think your child needed to see a specialist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	23%	19%	19%	21%	21%
No	77%	81%	81%	79%	79%
N	338	291	183	405	1217

11. In the last 6 months, was there any time when your child needed to see a specialist but could not see one for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	16%	15%	12%	13%	14%
No	84%	85%	88%	87%	86%
N	80	55	33	84	252

11a. In the last 6 months, how much of a problem, if any, was it to get a referral to a specialist that your child needed to see?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	8%	9%	6%	6%	7%
Small problem	11%	11%	19%	10%	11%
No problem	82%	80%	75%	84%	81%
N	76	54	32	82	244

12. In the last 6 months, did your child see a specialist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	22%	16%	16%	20%	19%
No	78%	84%	84%	80%	81%
N	341	289	182	403	1215

13. We want to know your rating of the specialist your child saw most often in the last 6 months, including a personal doctor if he or she was a specialist. Use any number from 0 to 10 where 0 is the worst specialist possible, and 10 is the best specialist possible. How would you rate your child's specialist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	4%	0%	10%	3%	4%
4 to 7	26%	26%	17%	14%	21%
8 or 9	22%	30%	31%	39%	31%
10	48%	43%	41%	43%	45%
N	73	46	29	76	224

14.. In the last 6 months, was the specialist your child saw most often the same doctor as your child's personal doctor?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	7%	14%	11%	8%	9%
No	93%	86%	89%	82%	91%
N	70	44	28	76	218

Calling Doctors' Offices

15. In the last 6 months, did you call a doctor's office or clinic during regular office hours to get help or advice for your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	65%	60%	54%	58%	60%
No	35%	40%	46%	42%	40%
N	343	289	182	404	1218

16. In the last 6 months, when you called during regular office hours, how often did you get the help or advice you needed for your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	0%	2%	3%	1%	1%
Sometimes	8%	6%	5%	7%	7%
Usually	17%	21%	16%	24%	20%
Always	75%	71%	75%	68%	72%
N	215	169	97	231	712

Your Child's Health Care in the Last 6 Months

17. A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse, or anyone else your child would see for health care. In the last 6 months, did you make any appointments for your child with a doctor or other health provider for regular or routine health care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	71%	67%	63%	65%	67%
No	29%	33%	37%	35%	33%
N	341	289	183	405	1218

18. In the last 6 months, how often did your child get an appointment for regular or routine health care as soon as you wanted?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	2%	1%	1%	2%	1%
Sometimes	9%	11%	10%	7%	9%
Usually	27%	26%	21%	27%	26%
Always	62%	62%	68%	65%	64%
N	234	193	115	254	796

19. In the last 6 months, how many days did you usually have to wait between making an appointment for regular or routine care and seeing the provider?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Same day	33%	37%	34%	36%	35%
1 day	18%	18%	13%	23%	19%
2-3 days	25%	16%	27%	20%	21%
4-7 days	13%	12%	17%	11%	13%
8-14 days	7%	11%	6%	6%	7%
15-30 days	2%	5%	2%	4%	3%
31 days +	2%	1%	1%	1%	1%
N	228	188	112	254	782

20. In the last 6 months, did your child have an illness or injury that needed care right away from a doctor's office, clinic, or emergency room?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	40%	40%	33%	38%	38%
No	60%	60%	67%	62%	62%
N	338	292	184	403	1217

21. In the last 6 months, when your child needed care right away for an illness or injury, how often did you get care as soon as you wanted?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	2%	2%	2%	1%	2%
Sometimes	7%	9%	5%	5%	7%
Usually	9%	14%	13%	19%	14%
Always	83%	76%	80%	74%	78%
N	132	115	60	154	461

22. In the last 6 months, how long did your child usually have to wait between trying to get care an actually seeing a provider for an illness or injury?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Same day	77%	78%	92%	72%	78%
1 day	14%	13%	5%	13%	12%
2-3 days	5%	4%	3%	13%	7%
4-7 days	3%	4%	0%	1%	2%
8-14 days	0%	1%	0%	1%	0.4%
15 days +	1%	1%	0%	0%	0.4%
N	132	113	59	154	458

**Statistically significant difference, $p < .05$*

23. In the last 6 months, how many times did your child go to an emergency room?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
None	76%	71%	80%	78%	76%
1	18%	19%	13%	14%	16%
2	4%	7%	4%	5%	5%
3	2%	3%	2%	1%	2%
4	0%	0.3%	1%	1%	0.4%
5 to 9	0%	0%	1%	0.3%	0.2%
10 or more	0.3%	0%	0%	0.3%	0.2%
N	342	292	183	404	1221

24. When was the last time your child went for a preventive health care visit such as a check-up, physical exam, or vaccination shot?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
1 yr ago or less	88%	81%	88%	80%	84%
1-2 yrs ago	9%	12%	10%	12%	11%
Over 2 yrs ago	2%	7%	2%	9%	5%
N	338	289	182	398	1207

* *Statistically significant difference, $p < .05$*

24a. In the last 6 months, was there any time when your child needed preventive care but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	4%	4%	2%	2%	3%
No	96%	96%	98%	98%	97%
N	340	290	182	405	1217

25. In the last 6 months, has a health professional or your child's health plan encouraged you to take any type of preventive health steps for your child such as watching what your child eats or using bicycle helmets or car seats?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	34%	37%	33%	27%	32%
No	66%	63%	67%	73%	68%
N	340	287	183	403	1213

26. In the last 6 months, was there any time when your child needed medical care but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	3%	3%	2%	2%	3%
No	97%	97%	98%	98%	97%
N	341	288	182	405	1216

27. The following is a list of possible reasons why people may not be able to get medical care for their children. In the last 6 months, did any of the following stop you from getting medical care that you or a health professional thought your child needed? (please check all that apply)

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Cant afford	22%	25%	33%	0%	17%
Can't find dr. who accepts Medicaid	67%	13%	0%	33%	34%
Trouble getting appointments	44%	13%	67%	22%	31%
Transportation	11%	13%	0%	44%	21%
Night or weekend	33%	13%	0%	11%	17%
Can't get off work	0%	13%	0%	11%	7%
Other reasons	11%	50%	33%	33%	31%
N	9	8	3	9	29

28. In the last 6 months, how much of a problem, if any, was it to get the care for your child that you or a doctor believed necessary?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	1%	0.4%	3%	1%	1%
Small problem	6%	6%	4%	4%	5%
Not a problem	93%	94%	93%	94%	94%
N	339	287	181	403	1210

29. In the last 6 months (not counting times you went to an emergency room),how much of a problem, if any, were delays in your child's health care while you waited for approval from your child's health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	3%	2%	2%	2%	2%
Small problem	5%	9%	6%	4%	6%
Not a problem	92%	89%	92%	95%	92%
N	335	289	180	400	1204

30. In the last 6 months (not counting times your child went to an emergency room), how many times did your child go to a doctor's office or clinic?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
None	14%	15%	21%	18%	17%
1	26%	20%	27%	22%	23%
2	25%	27%	25%	26%	26%
3 or 4	24%	26%	19%	20%	22%
5 to 9	9%	10%	6%	9%	9%
10 or more	4%	2%	2%	4%	3%
N	341	287	181	401	1210

** Statistically significant difference, p < .05*

31. In the last 6 months, how often did your child wait in the doctor's office or clinic more than 15 minutes past your appointment time to see the person your child went to see? (KW test sig @ .05)

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	36%	31%	42%	26%	33%
Sometimes	41%	43%	37%	48%	43%
Usually	12%	14%	10%	15%	13%
Always	10%	12%	11%	11%	11%
N	288	235	140	316	979

32. In the last 6 months, how often did office staff at your child's doctor's office or clinic treat you and your child with courtesy and respect?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	2%	0%	1%	1%
Sometimes	6%	7%	4%	5%	6%
Usually	11%	16%	10%	14%	13%
Always	82%	74%	87%	80%	80%
N	292	241	142	321	996

33. In the last 6 months, how often were office staff at your child's doctor's office or clinic as helpful as you thought they should be?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	0.3%	1%	1%	1%	1%
Sometimes	7%	9%	8%	10%	9%
Usually	20%	29%	21%	23%	23%
Always	72%	61%	71%	65%	67%
N	290	236	141	323	990

34. In the last 6 months, how often did your child's doctors or other health providers listen carefully to you?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	1%	1%	1%	1%
Sometimes	7%	6%	4%	8%	7%
Usually	14%	27%	16%	22%	20%
Always	79%	66%	79%	69%	73%
N	291	241	142	321	995

**Statistically significant difference, p < .05*

35. In the last 6 months, how often did your child's doctors or other health providers explain things in a way you could understand?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	2%	1%	1%	1%	1%
Sometimes	6%	7%	5%	4%	6%
Usually	15%	24%	13%	21%	19%
Always	77%	68%	82%	73%	74%
N	291	240	142	322	995

** Statistically significant difference, $p < .05$*

36. In the last 6 months, how often did your child's doctors or other health providers give you support about the care you are providing for your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	4%	6%	3%	6%	5%
Sometimes	7%	7%	4%	7%	7%
Usually	17%	25%	22%	22%	21%
Always	72%	62%	71%	66%	67%
N	281	233	140	320	974

37. In the last 6 months, how often did your child's doctors or other health providers show respect for what you had to say?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	2%	0%	0.3%	1%
Sometimes	6%	7%	4%	8%	7%
Usually	15%	26%	14%	18%	19%
Always	78%	65%	82%	83%	74%
N	286	242	141	320	989

** Statistically significant difference, $p < .01$*

38. Is your child able to talk with doctors about his or her health care?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	58%	54%	63%	69%	61%
No	42%	46%	37%	31%	39%
N	290	241	142	323	996

**Statistically significant difference, $p < .005$*

39. In the last 6 months, how often did doctors or other health providers explain things in a way your child could understand?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	4%	3%	2%	2%	3%
Sometimes	13%	13%	12%	10%	12%
Usually	24%	27%	22%	22%	24%
Always	59%	58%	64%	66%	62%
N	164	128	86	213	591

40. In the last 6 months, how often did doctors or other health providers spend enough time with your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	4%	1%	1%	2%	2%
Sometimes	11%	13%	9%	13%	12%
Usually	22%	33%	27%	30%	28%
Always	63%	53%	62%	55%	58%
N	281	238	137	317	973

41. We want to know how you, your child's doctor, and other health providers make decisions about your child's health care? In the last 6 months, were any decisions made about your child's health care?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	33%	34%	21%	36%	33%
No	67%	66%	79%	64%	67%
N	287	239	142	318	986

** Statistically significant difference, $p < .05$*

42. In the last 6 months, how often did your child's doctors or other health providers involve you as much as you wanted in these decisions?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	3%	5%	0%	1%	3%
Sometimes	10%	5%	14%	4%	7%
Usually	14%	18%	24%	16%	17%
Always	73%	72%	62%	79%	74%
N	94	83	29	114	320

43. In the last 6 months, how much of a problem, if any, was getting your child's doctors or other health providers to listen to your concerns about the best way to manage your child's medical or health problems?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	2%	4%	2%	3%	3%
Small problem	7%	12%	8%	11%	10%
Not a problem	90%	84%	91%	87%	88%
N	241	197	116	269	823

44. In the last 6 months, how much of a problem, if any, was getting your child's doctor or other health providers to follow up on concerns about your child's medical or health problems?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	3%	4%	1%	4%	3%
Small problem	9%	10%	4%	8%	8%
Not a problem	89%	86%	96%	89%	89%
N	239	191	112	264	806

45. In the last 6 months, have any of your child's doctors or other health providers talked with you about the skills needed to take care of your child?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	37%	40%	31%	28%	34%
No	63%	60%	69%	72%	66%
N	339	287	182	398	1206

** Statistically significant difference, $p < .005$*

46. Information about a child's medical or health problems can include things such as its causes, how to care for the child now, and what changes to expect in the future. Do you get the information you need from your child's doctors and other health providers about your child's medical or health conditions?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	4%	5%	3%	6%	5%
Sometimes	8%	11%	9%	11%	10%
Usually	22%	29%	23%	25%	25%
Always	66%	55%	65%	58%	61%
N	260	216	137	314	927

47. Is your child now enrolled in any kind of school or daycare?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	74%	67%	76%	79%	74%
No	26%	33%	24%	21%	26%
N	339	289	182	405	1215

** Statistically significant difference, $p < .05$*

48. Does your child have medical or health care needs that require any special help from teachers, nurses, or staff at your child's school or day care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	13%	16%	11%	16%	15%
No	87%	84%	89%	84%	85%
N	251	196	138	314	899

49. In the last 6 months, how much of a problem, if any, was getting your child's doctors and/or other health providers to help your child's school or day care understand these needs?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	9%	3%	0%	10%	7%
Small problem	27%	14%	7%	18%	18%
Not a problem	64%	83%	93%	73%	75%
N	33	29	14	51	127

50. Does your child get care from more than one health provider OR use more than one kind of service because of special medical or health needs?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	15%	12%	12%	15%	14%
No	85%	88%	88%	85%	86%
N	341	289	180	402	1212

51. Does anyone from your child's health plan, doctor's office or clinic help you to coordinate your child's care among these different providers and services?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	30%	24%	21%	32%	28%
Sometimes	12%	32%	21%	19%	20%
Usually	20%	9%	29%	9%	15%
Always	38%	35%	29%	40%	37%
N	50	34	24	57	165

52. We want to know your rating of all your child's health care in the last 6 months from all doctors and other health providers. Use any number from 0 to 10 where 0 is the worst health care possible, and 10 is the best health care possible. How would you rate all your child's health care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	2%	1%	4%	2%	2%
4 to 7	17%	17%	13%	18%	17%
8 or 9	35%	48%	39%	35%	39%
10	55%	42%	51%	46%	48%
N	266	228	138	325	957

Your Child's Dental Care

53. During the past 6 months, was there any time when you or a health professional thought your child needed dental care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	36%	37%	30%	41%	37%
No	64%	63%	70%	59%	63%
N	340	288	183	401	1212

54. Is there one main person/place where you can take your child if they need dental care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	83%	79%	80%	83%	81%
No	17%	21%	20%	17%	19%
N	333	286	183	393	1195

55. In the last 6 months, was there any time when your child needed dental care but could not get it for any reason?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	7%	12%	4%	12%	9%
No	93%	88%	96%	88%	91%
N	338	288	183	399	1208

** Statistically significant difference, $p < .01$*

56. The following is a list of possible reasons why people may not be able to get dental care for their children. In the last 6 months, did any of the following stop you from getting dental care that you or a health professional thought your child needed? (please check all that apply)

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Couldn't afford it	17%	25%	14%	24%	22%
Couldn't find dentist who accepts Medicaid	67%	69%	86%	71%	70%
Trouble getting appointment	21%	16%	14%	24%	20%
Transportation problems	25%	34%	14%	27%	28%
Night or weekend	17%	13%	0%	9%	11%
Can't get off work	13%	3%	14%	4%	6%
Other reasons	21%	9%	14%	18%	16%
Total	24	32	7	45	108

57. When was your child's last visit to the dentist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Less than 12 mos ago	56%	55%	62%	60%	68%
1 to 2 years ago	9%	10%	11%	11%	10%
Over 2 years ago	4%	4%	1%	5%	4%
Never been to the dentist	32%	31%	26%	24%	28%
N	341	291	183	398	1213

Your Child's Behavioral/Emotional Care

58. In the last 6 months, did your child need any treatment or counseling for an emotional, developmental or behavioral problem?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	13%	11%	14%	17%	14%
No	87%	89%	86%	83%	86%
N	341	287	183	401	1212

59. In the last 6 months, was there any time when your child needed treatment or counseling for an emotional or behavioral problem but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	14%	13%	16%	17%	15%
No	86%	88%	84%	83%	85%
N	44	32	25	66	167

60. In the last 6 months, how much of a problem, if any, was it to get this treatment or counseling for your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	7%	9%	8%	11%	9%
Small problem	19%	6%	16%	20%	16%
Not a problem	74%	85%	76%	69%	75%
N	43	33	25	64	165

61. Did anyone from your health plan, doctor's office or clinic help you try to solve this problem?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	50%	0%	33%	43%	39%
No	50%	100%	67%	57%	61%
N	10	4	6	21	41

Your Child's Health Plan

The next questions ask about your experience with your child's Medicaid health plan.

62. When you first joined Medicaid, did you choose to keep your child in the health plan that Medicaid placed him/her in or did you choose a different health plan?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Stayed in assigned plan	59%	67%	64%	63%	63%
Chose a different plan	21%	14%	15%	12%	15%
Never given a choice	3%	6%	10%	9%	7%
Only 1 available in county	0%	0.4%	1%	2%	1%
Not sure	18%	13%	11%	14%	14%
N	331	284	177	396	1188

** Statistically significant difference, $p < .001$*

63. You can get information about your child's health plan services in writing, by telephone, or in person. Did you get any information about your child's Medicaid health plan before you signed him or her up for it?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	65%	60%	59%	53%	59%
No	35%	40%	41%	47%	41%
N	333	281	176	386	1176

**Statistically significant difference, $p < .05$*

64. How much of the information you were given before you signed your child up for the plan was correct?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
All of it	60%	61%	52%	61%	59%
Most of it	29%	31%	34%	30%	31%
Some of it	10%	9%	14%	8%	10%
None of it	1%	0%	0%	1%	0.3%
N	198	160	91	193	642

65. In the last 6 months, did you look for information in any written materials from your child's health plan?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	26%	25%	21%	18%	22%
No	74%	75%	79%	82%	78%
N	337	284	181	398	1200

** Statistically significant difference, $p < .05$*

66. In the last 6 months, how much of a problem, if any, was it to find or understand information in these written materials?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	7%	6%	8%	3%	6%
Small problem	22%	21%	29%	25%	24%
Not a problem	71%	73%	63%	72%	71%
N	85	71	38	72	266

67. Did you know that there is a Medicaid helpline (1-800-338-9154) that you can call to get information or help for your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	47%	46%	52%	49%	48%
No	53%	54%	48%	51%	52%
N	338	287	182	397	1204

68. In the last 6 months, did you call the Medicaid helpline (1-800-338-9154) to get information or help for your child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	13%	20%	17%	13%	15%
No	87%	80%	83%	87%	85%
N	156	131	93	194	574

69. In the last 6 months, how much of a problem, if any, was it to get the help you needed when you called the Medicaid helpline?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	21%	15%	13%	4%	13%
Small problem	26%	11%	13%	8%	14%
Not a problem	53%	74%	75%	88%	74%
N	19	27	16	25	87

70. In the last 6 months, have you called the Medicaid helpline (1-800-338-9154) with a complaint or problem?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	7%	15%	9%	8%	9%
No	93%	85%	91%	92%	91%
N	156	132	93	193	574

71. How long did it take for the health plan to resolve your most recent complaint?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Same day	30%	24%	50%	71%	43%
Few days	10%	18%	0%	14%	12%
1 week	10%	0%	0%	0%	2%
2 weeks	0%	0%	13%	0%	2%
3 weeks	20%	0%	0%	0%	4%
4 or more weeks	0%	29%	0%	7%	12%
Still waiting	30%	29%	38%	7%	24%
N	10	17	8	14	49

72. Was your most recent complaint or problem settled to your satisfaction?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	45%	65%	38%	92%	63%
No	36%	24%	25%	0%	20%
Still waiting	18%	12%	38%	8%	16%
N	11	17	8	13	49

73. Paperwork means things like getting your child's ID card, having your child's records changed, processing forms, or other paperwork related to getting care for your child. In the last 6 months, did you have any experiences with paperwork for your child's health plan? *

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	15%	21%	11%	19%	17%
No	85%	79%	89%	81%	83%
N	340	289	183	402	1214

** Statistically significant difference, $p < .05$*

74. In the last 6 months, how much of a problem, if any, did you have with paperwork for your child's health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	10%	16%	11%	3%	10%
Small problem	15%	23%	22%	15%	18%
Not a problem	75%	61%	67%	82%	72%
N	20	31	9	34	94

75. We want to know your rating of all your experience with your child's health plan.
Use any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your child's health plan now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	2%	3%	3%	2%	2%
4 to 7	20%	23%	20%	23%	22%
8 or 9	35%	40%	36%	33%	36%
10	44%	33%	41%	43%	40%
N	335	287	181	401	1204

Prescription Medicine

76. In the last 6 months, did your child need any new prescription medicine or need to refill a prescription?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	58%	54%	49%	56%	55%
No	42%	46%	51%	44%	45%
N	341	288	182	403	1214

77. In the last 6 months, was there any time when your child needed prescription medicine but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	10%	15%	9%	11%	11%
No	90%	85%	91%	89%	89%
N	196	154	90	222	662

78. In the last 6 months, how much of a problem, if any, was it to get your child's prescription medicine?

	John Deere	Iowa Health Solutions	Coventy	MediPASS	Total
Big problem	3%	5%	3%	4%	4%
Small problem	8%	12%	11%	10%	10%
Not a problem	89%	83%	85%	86%	86%
N	193	151	89	222	655

79. Did anyone help you try to solve this problem getting your child's prescription medicine?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	48%	85%	46%	59%	62%
No	52%	15%	54%	41%	38%
N	23	26	13	32	94

**Statistically significant difference, $p < .05$*

About Your Child and You

80. In general, how would you rate <u>your child's overall health</u> now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Excellent	46%	37%	44%	45%	43%
Very good	34%	39%	37%	34%	36%
Good	17%	19%	17%	18%	18%
Fair	3%	4%	2%	3%	3%
Poor	0.3%	0.4%	1%	0%	0.3%
N	338	287	181	402	1208

81. Does your child currently need or use <u>medicine prescribed by a doctor</u> (other than vitamins)?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	30%	27%	26%	32%	29%
No	70%	73%	74%	68%	71%
N	341	286	183	405	1215

81a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	84%	75%	85%	83%	82%
No	16%	25%	15%	17%	18%
N	101	79	47	125	352

81b. Is this a condition that has lasted or is expected to last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	80%	81%	78%	83%	79%
No	20%	29%	22%	17%	21%
N	83	58	37	99	277

82. Does your child need or use more medical care, mental health or educational services than is usual for most children of the same age?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	13%	10%	10%	17%	13%
No	87%	90%	90%	83%	87%
N	337	282	183	401	1203

** Statistically significant difference, $p < .05$*

82a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	88%	87%	95%	93%	91%
No	12%	13%	5%	7%	9%
N	42	30	19	71	162

82b. Is this a condition that has lasted or is expected or last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	95%	96%	100%	98%	97%
No	5%	4%	0%	2%	3%
N	37	25	17	63	142

