

Report of the
2014 SURVEY OF VETERAN ENROLLEES'
HEALTH AND RELIANCE UPON VA

Prepared by



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Prologue

Personalized, proactive, patient-driven health care is at the forefront of the Veterans Health Administration's (VHA) strategic vision. It is the unifying theme of the VHA 2013-2018 Strategic Plan. It is also at the core of the Blueprint for Excellence, VHA's plan to address deficiencies found in its access to and delivery of health care. In order to best serve Veterans, VHA must first understand and then incorporate the Veteran perspective into the shaping of its system of health care delivery.

The Survey of Veteran Enrollees' Health and Reliance upon VA (Survey of Enrollees) enhances our understanding of who the Veterans we serve are, and how they feel about their health and their health care. It provides demographic information about the Veterans enrolled in VA health care that cannot be obtained elsewhere. This information includes employment status, marital status, income, insurance coverage, service era, race, and ethnicity. The survey tells us about Veterans' perceptions of the quality, availability, and accessibility of VA health care. It helps us to see how Veterans view their current health status and how they think they might use VA in the future. Finally, it informs us about Veterans understanding of VA health care benefits and access to non-VA health care alternatives.

In order to assure that we are capturing the full voice of the Veteran, the sampling strategy for the 2014 Survey was modified to emphasize inclusion of both Hispanic enrollees and female enrollees. These two populations are expected to be two of the fastest growing within the overall population of enrolled Veterans. It is important to account for the unique perspectives that these groups might bring as VHA continues to strive to put the Veteran in the driver's seat of their health care planning.

This report provides survey response data calculated as weighted estimates. The data are presented in an array of tables designed to allow comparisons with previous years. A summary of select findings can be found in the Executive Summary. Themes of note include a dramatic increase in the number of enrolled Veterans with annual incomes lower than \$16,000, a decrease in both unemployment rates and in the number of enrollees who are retired or otherwise not in the labor force, and a shift in the periods of service represented among our enrolled Veteran population. We hope these themes, as well as all the information contained within this report, will assist those who have taken on the commitment to serve Veterans and provide for their health care needs.

/s/

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EXECUTIVE SUMMARY

Introduction

The Survey of Veteran Enrollees' Health and Reliance upon VA (Survey of Enrollees) is an annual survey of more than 40,000 Veterans enrolled in VA's health care system. These Veterans are referred to as enrollees in this document. The survey is designed to provide VHA an in-depth understanding of enrollee demographics, available health care options, perceptions of VA health care, and self-reported health status.

The Survey of Enrollees was developed in 1999 to support VHA's planning efforts and to inform the VA Enrollee Health Care Projection Model (EHCPM), VHA's tool for projecting enrollment, utilization, and expenditures. Over the years, survey data have also been used to analyze policy decisions, provide insights into specific populations, and inform management decisions affecting VHA's delivery of care. This report is intended to provide a user-friendly synopsis of all information collected by the 2014 Survey of Enrollees.

Survey Methodology

For 2014, the survey was administered using a multi-mode (telephone, mail, and Web) approach. All sampled Veterans were mailed a pre-survey notification letter informing them that they would receive a telephone call or a mailed survey. All sampled Veterans had the option to self-select into a Web-administered survey, using the Web link provided in the pre-survey notification letter.

Both female Veterans and Veterans who identify themselves as Hispanic or Latino are expected to be two of the fastest growing populations of enrollees in future years. Therefore, in 2014, VHA oversampled for both of these cohorts in order to better incorporate their perspective into VHA's planning efforts.

The 2014 survey data collection began on February 15 and concluded on June 30. A total of 151,683 Veterans were contacted, of which 42,324 completed the survey. Of these enrollees, 25,447 completed the survey by phone, 11,009 completed the survey by mail, and 5,868 completed the survey via the Web link.

The average completion time for the telephone survey was 18.8 minutes. The overall telephone cooperation rate was 79 percent, with cooperation rate defined as the percentage of contacted, eligible respondents (46,249) who completed the survey. Further detail on survey methodology can be found in *Appendix A*.

Select Findings

Survey results are weighted to represent the population of Veterans enrolled in the VA health care system. The enrollee population at the time of survey weighting (September 30, 2013) was 8,486,965 (Note: this does not include enrollees who live outside of the United States or its territories). In 2014, the largest proportion of enrollees (41%) was enrolled in Priority Groups 1–3. The largest group of Veterans indicated they were 65 or older (47%). The median age was 64. The median reported income was \$32,000.¹

Demographic and Socioeconomic Characteristics of the Enrollee Population

The typical enrollee continues to be male, married, and White. However, the enrollee population continues to become more diverse. The number of female enrollees showed a statistically significant increase (7.2% in 2014 as compared to 6.8% in 2013), as did Black/African American enrollees (13.6% in 2014 as compared to 12.4% in 2013) and Hispanic/Latino enrollees (6.7% in 2014 as compared to 6.1% in 2013). (*Table 4, Table 5, Table 6, and Table 9*)

Half of enrollees (50%) report an income of less than \$36,000, a statistically significant increase from 2013 (47%). This increase appears to be driven by a significant increase in enrollees whose income falls below \$16,000. The percentage of enrollees in this category rose to 21 percent in 2014 as compared to 18 percent in 2013, a significant increase. (*Table 3*)

The unemployment rate for enrolled Veterans decreased to 15 percent in 2014 from 16 percent in 2013. More than half of enrollees (57%) stated that they were not actively seeking employment (i.e., retired, a homemaker, or a student). This is a significant decrease over the 59 percent of enrollees reporting the same in 2013. (*Table 7 and Table 8*)

In 2014, the majority of enrolled Veterans (80%) indicated that they had served one term of active duty. More than half a million enrollees have served three or more terms of active duty. (*Table 11*)

Enrollees from the Vietnam Era continue to represent the largest percentage of enrolled Veterans. However, this population showed a statistically significant decrease to 37 percent in 2014 from 42 percent in 2013. Other periods of service, World War II Era, Gulf War Era, and Current Era all saw statistically significant increases in their populations. (*Table 12*)

¹ Enrollees reported income either via a specific income value or via an income range. If an enrollee reported an income range, the range midpoint was assigned as the enrollee's income. Median income was then calculated for all enrollees with an income value. Don't know/Refusal responses are not included in this calculation.

Health Status, Key Drivers of Enrollees' Health Care Decision-making, and Planned Future Use of VHA Services

Overall, 67 percent of enrollees stated that their health was “Excellent”, “Very Good”, or “Good” as compared to other people their age. While those reporting their health as “Excellent” (11%) or “Very Good” (25%) decreased slightly from previous years, there was a statistically significant increase in those reporting their health as “Good” (32%) or “Fair” (22%). (Table 14)

In addition, although 63 percent of enrollees reported smoking at least 100 cigarettes in their lifetime, 70 percent of these enrollees also indicated that they do not currently smoke cigarettes at all. (Table 15 and Table 16)

There was an increase in overall enrollee concurrence (“Completely Agree” or “Agree”) that “There is a VA provider in my area that offers all of the health care services that Veterans like me need”. This increase is driven by a statistically significant increase in the percentage of enrollees who indicated “Completely Agree” with the statement and a statistically significant decrease in the percentage of enrollees who “Disagree” with the statement. Conversely, there was a decrease in the overall enrollee concurrence that “I have a doctor outside VA who I really like and trust”. This decrease was driven by a statistically significant decrease in enrollees who indicated “Agree” with the statement and a statistically significant increase in enrollees who indicated “Completely Disagree” with the statement. (Table 27 and Table 36)

Overall concurrence with two quality-oriented statements related to perceived respect from providers and satisfaction with care both decreased. The decrease in concurrence with the statement “VA health care providers treat their patients with respect” was driven by a statistically significant decrease in the percentage of enrollees who indicated “Agree” and a statistically significant increase in the percentage of enrollees who indicated “Neither Agree Nor Disagree”. The decrease in concurrence with the statement “Veterans like me who use VA are satisfied with the health care they receive” was driven by a statistically significant decrease in the percentage of enrollees who indicated “Agree”. (Table 32 and Table 33)

There were statistically significant changes in most responses to the statements “Veterans like me can get in and out of an appointment at VA in a reasonable time” and “When Veterans like me go to VA for an appointment, they do not wait a long time to see the doctor”, resulting in a decrease in overall concurrence. Similarly, overall concurrence that “It is easy for Veterans like me to get around in the VA health care facility” decreased, driven by statistically significant changes in most response categories. (Table 23, Table 26, and Table 28)

Enrollees’ overall concurrence that “VA offers Veterans like me the best value for our health care dollar” decreased. This decrease was driven by a statistically significant increase in the percent of enrollees who were neutral (“Neither Agree Nor Disagree”) about the statement. Similarly, there was a statistically significant decrease in concurrence that “VA is the most cost-

effective health care provider for Veterans like me”. This was driven by a statistically significant increase in enrollees who were neutral or who completely disagreed. (*Table 30 and Table 31*)

A statistically significant lower percentage of enrollees agreed with the statement that “If the cost of health care to me increases, I will use VA more” and a statistically significant higher percentage of enrollees were either neutral or completely disagreed with the statement. There was a statistically significant decrease in the percentage of enrollees who agreed or completely agreed that “My use of VA will decrease if my financial resources improve” and there was a statistically significant increase in the percentage of enrollees who were neutral about or who completely disagreed with the statement. (*Table 38 and Table 41*)

Public and Private Health Insurance Coverage of the Veteran Enrollee Population

Approximately one-in-eight (12%) enrollees said they were not enrolled in VA health care. This was a statistically significant decrease from the 14 percent of enrollees who said they were not enrolled in VA in 2013, suggesting more enrollees are becoming aware of their ability to access VA health care services. (*Table 43*)

Enrollees covered by TRICARE or TRICARE for Life decreased slightly, but statistically significantly, from 19 to 18 percent of enrollees. (*Table 54*)

Of the entire enrollee population in 2014, 51 percent reported additional coverage through Medicare. Additionally, 7 percent of enrollees indicated they had Medicaid coverage, a statistically significant increase from 2013 (6%). (*Table 47 and Table 53*)

Twenty-two percent of enrollees indicated they were uninsured.

