

CAHPS® PCMH Adult Survey
Data Summary Report for
Dr. Avery Wood
Year 1 (2012)

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Introduction

CAHPS PCMH Adult Survey

The Consumer Assessment of Health Providers and Systems (CAHPS) Patient-Centered Medical Home (PCMH) Adult Survey was designed to capture patients' experiences within the domains of primary care that define the medical home. The standardized assessment was developed jointly by the Agency for Healthcare Research and Quality (AHRQ), the National Committee for Quality Assurance (NCQA), and the Commonwealth Fund. It is the most comprehensive tool available for assessing consumers' experiences with their clinicians' practices. The adult survey, administered annually, contains 54 questions measuring key consumer issues such as overall satisfaction, wait times, and physician availability. Other core consumer and PCMH components assessed include:

- Self-Management Support
- Access to Care
- Communication
- Comprehensiveness (Adult Behavior)
- Shared Decision Making
- Office Staff
- Information
- Coordination of Care

NCQA is an independent, not-for-profit organization dedicated to improving health care quality. NCQA accredits and certifies a wide range of health care organizations. It also recognizes clinicians and practices in important areas of performance. CAHPS PCMH data submitted to NCQA will be used to establish a benchmarking database that will allow national comparisons across practices. Practices participating in the data collection process may earn a "Distinction in Patient Experience Reporting" and be eligible to receive NCQA credit for measuring patient/family experience.

VCHIP as the Certified Vendor



The Vermont Child Health Improvement Program (VCHIP) at the University of Vermont is an NCQA Certified Survey Vendor for the CAHPS PCMH surveys (adult and child versions). To become an NCQA Certified CAHPS PCMH Survey Vendor, an organization must demonstrate that it has the relevant survey experience, organizational capacity, and expert personnel capable of accurately collecting and reporting results. Survey vendors must also participate in an annual CAHPS PCMH Survey Vendor Training Program to maintain vendor certification.

VCHIP, through a contract with the Department of Vermont Health Access (DVHA), offers its vendor services for free to practices participating in the Vermont Blueprint for Health. Your practice agreed to allow VCHIP to conduct the CAHPS PCMH Adult Survey on its behalf. This report describes the data collection methods, sampling techniques, and results from the Year 1 (2012) data collection period. Your practice's results are compared to the overall state findings. The state findings consist of independently-owned, hospital-owned, and Federally Qualified Health Center (FQHC) practice sites serving approximately 75% of Vermont's Health Service Areas. At the time of survey administration, the majority of participating practices were PCMH-recognized sites. Of those practices that were not recognized, all but one is expected to be officially scored within the next year. VCHIP was recertified as a CAHPS PCMH survey vendor for the 2013 data collection period and plans to develop similar reports in the future that examine patient experiences over time.

The CAHPS PCMH Adult Data Summary Report is an informational tool only. Findings were calculated by VCHIP following NCQA specifications. They do not represent official NCQA results. No part of this document may be reproduced or distributed beyond the practice without written authorization from VCHIP. If you have any questions about your practice's involvement in the data collection process, please contact VCHIP's Program Evaluator, Julianne Krulewitz, Ph.D., at (802) 656-8371 or via email at Julianne.Krulewitz@uvm.edu.

Methods & Procedures

Practice Selection

In February 2012, VCHIP contacted the Vermont Blueprint for Health's Project Managers to determine the number of practices interested in using its CAHPS PCMH survey vendor services. VCHIP extended the offer until mid-May 2012 to all practices participating, or interested in participating, in the Vermont Blueprint for Health. Forty-eight practices approached by the Project Managers selected VCHIP as their CAHPS PCMH survey vendor. Forty of these practices had large enough adult patient populations to conduct random sampling (see "Sampling Protocol"). These practices were eligible to participate in the adult data collection process while the remaining eight practices had only their pediatric populations surveyed (using the CAHPS PCMH Child Survey - data not discussed in this report).

Clinician Eligibility

Physicians, nurse practitioners (NP's), physician assistants (PA's), and advanced practice registered nurses (APRN's) were eligible to have their patient panel surveyed. Clinicians had to practice in internal, family, or pediatric medicine and have an active, unrestricted medical license. Specialists, NP's, PA's, and APRN's who did not serve as primary care providers were ineligible.