83. Is your child limited or prevented in any way in his or her ability to do the things things that most children of the same age can do?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	10%	5%	9%	9%	8%
No	90%	95%	91%	91%	92%
N	335	284	181	399	1199

83a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	72%	67%	44%	78%	69%
No	28%	33%	56%	22%	31%
N	32	15	16	41	104

83b. Is this a condition that has lasted or is expected or last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	96%	100%	100%	100%	99%
No	4%	0%	0%	0%	1%
N	25	11	7	32	75

84. Does your child need or get special therapy, such as physical, occupational or speech therapy?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	7%	4%	6%	6%	6%
No	93%	96%	94%	94%	94%
N	340	286	182	401	1209

84a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	52%	50%	45%	55%	51%
No	48%	50%	55%	45%	49%
N	23	12	11	22	68

84b. Is this a condition that has lasted or is expected to last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	85%	50%	100%	92%	93%
No	15%	50%	0%	8%	17%
N	13	6	4	12	35

85. Does your child have any kind of emotional, developmental or behavioral problem for which he or she needs or gets treatment or counseling?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	14%	9%	13%	16%	13%
No	86%	91%	87%	84%	87%
N	338	286	183	402	1209

85a. Has this problem lasted or is expected to last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	90%	92%	95%	92%	92%
No	10%	8%	5%	8%	8%
N	42	24	22	64	152

86. What is your child's age now? *

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Under 1	10%	10%	7%	6%	8%
1 to 3	26%	29%	23%	19%	24%
4 to 7	24%	23%	28%	23%	24%
8 to 12	24%	20%	21%	30%	25%
13 to 17	16%	17%	21%	21%	19%
Average age	6.6	6.4	7.3	78	7.1
(std. dev.)	(5.1)	(5.2)	(5.3)	(5.0)	(5.1)
N	344	292	184	406	1226

** Statistically significant difference, $p < .001$*

87. Is your child male or female?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Male	53%	49%	42%	53%	50%
Female	47%	51%	58%	48%	50%
N	344	292	184	406	1226

88. Is your child of Hispanic or Latino origin or descent?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Hispanic or Latino	8%	11%	6%	8%	9%
Not Hispanic or Latino	92%	89%	94%	92%	91%
N	323	280	176	396	1175

89. What is your child's race? Please mark one or more. (Columns may not total 100% due to multiple responses.)*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
White	83%	88%	68%	92%	85%
Black or African American	16%	9%	35%	7%	14%
Asian	2%	3%	0%	1%	1%
Hawaiian/Pacific Islander	0.3%	0%	0%	0%	0.1%
American Indian or Alaskan Native	2%	1%	1%	1%	1%
Hispanic only (no other ethnicity noted)	2%	3%	1%	2%	2%
Other	1%	0.4%	0%	0.3%	0.3%
N	323	276	181	391	1171

* Statistically significant difference, $p < .001$

90. Are you male or female?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Male	11%	11%	10%	12%	11%
Female	89%	89%	90%	88%	89%
N	338	289	183	406	1216

91. What is your age now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
18-24	22%	26%	22%	15%	20%
25-34	37%	34%	42%	36%	37%
35-44	28%	24%	28%	31%	28%
45-54	7%	10%	4%	13%	9%
55-64	4%	4%	3%	3%	4%
65-74	3%	2%	2%	1%	2%
75+	0%	0%	0%	0.4%	0.1%
N	224	180	110	281	795

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

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
8th grade or less	3%	2%	4%	3%	3%
Some high school	12%	14%	14%	10%	12%
High school graduate/GED	39%	41%	36%	44%	40%
Some college or 2-yr degree	38%	37%	39%	38%	38%
4-yr college graduate	7%	5%	5%	3%	5%
More than 4 years college	1%	2%	1%	2%	2%
N	340	287	182	404	1213

93. What language do you mainly speak at home?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
English	97%	95%	93%	97%	96%
Spanish	1%	2%	2%	1%	1%
Other Language	2%	3%	5%	2%	3%
N	343	291	184	406	1224

94. How are you related to the child?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Mother/Father	89%	90%	88%	89%	89%
Grandparent	9%	7%	6%	6%	7%
Aunt/Uncle	0%	1%	4%	1%	1%
Other relative	0.3%	0%	0%	0%	0.1%
Legal guardian	2%	2%	2%	3%	2%
N	343	291	182	406	1222

APPENDIX B:
ADULT SURVEY RESPONSES BY QUESTION

1. In which of the following health plans are you currently enrolled?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
%	30%	27%	6%	36%	100%
N	289	262	55	347	953

2. Is this the health plan you use for all or most of your health care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	97%	96%	95%	99%	97%
No	3%	4%	5%	1%	3%
N	287	256	55	343	941

3. How many months or years in a row have you been in this health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Under 6 mos	5%	4%	9%	2%	4%
6-12 mos	27%	27%	33%	24%	26%
12-24 mos	27%	28%	27%	24%	26%
2-5 years	31%	29%	25%	35%	32%
5-10 years	6%	7%	2%	10%	8%
10 years +	4%	5%	4%	5%	4%
N	281	253	55	331	920

Your Personal Doctor or Nurse

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

4. A personal doctor or nurse is the health provider who knows you best. This can be a general doctor, a specialist doctor, a nurse practitioner, or a physician assistant. When you joined your health plan or at any time since then, did you get a new personal doctor or nurse?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	27%	38%	41%	40%	35%
No	73%	62%	59%	60%	65%
N	286	261	54	344	945

** Statistically significant difference, $p < .005$*

5. With the choices your health plan gave you, how much of a problem, if any, was it to get a personal doctor or nurse you are happy with?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	7%	15%	18%	6%	10%
Small problem	22%	14%	14%	18%	17%
No problem	71%	72%	68%	76%	73%
N	72	96	22	129	319

6. Do you have one person you think of as your personal doctor or nurse?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	73%	70%	83%	82%	76%
No	27%	30%	17%	18%	24%
N	285	262	53	341	941

** Statistically significant difference, p < .005*

7. We want to know your rating of your personal doctor or nurse. Use any number from 0 to 10 where 0 is the worst personal doctor or nurse possible, and 10 is the best personal doctor or nurse possible. How would you rate your personal doctor or nurse now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	2%	3%	2%	3%	3%
4 to 7	19%	17%	19%	21%	19%
8 or 9	39%	33%	45%	39%	38%
10	40%	47%	33%	37%	40%
N	192	174	42	263	671

Getting Health Care from a Specialist

When you answer the next questions, do not include dental visits.

8. Specialists are doctors like surgeons, heart doctors, allergy doctors, skin doctors, and others who specialize in one area of health care. In the last 6 months, did you or a doctor think you needed to see a specialist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	35%	31%	48%	37%	36%
No	65%	69%	52%	63%	64%
N	288	261	54	345	948

9. In the last 6 months, was there any time when you needed to see a specialist but could not see one for any reason?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	18%	29%	16%	14%	19%
No	82%	71%	84%	86%	81%
N	96	78	25	123	322

** Statistically significant difference, p < .05*

9a. In the last 6 months, how much of a problem, if any, was it to get a referral to see a specialist that you needed to see?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	6%	19%	12%	6%	10%
Small problem	11%	12%	8%	17%	13%
No problem	83%	69%	80%	78%	77%
N	94	77	25	121	317

** Statistically significant difference, p < .05*

10. In the last 6 months, did you see a specialist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	32%	29%	44%	33%	32%
No	68%	71%	56%	67%	68%
N	288	262	55	345	950

11. We want to know your rating of the specialist you saw most often in the last 6 months, including a personal doctor if he or she was a specialist. Use any number from 0 to 10 where 0 is the worst specialist possible, and 10 is the best specialist possible. How would you rate the specialist?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	1%	4%	0%	4%	3%
4 to 7	33%	19%	36%	23%	26%
8 or 9	38%	33%	36%	43%	39%
10	28%	43%	27%	31%	33%
N	86	72	22	110	290

12. In the last 6 months, was the specialist you saw most often the same doctor as your personal doctor?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	15%	7%	13%	10%	11%
No	85%	93%	87%	90%	89%
N	88	72	23	111	294

13. In the last 6 months, did your specialist talk to your personal doctor or nurse about your care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	40%	42%	56%	40%	42%
No	32%	24%	17%	27%	27%
Don't know	28%	35%	28%	33%	31%
N	68	55	18	92	233

Calling Doctors' Offices

14. In the last 6 months, did you call a doctor's office or clinic during regular office hours to get help or advice for yourself?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	64%	63%	67%	70%	66%
No	36%	37%	33%	30%	34%
N	289	260	55	347	951

15. In the last 6 months, when you called during regular office hours, how often did you get the help or advice you needed?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	1%	0%	1%	1%
Sometimes	10%	12%	6%	12%	11%
Usually	31%	23%	32%	25%	27%
Always	58%	63%	62%	62%	61%
N	178	158	34	240	610

Your Health Care in the Last 6 Months

16. A health provider could be a general doctor, a specialist doctor, a nurse practitioner, a physician assistant, a nurse, or anyone else you would see for health care. In the last 6 months, did you make any appointments with a doctor or other health provider for regular or routine health care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	71%	67%	64%	69%	69%
No	29%	33%	26%	31%	31%
N	285	261	55	344	945

17. In the last 6 months, how often did you get an appointment for regular or routine health care as soon as you wanted?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	2%	2%	0%	3%	2%
Sometimes	14%	10%	12%	12%	12%
Usually	31%	27%	30%	26%	28%
Always	54%	61%	58%	59%	58%
N	196	168	33	234	631

18. In the last 6 months, how many days did you usually have to wait between making an appointment for regular or routine care and seeing the provider?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Same day	25%	29%	21%	25%	26%
1 day	17%	21%	21%	23%	20%
2-3 days	26%	23%	18%	28%	25%
4-7 days	20%	13%	18%	11%	15%
8-14 days	8%	6%	9%	6%	73%
15-30 days	3%	6%	3%	6%	5%
31 days +	2%	2%	9%	2%	3%
N	191	163	33	229	616

19. In the last 6 months, did you have an illness or injury that needed care right away from a doctor's office, clinic, or emergency room?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	45%	42%	44%	44%	44%
No	55%	58%	56%	56%	56%
N	289	261	55	346	951

20. In the last 6 months, when you needed care right away for an illness or injury, how often did you get care as soon as you wanted?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	2%	3%	0%	2%	2%
Sometimes	16%	8%	13%	8%	11%
Usually	24%	26%	26%	23%	24%
Always	58%	63%	61%	67%	63%
N	126	106	23	152	407

21. In the last 6 months, how long did you usually have to wait between trying to get care and actually seeing a provider for an illness or injury?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Same day	59%	64%	64%	63%	62%
1 day	15%	15%	9%	14%	14%
2-3 days	17%	15%	18%	15%	16%
4-7 days	7%	3%	9%	5%	5%
8-14 days	1%	2%	0%	2%	1%
15 days +	0%	2%	0%	1%	1%
N	123	107	22	150	402

22. In the last 6 months, how many times did you go to an emergency room to get care for yourself?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
None	65%	66%	67%	69%	67%
1	22%	19%	11%	19%	20%
2	8%	10%	7%	9%	9%
3	1%	3%	7%	2%	3%
4	2%	0.4%	4%	1%	1%
5 to 9	1%	1%	4%	1%	1%
10 or more	1%	0%	0%	0%	0.2%
N	285	262	55	346	948

23. When was the last time you went for a preventive health care visit such as a check-up, physical exam, mammogram or pap smear test?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
1 yr ago or less	76%	76%	76%	73%	75%
1-2 yrs ago	12%	14%	13%	16%	14%
Over 2 yrs ago	12%	10%	11%	11%	11%
N	284	260	55	342	941

24. In the last 6 months, was there any time when you needed preventive care but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	5%	10%	5%	7%	7%
No	95%	90%	95%	93%	93%
N	286	260	55	344	945

25. In the last 6 months, has a health professional or your health plan encouraged you to exercise or eat a healthy diet?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	42%	43%	55%	43%	43%
No	58%	57%	45%	57%	57%
N	286	258	55	345	944

26. In the last 6 months, was there any time when you needed medical care but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	8%	8%	11%	10%	9%
No	92%	92%	89%	90%	91%
N	288	261	55	343	947

27. The following is a list of possible reasons why people may not be able to get medical care. In the last 6 months, did any of the following stop you from getting medical care that you or a health professional thought you needed?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Cant afford	27%	14%	17%	21%	21%
Can't find dr. who accepts Medicaid	41%	38%	17%	27%	33%
Trouble getting appointments	23%	29%	33%	18%	23%
Transportation	9%	24%	33%	18%	18%
Night or weekend	0%	5%	0%	6%	4%
Can't get off work	5%	5%	0%	6%	5%
Other reasons	36%	29%	33%	36%	34%
N	22	21	6	33	82

28. In the last 6 months (not counting times you went to an emergency room), how much of a problem, if any, was it to get the care you or a doctor believed necessary?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	3%	5%	5%	3%	4%
Small problem	10%	12%	7%	11%	11%
Not a problem	87%	83%	87%	86%	86%
N	285%	260%	55	341	941

29. In the last 6 months (not counting times you went to an emergency room),how much of a problem, if any, were delays in health care while you waited for approval from your health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	1%	5%	4%	3%	3%
Small problem	12%	12%	13%	11%	12%
Not a problem	88%	83%	82%	86%	85%
N	283	257	55	340	935

30. In the last 6 months (not counting times you went to an emergency room), how many times did you go to a doctor's office or clinic to get care for yourself?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
None	20%	20%	24%	20%	20%
1	17%	15%	11%	15%	16%
2	20%	24%	15%	20%	21%
3	10%	12%	13%	13%	12%
4	8%	9%	0%	6%	7%
5 to 9	13%	10%	24%	14%	13%
10 or more	13%	11%	13%	12%	12%
N	287	258	54	340	939

31. In the last 6 months, how often did you wait in the doctor's office or clinic more than 15 minutes past your appointment time to see the person you went to see?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	24%	30%	21%	18%	23%
Sometimes	48%	43%	49%	51%	48%
Usually	17%	13%	21%	15%	15%
Always	11%	14%	10%	15%	13%
N	229	206	39	270	744

32. In the last 6 months, how often did office staff at a doctor's office or clinic treat you with courtesy and respect?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	0%	2%	2%	0.3%	1%
Sometimes	7%	6%	2%	10%	8%
Usually	25%	24%	17%	24%	24%
Always	67%	68%	78%	65%	67%
N	229	207	41	271	748

33. In the last 6 months, how often were office staff at a doctor's office or clinic as helpful as you thought they should be?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	1%	2%	1%	1%
Sometimes	12%	13%	2%	14%	12%
Usually	31%	34%	34%	27%	30%
Always	57%	53%	61%	59%	57%
N	228	206	41	272	747

34. In the last 6 months, how often did doctors or other health providers listen carefully to you?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	3%	3%	2%	2%	3%
Sometimes	10%	11%	7%	9%	10%
Usually	30%	25%	29%	24%	27%
Always	57%	60%	61%	65%	61%
N	228	205	41	271	745

35. In the last 6 months, how often did doctors or other health providers explain things in a way you could understand?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	1%	2%	2%	1%
Sometimes	11%	6%	10%	8%	9%
Usually	25%	32%	27%	26%	28%
Always	63%	61%	61%	63%	62%
N	228	206	41	272	747

36. In the last 6 months, how often did doctors or other health providers show respect for what you had to say?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	1%	2%	2%	1%	2%
Sometimes	11%	10%	12%	13%	12%
Usually	27%	28%	32%	25%	27%
Always	61%	59%	54%	60%	60%
N	228	206	41	270	745

37. In the last 6 months, how often did doctors or other health providers spend enough time with you?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	4%	2%	7%	2%	3%
Sometimes	12%	17%	20%	18%	16%
Usually	41%	33%	29%	31%	35%
Always	43%	48%	44%	49%	47%
N	228	206	41	270	745

38. In the last 6 months, how often did you have a hard time speaking with or understanding a doctor because you spoke different languages?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Never	85%	84%	71%	82%	83%
Sometimes	12%	10%	20%	12%	12%
Usually	3%	3%	2%	1%	2%
Always	1%	3%	7%	4%	3%
N	228	205	41	273	747

39. We want to know your rating of all your health care in the last 6 months from all doctors and other health providers. Use any number from 0 to 10 where 0 is the worst health care possible, and 10 is the best health care possible. How would you rate all your health care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	2%	4%	2%	2%	3%
4 to 7	28%	27%	34%	27%	28%
8 or 9	47%	40%	28%	41%	42%
10	24%	29%	36%	29%	28%
N	272	247	53	321	893

Your Dental Care

40. When was your last dental check-up?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Less than 12 mos ago	56%	54%	57%	56%	56%
1 to 2 years ago	17%	18%	17%	19%	18%
Over 2 years ago	26%	28%	26%	25%	26%
N	287	258	54	344	943

41. Would you describe yourself as someone who:

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Visits the dentist regularly	36%	35%	27%	32%	34%
Visits the dentist occasionally	19%	21%	22%	22%	21%
Visits the dentist rarely	11%	10%	16%	10%	11%
Visits the dentist only when I have a problem	34%	33%	35%	36%	35%
N	284	259	55	344	942

42. Is there one main place you usually go for your dental care?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	76%	75%	76%	74%	75%
No	24%	25%	24%	26%	25%
N	283	260	55	345	943

43. Has a dentist ever refused to accept your dental insurance?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	23%	21%	9%	18%	20%
No	77%	79%	91%	81%	80%
N	275	243	53	321	892

44. During the past 6 months, was there any time when you or a health professional thought you needed dental care (including a dental check-up)?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	43%	40%	38%	36%	39%
No	57%	60%	62%	64%	61%
N	280	256	55	344	935

45. In the last 6 months, was there any time when you needed dental care but <u>could not get it</u> for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	16%	19%	16%	18%	18%
No	84%	81%	84%	82%	82%
N	281	257	55	342	935

46. The following is a list of possible reasons why people may not be able to get dental care. In the last 6 months, did any of the following stop you from getting dental care that you or a health professional thought you needed?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Couldn't afford it	33%	23%	33%	33%	30%
Couldn't find dentist who accepts Medicaid	61%	67%	56%	52%	59%
Trouble getting appointment	15%	23%	11%	16%	18%
Transportation	22%	27%	0%	28%	24%
Can't get off work	9%	10%	11%	3%	7%
Other reasons	15%	21%	11%	18%	18%
Total	46	48	9	61	164

47. In the last 6 months, how much of a problem, if any, was it to get the dental care you or a dentist believed necessary?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	11%	14%	8%	13%	12%
Small problem	15%	10%	13%	15%	14%
No problem	74%	76%	80%	72%	74%
N	205	185	40	255	685

48. How would you rate your overall dental health?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Excellent	15%	17%	18%	13%	15%
Very good	21%	23%	16%	26%	23%
Good	37%	31%	24%	35%	34%
Fair	21%	21%	33%	17%	20%
Poor	6%	8%	9%	9%	8%
N	276	252	55	342	925

49. We want to know your rating of all your experiences with your dental care in the last 6 months. Use any number from 0 to 10 where 0 is the worst dental care possible, and 10 is the best dental care possible. How would you rate your dental care now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	9%	7%	9%	8%	8%
4 to 7	30%	24%	37%	27%	28%
8 or 9	35%	35%	33%	36%	35%
10	26%	34%	21%	29%	29%
N	207	176	43	237	663

Your Behavioral/Emotional Care

50. In the last 6 months, did you need any treatment or counseling for an emotional or behavioral problem?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	17%	20%	25%	17%	18%
No	83%	80%	75%	83%	82%
N	285	259	55	346	945

51. In the last 6 months, was there any time when you needed treatment or counseling for an emotional or behavioral problem but could not get it for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	15%	13%	21%	15%	15%
No	85%	87%	79%	85%	85%
N	48	53	14	60	175

52. In the last 6 months, how much of a problem, if any, was it to get this treatment or counseling for yourself?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	6%	8%	7%	7%	7%
Small problem	17%	9%	21%	12%	13%
Not a problem	77%	83%	71%	81%	80%
N	48	53	14	57	172

53. Did anyone from your health plan, doctor's office or clinic help you try to solve this problem?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	45%	56%	50%	23%	41%
No	55%	44%	50%	77%	59%
N	11	9	4	13	37

Prescription Medicine

54. In the last 6 months, did you need <u>any</u> new prescription medicine or need to refill a prescription?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	76%	71%	78%	71%	73%
No	24%	29%	22%	29%	27%
N	287	261	55	347	950

55. In the last 6 months, was there any time when you needed prescription medicine but <u>could not get it</u> for any reason?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	18%	20%	16%	13%	16%
No	82%	80%	84%	87%	84%
N	288	260	55	344	947

56. In the last 6 months, how much of a problem, if any, was it to get your prescription medicine?

	John Deere	Iowa Health Solutions	Coventy	MediPASS	Total
Big problem	7%	6%	6%	6%	6%
Small problem	13%	17%	17%	10%	13%
Not a problem	81%	77%	78%	85%	81%
N	276	237	54	326	893

57. Did anyone help you try to solve this problem getting your prescription medicine?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	54%	69%	55%	59%	60%
No	46%	61%	45%	41%	40%
N	52	55	11	49	167

Your Health Plan

The next questions ask about your experience with your current Medicaid (Title 19) health plan.

