Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
			SATISFACTION WITH CARE QUESTIONNAIRE SPECIFICATIONS CRITERIA INTTYPE=C001, C002, C003, C004, C005, C006 SPALIVE=1 SEASON=FALL SPPROXY=SP or PROXY until BOX PA1 Other: N/A PLACEMENT Administer after NAQ.		
MCQUALTY	SC1	code 1	SHOW CARD SC1 We're interested in how you feel about the health care [you have/(SP) has] received [over the past year/since (TODAY'S DATE - 12 MONTHS, MONTH AND YEAR)] from doctors and hospitals. Please tell me how satisfied or dissatisfied you have been with the following: The overall quality of the health care [you have /(SP) has] received [over the past year/since (TODAY'S DATE - 12 MONTHS)]. Have you been very satisfied, satisfied, dissatisfied, or very dissatisfied?	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC2 - MCAVAIL
MCAVAIL	SC2	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The availability of health care at night and on weekends.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC3 - MCEASE
MCEASE	SC3	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The ease and convenience of getting to a doctor or other health professional from where [you/(SP)] [live/lives].	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC4 - MCCOSTS
MCCOSTS	SC4	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The out-of-pocket costs [you/(SP)] paid for health care.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC5 - MCINFO

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
MCINFO	SC5	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The information given to [you/you or (SP)] about what was wrong with [you/(SP)].	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC7-MCCONCRN
MCCONCRN	SC7	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The concern of doctors or other health professionals for [your/(SP's)] overall health rather than just for an isolated symptom or disease.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC8 - MCSAMLOC
MCSAMLOC	SC8	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] Getting all [your/(SP's)] health care needs taken care of at the same location.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC8A - MCSPECAR
MCSPECAR	SC8A	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The availability of care by specialists when [you/(SP)] (feel/feels) (you/he/she) (need/needs) it.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC8B - MCTELANS
MCTELANS	SC8B	code 1	SHOW CARD SC1 [Please tell me how satisfied or dissatisfied you have been with . . .] The ease of obtaining answers to questions over the telephone about [your/(SP's)] treatment or prescriptions.	(01) VERY SATISFIED (02) SATISFIED (03) DISSATISFIED (04) VERY DISSATISFIED (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	SC9-MDISSFY
MDISSFY	SC9	verbatim text	Please think about all of the health care services [you/(SP)] [receive/receives], including services provided by doctors or other health professionals, hospitals and pharmacies. What things, if anything, about the health care services [you/(SP)] [receive/receives] are you dissatisfied with?	(01) RESPONDENT IS NOT DISSATISFIED WITH ANYTHING (91) RESPONDENT IS DISSATISFIED (RECORD VERBATIM IN THE NEXT SCREEN) (-8) Don't Know (-9) Refused	(01) SC10A - MCWORRY (91) SC9 - MCDISVB (-8) SC10A - MCWORRY (-9) SC10A - MCWORRY