Patient Eligibility

Patients had to fulfill all of the following eligibility criteria to be included in the evaluation:

1. Aged 18 years or older as of the last day of the measurement period.
2. At least one visit with an eligible practice clinician during the measurement period.

The measurement period was the 12-month timeframe from which the practice generated the list of all eligible patients. NCQA granted four practices a protocol exemption to produce the list of eligible patients during a seven-month span due to these practices' newly implemented electronic health record systems. The measurement period for your practice was:

Year 1: May 1, 2011 - April 30, 2012

Sampling Protocol

Practices provided VCHIP with an Eligible Population Data File containing the names and addresses of all patients seen by eligible clinicians during the measurement period. If a patient saw more than one clinician during the measurement period, the most recent clinician/office visit was selected. A random sample was drawn from the Eligible Population Data File based on NCQA's sample size calculations (Table 1).

Deduplication: Only one adult per household was included in the sample. The adult population was deduplicated using the patient's mailing address.

Table 1. Survey Sample Sizes

| Number of Clinicians in Each Practice | Required Sample Size |
|---------------------------------------|----------------------|
| 1 | 128 |
| 2-3 | 171 |
| 4-9 | 343 |
| 10-13 | 429 |
| 14-19 | 500 |
| 20-28 | 643 |
| 29 or more | 685 |

Supplemental Questions

The standard CAHPS PCMH Adult Survey contains 52 questions. NCQA permitted vendors to insert additional questions provided that the questions did not significantly interfere with the standardized layout and validity of the survey. At the request of the Vermont Blueprint for Health, VCHIP added two questions measuring chronic health conditions and specialist care in adults.

Survey Administration

Surveys were administered by mail with an internet-response option. Patients were mailed a cover letter, the CAHPS PCMH Adult Survey, and a prepaid business reply envelope. The cover letter, printed on practice-specific letterhead and signed (facsimile) by a practice representative, was written as though it came directly from the practice. No incentives were used.

Mail: Two mailing waves occurred during data collection:

Year 1 — First Wave: July 2, 2012
 — Second Wave: July 23, 2012

Respondents who mailed or completed the survey online prior to the second wave did not receive the second mailing.

Internet: Respondents completing the survey online did so through an electronic data capture system hosted at the University of Vermont. REDCap (Research Electronic Data Capture) is a secure, web-based application designed to support data capture for research studies. Respondents were instructed to complete the survey via the REDCap system and submit the survey electronically.

Data Management

Surveys returned by mail were scanned into an electronic database using Cardiff TeleForm software (Cardiff TeleForm Desktop, Version 10.0, 2011, Verity Inc.). For quality assurance purposes, at least one out of every 20 surveys scanned was validated with the original paper survey. Processing of the scanned surveys occurred with 99.8% accuracy. The 0.2% error rate was largely due to respondents marking answers outside of the data capture zones (i.e. responses checked outside of the designated boxes). The REDCap and mail-based electronic databases were merged for analysis.

General Analysis & Coding

Frequencies and descriptives presented in this report were generated using IBM SPSS Statistics, Version 20.0 (SPSS Inc., Chicago, IL). Returned surveys were coded as complete and valid if the patient reported seeing the clinician in the past 12 months and answered at least one additional item on the questionnaire. Surveys were ineligible if they contained evidence the patient did not see the listed clinician in the past 12 months or did not meet the age criteria. The ineligible classification also was applied to surveys sent to those who were deceased or who could not complete the surveys due to language barriers. Only complete and valid surveys were used in this report's primary analyses. Response rates were calculated by dividing the complete and valid surveys by the total mailing sample (at the practice- or state-level, minus the ineligible patients).

If a patient returned two surveys, only data from the first survey received was analyzed. Missing responses, multiple marks (when not instructed), and inappropriately answered questions were excluded from the result calculations. Inappropriately answered questions were defined as cases when respondents answered items when instructed to skip them based on their response to a previous question. Questions were also coded as inappropriately answered when patients provided answers to questions within a skip pattern after inappropriately skipping or providing multiple marks to the initial gate question. Surveys with evidence a proxy completed or assisted the patient in completing the survey were included in the analyses.