58. When you first joined Medicaid, did you choose to stay in the health plan that Medicaid placed you in or did you choose a different health plan?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Stayed in assigned plan	59%	66%	75%	63%	63%
Chose a different plan	25%	13%	9%	14%	17%
Never given a choice	4%	7%	4%	7%	6%
Only 1 available in county	0.4%	1%	0%	3%	1%
Not sure	11%	14%	13%	13%	13%
N	281	248	55	333	917

** Statistically significant difference, $p < .005$*

59. Have you ever switched to a different health plan at any time while enrolled in Medicaid?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	19%	19%	18%	13%	17%
No	81%	81%	82%	87%	83%
N	264	224	49	300	837

60. You can get information about health plan services in writing, by telephone, or in person. Did you get any information about your Medicaid health plan before you signed up for it?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	58%	58%	64%	57%	58%
No	42%	42%	36%	43%	42%
N	279	245	55	331	910

61. How much of the information you were given before you signed up for the plan was correct?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
All of it	52%	51%	76%	58%	55%
Most of it	38%	40%	24%	31%	35%
Some of it	8%	7%	0%	11%	8%
None of it	1%	1%	0%	0%	1%
N	151	136	33	178	498

62. When you first joined your Medicaid health plan, did you get a list of doctors who were part of this health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	91%	93%	83%	83%	92%
No	9%	7%	17%	7%	8%
N	261	243	54	324	882

63. How much of a problem, if any, was it to understand which doctors you could see from the list you received?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	3%	5%	0%	3%	3%
Small problem	11%	10%	11%	10%	10%
Not a problem	86%	85%	89%	87%	87%
N	235	220	44	298	797

64. In the last 6 months, did you look for any other information in written materials from your health plan?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	15%	20%	24%	11%	15%
No	85%	80%	76%	89%	85%
N	284	254	55	341	934

** Statistically significant difference, $p < .01$*

65. In the last 6 months, how much of a problem, if any, was it to find or understand information in these written materials?*

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	0%	12%	25%	11%	9%
Small problem	14%	27%	25%	27%	23%
Not a problem	86%	61%	50%	62%	68%
N	42	49	12	37	140

* Statistically significant difference, $p < .05$

66. Did you know that there is a Medicaid helpline (1-800-338-9154) that you can call to get help or information?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	50%	53%	64%	54%	53%
No	50%	47%	36%	46%	47%
N	286	257	55	347	945

67. In the last 6 months, did you call the Medicaid helpline (1-800-338-9154) to get information or help?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	24%	32%	34%	29%	29%
No	76%	68%	66%	71%	71%
N	143	135	35	185	498

68. In the last 6 months, how much of a problem, if any, was it to get the help you needed when you called the Medicaid helpline?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	6%	23%	8%	12%	13%
Small problem	20%	18%	17%	12%	16%
Not a problem	74%	59%	75%	76%	70%
N	35	44	12	51	142

69. In the last 6 months, have you called the Medicaid helpline (1-800-338-9154) with a complaint or problem?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	13%	20%	14%	15%	16%
No	87%	80%	86%	85%	84%
N	142	133	35	185	495

70. How long did it take for the health plan to resolve your most recent complaint?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Same day	12%	31%	60%	29%	28%
Few days	12%	8%	20%	11%	11%
1 week	6%	4%	0%	4%	4%
2 weeks	12%	4%	0%	4%	5%
3 weeks	6%	0%	0%	7%	4%
4 or more weeks	12%	12%	0%	21%	14%
Still waiting	41%	42%	20%	25%	34%
N	17	26	5	28	76

71. Was your most recent complaint or problem settled to your satisfaction?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	75%	59%	100%	86%	75%
No	25%	41%	0%	14%	25%
N	12	22	4	22	60

72. Paperwork means things like getting your ID card, having your records changed, processing forms, or other paperwork related to getting care.
In the last 6 months, did you have any experiences with paperwork for your health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	27%	23%	35%	26%	26%
No	73%	77%	65%	74%	74%
N	287	257	55	342	941

73. In the last 6 months, how much of a problem, if any, did you have with paperwork for your health plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Big problem	8%	14%	0%	9%	10%
Small problem	32%	29%	30%	20%	27%
Not a problem	59%	57%	70%	70%	63%
N	37	35	10	44	126

74. We want to know your rating of all your experience with your health plan. Use any number from 0 to 10 where 0 is the worst health plan possible, and 10 is the best health plan possible. How would you rate your health plan now?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
0 to 3	2%	6%	9%	4%	4%
4 to 7	33%	30%	22%	28%	30%
8 or 9	39%	37%	41%	38%	38%
10	26%	26%	28%	30%	28%
N	286	258	54	340	938

75. Thinking about how well your Medicaid health care coverage meets your health care needs, how would you rate your Medicaid health care coverage?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Excellent	35%	33%	33%	41%	36%
Very good	36%	31%	38%	30%	33%
Good	22%	25%	11%	22%	22%
Fair	6%	8%	13%	6%	7%
Poor	1%	3%	5%	1%	2%
N	286	260	55	340	941

75a. Thinking about the types of services covered by Medicaid compared to those covered by most private health insurance plans, how would you rate the services covered by your Medicaid plan?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Much better	44%	47%	43%	54%	48%
A little better	22%	19%	20%	17%	19%
About the same	26%	24%	31%	24%	25%
A little worse	8%	8%	4%	4%	6%
Much worse	1%	2%	2%	1%	1%
N	268	239	51	323	881

75b. Thinking about your ability to find a doctor who accepts Medicaid patients compared to patients with private health insurance, how would you rate your ability to find a doctor who accepts Medicaid patients?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Much better	19%	23%	16%	27%	23%
A little better	17%	14%	20%	9%	14%
About the same	36%	38%	45%	40%	38%
A little worse	24%	14%	16%	18%	19%
Much worse	4%	11%	4%	6%	7%
N	266	244	51	323	884

75c. Thinking about how you are treated by the doctor and staff when you are covered by Medicaid compared to how you might be treated with private health insurance, how would you rate how you are treated when covered by Medicaid?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Much better	12%	14%	6%	17%	14%
A little better	11%	7%	20%	8%	9%
About the same	53%	56%	61%	54%	55%
A little worse	20%	19%	10%	17%	18%
Much worse	4%	5%	4%	4%	4%
N	268	241	51	327	887

75d. Do you think you have ever been treated differently because you were covered by Medicaid?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	33%	35%	30%	36%	34%
No	67%	65%	70%	65%	66%
N	283	257	54	338	932

If yes, please tell us how you were treated differently (you can add more on the back of the survey if you would like.) SEE APPENDIX…

75e. In the last 5 years, have you ever been covered by private health insurance (not Medicaid)?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	44%	44%	38%	39%	42%
No	56%	56%	62%	61%	58%
N	284	255	55	336	930

About You

The next series of questions are about your health.

76. In general, how would you rate <u>your overall health</u> now

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Excellent	12%	15%	9%	13%	13%
Very good	32%	33%	36%	25%	30%
Good	40%	37%	28%	42%	39%
Fair	14%	12%	15%	14%	13%
Poor	4%	3%	11%	6%	5%
N	285	257	53	342	937

77. Do you currently need or use <u>medicine prescribed by a doctor</u> (other than vitamins)?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	50%	49%	47%	53%	51%
No	50%	51%	53%	47%	49%
N	284	260	53	342	939

77a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	82%	79%	88%	76%	79%
No	18%	21%	12%	24%	21%
N	138	124	25	177	464

77b. Is this a condition that has lasted or is expected to last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	89%	84%	95%	88%	88%
No	11%	16%	5%	12%	12%
N	109	96	22	130	357

78. Do you need or use more medical care, mental health or other health services than is usual or routine for other people your same age?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	24%	29%	35%	29%	28%
No	76%	71%	65%	71%	72%
N	266	246	49	326	887

78a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	83%	81%	94%	88%	85%
No	17%	19%	6%	12%	15%
N	71	74	17	97	259

78b. Is this a condition that has lasted or is expected or last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	86%	89%	88%	92%	89%
No	14%	11%	12%	8%	11%
N	59	63	17	86	225

79. Are you limited or prevented in any way in your ability to do things that most people your age can do?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	19%	17%	29%	21%	20%
No	81%	83%	71%	79%	80%
N	278	257	52	332	919

79a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	86%	93%	93%	88%	89%
No	14%	7%	7%	13%	11%
N	51	44	15	72	182

79b. Is this a condition that has lasted or is expected or last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	91%	98%	93%	98%	96%
No	9%	2%	7%	2%	4%
N	43	42	14	63	162

80. Do you need or get special therapy, such as physical, occupational or speech therapy?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	6%	8%	6%	9%	8%
No	94%	92%	94%	91%	92%
N	281	257	53	339	930

80a. Is this because of ANY medical, behavioral, or other health condition?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	94%	92%	100%	93%	93%
No	6%	8%	0%	7%	7%
N	17	24	3	30	74

80b. Is this a condition that has lasted or is expected to last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	76%	74%	100%	89%	82%%
No	24%	26%	0%	11%	18
N	17	23	3	28	71

81. Do you have any kind of mental or emotional problem for which you need or get treatment or counseling?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	18%	20%	26%	21%	20%
No	82%	80%	74%	79%	80%
N	283	261	53	338	935

81a. Has this problem lasted or is expected to last for *at least* 12 months?

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	84%	88%	85%	88%	87%
No	16%	12%	15%	12%	13%
N	50	50	13	67	180

82. What is your age now? (from administrative data)

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
18-24	44%	44%	33%	42%	43%
25-34	34%	31%	38%	29%	32%
35-44	17%	19%	24%	22%	20%
45-54	3%	6%	5%	6%	5%
55-64	2%	0%	0%	1%	1%
Average age	28.3	28.3	29.9	29.0	
(std. dev.)	(8.8)	(8.8)	(8.0)	(9.3)	
N	289	262	55	347	953

83. Are you male or female? (from administrative data)

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Male	11%	10%	13%	18%	13%
Female	89%	90%	87%	82%	87%
N	289	262	55	347	953

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

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
8th grade or less	2%	2%	0%	2%	2%
Some high school	17%	11%	10%	19%	16%
High school graduate/GED	35%	40%	54%	41%	40%
Some college or 2-yr degree	38%	40%	29%	33%	36%
4-yr college graduate	4%	3%	6%	4%	4%
More than 4 years college	3%	3%	2%	1%	2%
N	284	261	52	338	935

* *Statistically significant difference ($p < .05$)*

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

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
Yes	6%	4%	8%	4%	5%
No	94%	96%	92%	96%	95%
N	272	249	52	331	904

85a. What is your race? Please mark one or more. (Results may not total 100% due to multiple responses.)

	John Deere	Iowa Health Solutions	Coventry	MediPASS	Total
White	85%	85%	75%	92%	87%
Black or African American	12%	11%	25%	6%	10%
Asian	1%	2%	0%	1%	1%
Hawaiian/Pacific Islander	0.4%	1%	2%	0%	0.4%
American Indian or Alaskan Native	3%	1%	4%	2%	2%
Hispanic only (no other ethnicity noted)	2%	2%	2%	1%	2%
Other	0.4%	1%	0%	0%	0.3%
N	273	257	51	355	916

APPENDIX C:
RESPONSES TO QUESTION NUMBER 75: ARE YOU EVER TREATED DIFFERENTLY BECAUSE YOU ARE ON MEDICAID

The following are responses to the write-in question "Do you think you have ever been treated differently because you were covered by Medicaid? If yes, please tell us how you were treated differently." The responses are presented as written on the survey except for the correction of some obvious spelling errors to make them easier to read. They are grouped according to the health plan in which they were enrolled.

John Deere Health Care

"Do you think you have ever been treated differently because you were covered by Medicaid?
If yes, please tell us how you were treated differently."

- Finding a doctor or dentist who will accept Medicaid clients.
- Sometimes the staff at the doctor's office act like they don't want to help. They act like they have to help, but they don't want to.
- I just feel with some clinics you don't receive the same treatment.
- Labcorps & John Deere, because I didn't know when the date of service was I could not get a copy of the bill from Labcorps and John Deere. Says my son was not on Medicaid. Conceco said they need a copy of the bill from Labcorps before they could even start looking at it. So now my 2 year old owes a Labcorp $110.00 also, no dentist in Muscatine will take Medicaid, you have to go outside of town. Closest is Iowa City or Davenport.
- I was refused to go to a hand specialist for my broken hand because my HMO wouldn't accept them (MAYO). I saw a local doctor in Waterloo, Iowa and he didn't even take the time to evaluate my broken hand. He told me he couldn't do anything for me. 3 months later I found an excellent hand specialist in Cedar Rapids, Iowa and he almost completely restored all of my movement with my right hand.
- Just their general attitude about you as a family.
- I feel that my previous doctor didn't listen to me. I feel that she didn't believe what I said. I believe that she would not look at any other possibilities that could be wrong. I still have the same problem and because of her I no longer feel that I have somewhere to go for my medicine needs.
- Medicaid staff have made comments about our family being on Title 19. Staff has announced the fact that our family is on Title 19 to reception area and other staff in the room in a negative way. Doctors have spent less time with family members. Doctor's attitudes are more negative toward family due to being on Title 19.
- You are received differently from the start. Some places see you as an insurance card before they see a person. My doctor's office have exceptional doctors and personnel. But I can't get my teeth fixed right and they are deteriorating. I am afraid to try to make a mental health appointment because I owe $55.00. I can't pay for being off of Medicaid for a while. But I do need it.
- Treated like a low-income freeloader. As if I like to live with state assistance. I am trying very hard to become self-sufficient. The OB I had for my last two pregnancies treated me as trailer trash with out any intelligence. It was degrading.

- Sometimes it makes you feel different. They reacted different toward you.
- There are a lot of places that don't take Medicaid. When you call and ask some people are kind of rude. I've had some give me disgusted looks.
- General atmosphere.
- Doctors have the doctor bill as much as possible. Doctors figure that the government will pay for it. I also take prescribed medication that I wouldn't be able to buy without this program. So I would have been dead by now because of no medication.
- Dental offices are almost always rude and talking down to you. My previous dentist in Indianola accepted my medical coverage. He did a ton of work, which ended with a complete upper denture and a partial bottom denture. After completed and gums healed, etc. I found my top denture was still loose and teeth so short that it looks as though I have no teeth. They're very obviously incorrect. My bottom has already lost 2-3 fillings and rotted one of my 4 remaining teeth to the point of having to be pulled and denture changed. When I called the dentist's office and told them of my problems, they not only wouldn't take me in again (stating they no longer accepted my type of medical coverage). They were extremely snotty and actually hung up on me and not due to my being rude or mouthy. My new dentist repaired the bottom and the top remains ugly and incorrect. If a dentist can be turned in for not giving a Medicaid patient the same service as other patients and for being rude and disrespectful to Medicaid patients, clearly providing poorer and uncaring service.
- Or the dentists will not even accept me as a patient.
- They don't take the time to talk to you. They act like you are bringing your kid in for nothing. Just to bring them in. They are nice to you until they see you have Medicaid.
- Different prescriptions. Would not call in prescription. Hard to be seen that is different than regular insurance.
- The lady that helped me snatched the card out of my hand got smart. I was an add on appointment. She treated me so mean. She said since you have Title 19 you will wait for a minute to see if your card will be approved.
- I feel treatment some physicians, nurses or others in the dr.'s office sometimes don't treat you same. My last experience the receptionist was short and the doctor helped someone else before me. The nurse was fine but the doctor hardly spent 10 minutes let alone listen to my symptoms. I was disappointed. My regular doctor is usually good.
- Sometimes the staff at the doctor's office are very rude when they see you have Medicaid. I've noticed this mostly at the new clinic I go to at Mercy South. My dentist office is very good about Medicaid.
- At a doctors office a while ago a receptionist said "do you have your Medicaid card" really loud so everyone could hear. It was so embarrassing.
- Appears to be greater scrutiny of those with Title 19 cards. It would be nice if the office staff could be a little more discreet about the type of insurance instead of shouting it out loud enough for the entire waiting room to hear.
- May have been my own perception. Used Medicaid through medical school for my son and I. So I am aware of what is said about Medicaid patients behind shut doors. Not usually appropriate. I

therefore tend to be a little defensive. Medicaid has been such a lifesaver in a time that I was in great need. Thank you.

- When I gave birth to my daughter, the nurses were so rude to me. The doctor was only with me for about _ hour, when I actually delivered, that was it. I had to have whatever doctor was on call. Never got to meet him until I actually delivered. I was treated very poorly and I think the reason was because I was young, unmarried, and on Medicaid.

- Both my dentist and my daughter's dentist offices (not the dentist, but the other workers in the office) treat us pretty crappy.

- Could not get a cervical treatment medication because they would not pay for it so I never got it. It still has not been treated so chances are when I go back they will find the same problem. I know for a fact private payers and other insurance get in earlier.

- When I was referred to a specialist the first thing he said to me when he saw what my insurance was, you don't want me.

- Some meds are not prescribed because they do not come in generic form. Dental is hard to find on Medicaid.

- Before I was going to my own personal doctor it seemed like no one wanted to help me out especially while I was pregnant because I had a Title 19 card but I found a way to over come.

- I am one semester away from getting my BA and I have been treated like I am stupid, mainly by the receptionists. Many are rude and think just because I have Medicaid insurance, I am less of a person and can be treated like trash. This is not only frustrating but emotionally disturbing. I would not even use Medicaid if I didn't want my 18-month-old son to also receive benefits.

- Asked to reschedule an appointment because we were 5 minutes late. The doctor saw someone else.

- Maybe it's my imagination but I think certain individuals have treated me 2nd class. Not a doctor but several pharmacists.

- While I was pregnant last year, dentist acted like I was stupid and didn't respect me as a person.

- A lot of doctors won't take people on Medicaid and they are rude about it. The list of doctors was given, 80% of them do not take Medicaid anymore.

- My daughter has a seizure disorder. I don't think she's received the treatment that she would get from private insurance plans.

- Shorter visits, put on generic medication.

- The people at the front desk treat you rude.

- I sometimes have to wait a little longer. I have been given dirty looks and some rude comments as well. I do appreciate the coverage I have if I'm not healthy. I can't care for my kids as well. I sure can't afford private health insurance. I bite my tongue when I get the looks and remarks.

- At the eye doctor they said because I wasn't paying I had no right to complain or be dissatisfied with their services.

- They don't spend as much time on me and they act as if they don't make generic medicines that my insurance will cover.
- In my experience, the attitude of the staff at the reception desk changes when they find out you are covered under Title 19. Perhaps it's my perception but they seem to act disapproving. However my health care providers have never treated me differently.
- That is why I switched doctors. I told him I was on Title 19 when I was pregnant and he said fine. I just want to get paid. Sometime I didn't like his behavior so I switched.
- I just felt that me and my son were frowned upon, not by anyone at Iowa City but in Cedar Falls and Waterloo.
- Sometimes the receptionists seemed to look differently at me after they asked to see my insurance card. A few of them would sound stern when speaking back to me.
- By a chiropractor he was snotty towards me a little.
- I feel as though I'm treated as someone who is less of a person when I use my Medicaid. Treated like I'm a lower class than when I had my own insurance. It's hard to deal with. I wouldn't be on this Medicaid if I didn't have to be.
- At the eye doctor at Whylie's Eye Care I overheard the receptionist say to another employee that "oh she's a 19 patient and she rolled her eyes. I will never go back there. I personally believe you guys shouldn't go through them.
- Nothing specific, there just seems to be an occasional attitude from certain nurses and/or doctors which makes you feel inferior.
- At times it seemed like people could be rude because of the Medicaid. It seemed especially true with receptionist when they took your card to make a copy.
- I feel like doctors like to do more tests then necessary.
- They were rude as if I wasn't worth their time because I was getting state assistance.

Iowa Health Solutions

Do you think you have ever been treated differently because you were covered by Medicaid?
If yes, please tell us how you were treated differently.

- Pharmacists would leave me sitting for almost an hour and filling people's prescriptions that came after I did, long after. This happened too many times to be a coincidence.
- I've had doctors tell me to get off public assistance and that taxpayers are tired of paying for my kids. Most people, including my family work for a living and receive only a little help but doctors have assumed we're lazy.
- The stomach pill I use, it takes too much to get okayed for certain medicines.
- #1 most seem to want to choose your care options for you rather than get you to help decide. Example I had a badly decayed tooth went to the dentist, we discussed options. I told him I did not want a root canal. Due to past complications and condition of tooth. But I'd rather have it pulled. So he meanders around in my mouth anyways and started a root canal. Till I realized he was and stopped him. I left his office and later had another pull it. I heard of testing that could determine if a medication would solve condition. Dr refused to order test stated too expensive instead did a more invasive rectal exam which I later found out is less reliable for prostate!
- At times I felt looked down upon as if it was a travesty to accept financial help from the state.
- When we were referred to an ear doctor. When he explained something to you, he treated you like he was explaining things to a moron. You would ask him to explain it and he would tell you he has other patients to see.
- I was at a chiropractor that couldn't treat my condition because of my insurance. There was a doctor in the office that could, but was on vacation. The office never cancelled the first half of my appointment which was with the doctor on vacation and the receptionist let me sit for 45 minutes. When I asked why, she said it was because of my insurance with no other explanation. I walked out. The other doctor called later. The receptionist was reprimanded.
- It seems like some doctors are in a hurry with Medicaid patients and some are very rude.
- Dentist was hard to find for an extraction of a tooth. Long story, bad experience.
- I wasn't treated differently.
- At a doctor visit the doctor offered me free samples of a medicine, and the nurse told him to write a script because I have a Medicaid card.
- Seems some health care staff have an attitude about people on Medicaid. Low class people.
- Simply by rudeness. Also, unable to receive dental care for my daughter.
- Received some looks that med me feel like I was being looked down on.
- When seeing a specialist the lady whom does billing is never nice, about having to get a referral number. She would make me call it in.
- I got the impression I was less important as a patient and would wait longer or was asked personal questions in regard to my health plan.

- I get looks by the doctors. Some act differently when they hear I have Title 19.
- I just felt like I wasn't treated as well for some reason, that has only happened once or twice. Usually I feel like I'm treated pretty fairly.
- The dentist I was seeing at the time, I was first under another insurance and then was switched to Medicaid when I no longer was at my job. While currently under their care and after a cleaning they refused their services to me saying they could not accept my money except for that days service of course and told me if my tooth was not hurting try not to bite on that side until I was off Medicaid and then come back to them. I then had to find another dentist who accepts Medicaid with a tooth not filled.
- When I went to the pharmacy to get a prescription for myself after I handed the pharmacist my card, she looked down upon me, was rude and short with me.
- A rush job or slow care.
- I think people are just nastier to people on Medicaid. They look down on them and assume they are all welfare cases.
- I have gone to the dentist office and when I was going to get an x-ray done, the assistant yelled out that I was probably pregnant because I had Medicaid.
- Have only used dental and had pleasant treatment by staff.
- Well, I went to a dentist appointment and the nurses there were pretty snotty with me. A few days later my boyfriend went in (who is covered by his work) and they were extremely nice to him. So if felt pretty crummy knowing that people with certain insurance get treated differently.
- Local dentist offices I contacted in regards to Medicaid coverage were for the most part extremely unwilling to accept Title 19. Receptionists were rude and abrupt when asked if their offices accepted Title 19. To my knowledge only 2 or 3 dentists in town accept Title 19 and all are at quota.
- I have medical and dental through my work, also this is my primary insurance. Now the last couple times I had to go to the dentist to get work done (root canal) Consultec (Medicaid ins) did not pay one bill. So my dentist had to pretty much eat what they needed to pay. The second time I went, sending statement after statement and me having to call Consultec, 6-7 months later they finally paid the balance on that. When I've called my dentist since I can sense a difference. Therefore, I am not too happy with my dental coverage. Usually, me and my son are sent reminders from my dentist of our yearly check ups. It has been over a year and we have not heard from them. I feel maybe because of our dental coverage and the problems and hassles they've had with Consultec.
- Dental people don't allow many Medicaid people in their office therefore I have to go to one that is rude and causes me pain.
- When I called to find a doctor the assistant would nice and immediately helpful, but as soon as I mentioned Title 19 they would change. They suddenly acted like I was trash and unimportant. My current facility is very good to my daughter and I. They treat us with respect, but the facility is meant for Title 19 people.
- At the emergency room they place a large bright pink XIX sticker on the file. People at certain pharmacies are very rude when given the card to look at.