Of enrollees who indicated that they had enrolled in the last five years, 19 percent indicated that it was due to a loss or reduction in other health insurance benefits. This is a statistically significant increase from the 16 percent who cited this reason in 2013. (*Table 45*)

Pharmaceutical Benefits Use

Thirty-three percent of enrollees responded that they did not have prescription drug coverage through VA, which may indicate lack of awareness about this benefit. This is potentially supported by a statistically significant increase from 2013 to 2014 in the number of enrollees who responded “Don’t Know” or refused to answer (10% to 12%). (*Table 59*)

Both the percentage of enrollees participating in Medicare Part D prescription drug plans and the percentage who indicated they had prescription drug coverage through a private insurance plan increased in 2014. (*Table 52 and Table 57*)

There was a statistically significant decrease in the number of enrollees who indicated the primary way they would use VA in the future was for prescriptions. The percentage had been 8 percent over the last three years and dropped to 7 percent in 2014. (*Table 42*)

MyHealthVet Web Site

In 2014, enrollees were asked about their awareness of the *MyHealthVet* Web site, VA's online personal health record system, designed to give Veterans more tools for making informed decisions about, and managing, their health care. Forty percent of enrollees indicated that they were aware of the Web site. Veterans used the site most frequently for health information, with 44 percent of enrollees who were aware of the site indicating they used it for this purpose. The second most frequent use of the site was for prescription re-ordering (36%). (*Table 19* and *Table 20*)

Awareness of Health Care Reform Law

The Affordable Care Act (ACA) was signed into law on March 23, 2010, with the majority of provisions to be phased in by January 2014. In order to continue to gauge enrollee understanding of the ACA and the Act's potential impact on enrollees' use of VHA, the survey asked how well enrollees understood the Act, and how it would change their use of the VA health care system. In 2014, 53 percent of respondents indicated that they did not understand the ACA, a statistically significant decrease from 2013 (65%). In addition, 61 percent of enrollees indicated that the law would not change their use of the VA health care system, a statistically significant increase from 2013 (52%). (*Table 62* and *Table 63*)

FULL FINDINGS

Purpose of the Survey of Enrollees

The annual Survey of Enrollees queries more than 40,000 Veterans enrolled in VHA in order to gain an in-depth understanding of enrollee demographics, available health care options, and perceptions and usage of VA health care services. This report is intended to provide a user-friendly synopsis of all information collected by the 2014 survey.

Brief History of the Survey of Enrollees

In October 1996, Congress enacted the *Veterans' Health Care Eligibility Reform Act of 1996* (Public Law 104-262). Among other requirements, this law required that VHA implement a priority-based enrollment system for Veterans who wished to use the VA health care system to give VHA the ability to plan to meet both immediate and future needs of Veterans enrolled in the VA health care system. The enrollment requirement became effective on October 1, 1998, which was the beginning of Fiscal Year (FY) 1999. A full description of priority levels can be found at the following Web site:

http://www.va.gov/healthbenefits/resources/priority_groups.asp

The Survey of Enrollees was developed in 1999 to support VHA's planning efforts and to inform the VA EHCPM, VHA's tool for projecting enrollment, utilization, and expenditures. Over the years, data from the survey also have been used to analyze policy decisions, provide insights into specific populations, and inform management decisions affecting VHA's delivery of care.

In addition to collecting basic demographic information about enrollees, the survey explores enrollees' insurance coverage, health care use (VA and non-VA), pharmaceutical use, attitudes and perceptions about VHA services (i.e., Key Drivers), perceived health status, barriers to accessing health care, and understanding of the new health care law.

Data Presentation

The majority of tables throughout this report provide three-year trended data, displaying both the weighted percent and weighted population counts. Percentage and population counts are rounded. Where applicable, the 2014 columns also contain a denotation if there is a statistically significant difference in response data compared to 2013. This significance is indicated by an asterisk ("*"). Statistical significance was set at the 95 percent confidence level.

Due to rounding, totals may not always sum to 100 percent. "Don't Know" and "Refused" responses are presented as DK and REF, respectively. A narrative summary of each data table identifies results of interest and significant changes in 2014 as compared to 2013.

Demographic Characteristics and Socioeconomic Status of 2014 Enrollees

In 2014, the largest proportion of enrollees (41%) was in Priority Groups 1–3. These three priority groups represent Veterans with service connected conditions. Most enrollees were aged 65 or older (47%). Half of enrollees (50%) reported household incomes of less than \$36,000 a year.

Table 1. Weighted count and percent of enrollees

2014				
Priority Group	1–3	4–6	7–8	Total
	3,487,844	2,832,393	2,166,728	8,486,965
	41.1%	33.4%	25.5%	
Age Group	<45	45–64	65 or older	
	1,639,838	2,877,424	3,969,703	
	19.3%	33.9%	46.8%	
Income Group	<\$36,000	\$36,000 or more	DK/REF	
	4,243,566	3,398,352	845,048	
	50.0%	40.0%	10.0%	

When reviewed as individual priority groups, most enrollees were in Priority Groups 5 and 8 (both at 24% and 23%, respectively); they were least likely to be in Priority Group 4 (2%).

Table 2. Priority Group populations

Priority Group	1	2	3	4	5	6	7	8
2012							7/8 Combined	
Enrollees	1,316,967	639,075	1,108,382	199,192	2,019,033	528,477	2,202,183	
Percent	16.4%	8.0%	13.8%	2.5%	25.2%	6.6%	27.5%	
2013							7	8
Enrollees	1,509,790	680,768	1,146,278	206,748	2,033,429	540,083	165,594	2,021,268
Percent	18.2%	8.2%	13.8%	2.5%	24.5%	6.5%	2.0%	24.3%
2014							7	8
Enrollees	1,642,015	684,122	1,161,707	205,715	2,026,553	600,125	186,195	1,980,533
Percent	19.3%	8.1%	13.7%	2.4%	23.9%	7.1%	2.2%	23.3%

In 2014, half of enrollees (50%) reported an annual income of less than \$36,000. Specifically, there was a statistically significant increase in the number of enrollees that reported their income was less than \$16,000 (18% to 21%). In addition, there was a significant decrease in the number of enrollees that indicated their income was been \$46,000 and \$55,999 (8% to 7%). However, more enrollees (23%) reported incomes of \$56,000 or more than any other income group. The median income was \$32,000.

Table 3. Income group details

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
<\$16,000	19.2%	1,535,809	18.1%	1,502,444	21.0% *	1,781,605
\$16,000-\$25,999	17.3%	1,386,492	16.2%	1,344,786	16.1%	1,365,071
\$26,000-\$35,999	13.5%	1,084,205	13.1%	1,088,962	12.9%	1,096,889
\$36,000-\$45,999	10.4%	832,312	10.3%	858,171	10.0%	848,395
\$46,000-55,999	7.3%	587,996	7.7%	643,307	7.3% *	616,853
\$56,000+	23.3%	1,865,881	23.3%	1,933,106	22.8%	1,933,104
DK/REF	9.0%	720,613	11.2%	933,181	10.0% *	845,048
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
- Not tested, not applicable

Ethnicity and Race

Through a series of questions, the 2014 survey asked enrollees to describe their ethnicity and race. In 2014, seven percent of enrollees reported that they are of Hispanic or Latino ethnicity, a significant increase from 2013 (6%).

Table 4. Would you describe yourself as Hispanic or Latino?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	5.7%	453,969	6.1%	502,808	6.7% *	569,841
No	92.0%	7,368,685	91.8%	7,623,658	91.5%	7,761,928
DK/REF	2.4%	190,653	2.1%	177,490	1.8% *	155,196
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
- Not tested, not applicable

In 2014, the largest proportion of enrollees (79%) described their race as White; this was followed by enrollees who described themselves as Black/African American (14%). The least commonly selected racial group was Native Hawaiian/Other Pacific Islander (1%). There was a statistically significant rise in Black/African American respondents (12% to 14%), a statistically significant decline in Native American/Alaska Native respondents (4.2% to 3.5%), and a statistically significant decline in respondents who indicated they were more than one race (2.9% to 2.7%).

Table 5. Enrollee populations by race categories (not mutually exclusive)

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
White	80.3%	6,430,720	79.1%	6,568,617	78.9%		6,695,299
Black/African American	12.4%	993,157	12.4%	1,027,174	13.6%	*	1,153,882
Native American/ Alaska Native	4.1%	327,716	4.2%	348,050	3.5%	*	297,330
Asian	1.1%	86,631	1.4%	113,736	1.3%		110,395
Native Hawaiian or Other Pacific Islander	0.6%	50,617	0.7%	61,341	0.8%		70,072
Enrollees who chose >1 race	2.9%	235,865	2.9%	243,259	2.7%	*	228,203
DK/REF	4.7%	376,779	5.5%	452,737	4.9%	*	413,992

* Tested, significant; 95% confidence level; 5% significance level

Note: Respondents indicating more than one race were counted in each race category indicated, plus the > 1 race category

Marital Status

The majority of enrollees in 2012, 2013, and 2014 reported being married. In 2014, there was a significant decrease in the number of respondents who indicated they were married (61% to 60%). In contrast, there were significant increases in the number of respondents who indicated they were separated (3.9% to 4.3%), registered civil partnership (0.7% to 0.9%), and registered common law partnership (2.5% to 2.9%).

Table 6. Which of the following best describes your current marital status?

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Married	61.1%	4,899,349	60.8%	5,052,781	59.9%	*	5,086,621
Widowed	7.4%	589,882	5.1%	423,142	5.1%		432,311
Divorce	17.6%	1,406,437	12.6%	1,043,155	12.1%		1,026,860
Separated	2.6%	209,103	3.9%	320,218	4.3%	*	364,619
Single - Never Married	10.5%	844,560	13.3%	1,104,119	13.8%		1,169,906
Registered Civil Partnership	--	--	0.7%	61,754	0.9%	*	78,619
Registered Common Law Partnership	--	--	2.5%	205,375	2.9%	*	242,308

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	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
DK/REF	0.8%	63,976	1.1%	93,414	1.0%	85,723
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

-- Response options not presented in year

Employment Status

The largest proportion of enrollees (57% in 2012, 59% in 2013, and 57% in 2014) reported that they were intentionally not employed (e.g., retired, homemaker, student, etc.). The decrease in 2014 was significantly different. In addition, 25 percent of enrollees reported that they were employed full-time, a statistically significant increase from 2013 (23%).

Table 7. How would you best characterize your employment status?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Employed full-time	22.7%	1,815,580	23.0%	1,906,429	24.6%	* 2,088,482
Self-employed full-time	3.0%	237,227	2.9%	240,305	2.8%	236,981
Employed part-time	5.1%	407,141	5.0%	418,190	5.3%	448,323
Self-employed part-time	2.9%	233,840	2.7%	226,034	2.6%	220,342
Unemployed, looking for work, or laid off	7.2%	577,010	6.4%	527,581	6.3%	534,696
Currently not employed - either retired, a homemaker, student, etc.	57.1%	4,578,763	58.5%	4,859,141	57.0%	* 4,836,775
DK/REF	2.0%	163,747	1.5%	126,277	1.4%	121,366
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Unemployment Rate

The U.S. Department of Labor's Bureau of Labor Statistics defines the unemployment rate as the number of unemployed persons divided by the labor force, where the labor force is the number of unemployed persons plus the number of employed persons.