Some question responses were combined from the original response sets to maximize the differences between relative groups. Patient age (years) was calculated from the patient's date of birth (acquired from the practice) and grouped into five categories: "18 to 34;" "35 to 44;" "45 to 54;" "55 to 64;" and "65 and older." Patient race was grouped into "White" and "Other," with the "Other" category representing those who identified themselves as being "African American," "Asian," "Pacific Islander," "American Indian/Alaska Native," "Other," or multiracial (i.e. more than one response selected). Responses of "5 to 9" and "10 or more times" for the question examining the number of times the patient saw the listed provider during the

measurement period were combined into "5 or more times." For questions with "Never," "Sometimes," "Usually," and "Always" response choices, "Never" and "Sometimes" responses were combined. This was done since several studies utilizing the CAHPS surveys showed that respondents rarely picked the "Never" response option.

Composite Results

Composite results are presented in graphical format to facilitate aggregation of information from multiple questions. The composites summarize six areas of measurement (specified by NCQA): Self-Management Support, Access to Care, Communication, Shared Decision-Making, Comprehensiveness (Adult Behavior), and Office Staff. Results from each question used in the composite calculations are located in tables immediately below the figures.

The methods used to calculate the composite proportions were as follows:

- Step 1:* The number of respondents who responded to each response choice was totaled. Response choices of "Never" and "Sometimes" were combined. For Shared Decision Making, "Yes" and "A lot" and then "No" and "Not at all" were combined.
- Step 2:* The proportion for each response choice (or combination) was calculated. Missing data were not included in the calculation.
- Step 3:* The average proportion responding to each choice across all questions in the specified composite was generated.

The CAHPS PCMH Adult Survey also measured patient experiences in the areas of Information and Coordination of Care. NCQA currently does not recommend survey vendors create composite results for these measures. Only the results from the individual questions assessing Information and Coordination of Care are presented.

Results

Response Rate

Table 2 displays the total number of surveys mailed and response rates for the eligible respondents.

| Table 2. Response Rate | Year 1 (2012) | |
|----------------------------------|---------------|---------|
| | Practice | Vermont |
| Number of Surveys Mailed | 128 | 11813 |
| Number of Eligible Respondents | 48 | 3825 |
| Number of Ineligible Respondents | 0 | 168 |
| Response Rate | 37.5% | 32.8% |

Eligible Respondent Characteristics

Table 3 shows the demographics, visit information, and health information for the eligible respondents.