- My family dentist refused to see me when I didn't have private insurance anymore.
- When a doctor ask you are you on a Medicaid card and your answer is yes they seem to get upset and look at you different because you don't have the money to pay for it.
- There are certain things you can buy with Medicaid, like certain glasses and with Medicaid you only get generic medicine.
- I think doctors are a little shorter and not as thorough when you have Medicaid and you have to wait longer to be treated.
- I think some doctors try and make things out of nothing so they can get more money.
- Like I didn't feel by my doctor's nurse that I was good enough or whatever and my son too. My whole family feels that way by his nurses.
- There are certain doctors I have run across that do a poor job of treating illness due to the fact of Title 19 insurance.
- I went to medical association in Clinton Iowa and was having neurological problems. I wanted to go to IA City and see a neurologist. He finally did an MRI and then laughed when he told me it wasn't a tumor. He disenrolled as a MediPASS due to my uncooperativeness because I wanted a 2nd opinion and he told me I did not need to see another doctor. I ended up in IA City after calling MediPASS and got a direct referral from them.
- I don't feel that I get as much respect as the paying customer do. Some times I have been made to feel like a low class citizen.
- Refusal of service because of past due bill.
- The doctors make people wait longer, try to get through with you faster and just don't care. The doctors I've been to are jerks to me because of my insurance. The nurses are mean and treat me like a baby. I avoid going to the doctor even when I need to go because of this treatment. My mother signed me up, but I will be getting a new health care plan in January. Medicaid makes me feel like a dummy and I hate it. I just needed help, so I applied. I wouldn't have done it if I knew how I would be treated.
- I was referred to a specialist and I went and waited 1 hour and 55 minutes to see him and he spent 5 minutes with me. He acted as if he didn't care. So I had to go back and ask my primary doctor to refer someone else.
- Where I live there are almost no dentists that accept Title 19. The ones that do, do not accept any new patients, but the vast majority does not accept Title 19. Why?
- Like I was poor.
- The people at the clinic that I go to seem to make a big deal when you show them your card. Every month they have to copy it and they make you wait in line a little longer so they can wait on people who don't take so long.
- The doctors don't really care about your health and they don't bother to listen to anything you tell them. I had a big problem with my last doctor. I would tell him my symptoms but he would just blow off everything I told him. He more or less told me it was all in my head and I was fine.

- Tests can only be run a few times a year so doctors cannot always run them because of this.
- They feel like they are doing you a favor by even seeing you. And some of the personnel think they are paying my bill out of their own pockets.
- The only dentist that accepts Title 19 is a 100 miles round trip from home. I've told the 800# that the doctor they have on my card will not see me but they won't change it.
- I felt like they didn't care for me because I was on Medicaid.
- They looked at me differently. When the words Title 19 are used, they seem to kind of frown down on it. They still treated me equally and with respect. I kept my same doctors and dentist. They were willing to let me stay since we know each other and I have gone there for years. I'm lucky to have such a great community with wonderful doctors/assistants and dentists.

Coventry Health Care

Do you think you have ever been treated differently because you were covered by Medicaid?
If yes, please tell us how you were treated differently.

- That they be more strict on people with the lower or should I say Medicaid. I really can't explain it, you might just have to wear the shoe, but don't get me wrong, your medical is great for my son and myself. At the emergency room you really can tell they take longer to get to you, also they be quick to check and give you what you need and send them on their way.

- It was back in 1987 when my daughters were little that a doctor at the Cedar Falls clinic gave us expired antibiotics for my daughter and treated us rudely.

- I have had many problems at Covenant Pharmacy get prescriptions. Sometime they say Title 19 real loud so other people can hear and sometime they are rude to me. Also my 8 year old son has a problem wetting at night and they pharmacy said Title 19 would not cover the prescription. I could not afford it and he has yet to get it.

- One time I went to the emergency room when I was 8 months pregnant and I had chronic bronchitis. The doctor ordered some tests and an ultrasound but when he found out I had Title 19 he said they couldn't do the testing for me.

- HMO's have to decide whether tests are important enough. My mother had a HMO and if she was not denied I would still have a mother. She died because a test was not done so now I no longer have a mother.

- Dental care, some of the better dentists will not accept my insurance.

- You are always looked at as a system sucker when you use Title 19.

- Having to pay up front, not being able to get certain types of services done. Wait seems longer for appointments.

- I was treated different because I am on Title 19, because I go to the doctor so much. I had to wait 2 hours one day at a clinic, because the receptionist said they thought I had left. All she had to do was call my name. Then my appointment was not in the computer one day. I really need to see the doctor that day. The last time seen at this clinic seems as if I was seen after everyone was waited on, not by appointment.

- It seems that there are some hospital staff that are often rude to Medicaid patients. The manor in which they treat patients are short and sometimes talk down. May I please note this has only been my experience on several occasions and at certain facilities? This statement isn't meant to be a generalization.

- Staff are rude. I've worked in doctor's offices before and even the people I worked with would talk about the people with Medicaid.

MediPASS

Do you think you have ever been treated differently because you were covered by Medicaid?
If yes, please tell us how you were treated differently.

- I feel office personnel rather than the actual doctors or practitioners treat you different. I don't have a big problem with how I am treated at my doctor's office. All humans could use a dose of common courtesy if you ask me.

- When trying to find a dentist in my town it was like I had a disease and they were afraid to come near me.

- I was rushed out of the room. I was in the hospital after my baby was born. Signed papers at 12:00 wanted me out at 4 pm. I was not ready and felt rushed.

- I feel like when I show my card, that I am being down graded because I get help from the state. It makes me feel very poor and ashamed. Just my feelings. I guess I get treated fairly.

- Some people treat you as though you're trash. Most think Medicaid is for the lazy and disable. You get frowned on for needing the help.

- I feel the doctors make us wait longer in the waiting room and the examination room than people with medical insurance.

- I was in need of a specialist for aneurisms on the brain. The Rochester, Mn turned me down, they said they didn't have enough time but my doctor referred some other patients there. Some on Title 19 got turned down. I don't think that's right even when it's a life or death situation. Still it's not taken care of.

- You wait a long time in the emergency room, over 1 hour.

- I want more tests ran to find out why I am having headaches and see a different doctor and the one I am seeing now won't allow it.

- I sometimes think when you call for an appointment you may get in sooner if you have better insurance. Also, my regular doctor is wonderful, but when I have had to see other doctors they have often treated me disrespectfully and like an idiot because of my insurance type.

- Treated not as friendly by the staff, just told to fill out any forms needed, take a seat. Someone will call you soon/which usually means 30-60 minutes later. And they always have the same look of disgust and distrust as they are telling you this.

- I have had receptionists ignore me over someone who has private insurance. I have also got the feeling that receptionists (some) look down on this insurance. My coverage may be the same but the reaction is not.

- By the pharmacy at HyVee it's not very good. And at the Horizon Dental office in Des Moines they are pretty unfriendly and not easy to work with.

- They rush you in & out and don't take the time needed. But anymore most doctors (of any kind) don't take the time with you that they should.

- Because dentist refuse to take Medicaid which I don't think is fair at all.

- I feel my appointments were not made quickly enough. If I called and had a question for the nurse, one receptionist would be very rude. She also was very rude and was obviously looking down on me when I would come to the clinic.

- I just believe you're treated better period.

- I was very unhappy with my OB doctor. Many situations occurred that I feel wouldn't have happened in other circumstances.

- A doctor who I had been seeing refused to see me because of my Medicaid. They act like you are more underneath the rest of the patients. Almost like they don't care as much for your health than a patient with regular insurance.

- If you need a service they will say well if you had regular insurance and not Title 19, we could do the procedure. But you can't have it.

- My son was refused an immunization because we received state aid.

- Sometimes you feel like they are looking down at you. I have a job, I just don't make that much. It's really small when you think about the help you're receiving you can deal with how you feel.

- When I went to the eye doctor the same time my husband did, they made me wait 2 weeks to get in yet he was able to make 2 different appointments the same week he called in and we wanted the same thing done. The lady told him they had any time that week open but yet I couldn't be seen for 2 weeks and now my Medicaid runs out November 1 and they can see me November 5. A lot of good that does me.

- About the second check up I had with my 1st healthcare provider, there was a misunderstanding and they told me they wouldn't help me. I was 2-3 months pregnant so I was mad. I had to explain to them that I got a referral from the doctor I was assigned. When I already told them once on the phone 1 week before this. Then my baby had thrush and I wanted a nurse to call me back and the receptionist said she didn't have to. That is when I switched doctors. They were terrible.

- DR. doesn't exam me for my problems, just gives me meds for what she thinks is wrong. Doesn't listen to me about anything I say.

- When getting meds it has to be called in to see if they can refill some of my meds. I had to wait till my doctor got back from vacation to have him change the dosage to as I needed, and it was 2 weeks I think I went through withdrawals from not having them and that can be dangerous.

- Not the doctor but some nurses.

- A specialist refused to run an important test on me (that I needed) because I am on Title 19. He basically said I wasn't worth it, because taxpayers would pay for it. It was a life and death situation and he didn't care. So I saw a different specialist who did do it.

- A time or two in the past it seemed that there was a slight negative reaction, but it may have been my own misinterpretation/preconceived expectation. I've had no problems in the last couple of years whatsoever.

- I think I was treated differently because I was not giving them money for my payment of the visit. And the way they look at me, like, oh this person is a Medicaid one. In another words, you're a welfare patient, and not a regular paying person.

- On the Medicaid I have to wait long to get in to the doctor. When I had private health insurance it was much sooner to see the doctor. But I don't go to see doctor unless I really have to. It costs too much for just an office call.

- Given not as good care or as many services are available to people who have private insurance.

- Not all doctors or dentist accept Medicaid, which can be a problem at times.

- I've been made to wait longer. I've been talked to in a curt manner by the receptionists at my doctor's office.

- If feel that we have limited dental treatment. I had a root canal done a year or so ago. I wasn't allowed to have a cap at that time. I have since lost parts of the tooth. I saw my dentist a few months ago and he said now they will allow it. I haven't gone back to get one. I have brown spots on my teeth, that look awful but aren't cavities. I would like them removed and some of my teeth filed down but am afraid to ask if it is covered. The problem may be with my dentist. I tried to change dentist and could only find one who would accept MediPASS. I didn't like the area of town it was in so I stayed with the one I've been with for probably 20 years. Thank you.

- When certain meds or procedures need to be done they don't do them if at all possible.

- The dentist my boyfriend goes to tried to get away with using less Novocain. The dentists want very little to do with us.

- I was bumped out of the computer system a few times until I finally caught on. I had a lump in left breast and had it surgically removed. This was not covered by MediPASS. The lump on my right was not considered malignant after a mammogram and visit to specialist but resulted in mastectomy. I was also knocked out of the system (said not covered by MediPASS) when my daughter was tested for HAD but it was caught by the clerk.

- I had private insurance and Medicaid at the same time. When one wouldn't pay the other was supposed to. Neither would pay for some care I had and since I can't pay for it I have been treated as if they do not have time for me. The problem is still being argued over for the last 2 years. Wal-Mart insurance won't cover it and Medicaid says that they should and now no one is paying for it and they are talking about turning it to credit bureau.

- Because they treat anyone on Medicaid or low income differently cause they think you are lazy and will not work. I will work if I get a job.

- Not necessarily by doctors or staff, but by people in general. Give you looks when paying for prescription or not having to pay at doctors office.

- An appointment with an eye doctor's office in Albia The nurse was rude after the eye exam. Told my mother and I we could always take the results to the other eye doctor in town to get the glasses made. Acted like we were wasting her time. My mother wrote the doctor a letter telling him us girls were on MediPASS because she was a disable veteran and didn't appreciate the way his nurse talked down to her like she was just another welfare mom. Us girls chose frames which were not covered by MediPASS so all together with what MediPASS paid for the exam and lenses and mom paid for the frames we had spent more then $500.00 in his office, and there was not fine line between professionalism and just plain rudeness. Regardless of who was paying the bill, mom wrote the letter to him as soon as we got home. A week later when we picked up the glasses she felt as strongly about it as when she wrote the letter so she gave it to the doctor. He asked mom to wait around to talk about it, but he was pretty busy so mom told him her phone number was on the bottom of the letter if he had any questions. He never called. We also changed

dentist because he also acted as if we were wasting his time. As for medical care we get absolutely the best care possible from our family doctor. Great lady, great doctor.

- All doctors do not take the type of coverage I have. It is very hard to get a specialist or a dentist. It is a horrible thing to turn someone down for any kind of treatment because of insurance or any other reason.

- I think that because people who have Medicaid you get the cheaper things the short end of the stick. For example, when my child went to get eye glasses the Title 19 glasses didn't look as good as the John Deere insurance glasses. I think it should be the same.

- Because if you're on Medicaid people know you're on state assistance and I work at a fast food restaurant and those kind of jobs don't offer insurance unless in management positions. I also work part time for the county and they don't offer insurance at all. It is just embarrassing and then your medical cards are paper and not plastic that can't be updated monthly.

- When I was at the dentist she kept bringing up my age. The fact that I had a child and was on Medicaid.

- I am to go straight back to sign in, instead of at the entrance of the clinic like others. Then from there I have to tell the receptionist I have Title 19. She takes copy of the card and gives me the slip to give to the doctor. If I had regular insurance all that procedure wouldn't be necessary. The employees would take care of it.

- I think it is different because dentists wont take Title 19 most of the time but they will take other insurance.

- Some places look at you as if you're not good enough and they don't know what kind of situation you're in and I don't think they should do that. If they can't help themselves, maybe they shouldn't be in the field they are in.

- Doctors or nurses seem more rude either because I have it or because to them I'm just another statistic because of the reason people think you have this kind of insurance.

- Attitude of office personnel snobbish, short, somber expression, and rude. I've had excellent health coverage from employment to no coverage at all and there is a tremendous difference in the way you are treated. Not for all but the few who do, do it very well, to belittle or make you feel worthless for using Medicaid.

- They treated us like we were not as good as someone with private insurance.

- No dentist takes it in town. Have to call doctor to get permission to go to ER for injured leg or arm. Have to force billing department to write in file that I'm on it. Have to provide complete pay information each month or else lose it along with FIP (if you have it). Have to go through too much red tape to change doctors if you don't like him or her. Have to re apply for it if you get married or add a child. Must pay minimum for things like chiropractic if over 18. Thank you for your concern and sending this questionnaire. I am no longer in need of your service. I have other insurance.

- Finding a dentist was difficult. My chiropractor is having difficulties because of too many appointments due to calendar year which he figured to be ok, but Consultec said it wasn't.

- We only get amount of care and Medicare.

- I went to see a surgeon he asked me what kind of insurance I had. I told him that it was Title 19, he said oh, asked a few more questions, then left the room. I heard him tell the nurse that I was on Title 19, and said that I shouldn't be there and that I was taking up too much of this time. Then said that my problem was so small that it was a shame that people like me used the insurance for just anything, then laughed at me.

- I felt I didn't receive all the treatment I needed and felt like I was just another number in a long line of others who can't afford health coverage.

- I felt I was treated differently when giving birth to my daughter, just because I was on Medicaid, the nurses were telling me about all these programs that I could be on. I was married and wouldn't have qualified and felt they just assumed that because of my insurance I was poor and needed all this assistance. I was very upset by this.

- Discriminated against I felt because I have this insurance.

- Dentist referred my son to an orthodontist but not one in town will accept any Medicaid patients.

- My son acquired a disease called PTI and I feel that if my family would have had private insurance they would have taken his case which could have led to death a little more seriously.

- Some doctors look down on you because you're on Medicaid. The doctors think that we don't make a lot of money so we don't have to be treated as well as the people that have a private insurance plan.

- Doctors tend to not want patients whom are on Title 19. Also, they seem to put people on the slow side of the appointments meaning we end up waiting longer and waiting days longer I believe for appointments.

- I had a broken arm and the doctor I was referred to was upset that he had to accept my Title 19 card.

- There's an attitude doctors have about people on welfare. Most of the time all of the doctors I have seen have been very nice and helpful. But there have been those that have treated me poorly due to the fact that I'm on Medicaid/MediPASS.

- The receptionists at the doctor's office were rude when I lost my other insurance and got my current health plan. I sit and wait forever while people who got there after me went in and came out. When I complained I was then taken in and treated.

- Dentist office refuses to accept Medicaid for braces for my son. Only problem I have. They say they lost too much by accepting it.

- I think I was judged by it. I think that is why I have been switched from doctor to doctor without my consent. Sometimes I don't know who I am going to see when I make my appointments.

- Sometimes you don't get the medical attention you need. It's like sometimes they think it is all in your head.

- Health care providers have a tendency to rush you in and out of their office when you are on Medicaid.

- Denied certain test due to Medicaid refusing to pay for them.

- Not so much the doctors but by the office staff in general. My pediatrician is excellent with my kids. My doctor is okay.
- Not being able to get treatment here in Fort Dodge, we had to go to Des Moines.
- Most doctors are locked in on the amount of Medicaid patients they want so I have been declined several times. I would like to change peds doctor, but since my other choices from Medicaid are all full I am not able to do so at this time.
- Part of being a Medicaid recipient is being looked down on by staff, except doctors. We all know this and accept it as being part of the price of health care. It's really not a big deal.
- The doctors sometimes will tell me there is nothing they can do because of Medicaid. If I were on private health insurance I would be treated better.

APPENDIX D:
COMMENTS FROM THE CHILD SURVEY

The following are comments written on the back page of the surveys to the question:

- "Please tell us if there is anything else you like or dislike about your Medicaid health plan."

The comments are grouped according to the health plan in which they are enrolled. They are also grouped according to the topic about which they are written (e.g., administrative issues, dental issues). The comments are presented as written except obvious spelling errors were corrected to make them easier to read. Some comments were split up into the appropriate topic area unless this would have changed the interpretation of the comment.

John Deere Health Care

Administrative

- They need to explain more about your options you have and also need to send information out about certain health and dental plans. We receive HMO John Deere Health care plan.
- There is a lot that I don't understand. Like I choose a Dr. and is getting billed for it that was on the list that was provided for myself and children. It's really hard to understand some of the policies that are referred me to myself in the booklet. Always put on hold when I call to ask questions. I really don't understand the procedures at all.
- I would like to say I did call the 800 number about my oldest child and didn't get the answers to my questions about orthodontist appointments. I was told to call the orthodontist and ask them. I thought that the 800 number should know about the cards they are giving out to people and what they can and can't be used for.
- I have asked for information about her asthma and constipation, could you please send me information on that?
- John Deere sucks. Keep not paying bill. Doctor said child need treatment.
- I really had problems when they gave me Iowa Health Solutions. It would take them 6 months or more to pay a bill.
- The unresolved issue that I have is regarding a dental visit back in August of 2000. Somehow our records showed that at that time, we were covered by Blue Cross/Blue Shield. Therefore you would not pay on the claim. I did get a letter from BC/BS stating that we did not have that coverage any longer and the effective date was included, but still Medicaid has not helped me to pay any of this old dentist bill.
- I receive bills for months after care for the part that Medicaid hasn't paid.
- Recently my child and I were visiting in Las Vegas and my child became ill. I went through the yellow pages and finally came up with a quick care or urgent quick care after driving quite a way to the clinic we were told to wait and the receptionist told me she had no idea how long the wait would be. Some people told me they had been waiting 4+ hours. I called the 800 number on my child's card and explained the situation and asked her to point us in the right direction. I was then told she could only go on referrals in Iowa and had no list of dr's in the Vegas area. So I went to the emergency room.

- I really haven't had any problems at all. It runs smoothly. It usually runs with the DHS if there was a problem.

- Dislike having to show card for each transaction. Dislike having to wait for card to come every month. Dislike having to depend on DHS to properly enter income and child care deductions to remain eligible for coverage. They screw up and don't seem to care and are not concerned about rectifying the situation and don't respond in a timely manner. DHS worker doesn't follow through and do what she said she would do. Dislike they will not correctly enter my child's name like there is no co payment for child.

- The office in which to change any paperwork is pathetic.

- Dislike going through child support. I don't want to collect it. I don't care for it. Yet I still have to fill out paperwork.

- Written notice when my child's doctor leaves the practice and another doctor is assigned. Would be nice. Dislike always having to take card. A direct monthly update from Title 19 to the doctor's office would be good.

- Need more info in Spanish.

Primary Care Providers

- I don't like it, that they want you to move from the doctors that you have used for a long time to someone new because they have decided for you!
-
- The plan is great. The doctor doesn't communicate well, only concern.

Referrals and Specialists

- I don't like the way they've changed the program. With the different doctors, referrals, etc. it's so confusing and less satisfying. I wish they would change the program back to its original way. Without referrals etc. seems we don't get the adequate or quality care needed at times.

- My son has cystic fibrosis which requires him to have regular 3 month visits to pulmonary specialists. I have to have a referral from family doctor for these visits. I was dropped from family doctor after 14 years as patients for slow pay on bills for other 2 children with no healthcare. Therefore no referral. I have since found a new doctor and going through the paperwork to switch. But my son is 2 months past specialist visit. Numerous occasions of difficulty getting visits approved for specialist by Medicaid. Doctors have fought and wrote letters on my son's behalf to keep his healthcare as needed.

- When I first started I was able to decide for myself who we saw, we now have to check first to see a specialist of any kind even for a second opinion. I believe that I should be able to take my children where I see fit for their health care needs.
-
- Please add more specialists. The only dermatologist I can see is Dr. X. John Deere and I am very dissatisfied with his bedside ethics and as a dermatologist period. I need a specialist and refuse to go and see him.