In *Figure 1*, the enrollee unemployment rate is compared to second quarter U.S. unemployment figures obtained from the U.S. Department of Labor. Unemployment rates

historically have been higher among enrollees than in the general U.S. population. In 2014, the enrollee unemployment rate was 15 percent, while the U.S. unemployment rate was 7 percent.

Figure 1. U.S. and enrollee unemployment rates

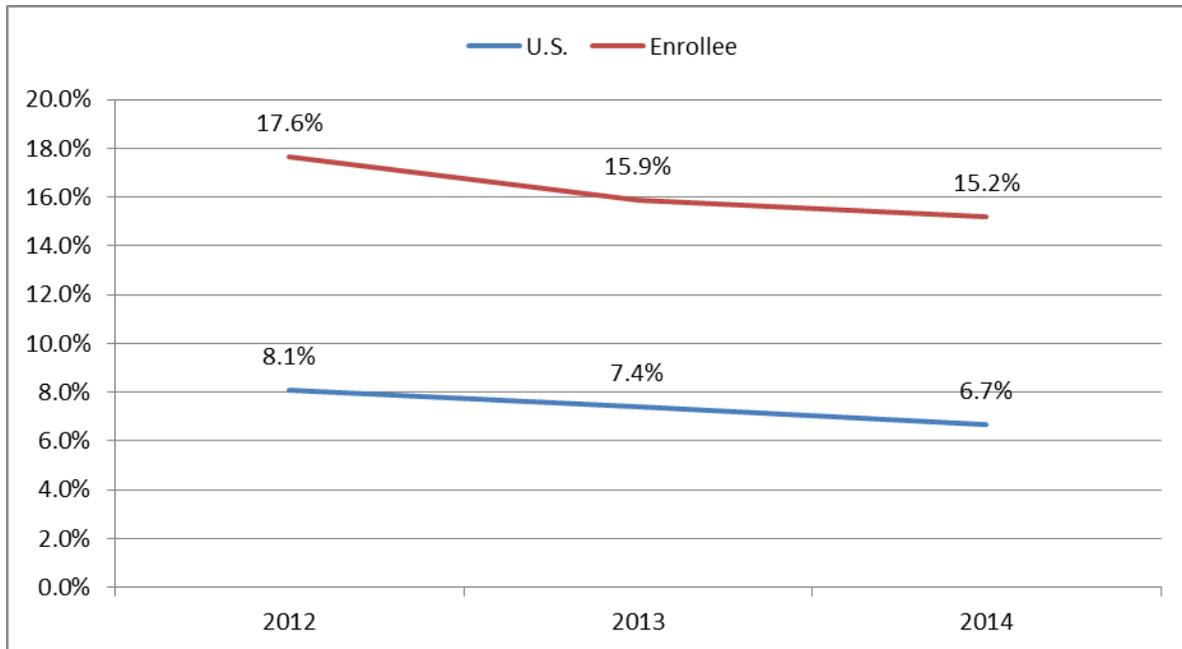


Table 8. Population counts, unemployment population counts, and unemployment rates

Category	2012	2013	2014
Enrollees in the Labor Force	3,270,798	3,318,539	3,528,824
Unemployed Enrollees	577,010	527,581	534,696
Unemployment Rate	17.6%	15.9%	15.2%

Female Enrollee Population

There has been a steady increase in female enrollees over the past three years, with a statistically significant increase in 2014 (6.8% to 7.2%).

Table 9. Enrollees by gender

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Female Enrollees	6.6%	526,432	6.8%	566,800	7.2% *	611,965
Male Enrollees	93.4%	7,486,876	93.2%	7,737,157	92.8% *	7,875,000
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Number of Dependents

All enrollees were asked to report on their number of dependents, defined as “anyone who relies on you for at least half of their financial support”. Across survey years 2012–2014, almost 60 percent of enrollees reported that they had one or more dependents.

Table 10. Not including yourself, how many dependents such as your spouse or dependent children do you currently have?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
0	39.3%	3,148,166	39.7%	3,293,100	39.0%	3,313,777
1+	59.3%	4,747,987	58.7%	4,871,474	59.1%	5,019,451
DK/REF	1.5%	117,156	1.7%	139,383	1.8%	153,737
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

- Not tested, not applicable

Terms of Active Duty

In 2014, 80 percent of enrollees reported that they had served one term of active duty. In addition, there was a significant increase in 2014 in the number of enrollees who reported serving three terms of active duty (2.7% to 3.0%). Over half a million enrollees have served three or more terms of active duty.

Table 11. How many terms of active duty military service have you served?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
1	79.9%	6,401,937	80.4%	6,675,512	79.8%	6,774,345
2	11.7%	936,049	11.5%	955,627	11.4%	966,102
3	2.9%	231,445	2.7%	225,463	3.0% *	257,329
4	1.3%	103,798	1.4%	120,209	1.5%	128,657
5	1.1%	90,592	1.1%	88,649	1.1%	97,391
6	0.8%	61,585	0.8%	67,530	1.0%	81,609
DK/REF	2.3%	187,902	2.1%	170,968	2.1%	181,532
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

In 2014, 37 percent of enrollees reported that they had served during the Vietnam War era, a significant decrease. In addition, there were significant decreases in the number of enrollees

indicating that they served during the Korean Era (11% to 10%), and the era Between Korea and Vietnam (23% to 20%). In contrast, there was a significant increase in the number of enrollees who indicated they served in WWII (6% to 7%), the Gulf War Era (20% to 22%), and the Current Era (16% to 19%).

Table 12. Enrollee active duty periods of service (not mutually exclusive)

Terms of Active Duty	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Pre-WWII: (<1942)	0.7%	56,535	0.5%	39,897	0.6%	48,162
WWII: (1942-1946)	7.1%	568,468	5.7%	472,188	6.6% *	559,065
Between WWII and Korea: (1947-1950)	5.0%	402,810	4.4%	366,408	4.4%	376,229
Korean Era: (1951-1954)	12.0%	964,188	11.4%	945,768	10.2% *	861,766
Between Korea and Vietnam: (1955-1964)	23.8%	1,908,225	23.3%	1,934,626	20.4% *	1,732,906
Vietnam Era: (1965-1974)	41.3%	3,310,223	41.5%	3,446,536	36.5% *	3,098,568
Between Vietnam and Gulf War: (1975-1990)	31.3%	2,504,419	31.5%	2,612,452	30.9%	2,626,167
Gulf War Era: (1991-2001)	19.7%	1,577,945	19.9%	1,655,191	22.2% *	1,887,136
Current Era: (>2001)	13.9%	1,117,583	15.7%	1,302,409	18.6% *	1,582,084
DK/REF	4.2%	335,912	4.2%	348,837	5.1% *	429,271

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Combat Duty

Over the past three survey years, just over 40 percent of enrollees consistently reported that they had been involved in, or had been exposed to, combat during at least one of their active duty military terms.

Table 13. During [any] term of military service, were you ever in or exposed to combat?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	42.5%	3,402,764	43.4%	3,607,827	43.1%	3,657,772
No	53.6%	4,297,890	53.2%	4,419,243	53.7%	4,560,159
DK/REF	3.9%	312,654	3.3%	276,887	3.2%	269,034
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	8,486,965

- Not tested, not applicable

Health Care Services

Health Status

In the past three survey years, the largest proportions of enrollees reported that their health was good (31% in 2012, 31% in 2013, and 32% in 2014) compared to other people their age. The increase in 2014 was statistically significant. In addition, there was a statistically significant increase in the number of enrollees who indicated that their health was fair (21% to 22%) compared to other people their age.

Table 14. Compared to other people your age would you say your health is...?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Excellent	11.3%	902,888	11.0%	914,154	10.6%	897,450
Very Good	25.7%	2,057,506	25.6%	2,126,544	24.8%	2,106,452
Good	30.5%	2,441,304	31.0%	2,574,314	31.9% *	2,711,052
Fair	21.2%	1,695,146	21.2%	1,759,815	22.2% *	1,880,200
Poor	10.4%	836,164	10.0%	831,083	9.8%	830,041
DK/REF	1.0%	80,300	1.2%	98,047	0.7% *	61,771
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Cigarette Smoking

In 2014, respondents were asked about their smoking behavior. Slightly more than three-out-of-five enrollees (63%) indicated that they had smoked at least 100 cigarettes in their entire life. This was a significant decrease from 2012 (65%). In addition, there was a significant increase in the number of enrollees that indicated they had not smoked at least 100 cigarettes in their entire life (34% to 36%).

Table 15. Have you smoked at least 100 cigarettes in your entire life?

	2012		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	65.4%	5,240,675	--	--	62.7% *	5,319,786
No	33.5%	2,683,958	--	--	36.4% *	3,092,288
DK/REF	1.1%	88,675	--	--	0.9% *	74,891
Total	100.0%	8,013,308	--	--	100.0%	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

Note: Significance test measures differences between 2014 and 2012

In 2014, of the respondents who indicated they had smoked more than 100 cigarettes in their life, 70 percent indicated that now they do not smoke cigarettes at all. In addition, there was a significant decrease in the number of enrollees that indicated they smoke cigarettes every day (20% to 19%).

Table 16. Do you now smoke cigarettes every day, some days, or not at all?

	2012		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Every day	20.0%	1,067,781	--	--	19.0% *	1,025,717
Some days	8.6%	457,848	--	--	9.2%	496,202
Not at all	69.8%	3,721,315	--	--	69.8%	3,765,995
DK/REF	1.5%	82,405	--	--	2.0% *	106,763
Total	100.0%	5,329,350	--	--	100.0% -	5,394,677

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

Note: Significance test measures differences between 2014 and 2012

In 2014, of the respondents who indicated they had smoked more than 100 cigarettes in their life, 28 percent indicated that they had tried to stop smoking for more than a day because they were trying to quit. This was a significant increase from 2012 (26%). In addition, there was a significant decrease in the number of enrollees that indicated they had not stopped smoking for more than one day because they were trying to quit smoking (68% to 65%).

Table 17. During the past 12 months, have you stopped smoking for more than one day because you were trying to quit smoking?