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
MCDISVB	SC9	verbatim text	[Please think about all of the health care services [you/(SP)] (receive/receives), including services provided by doctors or other health professionals, hospitals and pharmacies. What things, if anything, about the health care services [you/(SP)] (receive/receives) are you dissatisfied with?]	(01) [Continuous answer.]	SC10A - MCWORRY
MCWORRY	SC10A	list	Please tell me whether each of the following statements is true or false. [You/(SP)] (worry/worries) about (your/his/her) health more than other people (your/his/her) age. [Is this statement true or false?]	(01) TRUE (02) FALSE (-8) Don't Know (-9) Refused	SC10A - MCAVOID
MCAVOID	SC10A	list	[Please tell me whether each of the following statements is true or false.] [You/(SP)] will do just about anything to avoid going to the doctor.	(01) TRUE (02) FALSE (-8) Don't Know (-9) Refused	SC10A - MCSICK
MCSICK	SC10A	list	[Please tell me whether each of the following statements is true or false.] When [you/(SP)] [are/is] sick, [you/he/she] [try/tries] to keep it to [yourself/himself/herself].	(01) TRUE (02) FALSE (-8) Don't Know (-9) Refused	SC10A - MCDRSOON
MCDRSOON	SC10A	list	[Please tell me whether each of the following statements is true or false.] Usually, [you/(SP)] (go/goes) to the doctor or other health professional as soon as (you/he/she) (start/starts) to feel bad.	(01) TRUE (02) FALSE (-8) Don't Know (-9) Refused	BOX PA1
	BOX PA1		IF IN4-SPPROXY=1/SP then go to PAINTRO- PAINTRO. ELSE GO TO BOX SCEND		
PAINTRO	PAINTRO	no entry	Now I have some questions about how you make health care decisions. Answers to questions like these will help Medicare better understand how people use medical services. Please keep in mind that there are no right or wrong answers to these questions. Your opinions and experiences are important to us.	(01) CONTINUE (-7) Empty	PA3 - PAINSTRC
PAINSTRC	PA3	code 1	SHOW CARD SC2 Doctors often give instructions about how you should care for yourself at home, like changing a bandage, taking medicines on schedule, or applying ice packs. How confident are you that you can follow instructions to care for yourself at home?	(01) VERY CONFIDENT (02) CONFIDENT (03) SOMEWHAT CONFIDENT (04) NOT AT ALL CONFIDENT (-8) Don't Know (-9) Refused	PA4 - PAMEDREC
PAMEDREC	PA4	code 1	SHOW CARD SC2 Doctors also often give instructions about changing your habits or lifestyle, such as changing your diet, stopping smoking, or getting regular exercise. How confident are you that you can follow this kind of instruction, to change your habits or lifestyle?	(01) VERY CONFIDENT (02) CONFIDENT (03) SOMEWHAT CONFIDENT (04) NOT AT ALL CONFIDENT (-8) Don't Know (-9) Refused	PA5 - PACHGDRS

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
PACHGDRS	PA5	code 1	SHOW CARD SC3 Please use this card to respond to the following questions. How likely are you to change doctors or other health professionals if you are dissatisfied with the way you and your doctor or other health professional communicate?	(01) VERY LIKELY (02) LIKELY (03) UNLIKELY (04) VERY UNLIKELY (-8) Don't Know (-9) Refused	PA6-PADISAGR
PADISAGR	PA6	code 1	SHOW CARD SC3 How likely are you to tell your doctor or other health professional when you disagree with him or her?	(01) VERY LIKELY (02) LIKELY (03) UNLIKELY (04) VERY UNLIKELY (-8) Don't Know (-9) Refused	PA10-PARXINFO
PARXINFO	PA10	code 1	SHOW CARD SC4 These next questions are about practices sometimes associated with receiving medical care. Please tell me if you always, usually, sometimes, or never do the following: Do you always, usually, sometimes, or never read information about a new prescription, such as side effects and precautions?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	PA11-PADRQUEX
PADRQUEX	PA11	code 1	SHOW CARD SC4 Do you always, usually, sometimes, or never... Bring with you to your doctor or other health professional visits a list of questions or concerns you want to cover?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	PA12-PAANSWR
PAANSWR	PA12	code 1	SHOW CARD SC4 [Do you always, usually, sometimes, or never...] Leave your doctor or other health professional's office feeling that all of your concerns or questions have been fully answered?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	PA13-PALISTRX
PALISTRX	PA13	code 1	SHOW CARD SC4 [Do you always, usually, sometimes, or never...] Take a list of all of your prescribed medicines to your doctor or other health professional visits?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (05) NOT APPLICABLE (-8) Don't Know (-9) Refused	PA14-PATRSLT

Variable Name	MR Screen Name	Question Type	Question Text/Description	Code List	Routing
PATRSLT	PA14	code 1	SHOW CARD SC4 [Do you always, usually, sometimes, or never...] Make sure you understand the results of any medical test or procedure such as an x-ray, blood test, or EKG for heart conditions?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	PA15-PAOPTION
PAOPTION	PA15	code 1	SHOW CARD SC4 [Do you always, usually, sometimes, or never...] Talk with your doctor or other health professional about your options if you need tests, follow-up care, or a referral for care by a medical specialist?	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	PA21-PADVICE
PADVICE	PA21	code 1	SHOW CARD SC4 [Do you always, usually, sometimes, or never...] Contact your doctor or other health professional's office to get medical advice when you need it.	(01) ALWAYS (02) USUALLY (03) SOMETIMES (04) NEVER (-8) Don't Know (-9) Refused	BOX SCEND
	BOX SCEND	routing	GO TO CMQ.		