Prescriptions

- Not allowing doctors to prescribe the kind of medication they know will work on a child's medical condition. They end up having to prescribe all these other medications which will not work before they can get to the right one that does. It wastes a lot of funds having to do things that way. And because of the ineffective medicines the child does not feel better until they are on the correct medicine. Being ill is bad enough, prolonging it because of having to observe

guidelines is worse. You are making it harder on the doctors to treat their patients and making it harder on the patients by prolonging their illness.

- Most of the prescriptions sometimes aren't covered and then I have to pay for them because my son needs them.

- Child has had an infection on foot for 6 years. She cut her foot in Mexico and this caused the infection. We tried everything we could for 6 years. Nothing helped. Then we put her on Lamisil, prescribed by her doctor. For it to work you need to be on it at least 6 months. At 5 months her medical refused to cover the payment. So all the time and money were wasted. They now will let her get the next month of it but so much time has lapsed she need to start it all over again. And if she gets it and needs other medications the other medication are refused because she is on Lamisil. Extremely frustrating.

- There are some medicines I can't get for my son, allergy meds. But we are working through this.

- My son was unable to get necessary allergy testing. Often his pediatrician or specialist will prescribe a medication that they know will work based on past experience. We've been with the same doctor for 5 years. We are required to try what we know are ineffective medications before we can have the one that we know works. This is required by our health plan. This is at the expense of my child's health cover exposure to ineffective antibiotics, antihistamines and results in the additional unnecessary Rx expense. Please feel free to call me for additional comments, as this survey did not address all areas. I know you can't cover everything. Thanks.

- I went to have a prescription for my child and couldn't get the script because it hadn't been long enough.

- I dislike how they always substitute the medication with generic products all the time. I feel they should stick to whatever the prescription says.

- It won't pay for some real good medicines.

- I am upset that Medicaid does not cover all medicines subscribed by my child's doctor. I had to pay out of my own pocket a couple of prescriptions (Zyrtec and special cream for rash). This took away from feeding my child or providing for him. There are reasons why a cheaper medicine may not benefit my child, because it's not the same medicine. The incident with Zyrtec is very upsetting and all other medicines. This is wrong. It treats those who have less wrongly.

<u>Dental</u>

- We need more better Dr.'s in Muscatine Co. and dentists are needed greatly.

- Need more dentists that accept Title 19.

- The dental is non-existing because nobody takes Medicaid, which is horrible for the kids and adults. My son was sent to a specialist in Clive, Iowa twice and the office staff and doctor were very rude and had no desire to help because of our insurance and made this statement to me.

- I wish I could get a list for dental care dentists. My dentist doesn't even know if they accept the medical card Title 19.

<u>Mental Health</u>

- I'm satisfied with the Medicaid health plan. We're having difficulty finding mental health appropriate for his condition.

<u>Vision</u>

- In general the program is wonderful and so is our doctor. Thank you very much. We've only had a few problems. Our older son who is also covered on Medicaid needed new glasses, his

prescription changed (doubled) in less than a year and he really couldn't see well at all. Our health plan wouldn't cover another check up for him for several months and then the doctor had to apply for an exception for him to get glasses and that took another 6 weeks. He went without strong enough glasses for about 6 months.

Discrimination

- Sometimes I think my daughter doesn't get as much help and attention from doctors as paying patients do. My baby has been to the clinic so many times for other problems besides shots, and they always let her see a nurse, not a doctor. She has only seen a doctor twice since she was born (Dec. 2000). I don't think she gets to see the doctors as much as paying patients do.

Positive Comments

- I would just like to say I am very grateful I have this service available to me and my children. I don't have medical coverage for myself, therefore, I can't go to the doctor. However I'm grateful the children have the plan. There were times when the children didn't have coverage and couldn't go to the doctor because if even physicals and such. Thank you for making it possible for them to have the medical coverage available to them.

- November 2001 is the last month we will be eligible and it has been very helpful financially. We really are glad it has been available to us in our time of need.

- I am very thankful that they were able to help us at a time when we needed it. For we cannot afford health insurance for it is far too expensive. And it pleases me that they stepped in and helped us at a time I needed them. Even if they don't cover adult care, my children's health is very important to us.

- I like that through the John Deere health plan my child is able to see my choice of Integra health doctors, we think that her doctor Dr. S.B. out of the Ankeny Integra Clinic is a godsend to our family. She couldn't be a better or more personable doctor.

- I am very happy with the health plan because we have a good doctor. We had bad office help in Des Moines, so we changed doctors. We are treated a lot better now.

- I like the medical care and medicine otherwise I would just have to stay sick.

- We have been covered under all doctors we have seen, which is especially helpful if we can't get in to our regular doctor. Her dad is also covered, so this reduces a lot of stress we would have to face had we not had this health plan.

- Just a very big thank you for providing my child with this coverage.

- I appreciate this health plan very much. Thank you.

- His doctor was assigned to him essentially (pediatrician) and I did not like him but we stay with him because he knows my son's asthma problems the best. His behavioral coverage and doctor are excellent!

- My son needs allergy shots before he received them he could not be outside during PE, which the PE teacher didn't like. The allergy shots helped. He receives counseling for emotional problem. The state worker helped my son a lot I'm very thankful for the help and health care he gets. The clinic we go to is great. Every one there is very nice & helpful.

- I am very thankful for any help we can get. Thank you very much.

- I am very thankful to have it. My son is the most important thing in my life and his health care means the world to me. Thank you.

- We use this health plan as our secondary for our daughter and it is a wonderful program. I don't feel that she has ever been discriminated against by any providers. We are very fortunate to have such caring doctors in our area. They are exceptional. Thank you for the opportunity to express my opinion about this plan and our doctors. But most importantly thank you for the support given us by this medical plan.

- I also carry my own primary insurance plan for my child. I'm not sure if anything such as prescriptions or specialist would be a problem with Medicaid. But if there were problems my primary insurance would take care of them.

- I have been very pleased with it up to this point. Thank you.

The Survey

- I need to know what does what level of schooling you have had has to do with this survey? Also do your people think that everyone who gets a Medicaid card is stupid? You asked the same questions in a different way. People aren't stupid and you people in the higher world really need to quit treating people like they are.

Comments on Multiple Issues

- I think this survey is helpful but I think the survey really needs to be about Medicaid not the doctors we see on Medicaid. I have had many bad experiences with Medicaid, such as my son's plan suddenly being changed. This caused me to have to find him a new doctor. Or maybe you should ask questions about how DHS caseworkers treat us, and everything we have to go through to receive our benefits. The other thing that disappoints me is that other than when I was pregnant, I have never qualified for Medicaid and I don't have insurance available through work.

- I like the fact with all the plans you are able to choose which Dr works well with you and your child. Thank you for being concerned about my child's well being. Need for more medical providers.

- We need more better Dr.'s in Muscatine Co. and dentists are needed greatly.

- We love the children's medical doctor and the care they are given. We have had no problems with eye care professionals either. Dental care was a nightmare! We have finally after 2 years, found a good dentist that would take us. Our first dentist pulled one of my son's teeth without talking to me first, filled 2 of my daughter's teeth without deadening the area first. My children were very scared of the dentist. Plus the assistant didn't wear gloves on the last visit. We never went back! It took a couple of months to find a new dentist that took Title 19.

- Would like to see Child's health care providers get Child in to the doctor same day if possible. And to have Dr's, receptionist and nurses treat me with more respect. Also to do things on a timely manner. When something is talked to about concerns, follow through. Also I receive mixed messages from Dr's and visiting nurse.

- My biggest problem is the time when I called & scheduled an appointment I expected my child to be seen within 15 minutes of the appointment time. Having to wait 3-7 days to get in for a routine visit is no problem but when my child is ill I won't wait 3-7 days. I find going to emergency is better even when emergency staff have critical patients to deal with. Your wait time is at least an hour shorter than walk in time or making an appointment at the doctor's office. Patient's time is valuable too. I don't get paid as much as the medical field so I have to work longer hours. Patients need to be considered more.

Iowa Health Solutions

Eligibility and Administrative Issues

- I dislike how I didn't consent to being a HMO patient, they took it upon themselves to give me that.
- I have the red one Medicaid. I like having the green one.
- Don't really understand it. I thought it was just Title 19 and no difference from mine except his card was red and mine is green.
- Lack of coverage when away from Des Moines area and no way to be reimbursed for care necessary away from the area.
- I dislike because they don't pay for all of your doctor bill on your Medicaid bill.
- Have not received a Medicaid card since child was put on foster care. Worker said just use old card number but Dr office will want new card?
- I dislike all the trouble to get my children to be seen out at Iowa City with a preauthorization number that I have to give them to put in so that the bill gets paid.
- Last month I didn't receive their cards and they needed to be seen the second day of the month and I didn't get the card till the 5th.
- Title 19, I always have to keep track of my sons Title 19 cards, because nobody has the time to do it themselves. I feel that if I don't get his cards at least I should at least get a letter in the mail that I should show his doctor or hospital, what to do, or at least what needs to be done so that I don't get the bill.
- I told my case manager I received my re-enrollment forms late and under the circumstances I had to wait for my husband's paycheck stub copies. I would not have the forms in on time before the cancellation. Ms. S. told me this was fine, send them when I could & she would process them.

Primary Care Providers

- Tried to find a new doctor since my twins out grew pediatrician. Have not found one. Wasn't happy with the last 2 doctors. I don't know where to go if we need medical care.
- It is really hard to get in to a doctor if you have not seen him or her before or you are not a current patient. I have been told several times that the doctor is filled up or is not taking any more patients. I feel this is a big problem, because at one time I could not see a doctor because of this problem and was not allowed to see another doctor out of my county.
- Doctors were very impersonal to my sons and I.
- I just wish some Dr's would listen to you and you know how your own kid is, they don't. What I love is when I tell them so. When I am right and they were wrong. And I don't like a doctor tell me how to raise my kids.

Prescriptions

- When a prescription is ordered and it's too expensive we have to wait a day to get it approved.

- The Medicaid plan does not seem to take allergies and the health problems that can cause seriously. Since my son has not had his prescription for allergies we've had far more congestion, sleep trouble, sickness, and down days. We have been very fortunate that asthma has not been a bigger issue. We really watch his environmental surroundings to try and help with these difficulties, but things were simpler when he could take the prescription.

- Everything would be all right if Medicaid paid for babies' Tylenol. I am always told that won't cover so I am stuck with a fussy baby after his shots.

Dental

- My child only goes to the doctor for a cold or bellyache. I just wish that I could find a dentist that would take Title 19 and not act so stuck up. It's not right. I need to go and so does my daughter. I would like to get her teeth cleaned.

- It's very hard to get dental care. The ones that take it don't anymore or they have their limit on the number of Medicaid patients they can take and they make you feel like you're not as important as the ones who have better insurance or cash to pay them. They say Medicaid doesn't pay them enough and it's not worth it. So how can we keep up our child's teeth? Orthodontic care is worse yet.

- I was disappointed that my daughter needs braces on her teeth and it took 5 months for approval from insurance company.

- My children haven't been to a dentist in years. The county of Muscatine does not have one dentist that takes Medicaid for services. My children's teeth are rotten, and they endure constant pain caused by cavities that could be prevented. I am 30 years old and will have to have false teeth soon because I can't even get mine cleaned or fixed. The closest facility is 1 hour away and I like many other low-income single mothers, cannot take off work to get there, or don't have any transportation for that far away.

- Dental, dentists in Muscatine do not accept it.

- Dental coverage is probably the biggest problem. We choose to take our children to a non-participating provider and pay the fees out of pocket because the only Medicaid dentist in our area is rude and judgmental. A wider choice of dentist is needed. Thank you.

- I do have problems getting my son to a dentist and I don't think because I owe them $42 that should stop them from seeing my son. He needs to see a dentist he has 2 dead teeth because of a baseball accident. I would appreciate some help.

- I wish there was a Dentist in Muscatine that accepted Medicaid. The closest one is Davenport which makes it difficult to get off work and take the kids out of school.
- It is hard to find a dentist that will accept a medical card and they need to have a list of dentists that do so people wont have to call and be humiliated asking receptionists if they take the cards.

- The fact that dentist care is not approved like health care.

- I think it is hard for others to find a dentist. We do not have one in Story county that accepts Medicaid. I tried to find one when I was pregnant and had to drive 30-40 minutes, so I wasn't able to do that. That maybe a concern for parents with older children.

Discrimination

- I don't have many problems at all. Of course we have the discrimination for welfare participants but that is to be expected.

- People are very rude when you say you have HMO. You're looked down upon. No dentist wanted to see me and my family. One nurse even said, " I can't believe how clean you guys always are". What? Are all HMO patients dirty? We are people too. We have feelings. We deserve just as much respect as the next guy.

- There is often an underlying disrespect for people on Title 19 Medicaid. I had real insurance for a while and was very amazed at the difference in the way I was treated.

- Get help that's real. The card keeps us from getting great help or medication.

Positive Comments

- I really appreciate having the coverage for my child. If it weren't for this she would have no coverage. Thank you.

- I am very satisfied with Medicaid. Thank you.

- I'm grateful to be able to have this medical coverage. Cost wise, I'll not find any other insurance coverage as good as what I have now. Thanks for being there for all of us.

- I'm very satisfied with Iowa Health Solutions as the Medicaid health plan for my child.

- Nothing. It makes a difference when you could get Title 19 cause when you don't have it the kids suffer.

- We no longer qualify for the health plan. But it helped us through a very hard time. I hope the program continues.

- I told my case manager I received my re-enrollment forms late and under the circumstances I had to wait for my husband's paycheck stub copies. I would not have the forms in on time before the cancellation. Ms. S. told me this was fine, send them when I could & she would process them.

- I feel it has satisfied all my child's needs. Currently and hasn't been hard for me to access.

- Is a good plan!

- Nothing, it satisfies us very much, and is very reliable for my child. I am so thankful for their help they have given to my child. Thank you so much.

- It has really worked for our son. I'm so glad he was able to qualify. We could not afford his surgery or his medication.

- Excellent plan. Very happy that my daughter can get insurance because I can't work full time due to college.

- When we moved here from Illinois a year ago we were looking to get him on something like Kid Care. The medical card has been really good to have and the doctor that we heard good recommendations about just so happened to be on the list. Dr. S. F. He is very good with our child. Our only difficulty was not getting financial papers in on time and they discontinued his eligibility, but it was soon cleared up.

- I am very pleased with the program.

The Survey

- Please send the questions in Spanish.

Multiple Issues, General Comments

- We really like her doctor, Dr. S. He is friendly and obviously loves kids. He makes us very comfortable with her care. We wish that the people at DHS would take more time to explain Medicaid to us.

- I didn't appreciate how the HCHC lost my child's medical card at one visit. Then argued with me about how they gave the card back to him in the room when I was with him. Regarding J, the receptionist, with conversation on the phone. She was very rude to me. Otherwise there has been no problems except for dental too far away.

- I find it incredibly annoying that we are required to show our Medicaid card at every visit even though we are in the computer and the clinic has easily available verification of our eligibility. We were charged more than $500 for services which should have been billed to Medicaid. When the clinic finally corrected their error we were refunded a portion. However the initial outlay of capital was difficult.

- I wish there was some kind of health plan that would help me with the expenses of my prescriptions. I am now and have been experiencing post partum depression and have been given a prescription for Prozac for an entire year, due to my problems of crying spells, anxiety attacks, tiredness, and complete lack of motivation to care for myself. I received help from Medicaid for the first two months worth, which did wonders for me, but now I'm back where I was because I could not afford to continue treatment without insurance. The generic brand still costs $70.00 per month which is not affordable for me and income status. Please consider a longer time of eligibility for mothers such as myself who could greatly benefit from an extended program or at least a prescription card plan allowing discounted refills of the treatment required when approved by the physician. Thank you.

- I really would like to get my kids to a dentist, but I can't find one. I would also like you to know I love my kid's pediatrics doctor and their nurse.

- It's so very hard to find a dentist that takes Title 19. The care doctors and dentists give Title 19 patients is by far much less than a person who has health or medical insurance and pays for their own doctor visits or prescription drugs.

- I have a big problem with the dentists here in my area. Moved to Iowa 3 years ago. Can find 2 dentists who will take the card. 1 lives 25 miles away and the other one is horrible. I went to him myself. Have no faith in him. Never had this problem in NH. She went to same dentist all her life was told people on Medicaid cards don't keep appointments or come. Why should we be punished for other people's actions? Closest town is Iowa City. Almost 100 miles away. Something needs to be changed around here. As far as dr. goes, she has had 3 different ones. Latest one was for her yearly physical. So I can't judge her only seen her for 10 minutes. Please do something about the dentists, it is a disgrace. Thank you.

- We had a very hard time getting dental care. When we called the 800# they told us to go to Broadlawns. We needed a check up for school. The only Dr. we could find was in the Mall about 15 miles from our home. We would like a dentist we can feel good about and see all the time. We love our Dr.

- Could I get SSI for him if possible and my little one? Thank you.

- I have an education, I read or skimmed the materials and jumped through the correct hoops. Then chose a physician as though and with the idea that I have the power to make choices regarding my child's health and welfare. In short, I was already empowered to care for my children and not need the plan to empower me.
-

Coventry Health Care

Administrative

- I'm not sure if I'm supposed to use my usual Title 19 card or the Coventry one that was sent.
- Consultec or Medicaid in Des Moines said they would see if paying the premiums on my health insurance through my work would be cost effective. I sent them all the info in Feb. 2001 and haven't heard back yet. It is October. At the end of the year I'm taking them off of my insurance at work.
- Why is HMO an option on my kids and my medical cards but have Coventry Health care listed on the cards also?
- This plan will not pay for all his Medicaid.
- This Medicaid should be able to pay for all of my son's medical instead of me calling every month to get approved.
- I have a problem when they change my health care provider time and time again. I've had to call the 800# and change it back. I've had the same Dr. my whole life. I'd like my daughter to do the same. We trust our Dr. I know he cares about us. He and his staff have been more than professionals. They're really humane. They care about people, all the time not just when it's convenient.
- Still have not gotten the blue doctor card with my son's doctor since I changed it. I still have his old one.

Primary Care Providers

- We never see our family doctor. We see every doctor in the clinic. I want to see our doctor every visit. I want a new plan.
- I wish my child saw the same doctor every visit.
- Our pediatrician was one of the doctors to choose on the Coventry plan so this was very easy for us.

Chiropractic

- The thing I do not like about the plan is that we sometimes need to go to a chiropractic doctor and the plan will not pay for it.

Dental

- I dislike the fact that my son's teeth need to have cavities filled and his dentist couldn't do it. So we were referred to some other dentist in Iowa City. When I stated that it would be hard to get to Iowa City I was rudely told that because I had missed an appointment I had originally set up, that doctor wouldn't see my son. I was told that there were no other doctors around my area.
- I would like more information about dental care for my child. No dentists in the area will see children under 4 years old.

Vision

- The eye care I have had to pay for the exams and also glasses, which cost over $200.00.
- My concern is the help where eye care is paid more than the lens and frames are very expensive. In the last 7 months I had to pay $297.00 and some prescriptions was $49.00.
- My son and I am required to go to an eye specialist and contact specialist every 6 months and lately we've had lots of problems getting a referral. We've been going to the same specialist for years now, and I don't think we should keep having to have a referral each time if it's continuing. I have contacted Coventry and sometimes they tell me we don't need one. This has caused a lot of problems. My sons needs contacts and sometimes they tell me we don't need one. This has caused a lot of problems. My son needs contacts and sometimes his prescription changes. I've come to find out that Coventry hasn't and won't pay for his contacts yet they are a need. I have been very upset with this continuing situation.

Positive Comments

- Thankful it is available to me.
- Delays in seeing mental health doctor are a problem of the doctors scheduling. Not the health plan. The plan is very good.
- Everything is good. Thank you.
- This is a good program and really do appreciate the program.
- I think that the Medicaid health plan is good and especially Coventry health care plan.
- I can get dental or optical care the way I want it.
- Thoroughly satisfied at this time!
- I rarely have to take the child to doctors, but the services is highly service great.
- I don't have any problems with my daughters Medicaid. I have heard others horror stories but no errors have been made with my daughters plan. I've been very grateful to have it available for her and my son.
- I have never had any major problems with my daughter's health care plan. Thank you.
- I am very happy with the services I receive. I have not used the insurance beyond just doctor's visit but would hope I would receive the same excellent service.
- Health plan I sign up for I didn't understand but now I know more about how plan is set up. I am happy to know about Medicaid help line. Thank you all.

The Survey

- I answered all these questions about my child. There haven't been a lot of problems with her health care but there has with mine that has to do with my insurance. Where is my questionnaire?

Multiple Issues, General Comments

- I didn't know they were choosing a doctor for my four children, but they did and they all got different doctors. My children already had a family doctor and that is who I still take them to but I think I am getting charged for some things I shouldn't. I'm not sure. Eye care is a big problem

for us because only one eye doctor in our town accepts Medicaid and because of a past problem, my children can't see this doctor, so they have been waiting for a year or more to get glasses.

- Delays in seeing mental health doctor are a problem of the doctors' scheduling. Not the health plan. The plan is very good.

- I have a problem when they change my health care provider time and time again. I've had to call the 800# and change it back. I've had the same Dr. my whole life. I'd like my daughter to do the same. We trust our Dr. I know he cares about us. He and his staff have been more than professionals. They're really humane. They care about people, all the time not just when it's convenient.

- When my baby was a month old, I took her to the doctor because RSV was going around the daycare that I worked in. when I brought her in we had gotten a different doctor than our normal doctor. The next day I had to rush her to the hospital because she was choking on the mucus. I was very upset that I had to rush her to the hospital after going to the doctor the day before.

MediPASS

Multiple Issues, General Comments

- I feel generally the MediPASS program is a great experience. I personally have had no significant problems with this program. More written pamphlets, brochures, could be of benefit. Perhaps available in waiting room/lobby spin rack. Often time's people who learn you receive Medicaid are indifferent to you and treat you as simple minded, undereducated. I feel is a major factor. But no health professional has acted this way to me.

- There are so many doctors and dentists that are not going to give you treatment.

- The plan we have works good for us living in State Center. Our PA is wonderful. Only problem is, some medications are not covered. For example, an allergy med. So currently we are using Benadryl, which is not as effective. But our PA said to let him know and he would check on another. Our PA keeps in contact as to our child's problem

- There is nothing wrong with the plan as far as paying the necessary bills, it is very good. The biggest problem is finding a dentist who will take someone with MediPASS and without driving 60-70 miles from where we live. I am very thankful that there is such a program. This was my biggest worry. The cost of health care for my grandchild. The added expense of health insurance for her.