	2012		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	26.0%	1,384,996	--	--	28.2% *	1,523,430
No	68.4%	3,644,086	--	--	64.7% *	3,489,760
DK/REF	5.6%	300,267	--	--	7.1% *	381,487
Total	100.0%	5,329,350	--	--	100.0% -	5,394,677

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

Note: Significance test measures differences between 2014 and 2012

Use of VA to Meet Health Care Needs

About 30 percent of enrollees across survey years 2012–2014 reported using VA services to meet all of their health care needs. About the same proportion in each survey year reported using VA services to meet some of their health care needs. About half that many reported using VA services to meet most of their health care needs. Slightly less than five percent of respondents said they have no health care needs.

Table 18. Please complete the following statement. I use VA services to meet...

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
All of my health care needs	29.1%	2,335,337	29.5%	2,452,919	30.3%	2,571,921
Most of my health care needs	15.8%	1,268,532	15.4%	1,282,465	15.4%	1,309,456
Some of my health care needs	27.1%	2,173,461	27.5%	2,284,899	26.9%	2,284,249
None of my health care needs	21.7%	1,738,724	21.4%	1,778,232	21.5%	1,822,913
I have no health care needs	4.7%	380,402	4.8%	402,377	4.8%	403,806
DK/REF	1.5%	116,852	1.2%	103,065	1.1%	94,620
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

- Not tested, not applicable

In 2014, enrollees were asked whether they were aware of the *MyHealthVet* Web site. Almost 60 percent of enrollees indicated that they were not aware of the Web site.

Table 19. Are you aware of the MyHealthVet Web site?

	2012 ^a		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	--	--	--	--	39.9%	- 3,383,699
No	--	--	--	--	58.7%	- 4,981,164
DK/REF	--	--	--	--	1.4%	- 122,102
Total	--	--	--	--	100.0%	- 8,486,965

- Not tested, not applicable

^a Question not included in survey for this year

Enrollees who indicated they were aware of the *MyHealthVet* Web site were asked how they used the site. Over 40 percent of these enrollees indicated that they use the Web site to obtain health information. The next most frequently selected response was using the site to re-order prescriptions (36%).

Table 20. How do you use the site? (not mutually exclusive)

	2012 ^a		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
For health information	--	--	--	--	43.6%	1,476,918
To communicate with your healthcare provider via secure email	--	--	--	--	24.0%	810,689
To access your Personal Health Record	--	--	--	--	33.2%	1,121,709
To access lab test results	--	--	--	--	26.5%	896,374
To reorder prescriptions	--	--	--	--	35.8%	1,210,414
To schedule appointments	--	--	--	--	16.0%	539,723
For some other purpose	--	--	--	--	10.1%	340,351
DK/REF	--	--	--	--	2.1%	179,910

- Not tested, not applicable

^a Question not included in survey for this year

In 2014, enrollees were asked to identify their primary source for VA benefits information. One-in-three enrollees indicated that their primary source was VA mailings. Nearly half as many enrollees indicated that they used the Internet, or some other source (16% each).

Table 21. What is your PRIMARY source for VA benefits information?

	2012 ^a		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Friends or acquaintances	--	--	--	--	9.4%	801,269
VA mailings (such as the patient handbook)	--	--	--	--	33.0%	2,803,562
VA Outreach Events	--	--	--	--	1.2%	105,422
Other community forums sponsored by Non-VA organizations	--	--	--	--	0.4%	32,606
A Veterans Service Organization such as VFW, AMVETS, etc.	--	--	--	--	7.3%	616,349

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	2012 ^a		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
My local Veterans Service Officer	--	--	--	--	10.0%	847,715
Internet	--	--	--	--	15.9%	1,350,487
Some other source	--	--	--	--	15.8%	1,337,968
DK/REF	--	--	--	--	7.0%	591,587
Total	--	--	--	--	100.0%	8,486,965

- Not tested, not applicable

^a Question not included in survey for this year

Residential Setting

Enrollees were asked to identify the environment in which they live. Almost 40 percent indicated that they lived in a suburban environment, with 32 percent living in a rural environment, and 27 percent living in an urban environment.

Table 22. Would you say that you live in an urban area, a suburban area, or a rural area?

	2012 ^a		2013 ^a		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Urban	--	--	--	--	27.2%	2,305,908
Suburban	--	--	--	--	38.2%	3,243,319
Rural	--	--	--	--	31.8%	2,700,774
DK/REF	--	--	--	--	2.8%	236,964
Total	--	--	--	--	100.0%	8,486,965

- Not tested, not applicable

^a Question not included in survey for this year

Key Drivers

Over previous administrations of the Survey of Enrollees a series of questions was developed to shed light on enrollees' perceptions of VA health care services. These questions were developed through focus groups with VHA staff and Veterans, both at VA headquarters and in the VISNs. They were used in both the 2007 and 2008 surveys; from this series, 19 questions were identified that led to significant predictors of VHA utilization. These questions focused on quality, cost, availability, accessibility, knowledge of VA benefits, availability of non-VA health insurance, and current or future uses of VHA. Enrollees were asked to indicate their degree of agreement by using the following answers: *Completely Agree, Agree, Neither Agree nor Disagree, Disagree, or Completely Disagree.*

Availability and Accessibility

This domain is comprised of six questions.

In 2014, almost three-out-of-four (73%) enrollees either completely agreed or agreed that it is easy for Veterans like them to get around in the VA health care facility. Compared to 2013, there was a significant decrease in the number of enrollees who agreed (55% to 54%), and a significant increase in the number of enrollees who neither agreed nor disagreed (13% to 14%), disagreed (6% to 7%), and completely disagreed (1% to 2%).

Table 23. It is easy for Veterans like me to get around in the VA health care facility

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	19.8%	1,585,670	19.0%	1,579,871	19.1%	1,620,209
Agree	54.5%	4,365,227	55.4%	4,600,042	54.2% *	4,597,671
Neither Agree Nor Disagree	13.7%	1,097,255	13.4%	1,116,842	14.3% *	1,215,395
Disagree	6.4%	510,088	6.1%	510,616	6.6% *	562,247
Completely Disagree	1.4%	108,419	1.4%	113,108	1.6% *	140,012
DK/REF	4.3%	346,649	4.6%	383,478	4.1% *	351,431
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

In 2014, almost three-out-of-four (73%) enrollees either completely agreed or agreed that it is easy to get to their local VA facility. Additionally, there was a significant increase in the number of enrollees who neither agreed nor disagreed (9% to 10%), and completely disagreed (2.7% to 3.0%).

Table 24. It is easy to get to my local VA facility

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	20.6%	1,648,204	19.9%	1,649,629	20.1%	1,709,637
Agree	52.5%	4,203,457	54.0%	4,483,734	53.1%	4,510,489
Neither Agree Nor Disagree	9.0%	721,832	8.7%	721,518	9.5% *	806,899
Disagree	12.3%	986,285	11.8%	977,436	11.5%	975,708
Completely Disagree	2.9%	229,347	2.7%	223,930	3.0% *	257,376
DK/REF	2.8%	224,183	3.0%	247,710	2.7%	226,856
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

A little over 25 percent of enrollees agreed that they tended to use the same health care provider as their spouse/partner and/or children. This was a significant decrease from 2013 (27% to 26%). In addition, there was a significant increase in the number of enrollees who completely disagreed (15% to 17%).

Table 25. I tend to use the same health care provider as my spouse/partner and/or children

	2012 ^a		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	--	--	8.9%	737,780	8.9%		757,037
Agree	--	--	27.4%	2,274,214	25.8%	*	2,188,059
Neither Agree Nor Disagree	--	--	10.7%	888,530	10.5%		889,827
Disagree	--	--	33.0%	2,737,753	32.4%		2,753,885
Completely Disagree	--	--	14.6%	1,211,149	16.9%	*	1,431,990
DK/REF	--	--	5.5%	454,532	5.5%		466,166
Total	--	--	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

Almost two-thirds (62%) of enrollees in 2014 reported that they completely agreed or agreed that Veterans like them can get in and out of a VA appointment in a reasonable amount of time. In addition, there was a significant increase in the number of respondents who indicated they completely agreed (15% to 16%), neither agreed nor disagreed (16.3% to 17.3%), and completely disagreed (3.6% to 4.1). In contrast, there was a significant decrease in the number of enrollees who agreed (49% to 47%).

Table 26. Veterans like me can get in and out of an appointment at VA in a reasonable time

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	16.0%	1,279,147	14.7%	1,222,647	15.5%	*	1,312,543
Agree	48.3%	3,872,909	48.6%	4,035,023	46.7%	*	3,960,623
Neither Agree Nor Disagree	16.9%	1,352,995	16.6%	1,376,774	17.3%	*	1,469,845
Disagree	10.7%	859,763	11.3%	940,703	11.8%		1,000,416
Completely Disagree	3.3%	265,635	3.6%	300,895	4.1%	*	352,109
DK/REF	4.8%	382,860	5.2%	427,914	4.6%	*	391,429
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Slightly over 60 percent of enrollees in 2014 reported that they completely agreed or agreed that there is a VA provider in their area that offers all the health care services that Veterans need. The proportion reporting that they completely agreed increased significantly (16% to 17%), and the proportion reporting they disagreed decreased significantly (17% to 15%).

Table 27. There is a VA provider in my area that offers all of the health care services that Veterans like me need

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	17.7%	1,420,029	15.9%	1,319,893	17.1% *	1,453,747
Agree	45.7%	3,659,840	45.2%	3,756,287	45.8%	3,883,167
Neither Agree Nor Disagree	12.5%	1,000,532	12.9%	1,073,747	13.4%	1,135,475
Disagree	15.9%	1,271,219	17.2%	1,425,394	15.0% *	1,273,498
Completely Disagree	3.7%	298,380	3.9%	325,144	4.1%	350,649
DK/REF	4.5%	363,308	4.9%	403,491	4.6%	390,429
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

In 2014, 14 percent of respondents completely agreed that Veterans do not wait a long time to see the doctor, which was a significant increase from 2013 (13%). However, 44 percent agreed with this statement, a significant decrease from 2013 (46%). In addition, there was a significant increase in the number of respondents indicating they completely disagreed (3.6% to 4.2%).