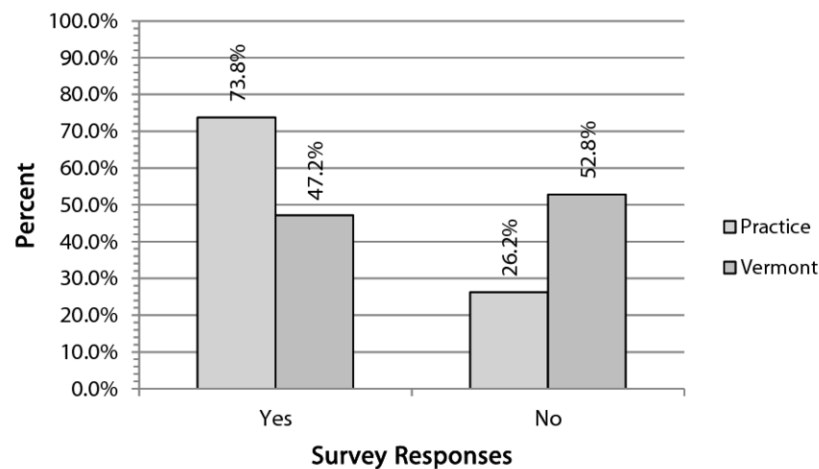
| Table 3. Eligible Respondent Characteristics | | Year 1 (2012) | | | |
|--|--|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Measure | Responses | n | % | n | % |
| Age as of the last day of the measurement period (years) | 18 to 34 | 7 | 14.6% | 435 | 11.4% |
| | 35 to 44 | 13 | 27.1% | 342 | 8.9% |
| | 45 to 54 | 11 | 22.9% | 626 | 16.4% |
| | 55 to 64 | 10 | 20.8% | 975 | 25.5% |
| | 65 or older | 7 | 14.6% | 1447 | 37.8% |
| Gender | Male | 9 | 18.8% | 1506 | 39.4% |
| | Female | 39 | 81.3% | 2319 | 60.6% |
| Race | White | 44 | 95.7% | 3494 | 95.3% |
| | Other | 2 | 4.3% | 174 | 4.7% |
| Ethnicity | Hispanic or Latino | 1 | 2.2% | 34 | 1.0% |
| | Not Hispanic or Latino | 45 | 97.8% | 3531 | 99.0% |
| Education | 8th grade or less | 0 | 0.0% | 103 | 2.8% |
| | Some high school, but did not graduate | 0 | 0.0% | 171 | 4.7% |
| | High school graduate or GED | 9 | 19.6% | 1097 | 29.9% |
| | Some college or 2-year degree | 12 | 26.1% | 996 | 27.1% |
| | 4-year college graduate | 10 | 21.7% | 557 | 15.2% |
| | More than 4-year college degree | 15 | 32.6% | 751 | 20.4% |
| Patient-reported visits with the listed provider during the measurement period | 1 visit | 13 | 27.7% | 970 | 26.4% |
| | 2 visits | 13 | 27.7% | 1016 | 27.7% |
| | 3 visits | 13 | 27.7% | 672 | 18.3% |
| | 4 visits | 5 | 10.6% | 431 | 11.8% |
| | 5 or more visits | 3 | 6.4% | 579 | 15.8% |
| Overall health rating | Excellent | 8 | 16.7% | 563 | 15.0% |
| | Very good | 19 | 39.6% | 1371 | 36.4% |
| | Good | 18 | 37.5% | 1331 | 35.4% |
| | Fair | 1 | 2.1% | 414 | 11.0% |
| | Poor | 2 | 4.2% | 86 | 2.3% |

| Table 3. Continued | | Year 1 (2012) | | | |
|--|-----------|---------------|-------|----------|-------|
| | | Practice | | Vermont | |
| Measure | Responses | <i>n</i> | % | <i>n</i> | % |
| Overall mental or emotional health rating | Excellent | 11 | 23.9% | 932 | 24.7% |
| | Very good | 17 | 37.0% | 1297 | 34.4% |
| | Good | 15 | 32.6% | 1105 | 29.3% |
| | Fair | 3 | 6.5% | 371 | 9.9% |
| | Poor | 0 | 0.0% | 61 | 1.6% |
| At least one chronic health condition reported | Yes | 27 | 61.4% | 2812 | 77.3% |
| | No | 17 | 38.6% | 826 | 22.7% |

Self-Management Support

Figure 1 shows the composite results for the two questions measuring Self-Management Support (Table 4) in the CAHPS PCMH Adult Survey.

Figure 1. Composite Results for Self-Management Support (Adult)