- That a dentist (oral) in our area will not take MediPASS anymore. I work 2 part time jobs in 1 day, but yet I'm suppose to take off both jobs to go clear to Iowa City when my car wouldn't even make it. I'm tired of people acting like we are 2nd hand citizens because I have children on MediPASS. I work but this is what works out best for me and my kids. If a doctor recommends tests on a child why does MediPASS not pay for it?

- Problems with dental care, for quite awhile I couldn't find a dentist. Bad relations, poor treatment because of Medicaid coverage. Mental services are not compatible with school hours or work schedules. It would be nice to have one card for a 1-year or 6 months. Cards are easily lost month to month. Certain meds that were prescribed were not covered (Allegra, Cipro).

- For parents who cannot afford other medical insurance. This is a blessing. For me, it ensures that my son get the care and medical attention that he needs. The only thing I don't like is how some medical offices, including dentist, react when you tell them what type of insurance you carry for your child. They act as if it pays them less than any other.

- In most situations prior to our current doctor, we were treated with disrespect and like ignorant fools. We had to wait on numerous occasions for hours after our appointment time. We're very fortunate to have our current doctor.

- Doctors and nurses are great. The person in the front desk scheduling or checking in are usually not nice once they know my kids are under Medicaid.

Eligibility and Administrative

- There is no plan for myself. When I'm in school, I have had surgery twice on my back. I can't work and try to pay for health care is very hard. When you can't get help to pay for it. I think something needs to be done on this because when on medical needs is very expensive if a person can't work. Most doctors office or hospital will not see you if you don't have insurance which I don't have.

- Mostly I worry about health care being available for my son after he turns 18, my work place doesn't offer a family plan.

- I have two other children and would like to put them on the MediPASS option and I have called the hotline about it. A couple of times they keep telling me they are not eligible for a change and they never tell me when they will be. It's been two years and have not heard anything. That is my only concern or problem.

- I hate it when I get bills sent to me for my son when I shouldn't get the bill. This doesn't concern my son but I hate it when you send bills to me for myself. I'm on Title 19 and have been for a long time. I wish you or whoever would take care of it. I'm paying $40 a month for 2 bills that didn't get taken care of for myself for 1995 and 1999. I won't have this taken care of until November of 2002 and hopefully I don't get any more bills that won't be paid. I'm on a fixed income as it is and I can't afford any more bills. Thank you.

- What I don't like is that some how someone mixed up person id numbers for health cards and claimed that my child received care that he did not receive. The day in question he was in school and was healthy plus it took place somewhere other than where his medical care is provided. They tried to claim it on my supplemental insurance.

- That when I went to visit my mom in California my son got hurt and took him to the hospital ER. The health plan didn't want to pay so I ended up with the bill. It was expensive. Still making payments. I don't think that's right since I take my son to doctor visits only prn.

- It's hard to get kids to doctors like if you're not by home other doctors won't see you if it's not an emergency.

- It doesn't pay for ambulance calls.

- Medicaid is secondary coverage for my son, so Medicaid does not pay for much, but we still have a bunch of paperwork to fill out. If there was any way to make the paperwork less, it would help me and I'm sure a lot of other people out. It takes away time from our busy schedules, and it makes me wonder if it's even worth keeping for our family.

- Sometimes unclear with paperwork. When and if he is eligible what they base it on? Why one of my kids qualifies and the other one doesn't. Basically DHS is a big joke, they screen phone calls and lie to you if your worker doesn't want to speak to you. I live 2 blocks from DHS and I drive by to see my worker's car there when I call and they say she is not there. Oh well!

- This program has gotten me through tough times for the past 21 years. I'm grateful for Medicaid. I feel the income guidelines need to be changed. I had to get a second job to make ends meet. My benefits ended because I made too much money. Now insurance premiums are being deducted from my check. Now I'm right back where I was before. Living expenses are not included in the determination of eligibility. Rent, electric, phone, insurance (life, auto & health), gas and car expenses. You work 50-60 hours week and gross this much money. Your benefits stop. You're forced to quit this second job to get back on, so ends that extra income and down you go. I've experienced a lot in the last 21 years too much for this small space.

- I have a concern about child support recovery unit. My payments are made late and the employer of my boyfriend, I think is embezzling our money.

- Being on Title 19, bills that should have been paid were sent to me, and I had to get hold of caseworker and straighten things out. The caseworker isn't very helpful. She also has an attitude problem. It is like my child and I are dirt 'cause she is on Medicaid 19. I was until I made a simple mistake oversight on checking a box 9h. All I get is a run around, but this is government for you.

- Sometimes the DHS worker has misplaced my paperwork that I have sent in and my benefits have been threatened to be discontinued. After contacting the worker and getting the problem resolved benefits were continued. I always get worried that my paperwork is not going to be handled properly. I have also had claims that have not been covered that I am in the process of getting covered.

- No cooperation with caseworker to get my newborn Medicaid. Phone calls not returned. I am already being pursued by collections for the 9-20-01 birth.

- Dislike being bumped off Medicaid because social worker is slow.

- I think that if there is a procedure to be done on your child the Dr.'s office staff should let you know beforehand if it is not covered by MediPASS. My daughter went to the Dr. for a physical before school started. She had to have her ears cleaned out. I later found out that MediPASS wouldn't cover it. Also, I got a bill.

- I don't like that since my husband has health insurance through his work that when I take the kids to the doctor they take both copies of their insurances but still seem to charge it to my husbands insurance and we always have to pay the $10 copay. I don't even know why they keep sending the Title 19 cards but it is nice when I take them to the dentist and eye doctor. Also, I took my son into the emergency room one night and gave them both insurance cards and we got a bill for over $200 because they charged it to my husband's insurance instead of using the Title 19 card. I can't figure it out.

- My husband has health insurance on the boys and myself at his job. We are also covered on Title 19. I don't understand why I have to pay money out of my pocket on a doctor bill when I have both of these insurances. I'm separated from my husband.

- I wish they would be more companies that would take Medicaid and not have hassle with the hospitals.

- We use the Medicaid program as secondary insurance only.

Primary Care Providers

- He should be allowed to see more than one doctor. I don't like having to choose one to put on the card when there are several good ones in our area and they aren't always working when you need them or you can't get in when you want to.

- The choice of doctors was slim. We went with our second or third choice. Why are so many doctors not covered? We now have to drive 45 minutes away.

- I don't like to have my child's doctor's name on the card. I would like to go back to John Deere for the whole family.

- The only problem I have is when we are needed to choose a health care provider all the time. When I've had the same physician for over 15 years. It gets a little irritating once in awhile.

- That someone else decides what doctor or doctors my child can or cannot see. Otherwise I think that this plan is a great one.

- We have MediPASS and live 1 mile from a hospital, but our pediatrician lives 30 miles away. When we need emergency care we cannot take our children to the nearest ER because MediPASS will not pay if it is not the doctor on the card. I think that is the dumbest thing I have ever heard. Sometimes time is everything and 1 mile can be a lot better in a situation than 30.

- I feel that one should be able to choose whomever they wish to see whenever they need to besides just the doctor on the plan. People more – doctor – patient relationships change. A certain clinic might be closer than another. I dislike being designated a HMO, because it restricts me to just one doctor and clinic, and I like being able to see whom I'd like to.

- I don't like the fact that on this insurance you have to see whatever doctor is on call in the emergency room. I have called my regular doctor and still had to see the doctor on call. The doctor on call during my daughter's accident one time did nothing for her. I think my regular doctor would have done something.

- The only thing I dislike is having an appointment time and having to wait for extended periods beyond that time. Also, most of the doctors at Medical Associates here in Clinton, Iowa, treat you in a hurried fashion. A lot of the time, you don't get the personal attention that your illness/injury requires, and you end up leaving with a lot of unanswered questions.

- The only thing I dislike is that if our doctor is out or has a full schedule that we have to get it okayed from our doctor's office to see a different doctor.

- Not all doctors accept Medicaid is my dislike.

- Sometimes things aren't properly diagnosed.

Referrals and Specialists

- I don't like MediPASS. I hate getting approval every time I take him to a specialist. They always have to call for approval. I think it is dumb.

- The fact that if your doctor can't figure out what the problem is you have no one else to go to. If you think they need to see a specialist they can't unless your doctor agrees.

Prescriptions

- She needs the medicine for allergies but every six months or so, Medicaid questions it when my pharmacist calls in and then I have to call the doctor and have the doctor write a letter. It is a problem. If she didn't need the medicine, I wouldn't be getting a prescription for it. I feel they should honor prescriptions without question, especially for allergies.

- My child is in childcare. When we do ear drops we can only get one bottle at a time. It would be nice if I could get 2, one for home and one for child care.

- No problems where my daughter is concerned. Have more problems with getting meds for my son.

- The plan is good. We only had one problem with the service and that was trying to get a refill for a prescription, which was prescribed by a doctor. The pharmacy told me that they couldn't refill the prescription because the medical plan wanted the child to go without it for 6 months to see what happened.

- I have 3 children on my health plan. I hate dealing with medication. I have had problems with them filling what was needed many times. Some were stomach meds and others type z meds.

Dental

- The thing that I dislike is there is not a dentist in this town that will take Medicaid for payment. Muscatine, Iowa.

- I don't like that our usual dentist is not on the plan. I do not like the dentist we had to go to, so we went back to our usual dentist.

- The biggest problem is to find a dentist in the area to accept Medicaid and it is hard for me to go to Iowa City for care.

- It would be very beneficial to area residents if there were an orthodontist who accepted Title 19 in this area. We have Dr. C., Cedar Falls as our doctor but it is an unreal distance once a month for a two-year period. However, Dr. C. is very efficient and kindly.

- There are not enough dentists that accept Medicaid. It is very discouraging. We had a dentist in Burlington and missed an appointment and refuse to take us back as patients because they don't like to take Medicaid patients.

- When is the problem of dentists taking MediPASS going to be taken care of? My son has seen one dentist and he said several things that would need to be watched. The only reason that dentist took him was because he was doing it for Head Start. My son is now in 1st grade. It is starting to concern me that he will be having problems with his adult teeth starting to come in. He needs to be seen. But we cannot find anyone that will take him that is within an hour of one-way travel.

- I feel it is very difficult to find a dentist around our town. We have to usually travel 36 miles to see one. And my concern is what happens when one of my children hurt their mouth or breaks a tooth. Then what? I can't always afford to drive them or get time off of work.

- There should be more dentists that take Medicaid.

Discrimination

- For parents who cannot afford other medical insurance. This is a blessing. For me, it ensures that my son gets the care and medical attention that he needs. The only thing I don't like is how some medical offices, including dentist, react when you tell them what type of insurance you carry for your child. They act as if it pays them less than any other.

- In most situations prior to our current doctor, we were treated with disrespect and like ignorant fools. We had to wait on numerous occasions for hours after our appointment time. We're very fortunate to have our current doctor.

- Doctors and nurses are great. The person in the front desk scheduling or checking in are usually not nice once they know my kids are under Medicaid.

- I feel generally the MediPASS program is a great experience. I personally have had no significant problems with this program. More written pamphlets, brochures, could be of benefit. Perhaps available in waiting room/lobby spin rack. Often time's people who learn you receive Medicaid are indifferent to you and treat you as simple minded, undereducated. I feel is a major factor. But no health professional has acted this way to me.

- The office personnel at the clinic are very rude, on the phone and in person.

Positive Comments

- All the things are okay. Thank you.

- It would be nice to be able to go to any doctor you choose at the given time. But I really think overall it is a good program.

- I have always been satisfied with the care we get from Drs., Dentists or otherwise. When calling in help has always been given right away or have been pointed in the right direction.

- I signed up for Medicaid so my child would be covered for any health concerns I had. I am a single parent who can't afford medical insurance and I had no problems getting it . My caseworker has always been available when I needed her.

- I like her MediPASS. I do wish it would cover things like lazy eye surgery or braces. She doesn't need braces but it would be nice for people who really need them but can't afford them.

- I appreciate having it.

- I'm so grateful for this insurance for my son!

- I like my child's health plan very well. Fortunately we haven't needed to see a doctor or go to the emergency room since January of this year. Occasionally she does need to have medication for her asthma and when we need the help we get it from her personal doctor. Thank you for your concern for our feelings and thoughts.

- I wanted to let you know how much I needed this plan for my son. It has helped me and him so much. He has had excellent care. He needed surgery on his knee a year and a half ago. The specialists was very good, he got wonderful care. Again I want to thank you for this medical care.

- This is a great program and give me the peace of mind that my child will be cared for even when I don't have any money.

- I am generally satisfied with the MediPASS coverage that my daughter has. Than you for your concerns.

- I've never had a problem with her health care provider.

- I like it a lot. It helps out me and my daughter with the care we need. Thank you.

- I'm very happy about how easy the Medicaid plan is to use. Thank you for the program because it helps me provided great health care for my children. I work full time but what I make I couldn't buy health insurance. Please keep this great program for our children. Thank you.

- I'm satisfied with the Medicaid health plan that me and my son has and I'm very satisfied with the doctor and the clinic we go to. I have not changed a doctor or clinic and do not plan to.

- No problems, I was able to retain my child's primary care physician when I requested changing from the physician chosen for her. The plan has helped with an emergency room visit and a pair of eyeglasses. Thank you.

- In April of 2001, my son's health provider would not do anything for the problems with his ears. I changed providers and received the referral to ENT and within 1 week he received surgery to remove his tonsils, adenoids, and tubes put in his ears. He had excellent care. I am very happy with Medicaid and my son's new provider.

- Our town is small, our doctor is right down the street and knows us well, we like that. We feel lucky to have such a well-educated doctor as ours. Very lucky.

- I'm very happy with the doctor I have now, but my girls did have a doctor at the University Hospital general ped's earlier and had many bad experiences. Never saw the doctor we signed up for, was always seeing residents. Also never the same. Therefore every visit was like starting over. Waiting long periods of time between seeing doctor to nurse giving shots, etc. my daughter also has a condition which the doctor there never seemed bothered to check on, but when I switched her new doctor he was alarmed to hear no action had been taken, though I mentioned it at every visit. He discussed it with me and gave me some help. I feel much better.

- I wouldn't change a thing about the health plan. I know there are many families out there that are very thankful and appreciate health plans such as Medicaid. I know I wouldn't know what to do without it. Thank you.

- I am very happy with my child's health plan.

- We are very happy with the health care coverage. We have had no problems getting him in to see a doctor when one was needed. The doctor he has is very good and takes the time to answer questions we have. It is reassuring to have Medicaid, to know that it sure if son gets sick he can get medical attention without having to worry if we can afford it or not.

- Dr G.B. at Mercy family practice in Cedar Rapids is the best doctor ever.

- I like the doctor that my child goes to now. The Redfield Clinic and EF are great. I did, however, have a problem with my child's first doctor. Three months after my son was born he cancelled me and my family as a client. He used the excuse as lack of showing up.

- No questions, but sure like the Medicaid for my boys.

- I feel generally the MediPASS program is a great experience. I personally have had no significant problems with this program. More written pamphlets, brochures, could be of benefit. Perhaps available in waiting room/lobby spin rack. Often time's people who learn you receive Medicaid are indifferent to you and treat you as simple minded, undereducated. I feel is a major factor. But no health professional has acted this way to me.

- I feel that the Medicaid program is great for people like or family, who is finishing college and their education to make a better future for the family. This program has helped our family greatly. Thank you.

- I like the help you get. As of 11/1/01. My daughter will no longer receive Title 19. I am lucky her doctor clinic is so great but while I was on until last 09/01 I was treated like crap, like scum for being on it and wasn't listened to. I think its great to have and when you have nothing and hate seeing people abuse it.

- Clarion is our main medicine and it has to be approved. So it usually takes awhile to get the prescription filled which is sometimes inconvenient. Otherwise Iowa Medicaid is excellent. Thank you. Also we love not having to do monthly reports.

- I feel generally the MediPASS program is a great experience. I personally have had no significant problems with this program. More written pamphlets, brochures, could be of benefit. Perhaps available in waiting room/lobby spin rack. Often time's people who learn you receive Medicaid are indifferent to you and treat you as simple minded, undereducated. I feel it is a major factor. But no health professional has acted this way to me.

- His Title 19 card has been very valuable and provides peace of mind.

APPENDIX E:
COMMENTS FROM THE ADULT SURVEY

The following are comments written on the back page of the surveys to the question:

- "Please tell us if there is anything else you like or dislike about your Medicaid health plan."

The comments are grouped according to the health plan in which they are enrolled. They are also grouped according to the topic about which they are written (e.g., administrative issues, dental issues). The comments are presented as written except obvious spelling errors were corrected to make them easier to read. Some comments were split up into the appropriate topic area unless this would have changed the interpretation of the comment.

John Deere Health Plan

Multiple Issues/General Comments

- I know it is hard to do a lot of work for your clinics. I am suggesting that with or doctor's names we can see that there would be names of dentists and prescription (pharmacy) that are available for us. I've called different places and they keep saying no. Other than that this plan is very helpful for my son and I.

- Better family plans needed. I am dealing with a 7 year old with ADHD and there are tests that need to be done that Title 19 won't cover, but are needed to help my daughter with her condition. More information on what they cover for ADHD patients would be helpful. More understanding and helpful people on the Medicaid help line.

- My dental coverage was either 1. Self-aid or 2. Through a private health insurance. I never attempted to obtain dental coverer age on Medicaid because so few providers accept it. I've never had any difficulties with my Medicaid from my insurance. My biggest difficulties involved having my information updated by my DHS caseworkers and stemmed in part from the rapid turnover at DHS. My only complaint about the Medicaid program involves DHS and paper work.

- It is very hard to find a doctor you want or that is convenient that accepts Title 19. Even harder to find dentists and chiropractors.

- Yes, very simple things Medicaid will not cover, in medicine, make a huge difference. Especially lately my family has just gone without some basic medicines because they can be bought over the counter. And while in most circumstances that is only reasonable, in others, we can't buy it and we don't get it period. Like worm medicine. Not something you want to delay. And others I don't recall. And sun glasses, tinted prescription eyeglasses. I would make payments on the extra cost. My eyes hurt, burn and water. I can't look up at people in the face while I'm talking to them without shielding my face every which way when the sun is bright. And I drive a lot, from house to house doing house cleaning. It's hard. Thank you.

- I would appreciate knowing what if any chiropractors in Scott County that take Medicaid because I frequently suffer from my back and hips being out of place which makes it painful or uncomfortable to complete tasks. And also, I would like to know who else takes Medicaid that are dentists (orthodontists) besides community health care.

- I believe that in order to timely be effective, health insurance should fund preventive health care, especially the scientifically validated technique of transcendental meditation. This technique has

been proven by over 50 scientific studies to reduce stress, the root cause of all disease. Recently the leading national medical association has granted a $12 million dollar grant to further fund scientific studies info the numerous health benefits of transcendental meditation. Just think how much money health insurance companies would save if they paid for participants to prevent disease rather than pay for people to poison themselves with synthetic drugs to treat the symptoms of diseases rather than the disease itself. Currently our health system fosters sickness and thrives off disease. It is time to revolutionize our whole world perspective and wake up to a deeper reality within our very own selves. Currently TM is available through national funding to Vets (VA hospital). It is overdue that people are able to participate in this sort of program on all levels of society. Prevention is the cure. You should reorganize the survey to be more practical. I had to make up my own answer boxes for most of the questions. Oh and by the way, most doctors don't really even care about you, as far as I can tell.

- Well in this day and age health care professionals say that obesity is a large problem. Some people can't lose weight naturally and it doesn't matter how much exercise they do they can't lose it. There are drugs that can help suppress your appetite so you don't have an urge. Medicaid will not pay for those drugs. They are extremely expensive. Especially for those on Medicaid that means that the people on Medicaid can't get help with obesity. Because if they had enough money for it they probably wouldn't be on Medicaid. Obesity is also genetic, so why can't Medicaid help us. It may save them money in the long run, because people who are overweight are depressed so therefore most of them take anti-depressants that Medicaid pays for. So if they help the obese get help to lose weight then they wouldn't need anti-depressants.

- I think Medicaid should cover smoking cessation classes or other ways to help people quit smoking. I also think they should have more help for weight loss too. I don't think they give enough choices for doctors for mental health either.

- More optometrists should accept the card. More dentists should accept the card.

- I can't wait to get my job and get off Title 19.

Eligibility and Administrative

- I think Medicaid should be for anyone not just 0-18 or 65 or older. I'm a mother of two, work part time and my husband's work don't offer insurance. My husband and I don't get any health coverage. We both make little money so when we need to go to the doctor and need medicine we spend lots of money. Me, I have my birth control and Synthroid every month. That is $50 a month. That's a lot.

- I just don't understand how they judge whether you can get Title 19. I try and pick up hours to better myself and you'll cancel on me. I make very little money just enough to support myself and you will cover me. Why is this, I can never get ahead.

- The only thing is that the guidelines for how much income you can have. My husband makes good money but he's our only source of income. We barely make our bills but will probably be unable to continue with my Medicaid now that he has a new job, even though we cant afford to get insurance for me. He has epilepsy so is uninsurable and he goes without insurance. We pay about $200.00 per month to insure our children. It's very difficult not having insurance.

- I think the people on Medicaid without jobs, I think Medicaid should try to help the ones who need jobs but can't get one because they go to the doctor once every two weeks, because they are expecting a baby. No one will hire some one who is expecting.

- The only thing I believe is messed up is that they kick people off Title 19 because they're 18 and they don't have any other insurance. I believe you should help out people that don't have any insurance. Thanks.

- Make Medicaid easier for stay-at-home mothers and new mothers to get. Especially when not able to be covered by husband's health plan.

- Only thing about Medicaid is that you should give it to the babies more than a year. It is excellent for pregnant women and I thank you for providing me with one.

- I have epilepsy and if I have to go off this program I probably will die or have a lot of seizures. I want to know why my back, legs, and arms always hurt. I've got another 2 months on FIP, then what am I going to do? Help!

- More clarity on who can/can't see, hospitals can/can't visit. More info on time needed for referrals and how this process works.

- When I first started on Medicaid I was under the impression that they would cover up to 3 months but not all were covered. I am still paying on a medical bill from last year. I have also had bills come to me and have been bothered by people to collect money from Medicaid services after I was on Medicaid. I wish stuff like this wouldn't happen because it's a big mess for me.

- Why do we have to call the doctor before going to the ER? If you are sick you are sick, I'm pretty sure someone wouldn't want to go the ER if they weren't sick. Thank you.

- I know right now it's okay. I have in the past gotten lots of bills of thousands of dollars which should have been covered and was not.

- I keep getting bills from hospitals when I shouldn't be.