Table 28. When Veterans like me go to VA for an appointment, they do not wait a long time to see the doctor

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	14.2%	1,137,626	13.0%	1,081,633	14.0% *	1,184,804
Agree	45.6%	3,655,003	45.7%	3,792,139	43.8% *	3,715,858
Neither Agree Nor Disagree	18.8%	1,506,501	18.6%	1,545,140	19.3%	1,640,057
Disagree	13.0%	1,042,063	13.6%	1,128,082	13.7%	1,164,339
Completely Disagree	3.5%	283,801	3.6%	301,523	4.2% *	357,722
DK/REF	4.8%	388,315	5.5%	455,439	5.0% *	424,184
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

The last question in this domain asked how strongly respondents agreed or disagreed that Veterans like going to VA because they can talk to other Veterans. In all, 53 percent either completely agreed or agreed with this statement. Compared to 2013, there was a significant increase in the number of enrollees who indicated they neither agreed nor disagreed (27% to 28%).

Table 29. Veterans like me like going to VA because you can talk to other Veterans

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	11.6%	927,990	10.8%	896,529	10.8%	916,278
Agree	41.6%	3,334,494	41.9%	3,479,501	41.8%	3,550,598
Neither Agree Nor Disagree	26.5%	2,124,385	26.6%	2,208,762	27.5% *	2,331,909
Disagree	13.3%	1,063,974	13.3%	1,105,533	12.8%	1,083,879
Completely Disagree	2.8%	225,845	2.8%	234,926	2.9%	248,203
DK/REF	4.2%	336,620	4.6%	378,706	4.2%	356,098
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Cost

The cost domain is comprised of two questions.

In 2014, two-out-of-three enrollees (66%) either completely agreed or agreed that VA offers the best value for their health care dollar. Compared to 2013, there was a significant decrease in the number of enrollees who indicated they agreed (47% to 46%). Additionally, there was a significant increase in the number of enrollees who neither agreed nor disagreed (18% to 19%) and who completely disagreed (1.7% to 2.2%).

Table 30. VA offers Veterans like me the best value for our health care dollar

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	21.4%	1,716,320	20.4%	1,697,688	20.8%	1,768,835
Agree	47.8%	3,832,470	47.4%	3,938,813	45.6% *	3,872,294
Neither Agree Nor Disagree	18.0%	1,441,853	17.9%	1,490,118	19.2% *	1,629,806
Disagree	6.0%	477,248	6.9%	572,824	6.8%	575,783
Completely Disagree	1.8%	141,820	1.7%	143,320	2.2% *	188,637
DK/REF	5.0%	403,596	5.6%	461,194	5.3%	451,609
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

In 2014, 67 percent of enrollees either completely agreed or agreed that VA is the most cost-effective health care provider for Veterans like themselves. The number of enrollees who agreed significant decreased (47% to 45%). In contrast, the number of enrollees who neither agreed nor disagreed (17% to 19%), and completely disagreed (1.5% to 2.0%) significantly increased.

Table 31. VA is the most cost-effective health care provider for Veterans like me

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	22.4%	1,798,596	22.0%	1,826,374	22.1%		1,871,630
Agree	46.7%	3,745,761	46.5%	3,859,842	45.2%	*	3,832,928
Neither Agree Nor Disagree	17.8%	1,428,407	17.4%	1,442,182	18.9%	*	1,600,859
Disagree	6.1%	488,783	6.9%	575,622	6.5%		551,894
Completely Disagree	1.6%	125,678	1.5%	126,897	2.0%	*	166,607
DK/REF	5.3%	426,083	5.7%	473,041	5.5%		463,048
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Quality

This domain contains two questions relating to the quality of care that Veterans received.

Almost eight-out-of-10 enrollees (78%) either completely agreed or agreed that VA health care providers treat their patients with respect. In 2014, there was a significant decrease in the number of enrollees who agreed (53% to 51%), and a significant increase in the number of enrollees who neither agreed nor disagreed (12% to 13%).

Table 32. VA health care providers treat their patients with respect

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	28.0%	2,241,863	26.3%	2,187,472	26.9%		2,283,345
Agree	50.9%	4,077,847	53.0%	4,404,906	51.2%	*	4,345,355
Neither Agree Nor Disagree	12.4%	993,723	11.8%	975,793	13.1%	*	1,109,958
Disagree	3.7%	293,001	3.5%	290,117	3.7%		314,852
Completely Disagree	1.1%	91,156	1.2%	99,620	1.4%		114,844
DK/REF	3.9%	315,719	4.2%	346,049	3.8%	*	318,611
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Almost half (48%) of 2014 enrollees agreed that Veterans who use VA are satisfied with the health care they receive, a significant decrease from 2013 (50%). In addition, there was a significant increase in the number of enrollees who indicated they completely disagreed (2% to 3%).

Table 33. Veterans like me who use VA are satisfied with the health care they receive

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	18.3%	1,463,579	16.7%	1,384,653	16.9%	1,432,061
Agree	49.3%	3,948,809	49.6%	4,116,029	48.1% *	4,084,466
Neither Agree Nor Disagree	18.3%	1,469,924	18.5%	1,537,067	19.2%	1,626,136
Disagree	7.2%	574,713	8.1%	669,325	8.5%	718,914
Completely Disagree	2.0%	161,378	2.1%	174,867	2.7% *	226,775
DK/REF	4.9%	394,905	5.1%	422,017	4.7%	398,613
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Knowledge of VA Benefits

This domain contains two questions.

Veterans were asked to indicate how much they agreed or disagreed that they know what is available to them through their VA benefits. Consistently across the previous three survey years, one-in-10 enrollees completely agreed with this statement. In addition, there was a significant increase in the number of enrollees who indicated they neither agreed nor disagreed (14% to 15%).

Table 34. I feel I know what is available to me through my VA benefits

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	10.9%	872,758	10.7%	884,494	10.6%	900,144
Agree	50.9%	4,079,663	50.6%	4,205,259	50.4%	4,277,602
Neither Agree Nor Disagree	13.8%	1,103,781	13.9%	1,154,710	15.0% *	1,276,546
Disagree	16.6%	1,329,149	16.9%	1,407,077	16.4%	1,389,290
Completely Disagree	4.2%	336,943	3.9%	320,777	4.1%	345,044
DK/REF	3.6%	291,015	4.0%	331,640	3.5% *	298,339
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

The second question in this domain indicates how much enrollees agree or disagree that they understand how their VA benefits work. In 2014, approximately 60 percent either completely agreed or agreed with this statement. In addition, there was a significant increase in the number of enrollees who indicated they neither agreed nor disagreed (15% to 17%).

Table 35. I understand how my VA health benefits work

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	10.3%	823,523	10.0%	833,783	10.0%		852,379
Agree	50.7%	4,060,315	50.7%	4,210,367	50.3%		4,265,316
Neither Agree Nor Disagree	14.9%	1,194,850	15.0%	1,245,263	16.5%	*	1,396,916
Disagree	16.4%	1,317,090	16.6%	1,381,546	16.0%		1,358,723
Completely Disagree	4.0%	318,895	3.8%	311,447	4.0%		340,386
DK/REF	3.7%	298,635	3.9%	321,551	3.2%	*	273,245
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Availability of Non-VA Benefits

This domain is comprised of two questions.

In 2014, over half (52%) of enrollees completely agreed or agreed that they have a doctor outside VA that they really like and trust. There was a significant decrease in the number of enrollees who agreed with this statement (37% to 36%). In addition, there was a significant increase in the number of enrollees who completely disagreed with this statement (10% to 11%).

Table 36. I have a doctor outside VA who I really like and trust

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	15.4%	1,232,625	16.4%	1,365,900	16.0%		1,356,563
Agree	36.2%	2,903,046	37.0%	3,074,326	36.0%	*	3,057,507
Neither Agree Nor Disagree	11.4%	909,870	11.0%	916,533	11.2%		952,208
Disagree	22.5%	1,804,079	22.8%	1,893,250	23.1%		1,962,391
Completely Disagree	11.0%	882,850	9.5%	792,205	10.9%	*	926,566
DK/REF	3.5%	280,839	3.2%	261,744	2.7%	*	231,731
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

In 2014, one-in-nine (12%) enrollees completely agreed that their family has a health insurance plan that covers them and the rest of the family. However, the largest proportion (30%) disagreed with this statement, a significant decrease from 2013 (31%). In addition, there was a significant increase in the number of enrollees who completely disagreed with this statement (19% to 20%).

Table 37. My family has a health insurance plan that covers me and the rest of the family

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	11.0%	883,749	11.8%	980,394	11.9%	1,011,813
Agree	26.6%	2,134,564	27.4%	2,275,636	26.6%	2,261,236
Neither Agree Nor Disagree	6.7%	533,174	6.2%	517,656	6.6%	559,764
Disagree	30.1%	2,410,863	31.2%	2,589,186	30.1%	* 2,553,282
Completely Disagree	21.0%	1,684,390	18.6%	1,548,278	20.1%	* 1,707,022
DK/REF	4.6%	366,567	4.7%	392,806	4.6%	393,847
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

In 2014, almost two-thirds (63%) of enrollees either completely agreed or agreed that they would use VA more if the cost of health care increased for them. In comparison to 2013, there was a significant decrease in the number of enrollees who agreed with this statement (52% to 50%). In addition, there was a significant increase in the number of enrollees who neither agreed nor disagreed (18% to 19%), and completely disagreed (1.9% to 2.2%).

Table 38. If the cost of health care to me increases, I will use VA more

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	15.9%	966,771	12.5%	734,129	12.4%	735,773
Agree	48.7%	2,957,476	52.3%	3,057,391	50.4%	* 2,979,168
Neither Agree Nor Disagree	18.0%	1,090,802	17.5%	1,025,827	18.9%	* 1,120,733
Disagree	10.7%	648,942	11.5%	670,481	11.8%	697,969
Completely Disagree	2.4%	143,988	1.9%	110,685	2.2%	* 131,765
DK/REF	4.4%	264,498	4.3%	252,526	4.2%	249,636
Total	100.0%	6,072,477	100.0%	5,851,038	100.0%	- 5,915,044

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Note: Question only asked of respondents that indicated they did not use VA to meet all of their health care needs

The second question in this domain asked if Veterans would only use VA if they did not have access to any other source of health care. In 2014, slightly less than half (47%) of enrollees indicated that they either completely agreed or agreed with this statement. In addition, there was a significant increase in the number of enrollees who completely disagreed with this statement (9% to 10%).