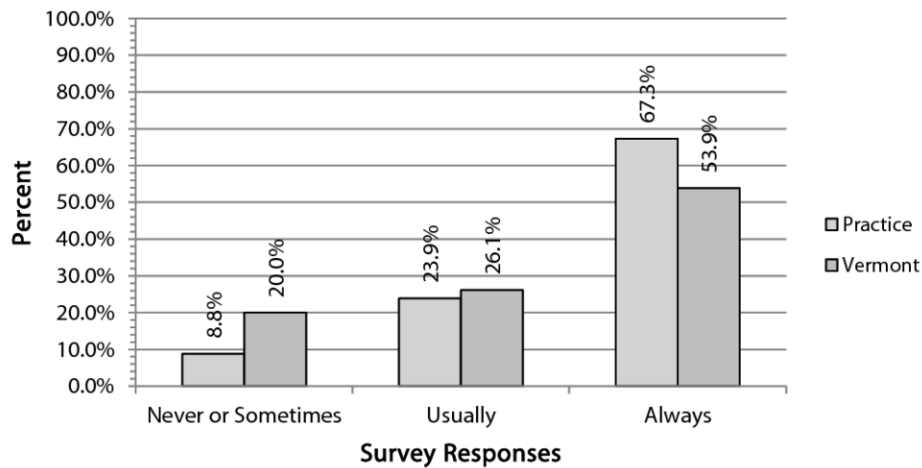


| Table 4. Frequency of Responses for the Adult Items Measuring Self-Management Support | | Year 1 (2012) | | | |
|--|-----------|---------------|-------|----------|-------|
| | | Practice | | Vermont | |
| Question | Responses | <i>n</i> | % | <i>n</i> | % |
| In the last 12 months, did anyone in this provider's office talk with you about specific goals for your health? | Yes | 38 | 80.9% | 2085 | 57.8% |
| | No | 9 | 19.1% | 1520 | 42.2% |
| In the last 12 months, did anyone in this provider's office ask you if there are things that make it hard for you to take care of your health? | Yes | 30 | 66.7% | 1311 | 36.5% |
| | No | 15 | 33.3% | 2276 | 63.5% |

Access to Care

Figure 2 shows the composite results for the six questions measuring Access to Care (Table 5) in the CAHPS PCMH Adult Survey.

Figure 2. Composite Results for Access to Care (Adult)

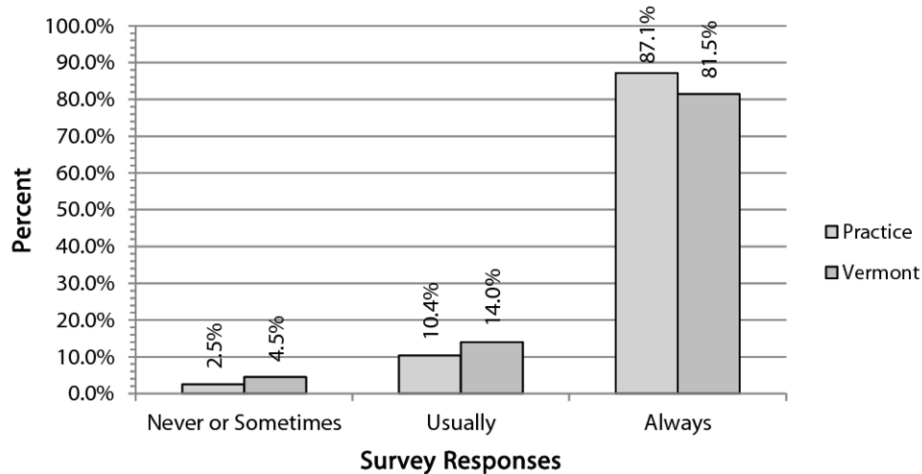


| Table 5. Frequency of Responses for the Adult Items Measuring Access to Care | | Year 1 (2012) | | | |
|---|--------------------|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Question | Responses | n | % | n | % |
| In the last 12 months, when you phoned this provider's office to get an appointment for care you needed right away, how often did you get an appointment as soon as you needed? | Never or Sometimes | 2 | 9.1% | 194 | 9.9% |
| | Usually | 6 | 27.3% | 506 | 25.9% |
| | Always | 14 | 63.6% | 1256 | 64.2% |
| In the last 12 months, when you made an appointment for a check-up or routine care with this provider, how often did you get an appointment as soon as you needed? | Never or Sometimes | 3 | 7.9% | 176 | 6.0% |
| | Usually | 6 | 15.8% | 773 | 26.3% |
| | Always | 29 | 76.3% | 1989 | 67.7% |
| In the last 12 months, how often were you able to get the care you needed from this provider's office during evenings, weekends, or holidays? | Never or Sometimes | 2 | 28.6% | 280 | 51.8% |
| | Usually | 2 | 28.6% | 82 | 15.2% |
| | Always | 3 | 42.9% | 179 | 33.1% |
| In the last 12 months, when you phoned this provider's office during regular office hours, how often did you get an answer to your medical question that same day? | Never or Sometimes | 1 | 5.3% | 221 | 11.7% |
| | Usually | 4 | 21.1% | 550 | 29.1% |
| | Always | 14 | 73.7% | 1119 | 59.2% |
| In the last 12 months, when you phoned this provider's office during after office hours, how often did you get an answer to your medical question as soon as you needed? | Never or Sometimes | 0 | 0.0% | 52 | 20.7% |
| | Usually | 2 | 25.0% | 49 | 19.5% |
| | Always | 6 | 75.0% | 150 | 59.8% |
| Wait time includes time spent in the waiting room and exam room. In the last 12 months, how often did you see this provider within 15 minutes of your appointment time? | Never or Sometimes | 1 | 2.1% | 724 | 19.9% |
| | Usually | 12 | 25.5% | 1484 | 40.8% |
| | Always | 34 | 72.3% | 1432 | 39.3% |

Communication

Figure 3 shows the composite results for the six questions measuring Communication (Table 6) in the CAHPS PCMH Adult Survey.