- Well, I think it's not fair that they stuck me with at least $1000 dollars or more in bills that should have been paid and I'm not too happy with any of it cause I have a 15-month-old son I have to take care of. And it's hard when I don't have money to do it because of those bills. Thanks.

- I often received my recertification papers the day they were due. I would then have to call and that was never a simple solution because reaching your caseworker isn't usually easy.

- I feel as if the cards need to be made smaller as well of hard plastic. The paper tears too easy.

Primary Care Providers

- Most Medicaid is HMO, which limits your doctors. When I moved to DM I had to get a different doctor and I have not yet found another doctor that I am comfortable with like I was with my previous doctor.

- Need more doctors on the program to choose from.

Specialists

- I answered this questionnaire about myself, but my son needs to see a specialist and I cannot find one accepting patients in my area with Medicaid. It's a real problem.

Prescription Medication

- Almost every time I try to get a prescription filled for a migraine medication, insurance will not pay for it. I suffer from many migraines, up to 5 a week sometimes. Also, this insurance does not like to pay for yeast infection pills, which are supposed to be used by women who have recurrent infections. I cannot afford to pay for these medications.

Chiropractic

- Right now the only problem I see is the following. I was going to go see a chiropractor about my sore back and shoulders. But before Title 19 would cover it, I would have to have an x-ray and I would have to pay for the x-ray, which I can't afford so I never did see a chiropractor and to date I still experience back and shoulder pain.

- I think it is hard to find a chiropractor that will take Medicaid. Is there a list for them?

Dental

- Muscatine has no dentist that will take Title 19 card.

- A few years ago I needed a tooth removed. My dentist sent me to an oral surgeon; the surgeon was here in Des Moines. Now I've needed to see the surgeon again for over a year now but would have to go to Iowa City, which due to transportation and money reasons I've not been able to make it.

- Everything is great but dental health plan sucks.

- I would like to see more variety for adult dental care.

- Just I can't go to any good dentists because my Medicaid can't afford it or I. I like to keep my teeth white and clean and no cavities.

- Need more dentist offices to accept Title 19 Medicaid program. Don't have time to call all over to find dentist clear on other side of town.

- I'm very grateful with the Medicaid but I do wish some of the dentist would accept it for dental care here in Iowa. Can someone find out why it is very limited for people of all ages here in Des Moines? Maybe you can send out a survey to some of the local dental offices. Because you either have Broadlawns, Des Moines Health Center, Iowa City Area College in Ankeny, Iowa. That's it, and House of Mercy is starting their own dental service for clients only and then later on it will be open to the public. You see some people need more then just cleaning and pulling out the teeth when just maybe the teeth can be saved not everybody can go to Iowa City or wait for hours at Broadlawns in awful pain.

- I really appreciate Medicaid. I am a mother of a 3 year old. I am a full time student and I work part time. So I don't have any insurance but Medicaid and it has saved me and my son. The only big complaint I really have I that Medicaid has very poor dental coverage, and no dentist to take Medicaid. Thank you.

Vision

- I feel that Medicaid is a good jump off and helping others to get on their feet to do on their own and is very helpful. The only thing is I wear contacts or eyeglasses and the eye place I have been going to for 11 years all of the sudden isn't taking my HMO no more and there really isn't that many eye care places that are good that take HMO.

Other Coverage Issues

- I have a 2-year-old son, sometimes I find it hard to get his immunizations. He is already 1 year behind because most doctors don't accept Title 19 for immunizations. Thank you for taking the time to ask us our opinions.

- I feel that prenatal care providers should be able to give more than one ultrasound for a patient who is having a regular pregnancy. Because they take it too early to tell what sex it is.

Positive Comments

- I believe that the Medicaid health care policies are very great for the medical providers that deal with Medicaid. I don't believe anything should be changed or rearranged in any shape or form. I believe it should stay the same.

- I think it's real good. Thank you.

- I am off Medicaid now as I am working full time and I still have John Deere Choice. The Medicaid version of this is much better. I have no dental/chiropractic/eye care.

- As I have shown in all the positive answers I have responded to, I am very happy with my medical coverage. The doctor I have chosen is excellent. I never wait in the office and I'm always treated with respect.

- First of all for my daughter it has been fabulous. 2nd of all my 1st appointment is December 4th for physical routine heart and 1st time hands checked for carpal tunnel. Other than that, it's been good. Thank you. I was never on medical till after I had my daughter. They signed me up afterwards. I did not know I was applicable for it. Thanks again.

- My 2 year old sees the Dr. more than I do. I would like to keep my plan with John Deere Medicaid for my son. He has ear problems.

- We have been very pleased with our Medicaid experience, both with the health plan as well as one worker receiving our cards, etc. It acts as our secondary insurance and has been such a relief. As a diabetic, the medications, testing supplies, and general care expenses are never ending. There have been times prior to Medicaid where I was forced to go without because I did not even have enough money to cover my co-pays. It has truly been a blessing. Any time I've had questions or problems the answers have been easy to find and our worker is always pleasant and friendly. Thank you.

- I have not had any serious health problems and have been satisfied with my health care providers in general.

- My sincere thanks to Dr. B. and Dr. M. and for their outstanding service and respect while being treated. I am extremely satisfied with what they have done for me. They are both outstanding medical providers.

- I think that Medicaid takes care of me very well.

- Even with the rude people, I really do appreciate this coverage. So for what it it's worth, thank you.

- I am no longer covered by Medicaid, for my pregnancy is over. It was a wonderful help to me to be covered because I could have never paid the bills. Thank you.

The Survey

- If you want more people to fill out your survey you should shorten it up.

Iowa Health Solutions

Multiple Issues/General Comments

- I hate not having maneuverability, having to get permission for a 2nd opinion and then use that doctor's choice. I hate to go to a doctor jut to get a referral. The choice of doctors is limited and if my doctor is unavailable I have few choices: to wait to go to another doctor and pay, or to go to the ER and pay. I had a prescription medicine stolen (with my purse) and I couldn't get a refill until the refill date. It was a medicine I need daily. My doctor (specialist) called the pharmacy to explain but the pharmacy said I could only refill if I had cash. My doctor had to contact the drug company for samples, which took over a week. By the time I received them I was quite ill. I love my specialist but my regular medical doctor is another story. I often don't get medical care when I need it because I have such horrible experiences there. Every medical complaint I have is blamed on my medical condition yet my specialist says its not related. My specialist cant order tests because he can only give me care related to his specialty. I wait to go see my primary care physician until the discomfort is worse than the dread of the visit.

- I have to go to the regular doctor to get okayed to go to my orthopedic doctor. Sometimes I can go awhile before returning to specialist and when I need to see him I have to go to the regular doctor and get a referral. Been seeing doctor specialist for a while. I feel it ties up doctor's time he could be spending on someone who really needs to be seen. Same goes for allergy shots she has to see the doctor because of the insurance that I have stipulates that she sees the doctor. I feel if she isn't having problems then she could pass on seeing him. Another problem is with certain meds they upset my stomach and I have to try 2 or 3 different meds before I can get the one that my doctor and I know will work. Hope you can read this. Sorry so sloppy.

- Was hard to find a dentist who accepts Medicaid. Wish I could get my birth control bills partially paid for.

- I presently have medical bills that have gone into collection agency. I have paid a few medical bills. I have bills that have never been paid while I was on Title 19. My children have not seen a dentist in 6 years because it's too hard to get a dentist who will see you on Saturday. I have been refused medication because they say my medication is too expensive. I'm on Plaquenil and Celebrex. So they limit my dosage. I also use albuterol inhaler, Serevent. I take birth controls to control my bleeding, I'm anemic. They will not give me enough to last 2 months.

- I tend to prefer alternative health solutions such as massage therapy which is not covered by my insurance. I am highly satisfied with my health insurance. I just graduated college and got a good job so I probably won't be eligible for insurance any more which worries me because I've been covered with Title 19 my entire life. I can't imagine not having access to doctors and dentists when I need them. I have never had to worry about it before.

- Reimburse for x-rays done by chiropractors. Cover at home births attended by ob/gyn, CNM, family practice physicians, etc. Many of the questions could not be answered by me since I have not used any providers from my IHS plan. I do receive dental care every 6 months. I am seen regular in the clinic at Palmer College of Chiropractic and have excellent health and nutrition.

- I would rather be able to go to the dentist without wasting my doctor's time getting a referral. I think I'm old enough to know when I need to go. It would also be nice if more eye doctors accepted Medicaid. As it is, I don't have a choice in doctors, there is only one.

- There should always be a doctor, dentist, hospital, foot doctor, any of this stuff that takes a Title 19 patient or a new patient in any town that you are at either if you are new or not.

- Well I need to get a thing made for my bottom teeth so they straighten up. They are crooked and my dentist said that he would not recommend me to another doctor to get it done. It looks bad.

So I think my plan should cover that so I can get it done. Even if I have to pay a co-pay. I also wish that my plan would cover the charge of me getting a liposuction. I feel gross and I need to get rid of all my stretch marks on my stomach. I don't feel wanted by anyone because I have them. I also feel down and depressed because of it.

- Just tired of the belief of a Medicaid recipient. Some people believe that people using Medicaid wish to do so, and have no desire to change it. Some do use the system. Most only need help to become self-sufficient. We expect only the same health care of anyone else, Medicaid recipient or otherwise. It took me 1-_ years to find a dentist closer than Iowa City to see my daughter. Now, I've found one _ hour from my home, and can't find an orthodontist to treat her and use preventative. Her teeth hurt her. I can understand if it was for cosmetics, but not this.

- I would rather be able to go to the dentist without wasting my doctor's time getting a referral. I think I'm old enough to know when I need to go. It would also be nice if more eye doctors accepted Medicaid. As it is, I don't have a choice in doctors, there is only one.

- Maybe you guys should drop the HMO and start giving us insurance with a POS (point of service) primary care physician.

Eligibility and Administrative

- I need Medicaid because my family cannot afford dentures or medical to get my prescription medicine filled to get rid of my chronic ear infection. Plus I need to be seen by a back doctor. I got canceled off Medicaid because of my boyfriends and my income is too high. But yet we have 4 children living with us from 3 months to 16 years. So we don't really have money for anything. If you could possibly help me and my family I'd really like that. Thank you very much.

- My younger brother is covered under my Medicaid insurance. My mom wanted to change his doctor (she is the guardian of him). The person she talked to said she couldn't do that. I would have to.

- I'm being taken off Medicaid and so is my daughter. I have coverage also through my private insurance that I have through Wal-Mart, but I'm being taken off because I make too much. How can $7.35, $1.65 below poverty level, be too much? I'm not a deadbeat, I'm a single mother who can't find a better paying job due to this dying economy in this town of Clinton.

- My family and I are in the US more than one year and we came here as refugees, so we don't know good English and do not have a good job also and our family with too low income. Recently my Medicaid program was finished and soon my wife's coverage also will be canceled. It is difficult to take care of me and my family's health without Medicaid. I suggest that for those refugees that have limited income (low income) should be provided with Medicaid much longer than now.

- I have tried to switch from an HMO to Medicaid and they keep telling me they change if when I call, but I'm still on the HMO. Overall though I am well taken care of.

- Yes I would like to have the same plan as my children. I don't know why mine was changed but it is different and I would like for them to change it back because my doctors office has to call to make sure that is will be ok for me to be seen.

- It is very upsetting when I get medical bills in the mail when I know it should have been paid by Medicaid. I then report I have Medicaid, and have been on it for over 5 years and they call Medicaid people and they say I was not on Medicaid when I know I've always been on it. Then they send the bill to collection services, and I receive bill from them. I refuse to pay the bill because not only was I on Medicaid, but if for some reason Medicaid wasn't going to pay it I should have been told this from the doctor's office the day I was seen.

- I think if you got a problem with them they should help you try to work it out so that you don't have back payment that you have to pay out. Thank you.

- I went to the emergency room to get treated for suicidal thoughts, and my Medicaid didn't pay for the visit to the ER. So now I'm stuck with a bill that I can't pay. All because I wanted to go to the ER and get help.

- Iowa Health Solutions is not covered out of state. I was in the hospital last month in the emergency room and my insurance did not cover this or the medication I was prescribed.

- I would like to know why I got taken off of this plan. When I filled out all of the papers I was sent to fill out and I know I don't have any health care at all which I really need. I ended up in the hospital in October with a fever of 102.2 and I had an infection and I had to stay in the hospital for 2 days. Then I had to have a check up with my regular doctor and I had to get meds, but luckily they gave me samples of the meds. Now I have to pay a hospital bill of $4,375.50. And that is not including my check ups at my doctor's office and I have no clue how I am going to pay for that. I am looking for a job right now. I'm hoping that I will get some help back to help me pay those bills.

- Getting duplicate paper work. It is very confusing with all of the deadlines.

- #1. When I enrolled or asked for help it was for my daughter, but that was only after I filled an application out for that school insurance paper that was suppose to be free from a certain amount to a certain amount. The next thing I know I get a letter saying they refused us to DHS for medical needs. And when I go fill out applications for just medical, the worker said they would pay for medical bills for 3 months before. So I didn't think anything of it until I had gotten a couple of bills from Broadlawns. Then around July 2000 I had to go the emergency room because I could not breathe, walk normal. Found out I had pneumonia. They put me in the hospital because I had it real bad. Evidently if I am in the hospital then I am not doing real good huh? But because no insurance to help me my doctor thought it best for my income that I should not stay so I got out 2 days later. Still feeling like crap, but not being able to not afford it. What else, but go and get help from the state for medical. So I did, and when is filled out all papers for and myself at the same time, the worker said then that they would pay for any medical bills that we had required of that year back to January, February, March, April, May, June, July, and August of 2000. Because there was some computer or human error my daughter was cut off in one month, which the lady didn't know why. So when I applied and she found errors done that shouldn't have been it all leads up to why am I still getting bills, more less from a collection agency that those bills still haven't been paid, when they should be. I still get a bill from my doctor that I have seen for 10 years, 9 years with my daughter from being in the hospital July 2000?

- I like to know about the bills and what gets paid. Need to get info on a dentist I can go to with my insurance. Thank you.

- I like the fact that Medicaid helps people that need the extra help. I don't like that Medicaid is color coded and certain places only take green or blue medical cards. And places that are willing to help any body that may not have everything you need only takes the pink medical card.

- There should always be a doctor, dentist, hospital, foot doctor, any of this stuff that takes a Title 19 patient or a new patient in any town that you are at either if you are new or not.

- Whylie Eye care never resubmitted my Title 19 for my son's glasses. I was off Title 19 for a short time but I got back on and received retroactive cards. I took the card for the month I purchased glasses for my sons and asked them to resubmit and they refused. I was out $70.00 recently I was told to get a heart echo and I told my physician that that had to be set up and certain measurements had to be taken. I was seen at Metropolitan (used to be Des Moines General). I told the receptionist what measurements had to be taken and sent on to Iowa City in care of the genetics clinic. I also told the technician repeatedly Iowa City did not receive those measurements.

- I enrolled in Medicaid due to an unexpected pregnancy. I had to put off finishing college so my father's insurance dropped me. My income wouldn't have covered most private insurance premiums. I was pleased with the swiftness of the paper work. I was able to receive prenatal care right away. I was able to choose the nurse-midwife I wanted, who was wonderful! She and her staff were very courteous and helpful and never treated me any different just because I was state aid. I was a little intimidated by my social worker, she makes me nervous.

Primary Care Providers

- The only doctor I ever saw was for obstetrics. I never saw a general practitioner. I would consider the midwife who delivered my son, my personal doctor, nurse for gynecological care.

- Don't put just a certain doctor that you have to see.

- Your doctor on the list. But when you call to set up an appointment you just get one of the doctors that is open. So you go to the doctor that is open and Title 19 don't cover it.

- There should always be a doctor, dentist, hospital, foot doctor, any of this stuff that takes a Title 19 patient or a new patient in any town that you are at either if you are new or not.

Prescriptions

- Some drugs prescribed by my doctor are not covered my Medicaid. I have allergy problems and they won't prescribe non-drowsy allergy medications. The only medications covered are ineffective and make me too tired to function.

Dental

- I do find it hard to find and get good dental care here in Davenport. CHC has a 3-year waiting list. Thank you.

- Regarding questions #45-49, I have not tried to get a dentist here in Ames because I'm always told they are not accepting new patients. The last time I visited a dentist was in 1998, there in Iowa City at the Dental College. I was grateful even to pay the $50.00. I did not know anything about Iowa City. I had four teeth extracted. Thank you. I hope I've been of some help in your research.

- Anyway to get more dentists to accept Title 19 patients would be greatly appreciated. I think it's horrendous that people in my town need to drive 2+ hours to Iowa City for normal dental check ups and procedures. We have just as much entitlement to good dental care as any private insurance holder!

- I think that something should be done with the dental issues. I am unable to find a dentist or an oral surgeon that will take new Title 19 patients. I've heard of a dentist in Carroll, Iowa and Iowa City that will take new patients but that's too far to drive just to get dental care, especially if you have really bad teeth and need to have work done. That 1 visit isn't enough. It's too expensive to drive that far every month or week.

- I don't like the problem with dentists not accepting new Title 19 patients.

- I really wish I could find a dentist in the Muscatine county area. I haven't had a check up or cleaning in 2-3 years, and it's up to that time I had my teeth cleaned every 6 months like normal. I need to find a local dentist because my 9-year-old daughter's teeth are very crooked and awkward. She will need to have teeth pulled and braces put on, within the next 3-5 years or else she will have great problems with her teeth.

- We need a dentist in Muscatine that accepts Medicaid. I can't travel far and my teeth are falling apart! Other than that Medicaid is a little better than my private insurance I use to have.

Vision

- My eyes have digressed and I can't get another pair of glasses for over 1 year. I don't think that is right.

Other Coverage Issues

- Well I need to get a thing made for my bottom teeth so they straighten up. They are crooked and my dentist said that he would not recommend me to another doctor to get it done. It looks bad. So I think my plan should cover that so I can get it done. Even if I have to pay a co pay. I also wish that my plan would cover the charge of me getting a liposuction. I feel gross and I need to get rid of all my stretch marks on my stomach. I don't feel wanted by anyone because I have them. I also feel down and depressed because of it.

- I would like to tell you that when women are pregnant they like to have more than 1 ultrasound. I know they cost a lot but 2 at the most would be really great. A lot more people would appreciate it because you guys are a lot better than private health insurance except in that place. When I was pregnant my best friend had her dad's health insurance from his work and got a lot more pictures here. I was on Title 19 and I only got to have 2, the 2nd one was b/c. I was 2 weeks/centimeters bigger so they were worried but it really hurt me cause I mean she got like around 16-20 pictures. I got 9 pictures at 2 different times. She went in probably around 4-5 times. Hopefully you guys will really consider this letter. Thanks for your time. I really appreciate your guys/girls service to me and my family.

Discrimination

- Just tired of the belief of a Medicaid recipient. Some people believe that people using Medicaid wish to do so, and have no desire to change it. Some do use the system. Most only need help to become self-sufficient. We expect only the same health care of anyone else, Medicaid recipient or otherwise. It took me 1-_ years to find a dentist closer than Iowa City to see my daughter. Now, I've found one _ hour from my home, and can't find an orthodontist to treat her and use preventative. Her teeth hurt her. I can understand if it was for cosmetics, but not this.

Positive Comments

- I love my health plan. I could never afford my medical bills for my asthma and depression. I have no complaints of my medical plan I have right now.

- I am a single working mother of 1. I had found the Medicaid program very beneficial to us. I would not be able to afford private health insurance. I am very grateful that your service requires the minimum amount of time necessary from myself. Thank you.

- I am not financially capable of carrying health, dental or vision insurance for my daughter or myself. I appreciate how available this coverage is. I also enjoy what a wide variety my coverage takes care of.

- Don't know of anything at this time.

- I am grateful that Medicaid provides useful resources and guaranteed health coverage.

- I have been on Medicaid for a year and a half and I haven't had hardly any problems with them. If it wasn't for Medicaid I would be in debt with medical bills especially after I had my first child. I want to give my greatest thanks to whomever made this program possible.

- I think all and all it's a good thing. I wish I could get my own medical insurance but that's just not possible now.

- I am very satisfied with the way Iowa City accepts Title 19 and HMO patients and will treat them fairly and do what needs to be done.

- I'm very satisfied with my health care but I've never had anything else so I'm glad to have insurance at all. Thank you for everything.

- I don't have insurance offered at my job and I have migraine medicine that I have to take on a permanent basis. I appreciate having this healthcare.

- I'm just glad there is health care out there for people like me who are full time college students and full time parents who are trying to get their lives together. Thanks.

- Medicaid works very well. I see no difference between other insurances except you can cover more with other insurances. However, I don't need much more coverage, myself. I am very thankful for the Medicaid program. It has given me a chance to better myself, while staying healthy. Thank you Medicaid, and thanks for your interest with my enrollment in Medicaid. Have a good day and good luck with your survey.

- We need a dentist in Muscatine that accepts Medicaid. I can't travel far and my teeth are falling apart! Other than that Medicaid is a little better than my private insurance I used to have.

- I enrolled in Medicaid due to an unexpected pregnancy. I had to put off finishing college so my father's insurance dropped me. My income wouldn't have covered most private insurance premiums. I was pleased with the swiftness of the paper work. I was able to receive prenatal care right away. I was able to choose the nurse-midwife I wanted, who was wonderful! She and her staff were very courteous and helpful and never treated me any different just because I was state aid. I was a little intimidated by my social worker, she makes me nervous.

- I would like to tell you that when women are pregnant they like to have more than 1 ultrasound. I know they cost a lot but 2 at the most would be really great. A lot more people would appreciate it because you guys are a lot better than private health insurance except in that place. When I was pregnant my best friend had her dad's health insurance from his work and got a lot more pictures here. I was on Title 19 and I only got to have 2, the 2nd one was b/c. I was 2 weeks/centimeters bigger so they were worried but it really hurt me cause I mean she got like around 16-20 pictures. I got 9 pictures at 2 different times. She went in probably around 4-5 times. Hopefully you guys will really consider this letter. Thanks for your time. I really appreciate your guys/girls service to me and my family.

<u>The Survey</u>

- I apologize for not getting this taken care of before now. I've been busy with school.

Coventry Health Care

Eligibility

- I have severe headaches that keep me from doing things that I would enjoy doing. I want to know why my head hurts so severe. Right at this present time I have no insurance. My son is Dyslexic, Epileptic, ADHD, which is difficult because he cannot go on husbands insurances make it difficult to get meds for him and being pre existing for even myself to get on my husbands insurance. I think that HMO's should not have as much control of what the doctor thinks is best for his patients.