Table 39. I would only use VA if I did not have access to any other source of health care

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	12.5%	1,003,778	10.7%	891,338	11.0%	933,020
Agree	37.3%	2,985,063	36.0%	2,988,934	35.5%	3,016,611
Neither Agree Nor Disagree	12.3%	986,640	12.0%	996,237	12.0%	1,016,926
Disagree	26.1%	2,090,744	29.4%	2,440,112	28.9%	2,452,178
Completely Disagree	8.7%	694,726	8.7%	722,046	9.6% *	810,880
DK/REF	3.1%	252,357	3.2%	265,290	3.0%	257,349
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

The third question in this domain asked if Veterans agreed or disagreed with the statement, “Veterans who can afford to use other sources of health care should leave VA to those who really need it”. The largest proportion (30%) of enrollees in 2014 agreed with this statement, a significant decrease. Compared to 2013, there was a significant increase in the number of enrollees who completely disagreed with this statement (10% to 11%).

Table 40. Veterans who can afford to use other sources of health care should leave the VA to those who really need it

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Completely Agree	8.8%	707,370	7.9%	653,998	7.5%	637,542
Agree	32.8%	2,630,802	31.8%	2,640,358	30.0% *	2,546,654
Neither Agree Nor Disagree	17.8%	1,428,257	18.3%	1,517,735	19.0%	1,608,834
Disagree	26.8%	2,147,580	28.6%	2,375,126	28.7%	2,435,788
Completely Disagree	10.2%	815,584	9.6%	800,322	11.3% *	954,817
DK/REF	3.5%	283,716	3.8%	316,418	3.6%	303,330
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

The last question in this domain asked enrollees if their use of VA would decrease if their financial resources improved. In comparison to 2013, there were significant decreases in the number of enrollees who completely agreed (4.3% to 3.8%), and agreed (25% to 23%) with this statement. In addition, there were significant increases in the number of enrollees who neither agreed nor disagreed (18% to 19%), and completely disagreed (9% to 11%).

Table 41. My use of VA will decrease if my financial resources improve

	2012 ^a		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Completely Agree	--	--	4.3%	262,977	3.8%	*	237,000
Agree	--	--	24.7%	1,510,278	23.0%	*	1,438,607
Neither Agree Nor Disagree	--	--	17.7%	1,085,864	18.7%	*	1,168,417
Disagree	--	--	39.9%	2,441,500	39.2%		2,453,778
Completely Disagree	--	--	9.1%	560,046	11.2%	*	699,955
DK/REF	--	--	4.3%	262,684	4.2%		262,488
Total	--	--	100.0%	6,123,348	100.0%	-	6,260,246

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Note: Question only asked of respondents that indicated they use VA to meet at least some of their health care needs

Future Use

Respondents were asked to indicate the primary way they planned to use VA health care in the future. As shown, the largest proportion in all three survey years reported they will use VA as their primary source of health care (43% in 2012, 44% in 2013, and 44% in 2014). In addition, there was a significant decrease in the number of enrollees who indicated they will use VA as their primary source of prescriptions (8% to 7%).

Table 42. Please choose the one that best describes the primary way you plan to use VA health care in the future. Do you plan to use VA as...

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Primary Care	42.9%	3,436,524	43.8%	3,637,449	44.3%		3,761,368
Backup Care	11.4%	909,769	10.9%	906,159	10.8%		919,442
Safety Net	16.2%	1,302,096	16.5%	1,372,042	16.7%		1,413,271
Prescriptions	7.9%	632,624	7.8%	646,750	7.1%	*	600,956
Specialized Care	3.5%	279,886	4.8%	397,203	5.0%		420,238
Other	1.2%	93,745	0.6%	52,063	0.6%		54,589
No Plans	10.3%	827,242	9.9%	820,561	9.8%		832,541

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	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
DK/REF	6.6%	531,424	5.7%	471,730	5.7%	484,559
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Health Benefits

VA Health Care

The survey asks each enrollee whether they are enrolled in VA health care. Since all sampled Veterans are VA enrollees, a negative response or a “Don’t Know” response can be interpreted as a lack of awareness by the Veteran of their enrollment status. In 2014, there was a significant increase in the number of enrollees who reported that they were enrolled (79% to 81%). In conjunction, there was a significant decrease in the number of enrollees who indicated they were not enrolled in VA health care (14% to 12% percent).

Table 43. Are you enrolled in VA health care?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	78.8%	6,313,371	78.8%	6,543,916	80.8% *	6,856,066
No	13.4%	1,071,635	14.3%	1,189,197	12.3% *	1,040,015
I do not remember enrolling	4.6%	368,486	3.5%	288,211	3.7%	310,598
DK/REF	3.2%	259,816	3.4%	282,634	3.3%	280,285
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Enrollees were asked whether they had enrolled in VA for health care within the last five years. There was a nearly even split between enrollees who responded yes and those who responded no (49% and 47%, respectively). There was a significant increase from 2013 in the number of enrollees who responded yes (47%), and a significant decrease in the number of enrollees who responded no (49%).

Table 44. Did you enroll in VA for health care within the last five years?

	2012 ^a		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Yes	--	--	46.8%	3,062,227	49.1%	*	3,367,473
No	--	--	49.3%	3,227,280	46.7%	*	3,201,420
DK/REF	--	--	3.9%	254,409	4.2%		287,173
Total	--	--	100.0%	6,543,916	100.0%	-	6,856,066

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

Respondents who indicated that they had enrolled within the last five years were asked to share their primary reason for enrollment. Just over 42 percent provided a reason outside of those listed, a significant decrease. In addition, 19 percent of respondents indicated that they enrolled because of a loss or reduction in other health insurance benefits, a significant increase.

Table 45. What is the primary reason that you enrolled?

	2012 ^a		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Recent discharge from service	--	--	10.5%	322,015	9.7%		327,231
Loss or reduction in other health insurance benefits	--	--	15.5%	474,269	19.0%	*	638,574
Other economic circumstances	--	--	15.5%	474,224	15.8%		531,254
To meet the requirement for health insurance coverage under the health reform law	--	--	3.8%	116,642	3.8%		127,500
Moved closer to a VA facility	--	--	1.7%	53,422	2.1%		70,232
A VA facility opened close to me	--	--	2.8%	86,559	3.1%		103,167
Other	--	--	46.0%	1,407,124	42.2%	*	1,420,162
DK/REF	--	--	4.2%	127,972	4.4%		149,355
Total	--	--	100.0%	3,062,227	100.0%	-	3,367,473

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

Insurance Status

Over the past three years, approximately one-in-five enrollees reported that they were uninsured.

Table 46. Insurance status

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Insured	77.5%	6,212,444	78.8%	6,547,399	78.4%	6,653,847
Uninsured	22.5%	1,800,864	21.2%	1,756,558	21.6%	1,833,118
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

- Not tested, not applicable

Medicare Coverage

All enrollees reported on whether they were covered by Medicare. In 2014, slightly more than half (51%) of enrollees reported that they were covered. This was similar to the proportions seen in 2013 (52%) and 2012 (50%).

Table 47. Are you covered by Medicare?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	49.9%	4,001,098	52.0%	4,318,730	51.2%	4,344,172
No	48.5%	3,884,769	46.5%	3,862,768	47.2%	4,002,085
DK/REF	1.6%	127,441	1.5%	122,459	1.7%	140,707
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

- Not tested, not applicable

Enrollees with Medicare were asked to report whether they chose to obtain Medicare coverage through a Medicare Advantage Plan (“yes” in the table below). In each survey year, about one-in-five respondents chose this option, while the majority obtained their Medicare coverage through the Original Medicare Plan (“no” in the table below). In 2014, there was a significant increase in the number of enrollees who responded yes (21% to 22%).

Table 48. Did you choose to receive your Medicare coverage through a Medicare Advantage Plan and not through the Original Medicare Plan?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	21.1%	845,016	20.8%	896,281	21.8% *	945,774
No	61.8%	2,473,281	61.8%	2,671,099	61.4%	2,667,923
DK/REF	17.1%	682,802	17.4%	751,351	16.8%	730,475
Total	100.0%	4,001,098	100.0%	4,318,730	100.0%	- 4,344,172

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Respondents with the Original Medicare Plan were asked a series of follow-up questions. First, they were asked whether their coverage paid for care if they were hospitalized. In 2014, about 85 percent of respondents said “Yes”, while about four percent said “No”. A little over 11 percent did not know or refused to answer the question.

Table 49. Does your Medicare coverage pay for care if you are hospitalized?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	86.0%	2,712,909	84.9%	2,907,271	84.5%	2,872,495
No	4.1%	129,503	4.0%	137,774	4.1%	139,060
DK/REF	9.9%	313,670	11.0%	377,404	11.4%	386,843
Total	100.0%	3,156,083	100.0%	3,422,450	100.0%	- 3,398,398

- Not tested, not applicable

In all three survey years, over three-quarters of enrollees also covered by the Original Medicare Plan reported that Medicare also pays for their doctor’s office visits.

Table 50. Does your Medicare coverage pay for doctor’s office visits?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	77.9%	2,458,521	76.2%	2,608,431	76.0%	2,583,033
No	13.1%	412,111	13.2%	450,901	13.2%	449,943
DK/REF	9.0%	285,451	10.6%	363,118	10.8%	365,422
Total	100.0%	3,156,083	100.0%	3,422,450	100.0%	- 3,398,398

- Not tested, not applicable

Respondents with the Original Medicare Plan were also asked whether they purchased private health care coverage to supplement their Medicare plan. In 2014, 43 percent of enrollees purchased such a supplemental private plan. There was a significant increase in the number of respondents who indicated that they did not know or refused to answer whether they had purchased supplemental private health care coverage (5% to 6%).

Table 51. Do you purchase any private health care coverage to supplement Medicare; that is, to pay for services Medicare does not pay for?

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Yes	43.7%	1,379,315	42.9%	1,468,026	42.9%		1,457,777
No	52.9%	1,670,941	52.0%	1,779,510	51.4%		1,745,325
DK/REF	3.4%	105,827	5.1%	174,913	5.7%	*	195,296
Total	100.0%	3,156,083	100.0%	3,422,450	100.0%	-	3,398,398

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Respondents with any kind of Medicare (Original Medicare Plan or Medicare Advantage Plan) were asked to report whether they had Medicare prescription drug coverage, commonly known as “Part D”. Just over one-third (36%) of enrollees in 2014 had obtained this type of coverage, a significant increase. There was also significant decrease in the number of enrollees who indicated they did not have “Part D” coverage (57% to 56%).

Table 52. Do you have Medicare prescription drug coverage “Part D?”

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Yes	34.3%	1,370,425	34.6%	1,496,272	36.3%	*	1,575,098
No	58.8%	2,352,443	57.4%	2,476,939	55.8%	*	2,425,532
DK/REF	7.0%	278,231	8.0%	345,520	7.9%		343,543
Total	100.0%	4,001,098	100.0%	4,318,730	100.0%	-	4,344,172

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Medicaid Coverage

All enrollees were asked whether they were covered by Medicaid at the time of the survey. In 2014, 90 percent of respondents indicated that they were not covered currently by Medicaid, a significant decrease. There was also a significant increase in the number of enrollees who indicated that were covered by Medicaid (6% to 7%).