Figure 3. Composite Results for Communication (Adult)

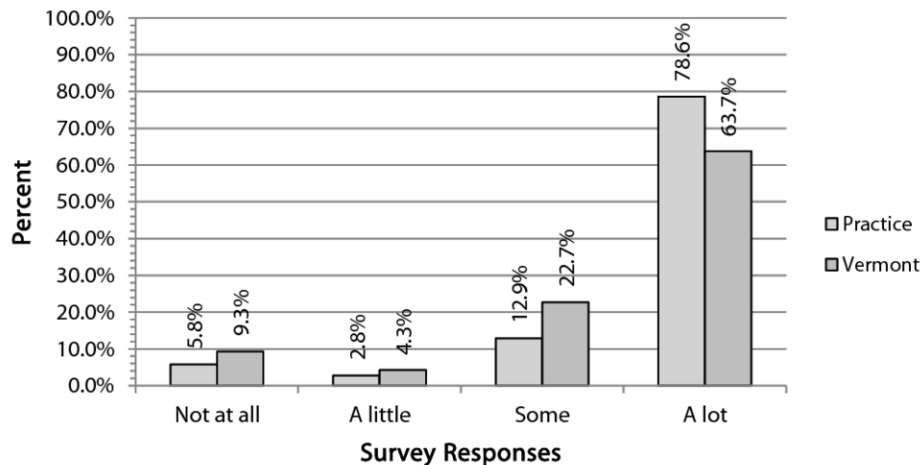


| Table 6. Frequency of Responses for the Adult Items Measuring Communication | | Year 1 (2012) | | | |
|---|--------------------|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Question | Responses | n | % | n | % |
| In the last 12 months, how often did this provider explain things in a way that was easy to understand? | Never or Sometimes | 1 | 2.1% | 104 | 2.9% |
| | Usually | 3 | 6.4% | 475 | 13.0% |
| | Always | 43 | 91.5% | 3062 | 84.1% |
| In the last 12 months, how often did this provider listen carefully to you? | Never or Sometimes | 1 | 2.1% | 177 | 4.9% |
| | Usually | 4 | 8.5% | 401 | 11.0% |
| | Always | 42 | 89.4% | 3061 | 84.1% |
| In the last 12 months, how often did this provider give you easy to understand information about your health questions or concerns? | Never or Sometimes | 1 | 2.3% | 146 | 4.6% |
| | Usually | 4 | 9.1% | 417 | 13.3% |
| | Always | 39 | 88.6% | 2578 | 82.1% |
| In the last 12 months, how often did this provider seem to know the important information about your medical history? | Never or Sometimes | 1 | 2.1% | 232 | 6.4% |
| | Usually | 13 | 27.7% | 787 | 21.7% |
| | Always | 33 | 70.2% | 2606 | 71.9% |
| In the last 12 months, how often did this provider show respect for what you had to say? | Never or Sometimes | 2 | 4.3% | 138 | 3.8% |
| | Usually | 1 | 2.1% | 314 | 8.6% |
| | Always | 44 | 93.6% | 3193 | 87.6% |
| In the last 12 months, how often did this provider spend enough time with you? | Never or Sometimes | 1 | 2.1% | 168 | 4.6% |
| | Usually | 4 | 8.5% | 597 | 16.4% |
| | Always | 42 | 89.4% | 2869 | 78.9% |

Shared Decision-Making

Figure 4 shows the composite results for the three questions measuring Shared Decision-Making (Table 7) in the CAHPS PCMH Adult Survey. "Not at all" and "No" and then "A lot" and "Yes" responses were combined during the calculations for the composite results. For presentation purposes, these grouped variables are represented as "Not at all" or "A lot" in the figure below.