Administrative

- I didn't think it's necessary to have to show your card every month.
- I would like to get switched to the John Deere Medicaid (HMO). I was told I was eligible for it. I have a hard time getting my chiropractor help. Thank you. I would also like my son changed too. Any questions call 123-456-7890.
- The only comment I have is that when billing people at the doctor's offices bill you for not having a Medicaid card. That person shouldn't be harassed by insurance people to pay that bill when you can't. They think money grows on trees.

Specialists

- I use Title 19 for my child. She has several congenital eye conditions. For this reason I must take her to see a specialist the biggest problem I have with Coventry health care or Title 19. Is there a must have authorization from my child's primary care doctor. My child has been seeing the eye specialist for almost 2 years and will be seeing this specialist for at least 3-6 more years. I am and have been trying to make Title 19 understand this and it not necessary to continue to get approval to see the specialist. I will stop seeing the specialist when I'm told that my child no longer needs his care.

Chiropractic

- I would like to get switched to the John Deere Medicaid (HMO). I was told I was eligible for it. I have a hard time getting my chiropractor help. Thank you. I would also like my son changed too. Any questions call 123-456-7890.

Positive Comments

- I'm so grateful for Medicaid and I hope other recipients treat this insurance with the same respect. Health care providers have encountered have always put my health needs first and foremost regardless of the type of insurance I have. Thank you for the concerns Medicaid recipients may encounter.
- I've been very happy with my health plan since being forced to go on Medicaid. I now can see a doctor when needed and my daughter gets great care.

MediPASS

Multiple Issues/General Comments

- Medicaid is extremely helpful. I had an unexpected pregnancy and without Medicaid probably wouldn't have got great care and probably wouldn't have had a healthy baby and would have been in debt for many years. You should be proud of this program. The only problem I had is after my baby was born and was covered for 60 days and DHS said you could apply for 6 more months of coverage, but I didn't get any information from them like I asked for. We would have qualified because we were not a family of 3 but it's too late. My question is: is there any way you can get coverage if you're not pregnant and what happens when my sons run out in 2 years. How do you apply for more? If there is any information you can send me I'd appreciate it. Thanks. This program is well managed and extremely helpful. Thanks for everything.

- What I like about Medicaid is I don't have to pay that much for my medicine or any for my child's. What I dislike about Medicaid, it doesn't cover most doctors my child and I see. I have also had problems with my Medicaid card because they also put my other insurance on my Medicaid that I'm no longer on anymore.

- I think that sometimes it is hard to understand the information and sometimes I don't quite understand what is covered by Medicaid. I also feel like it is very hard to find a dentist that accepts Title 19 and if you do you have to wait at least 2 months for an appointment.

- It's really hard to come up with co-payment when you are on a fixed income. It's hard to find a dentist to accept people with title 19. They say they don't get their money fast enough.

- I really like it that the cost of the prescriptions are really cheap and the only part that I find really difficult sometimes is having to get approval every time I go to the University Hospital. I have hepatitis c and a c-5 herniated disc in my neck. I will be having surgery on my neck on November 8th. Then in December I am having a liver biopsy. I have high cholesterol which I take Lipitor for. I also have degenerative arthritis I take Flexeril and Darvon for that then on top of all that I've had a complete UCL on my left knee (I have 2 screws in my knee). Now I have to wear a brace on my leg constantly. I also have depression. They have me on Zoloft and a pill called clonazepam for anxiety but it will be short term. I was on Lorazapam and the psychiatrist changed it. Then I also have acid reflux disease. I take Prilosec for that. I wish once the regular doctor sent me to the specialist that when I got there I wouldn't keep getting told I need to be sure to get prior authorization?

- We need more dentists for adults and children in this town (SE Iowa) who will accept MediPASS or HMO. I am happy with my current Dr. and pharmacy. I am satisfied with MediPASS coverage except for access to dental and sometimes I am so broke the co pay for prescriptions can be difficult.

- Went to hospital in ambulance, having problems with medicines, paying for follow up, Dr. saying not usual doctor. Lots of bills due to doctor. I wanted not being on MediPASS. I called numerous times from dr office I wish to be seen at. Problems with getting Vioxx for my knees. Always need to be okayed by dr for MediPASS to pay. They okayed it once. You'd think that would be enough.

- Medicaid is a good plan. However, I encountered a few frustrations with filling prescriptions. My son and I were both denied for our allergy meds. I ended up paying cash ($50/mo) for my sons and never filling mine. Now that I am a medical assistant I am rather annoyed that any insurance company can 2nd guess doctors knowledge by denying coverage. However, Medicaid was wonderful while I was in college. My son and I would have been in serious trouble without health care coverage. Also, there are no oral surgeons who would take my plan. I couldn't drive to Iowa City, so I had to borrow $1500.00 to get my wisdom teeth out. I did have my dentist take

one out, but she used Novocain only. I had to get an oral surgeon to finish because it hurt worse than anything I have ever lived through. So I had attempted to use my Medicaid for this service.

- First is pay for dentist visits locally and second make it so every American has this same health care plan, it would be easier and cheaper in the long run for all of us Americans. Thank you for letting me voice my opinion

- One of the biggest problems I have had is with eye coverage for myself and my child. My child needs eyewear almost every year and they cover only hideous embarrassing frames and worse yet. My child has very very thick lenses, and the insurance will not cover the thin, light lenses, or even let me pay the difference. The thin lenses are actually safer if broken. Like the Lenscrafter brand. The lenses are so thick also, they pop out of the frame. They won't cover contacts, which would actually be cheaper than glasses. I think they need to reconsider their eye policies. Also, there are certain things not covered that should be. Such as TMJ (cracked jaw), I wanted to have my jaw problem looked at and have something made to wear at night so my jaw wouldn't slip, but they say it is not covered and I suffer a lot with it. How can they say certain health problems are covered and others are not?

- At this moment I'm pregnant with my 4th child. Medicaid doesn't cover abortions and with my birth control after my 2nd child I became very over weight and now being pregnant it's putting too much strain on my body. I've visited a doctor, mentally and the person that I was going there because of told me I couldn't go anymore. But back to my pregnancy I am having a lot of back problems so I hope Medicaid cover maternity chiropractor that can help with my pain and my weight. The doctor and dental offices are on another side of town and I have to take a 1- hour bus ride to them and with time and kids. I tried to take my baby to a closer clinic and waited over an hour in the waiting room and left and that was for her shots. Thanks for the survey if my answers seem confusing the way the questions were was hard to pick up on, I would have rather did them in person or over the phone.

- Should be treated better in the emergency room when you got there and when your asthma is out of control, should go to a room in a hurry. Cause you don't play with asthma and you can die with it. Because I have seen friends of mine die. And they are not here 'cause they didn't get the treatment from the emergency room. I wish this can be changed and you can't get away from asthma. You live with it and take a lot of medicine.

- I'm ADHD.

<u>Eligibility / Administrative</u>

- What I don't like about Medicaid is I have been on Medicaid for a little over a year and every time I tried to work all I heard was you are going to lose your Medicaid. I am a single parent my little boy has good insurance so he is taken care of. I have a muscle disease, I work and try but I get run down because it is hard on me and it is a awful feeling hanging over your head that you can lose your medical card when you have health problems.

- I wish that Medicaid would cover women even when they weren't pregnant. A lot of people cannot afford private insurance and they go without insurance so what do they do when they get sick?

- I feel that if someone like myself would prefer to have Medicaid in case of accident or illness they should be able to get it. When that person chooses not to get child support from their baby's father because he gives them money to live and is already supporting his child although he is not living with them. This goes for the food stamp program also.

- My family got disenrolled from Medicaid due to both my husband and I are both working. But our income is just $200.00 over the limit of receiving Medicaid. Therefore my family has no medical coverage now. I wish Medicaid had a program would assist low-income families who are not qualified for Medicaid, but still receive some kind of assistance. Maybe on a co-paid or based on income level.

- I take Dilantin for a seizure disorder. I have 2 children ADHD that take medicine. I have no problem being on Medicaid. I do have one when I got a child on one plan and another on something different. And I called and give all information they need to change it and they still don't change it after 3 or 4 phone calls to them. And what would really help me out is if you went by your doctor bills and other meds. Then your income just to get on the program, I have to work almost two jobs to keep me and my family healthy, just to medical and drug store bills.

- I have only had two major problems with Medicaid. The first one was my worker wouldn't call me back. Even when I left a message on her answering machine and told her my son needed medicine and it was important that he get it and the pharmacy couldn't find record of my coverage. She didn't call. But my biggest problem is that they say I make too much money for any assistance. I don't see how I can be making too much money when my rent is more than x% of my income, and leaves me with only a couple hundred for all my other bills and to feed and clothe myself and my son.

- They seem to wait till the very last minute to pay the bill. I had a baby in March and Medicaid still has not paid all of their share.

- You should list some doctors from which you may choose from if you would like to switch doctors.

- Went to hospital in ambulance, having problems with medicines, paying for follow up, Dr. saying not usual doctor. Lots of bills due to doctor I wanted not being on MediPASS. I called numerous times from dr office I wish to be seen at. Problems with getting Vioxx for my knees. Always need to be okayed by dr for MediPASS to pay. They okayed it once. You'd think that would be enough.

- We get bills a lot from St. Luke's Hospital for my husband, my son and myself. If you could take care of those I would appreciate it.

- When 8 years old and received a medical card our regular family doctor was not on the list of available doctors. Although he accepted Medicare patients after request for him it was okayed. Since being on mothers insurance which she was required to do, they were so slow paying their part that it held up Medicare payment. My dr was nice enough to understand and did keep seeing me when necessary. Needing to find a new dentist. I live with my grandmother. She has appreciated the card for me. I am a senior this year. I have lived with her for ten years.

- When I had questions, the people I talked to were rude and were not helpful when it came to customer service. They made me feel like I was stupid and they didn't offer me any help.

- I was very scared and put my life at risk when I had a blood clot in my arm while I was away (out of state on business) because they would not take my medical coverage.

- When I first signed up for this they told me they take care of all hospital bills up to three months before. I had one a month before I signed up, thinking they then paid it and is now in the collection service. I went to the office and showed them and they tell me there's nothing they can do about it. So I don't see the point in lying about this insurance. You need to tell the truth to help make every body lives a little easier and not try to trick people.

- They don't pay my doctor bills so I don't get to see my doctor till they are paid. It's not my responsibility to pay doctors bill. I feel they do a poor job. I rather have something else.

- There is one thing! The last couple of times me and my family have gone to the doctor they say that we owe them money. I was just wondering why I get the bills for doctor visits when we have Title 19. If there is any way you can let me know please tell me. As of right now, that is the only questions I can think of.

- I called to have the health care provider changed on my son's card and was told it would be changed. It wasn't. I called again and was told again that it would be changed on the November card. Again, it wasn't.

- The worker for O'Brien County is not a very good people person. She is sometimes rude and will not listen when problems arise. She doesn't have good phone manners and is very short with you on the phone and in writing.

- Not the Medicaid, I haven't had problems with that, my problems have all been with my worker. He doesn't return phone calls and has not changed my name yet even though I've been trying to get it done for 6 months now.

- I was extremely satisfied with my plan and coverage. I was unsatisfied with the worker at the Warren County Department of Human Services. She made me feel terrible for being on Title 19. I hated dealing with her and dreaded each time I needed to. My worker was rude and downright mean.

- I think Medicaid should pay more of doctor bills, because I'm on a limited budget and can't afford to pay the extra I have to pay so it has ruined my credit and there is no way I can fix the problem now. My health is getting worse and the stress of the bills I have made it even worse.

- I take Dilantin for a seizure disorder. I have 2 children ADHD that take medicine. I have no problem being on Medicaid. I do have one when I got a child on one plan and another on something different. And I called and give all information they need to change it and they still don't change it after 3 or 4 phone calls to them. And what would really help me out is if you went by your doctor bills and other meds. Then your income just to get on the program, I have to work almost two jobs to keep me and my family healthy, just to medical and drug store bills.

- Some medicines aren't covered, again one of my son's immunizations was not covered. Difficult paper work, otherwise ok.

- I have no complaints about the care my wife and new son received while on Medicaid. I do, however, have a problem with the way the Department of Human Services office in Oskaloosa, Iowa operates and treats the people seeking health aid. Obviously, several forms need to be filled out, and documentation of income needs to be obtained by the DHS to determine eligibility for services. A problem arises when the office hours are from 9am to 4:30 pm and my wife and I are in school or are working through that time. They should be open earlier or a little later. The biggest complaint I have with the DHS is the disrespectful way they treated my wife in regard to some forms she needed to complete. As previously stated we both have a problem making it to the office during hours. When my wife couldn't get off work 30 minutes early to bring a form in, we were harassed over the phone by a social worker and were told our benefits could be cancelled or not renewed by our gross negligence and inability to understand what day of the week it was. Her (the social worker) threat caused us to bring the paper work regardless of our other responsibilities and plans to advance ourselves in life. The second encounter over the phone with the DHS occurred in March. My wife received a call from the same person, this time she had a problem with the pay stubs my wife had given her. She didn't understand that in February my wife only received one pay check because she gets paid bi weekly and received a pay check at the end of Jan and in the beginning of March. No time was left unaccounted for in the span she requested. Still, the DHS worker would not relent in her inquisition of my wife, eventually reducing her to tears because of the inconsideration and stupidity of the social worker.

- I have only had two major problems with Medicaid. The first one was my worker wouldn't call me back. Even when I left a message on her answering machine and told her my son needed medicine and it was important that he get it and the pharmacy couldn't find record of my coverage. She didn't call. But my biggest problem is that they say I make too much money for any assistance. I don't see how I can be making too much money when my rent is more than x% of my income, and leaves me with only a couple hundred for all my other bills and to feed and clothe myself and my son.

Primary Care Providers

- I have a very tough time getting in to see our family doctor. She is always too busy. She is continually picking up more pregnant women, which means after they have their baby there will be even more people that need to see her. I know she takes Medicaid patients, I believe it would be helpful if she was taken off your list or else at least make it known she is full. Her name is ….

- I wish there was a # you could call and check on your potential doctors reputation. It would make me feel more secure in making a choice.

- I cannot change my doctor if I'm having a problem. I have to wait until you say I can.

- I don't agree with one thing. When you have to enroll to a doctor away from your hometown because the clinic in your town closes and then reopens, what happens if you cant get to the clinic away from home because of the weather. I have to drive at least 20 miles there and back just to get a shot. I can see if the clinic closes and reopens you would want someplace that you can rely on, but if it is open, I rather go there to get a shot than have to drive 20 miles for a Depo-provera shot only. I like the fact that my daughter (2 year old) can go to the same doctor for any medical reason, as she has since she was born. I want the doctor to my history and my daughter's but the drive can be a nuisance. At least the medical plan lets you choose the doctor, that way he or she knows your medical history. I have not had a big problem with it, and appreciate the medical plans, Title 19, without it I don't know how I would pay for doctor's bills. Thank you much.

Prescriptions

- Could not get the best prescription for my stomach condition except for a short time and then it was not approved even though my doctor prescribed it. I had to switch to a different medication that doesn't work as well.

- I have been taking some meds not covered by Title 19. One of them is really costly. I really can't afford. So I pay the least amount possible. Skipping some. I'm overweight, trying to lose weight to help my hurt back. I just wish that I didn't have to worry every time I get a prescription if it's covered or not.

- Some medicines aren't covered, again one of my sons immunizations was not covered. Difficult paper work, otherwise ok.

- I would like Medicaid to cover such things as Zyban for quitting smoking and some sort of weight loss plan. They do not cover these things, and there are many people out there that would benefit from this. Myself included

Chiropractic

- I completely forgot about my chiropractor doctor, which I see often on and off during the year, is answering this form. My chiropractor doctor works on my back since I have a curve of the spine. I usually see him 2 times a month or 8 months a year.

- The only problem I have is the limit that Medicaid covers chiropractic care, it is only 1 time a month and I usually need to go more. I can't afford to pay for the visits myself.

Dental

- Trying to get dentists in our town who will accept Title 19. Because I don't have a car to get to any dentists out of town.

- Lots of problems with dental secretaries not knowing whom to bill for services for the family children.

- The reason I placed fair for how would I rate my overall dental health is because they hit a nerve in two of my teeth to place fillings in they hit a nerve.

- Provide a list of dentists that take Medicaid.

- The only main very big problem I have is finding a dentist. I am from Kansas City, Mo and I never seen such a poor state with finding a dentist. My daughter and I have to drive all the way home to Missouri or go to Winnebago dental clinic to see a dentist and my daughter now has poor teeth and so do I. I plan on moving back home because of this problem. No dental office here accepts Medicaid, just way in Dakota Dunes. That's sorry.

- You should send out a list of dentist like the doctors and let us pick our own dentist since we do with the doctors

- There needs to be more dentist that accept the Medicaid card in the Lee county area.

- On the dental health provider. Most dentists will not accept new Title 19 patients. Like finding a dentist to accept Title 19 for my wisdom teeth. My regular dentist won't pull wisdom teeth. But I found somebody. But it was difficult.

- It is hard to get dental providers that accept Title 19 especially orthodontists.

- I don't understand why most of the dentists in Ames, Iowa do not accept Medicaid. It seems as though I would have to travel approximately 35 miles to Des Moines, Iowa to see a dentist who accepts Medicaid. I find it surprising this is the case since there is a major university in Ames, Iowa. From my own experience, this is probably the weakest component of the Medicaid program here in Ames.

- Yes, it is hard to find a dentist that will take Medicaid. I feel like this is important for XIX people who have dental problems and live in pain because of teeth breaking off or teeth that need pulled out. Then don't get into the dentist because they don't take new patients. We have tried numerous dentists and have been turned down. Is there anything that we can do to get a dentist around here to accept XIX? My husband has a tooth in front that needs replaced and 2 pulled out and needs a root canal. He lives in constant pain and lives on Advil for the pain. He has had this pain for about a year and still no help. If there is anything that can be done please let me know by writing to this address.

- Not enough dental or orthodontist in area, actually none within 20-25 miles from where I live that accepts Medicaid. I had dental insurance through work, had braces put on my daughter, lost my job and insurance. The orthodontist wouldn't accept the Medicaid so I owe him $3800.00 and he wouldn't finish my daughter's treatment after he removed her braces. She said he was mean and rude to her every time she had to see him. These are the main reasons I put off care when needed. I think the program is great. It's the professionals who ruin it for those that need it and use it.

- I stay in Fort Madison, Iowa and there's not too many dentist here. I need my teeth fixed and the dentist I went to that accepts Medicaid was rude and would not refer me to other so what am I to do? Sincerely, Mrs ….

- I would like a list of dentists that accept Medicaid because I don't have one. I saw a dentist a couple weeks ago, but I could only get in if it was an emergency. I would like to say that I think that Medicaid is a wonderful thing. Without it, I'd be so far in debt and very unhealthy.

- Medicaid health plan is fine. It's not being able to get the proper care from the doctors that is wrong. No dentist in this area will take it. I received better care when my mother was working and had her own insurance.

- It would be helpful to myself as well as others if dental offices would become more accessible to Title 19 homes as well as others. Otherwise your program is wonderful. I appreciate the help.

Vision

- With optical care, it isn't hard to find a place who accepts Medicaid. Although most places who do accept it, if you happen to need corrective lenses, have just a basic 3 or 4 cheepy type of frames for you to choose from and that's it. Which makes me feel sort of downgraded for being on Medicaid and not being able to select from the other 1000 of selection available to other health care insurance companies.

Discrimination

- When I go to the ER to get treatment they do not treat me very well. The last time I went to the ER I waited in a room for three hours before a doctor came in to see me. Then it took a nurse 45 minutes to bring in and give me a shot. I feel that I am not treated fairly when I go to the ER because I am on Medicaid. Thank you.

- I was unhappy with the lack of bedside manners and respect when my son had to go to the ER and stay the weekend at Ottumwa Regional Health Center. I am thrilled with his usual Dr., however, and feel she is the best Dr. we've had for him thus far.

- I am grateful for this insurance. Without it I would be in great debt and in need of much help. I am pleased with the overall coverage. But not with the treatment from those that find out I do have this type of coverage. I have a medicine in which I need to take 1 pill daily or I would be in much pain. It took the doctors over 8 months to figure out what the problem was. The medicine is covered and cost over $150.00 a month. Thank god for Medicaid.

Positive Comments

- Medicaid has been my lifesaver.

- I have never had very many problems while being on Medicaid. I'm more than happy there are plans like this out there to help people. Thank you.

- I just want to say I never would have made it without this Medicaid and I even work all the time and it is so hard to raise a child on your own and be financially stable at the same time. Even though I hate being supported by the state, I had to do it for my baby's sake. I hope that within the next 6 months I will be making enough money to get my own health insurance.

- I personally like title 19. I don't think people should feel ashamed to be on it or treated differently. I think you should leave the program just the way is it.

- I feel very fortunate to receive MediPASS. As a single mother it is one less thing to worry about. I do wish there was a way to be able to afford my own healthcare but fortunately I'm able to receive MediPASS.

- Medicaid has been my primary medical assurance most of my life as a single parent. Our family has depended on Medicaid for all of our medical, dental, visual, and mental therapeutic needs. I thank god for this program and I do consider it a treasured privilege. Our family physicians and their staff are very professional, courteous, and efficient. The Medicaid program is obviously a very carefully constructed and structured system. Please don't change. Gratefully thanking all those involved in the medical programs provided through our great state of Iowa.

- Everybody is very helpful and very easy to talk to. Thanks.

- It would be nice to be able to use your services always because you're so good. But we wont be able to. I would like to thank you for the opportunity to say that Medicaid services have so surpassed my history with all other insurance companies and that it's a shame people are put down or looked down on, because your insurance holder is Medicaid. If you could ditch the Title 19 title and come up with something that's more reflective of your competitive services you should. For years, we've paid hundreds for lousy medical and dental policies that don't always come through with what they promised. One year ago, my husband went back to school full time, only working part time and on occasion not at all. Self-employment insurance was a joke, so we are very thankful we were eligible for Medicaid. In a couple of years, we'll move on to better jobs and once again back with private insurance plans. But I do thank you again for making this time of our lives easy, convenient and reliable. Everyone wants good health care and I believe we have it with Medicaid. Thank you for being there when we needed it.

<u>The Survey</u>

- It was sort of hard to answer this survey because I have a long existing work injury that is being taken care of through workman's comp and so some of the questions I didn't know how to answer.

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