Table 53. Are you currently covered by Medicaid (sometimes referred to as “Medical Assistance”) for any of your health care?

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Yes	6.1%	492,505	6.4%	533,432	7.1%	*	602,441
No	90.7%	7,264,149	90.4%	7,510,460	89.9%	*	7,625,545
DK/REF	3.2%	256,653	3.1%	260,065	3.1%		258,979
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

TRICARE or TRICARE for Life Coverage

Almost 76 percent of enrollees indicated they were not covered by TRICARE or TRICARE for Life in 2014; this was a significant increase. In addition, there was a significant decrease in the number of enrollees who indicated they were covered by TRICARE or TRICARE for Life (19% to 18%).

Table 54. Are you currently covered by the Department of Defense’s TRICARE or TRICARE for Life health care programs?

	2012		2013		2014		
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent		Population Estimate
Yes	18.1%	1,452,870	18.9%	1,569,979	18.2%	*	1,542,284
No	75.3%	6,037,883	74.8%	6,207,469	75.8%	*	6,434,712
DK/REF	6.5%	522,555	6.3%	526,509	6.0%		509,969
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	-	8,486,965

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Additional Health Coverage

Over the past three survey years, the proportion of enrollees who were covered by another individual or group health plan remained steady, at slightly less than three-in-ten (29% in 2012, 28% in 2013, and 29% in 2014).

Table 55. Are you currently covered by any other individual or group health plan that either you or an employer, or someone else such as a family member obtains for you?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	28.9%	2,317,257	28.2%	2,343,476	28.6%	2,426,928
No	69.6%	5,580,624	70.4%	5,849,415	70.0%	5,942,341
DK/REF	1.4%	115,427	1.3%	111,066	1.4%	117,696
Total	100.0%	8,013,308	100.0%	8,303,957	100.0%	- 8,486,965

- Not tested, not applicable

Enrollees with other individual or group health plans were asked three follow-up questions. As shown below, the largest proportion of enrollees in all three recent survey years reported that their additional coverage was provided by a current employer (40% in 2012, 40% in 2013, and 42% in 2014). In 2014, there was a significant decrease in the number of enrollees who indicated they were covered by a former employee (20% to 18%). In contrast, there was a significant increase in the number of enrollees who indicated a source other than those listed provided their coverage (1.5% to 2.4%).

Table 56. Who provides this coverage? If more than one source applies, please indicate the primary source.

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Current Employer, Including COBRA	40.1%	929,937	40.3%	944,775	41.5%	1,007,390
Former Employer	19.8%	457,880	20.1%	470,328	18.3% *	443,994
Individually Purchased Coverage	12.1%	280,173	12.6%	296,375	12.0%	290,482
Federal, State, County, or local community health services program	6.7%	155,585	6.7%	158,116	6.4%	154,516
Family Member	16.4%	379,174	15.8%	370,501	15.3%	371,548
DK/REF	3.0%	69,209	2.9%	68,447	4.2% *	101,500
Other	2.0%	45,298	1.5%	34,933	2.4% *	57,497
Total	100.0%	2,317,257	100.0%	2,343,476	100.0%	- 2,426,928

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

In the past three survey years, slightly more than 80 percent of enrollees with additional coverage reported that it included prescription drug benefits. In addition, in 2014 there was a significant decrease in the number of enrollees who indicated that their coverage did not include prescription drug coverage (13% to 12%).

Table 57. Does this coverage include prescription drug coverage?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	82.9%	1,921,260	82.8%	1,940,797	83.8%	2,033,607
No	13.4%	310,507	13.2%	308,889	11.6% *	282,215
DK/REF	3.7%	85,489	4.0%	93,790	4.6%	111,106
Total	100.0%	2,317,257	100.0%	2,343,476	100.0%	- 2,426,928

* Tested, significant; 95% confidence level; 5% significance level
 - Not tested, not applicable

Of respondents with additional individual or group health care coverage in 2014, slightly less than half (47%) reported that their coverage was provided through a Health Maintenance Organization (HMO) or another managed care organization.

Table 58. Is this coverage provided through an HMO or other managed care organization?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	49.6%	1,148,864	47.5%	1,112,875	47.4%	1,151,234
No	40.7%	942,134	41.1%	962,288	40.0%	970,898
DK/REF	9.8%	226,259	11.4%	268,313	12.6%	304,796
Total	100.0%	2,317,257	100.0%	2,343,476	100.0%	- 2,426,928

- Not tested, not applicable

Medication Use and Benefits

Prescription Drug Coverage through VA

All enrollees were asked to report on their prescription medication use and benefits. In 2014, over half (55%) of enrollees indicated that they had VA prescription drug benefits, a significant decrease. All enrollees are entitled to prescription benefits from VA, so this decreasing percentage reflects a diminishing lack of awareness of those benefits.

Table 59. Do you currently have a prescription drug benefit from VA?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
Yes	55.7%	4,466,878	56.6%	4,700,229	55.1% *	4,677,750
No	33.8%	2,711,191	33.3%	2,767,840	33.2%	2,815,124
DK/REF	10.4%	835,239	10.1%	835,888	11.7% *	994,092
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Prescription Medications

All enrollees were asked to report the number of different prescription medications they had taken in the last 30 days. In 2014, the largest proportion (41%) of enrollees reported taking five or more prescription medications within that timeframe. There was a significant increase in the number of enrollees who indicated not using prescription medication in the last 30 days (17% to 18%). There was also a significant decrease in the number of enrollees who indicated they used three-to-four prescription medications within that timeframe (21% to 20%).

Table 60. How many different prescription medications did you use in the last 30 days?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
0	16.4%	1,314,453	16.7%	1,386,320	17.6% *	1,497,550
1-2	19.7%	1,579,038	18.8%	1,560,871	18.8%	1,597,791
3-4	20.8%	1,667,321	21.1%	1,754,622	20.2% *	1,710,152
5+	41.1%	3,296,433	41.2%	3,424,588	40.5%	3,439,302
DK/REF	1.9%	156,063	2.1%	177,555	2.9% *	242,169
Total	100.0%	8,013,308	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Next, enrollees who had taken at least one prescription medication in the last 30 days were asked to report the number of medications they obtained from VA. The largest proportion in each survey year (37% in 2012, 38% in 2013, and 36% in 2014) reported that they obtained none of their prescription medications from VA; the decrease was significant.

Table 61. Of these prescription medications, how many did you obtain from VA?

	2012		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
0	37.4%	2,449,660	37.7%	2,539,331	36.0%	* 2,425,649
1-2	16.9%	1,103,963	16.7%	1,123,522	16.9%	1,137,210
3-4	15.9%	1,037,831	15.6%	1,050,888	16.2%	1,096,382
5+	29.0%	1,899,833	28.9%	1,949,321	29.5%	1,993,296
DK/REF	0.8%	51,504	1.1%	77,020	1.4%	* 94,709
Total	100.0%	6,542,792	100.0%	6,740,082	100.0%	- 6,747,245

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

Patient Protection and Affordable Care Act

In 2014, enrollees were asked how well they understood the ACA. Almost 53 percent of enrollees indicated that they did not understand the Act, a significant decrease. In addition, there was a significant decrease in the number of enrollees who indicated they rely on others for information about the Act (13% to 12%). In contrast, there were significant increases in the number of enrollees who indicated they follow the issue closely (14% to 19%), and that the Act does not affect them (6% to 18%).

Table 62. How well do you understand the Patient Protection and Affordable Care Act? (not mutually exclusive)

	2012 ^a		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
I have followed this issue closely	--	--	14.4%	1,196,604	19.1%	* 1,621,393
I rely on others for information about the Act	--	--	12.7%	1,057,289	11.9%	* 1,006,368
The patient protection and affordable care act does not affect me	--	--	6.2%	518,336	18.1%	* 1,536,592
I do not understand this Act	--	--	64.6%	5,362,910	52.7%	* 4,471,595
DK/REF	--	--	4.3%	360,040	3.1%	* 264,930

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

In 2014, enrollees were asked how they thought the ACA would change their planned use of the VA health care system. Over 60 percent indicated that they would not change their use of the system, a significant increase. Additionally, there was a significant decrease in the number of enrollees who indicated they would increase their use of the VA health care system (15% to 14%), and would decrease their use of the VA health care system (2% to 1%).

Table 63. How do you think the health care reform law will change your planned use of the VA health care system?

	2012 ^a		2013		2014	
	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate	Weighted Percent	Population Estimate
I will definitely increase my use of the VA health care system	--	--	7.4%	615,683	7.4%	625,883
I will probably increase my use of the VA health care system	--	--	15.1%	1,253,119	13.9% *	1,179,975
I will not change my use	--	--	51.5%	4,276,326	60.6% *	5,142,858
I will probably decrease my use of the VA health care system	--	--	1.6%	132,038	1.3% *	112,667
I will definitely decrease my use of the VA health care system	--	--	0.8%	62,405	0.7%	60,094
DK/REF	--	--	23.7%	1,964,386	16.1% *	1,365,488
Total	--	--	100.0%	8,303,957	100.0% -	8,486,965

* Tested, significant; 95% confidence level; 5% significance level

- Not tested, not applicable

^a Question not included in survey for this year

APPENDIX A – CONDENSED DESCRIPTION OF THE METHODOLOGY

This appendix offers a condensed overview of the 2014 Survey of Enrollees methodology.

Sample Design

A sample of 151,683 enrollees was drawn from the population of enrolled Veterans as of September 30, 2013. Enrollees were excluded if they lived outside of the United States or Puerto Rico. In addition, the enrollment file was compared to key VA Veteran data files to exclude any enrollees who declined enrollment, did not have a valid address, or whose file indicated they were deceased. For 2014, the stratification by Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn (OEF/OIF/OND) and pre-/post-enrollee type was dropped, and stratification by gender was added to facilitate the oversampling of women. In addition, a Supplemental, independent sample was drawn of enrollees identifying as Hispanic or Latino. These changes were designed to increase data utility for these two emerging Veteran populations.