Figure 4. Composite Results for Shared Decision-Making (Adult)

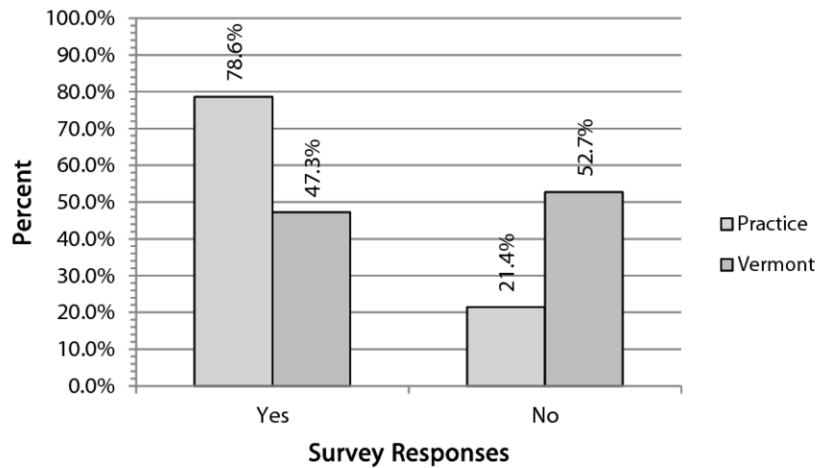


| Table 7. Frequency of Responses for the Adult Items Measuring Shared Decision-Making | | Year 1 (2012) | | | |
|--|------------|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Question | Responses | n | % | n | % |
| When you talked about starting or stopping a prescription medicine, how much did this provider talk about the reasons you might want to take a medicine? | Not at all | 0 | 0.0% | 24 | 1.3% |
| | A little | 2 | 8.3% | 83 | 4.6% |
| | Some | 3 | 12.5% | 553 | 30.3% |
| | A lot | 19 | 79.2% | 1163 | 63.8% |
| When you talked about starting or stopping a prescription medicine, how much did this provider talk about the reasons you might not want to take a medicine? | Not at all | 2 | 8.7% | 197 | 10.9% |
| | A little | 0 | 0.0% | 149 | 8.2% |
| | Some | 6 | 26.1% | 682 | 37.7% |
| | A lot | 15 | 65.2% | 780 | 43.1% |
| When you talked about starting or stopping a prescription medicine, did this provider ask you what you thought was best for you? | Yes | 21 | 91.3% | 1518 | 84.2% |
| | No | 2 | 8.7% | 284 | 15.8% |

Comprehensiveness (Adult Behavior)

Figure 5 displays the composite results for the three questions measuring Comprehensiveness (Adult Behavior; Table 8) in the CAHPS PCMH Adult Survey.

Figure 5. Composite Results for Comprehensiveness (Adult Behavior)

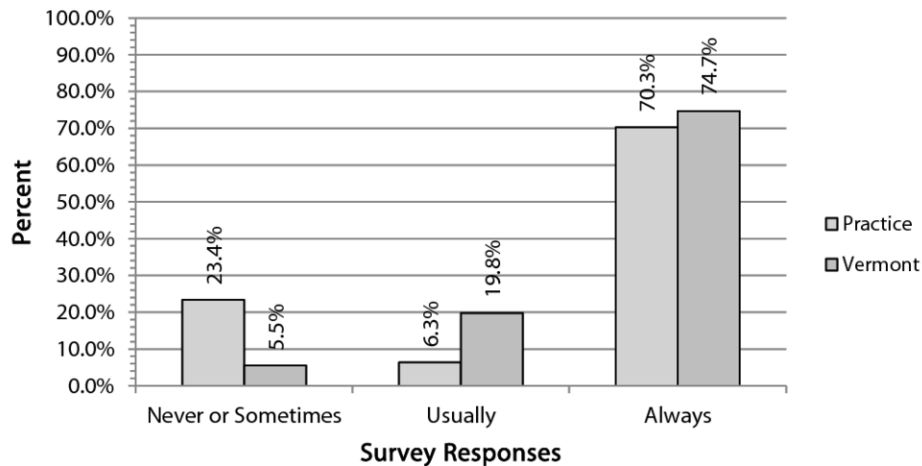


| Table 8. Frequency of Responses for the Adult Items Measuring Comprehensiveness (Adult Behavior) | | Year 1 (2012) | | | |
|---|-----------|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Question | Responses | n | % | n | % |
| In the last 12 months, did anyone in this provider's office ask you if there was a period of time when you felt sad, empty, or depressed? | Yes | 36 | 78.3% | 1809 | 50.2% |
| | No | 10 | 21.7% | 1796 | 49.8% |
| In the last 12 months, did you and anyone in this provider's office talk about things in your life that worry you or cause you stress? | Yes | 40 | 85.1% | 1935 | 53.5% |
| | No | 7 | 14.9% | 1679 | 46.5% |
| In the last 12 months, did you and anyone in this provider's office talk about a personal problem, family problem, alcohol use, drug use, or a mental or emotional illness? | Yes | 34 | 72.3% | 1374 | 38.1% |
| | No | 13 | 27.7% | 2237 | 61.9% |

Office Staff

Figure 6 displays the composite results for the two questions measuring Office Staff (Table 9) in the CAHPS PCMH Adult Survey.

Figure 6. Composite Results for Office Staff (Adult)



| Table 9. Frequency of Responses for the Adult Items Measuring Office Staff | | Year 1 (2012) | | | |
|--|--------------------|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Question | Responses | n | % | n | % |
| In the last 12 months, how often were clerks and receptionists at this provider's office as helpful as you thought they should be? | Never or Sometimes | 6 | 25.0% | 257 | 7.1% |
| | Usually | 2 | 8.3% | 920 | 25.6% |
| | Always | 16 | 66.7% | 2418 | 67.3% |
| In the last 12 months, how often did clerks and receptionists at this provider's office treat you with courtesy and respect? | Never or Sometimes | 5 | 21.7% | 142 | 3.9% |
| | Usually | 1 | 4.3% | 501 | 13.9% |
| | Always | 17 | 73.9% | 2952 | 82.1% |

Information

NCQA does not currently recommend calculating composite scores for the questions measuring Information. Table 10 displays the results for the two questions assessing this measure.

| Table 10. Frequency of Responses for the Adult Items Measuring Information | | Year 1 (2012) | | | |
|--|-----------|---------------|-------|---------|-------|
| | | Practice | | Vermont | |
| Question | Responses | n | % | n | % |
| Did this provider's office give you information about what to do if you needed care during evenings, weekends, or holidays? | Yes | 45 | 95.7% | 2640 | 73.7% |
| | No | 2 | 4.3% | 943 | 26.3% |
| Some offices remind patients between visits about tests, treatment or appointments. In the last 12 months, did you get any reminders from this provider's office between visits? | Yes | 30 | 65.2% | 2309 | 64.0% |
| | No | 16 | 34.8% | 1298 | 36.0% |

Coordination of Care

NCQA does not currently recommend calculating composite scores for the questions measuring Coordination of Care. Table 11 displays the results for the three questions assessing this measure.

| Table 11. Frequency of Responses for the Adult Items Measuring Coordination of Care | | Year 1 (2012) | | | |
|--|--------------------|---------------|-------|----------|-------|
| | | Practice | | Vermont | |
| Question | Responses | <i>n</i> | % | <i>n</i> | % |
| In the last 12 months, when this provider ordered a blood test, x-ray, or other test for you, how often did someone from this provider's office follow up to give you those results? | Never or Sometimes | 1 | 2.6% | 287 | 10.0% |
| | Usually | 6 | 15.4% | 406 | 14.2% |
| | Always | 32 | 82.1% | 2172 | 75.8% |
| In the last 12 months, how often did the provider seem informed and up-to-date about the care you got from specialists? | Never or Sometimes | 2 | 6.5% | 292 | 14.6% |
| | Usually | 8 | 25.8% | 550 | 27.5% |
| | Always | 21 | 67.7% | 1157 | 57.9% |
| In the last 12 months, did you and anyone in this provider's office talk at each visit about all the prescription medicines you were taking? | Yes | 31 | 83.8% | 2689 | 86.7% |
| | No | 6 | 16.2% | 414 | 13.3% |