Multi-mode Survey

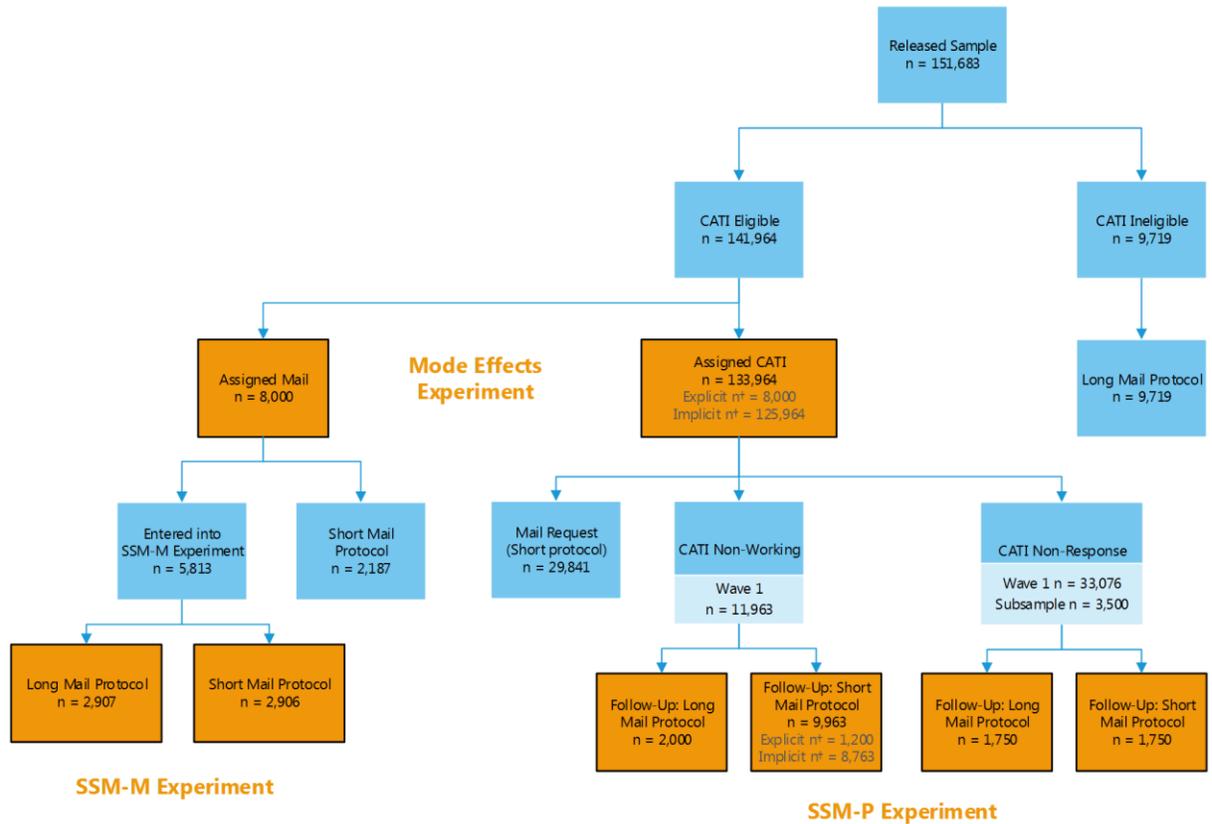
Veterans with missing or invalid telephone numbers were assigned to the paper-and-pencil interviewing (PAPI) treatment. The remaining Veterans—those with a populated telephone number—were assigned to either the Computer-assisted Telephone Interviewing (CATI) control group or the PAPI experimental treatment group. Both CATI and PAPI treatments included an option for Veterans to complete the survey via Computer-assisted Web Interviewing (CAWI). The total number of selected Veterans was determined by reviewing historical response rates, estimating the impact of all Veterans receiving a pre-survey notification letter, the use of multiple modes, and actual performance during the course of data collection.

The 2014 Survey of Enrollees included three experiments:

1. **Mode Effects (ME):** To test for mode effects in the CATI-eligible population, ICF randomly assigned CATI-eligible enrollees to one of two modes, CATI or PAPI.
2. **Second Survey Mailing, Follow-Up to Phone Protocol (SSM-P):** To test the effect of one vs. two CATI non-working/non-respondent follow-up contacts, ICF mailed either one or two follow-up surveys to a sample of CATI non-working/non-response records. The control group received the “short” follow-up protocol (i.e., one mail survey and a reminder postcard), whereas the treatment group received the “long” follow-up protocol (i.e., one mail survey, a reminder postcard, then a second mail survey).
3. **Second Survey Mailing, Mail Protocol (SSM-M):** This experiment tested the effect of one vs. two survey mailings among a sample of enrollees given the PAPI protocol. The control group received the “short” protocol (i.e., one mail survey and a reminder

postcard prior to initiation of phone follow-ups), whereas the treatment group received the “long” protocol (i.e., one mail survey, a reminder postcard, then a second mail survey—prior to initiation of phone follow-ups). *Figure A-1* details how sample was allocated to the three experimental groups. Analysis of the 2014 experiments is the subject of a separate report.

Figure A-1. Sample allocation



*For the Mode Effects and SSM-P experiments, sample was explicitly assigned to conditions as recommended by power analyses. In both cases, additional sample was implicitly included in the control condition due to the fact that the treatment for records not explicitly assigned to an experimental condition was identical to that of records explicitly assigned to the control condition.

Design Weights

Prior to calculating the non-response adjustment, ICF adjusted for differential selection probabilities and the increased probability of selection for Hispanic/Latino enrollees created when combining the two independent samples.

The 2014 sample consisted of two independent draws. The first draw (Main) contained the bulk of the sample and was designed to support overall estimates of the enrollee characteristics. This sample was stratified by VISN (21 levels), Priority Group (8 levels), and gender (2 levels), yielding 336 strata. The sample was allocated to oversample female enrollees.

The Supplemental sample was then drawn from this file as a stratified simple random sample drawing an equal proportion from each VISN's population of Hispanic/Latino enrollees. The sample was allocated 2,625 completed interviews.

The design weight compensates for unequal selection probabilities across sampling strata. Because the two samples were statistically independent, an initial design weight was first computed separately for each sample. The probability of selection is calculated as $p = n_i/N_i$ where n_i is the number of sampled enrollees and N_i is the total number of enrollees in the i^{th} sampling stratum. The inverse of these selection probabilities is the independent-samples design weight, $w_1 = 1/p$.

For the Main sample, i indexes one of 336 strata formed by crossing VISN, Priority Group, and gender.

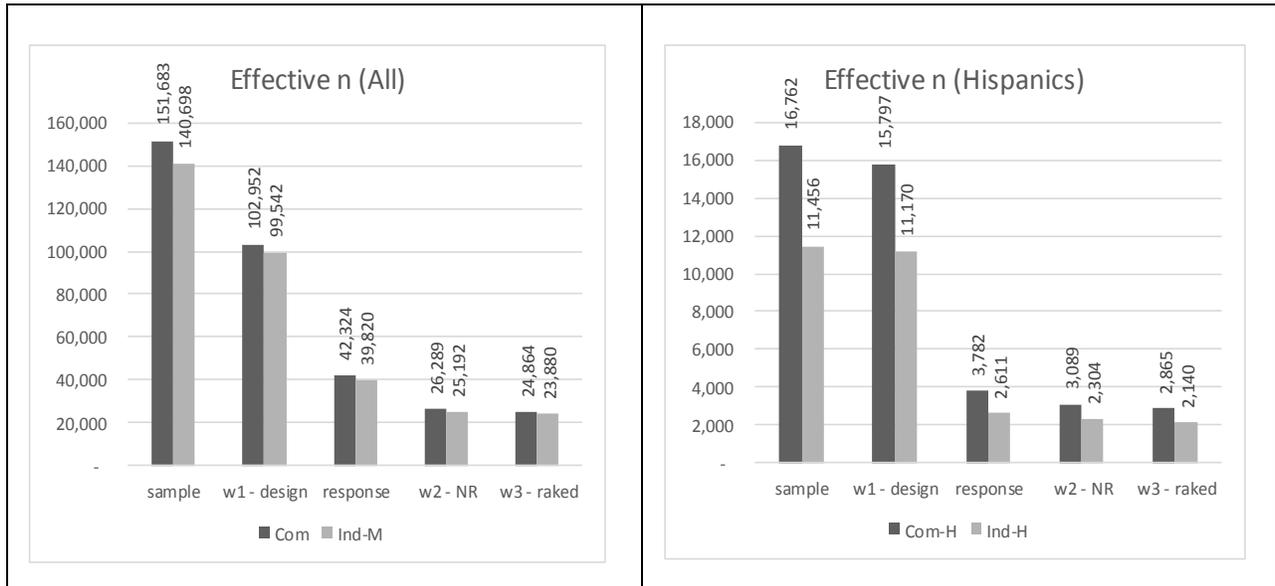
In the combined sample, Hispanic/Latino enrollees received a probability of selection in both the Main and Supplemental samples. The selection probability of the combined-sample design weight was computed to account for this. Specifically, if $p_{S,j}$ represents the probability of drawing the j^{th} enrollee from the Supplemental (Hispanic/Latino) frame, and $p_{M,j}$ represents the probability of drawing the same j^{th} enrollee from the Main sample frame, then the correct selection probability for the j^{th} enrollee in the combined sample is given by $p_j = p_{S,j} + p_{M,j} - (p_{S,j} \times p_{M,j})$, and the combined-sample design weight is taken, as above, as $w_1 = 1/p$. This is the delivered design weight that was used as the basis for the following non-response and post-stratification adjustments.

Weighting

In 2005, ICF conducted a non-response bias analysis for that cycle. One of the resulting recommendations was a *propensity score* weighting adjustment. This weighting adjustment, used in each subsequent cycle, corrects for differential non-response by health utilization and demographic information. It reduces potential bias to the extent that non-respondents and respondents with similar response probabilities are also similar with respect to the survey statistics of interest.

In 2014, to facilitate more precise estimates of survey outcomes for Hispanic enrollees, a Supplemental sample of Hispanic enrollees was drawn independently from the Main sample. Following data collection, ICF recommended combining the Main and Supplemental samples due to the net gain in precision from the overall larger sample size, which outweighed the loss of precision due to the increased weighting variance introduced when combining the samples (see *Figure A-2*). The method used to combine the two independent samples, described below as part of the design weight, took into account the increased probability of selection of Hispanic enrollees.

Figure A-2. Effective sample size (overall and for Hispanic enrollees) when using combined vs. independent weights



Non-Response Adjustment

To calculate the non-response adjustment, each sampled enrollee was classified into a non-response category (y) based on whether the attempted interview was complete or incomplete:

$$y = \begin{cases} 0 & \text{if interview is an incomplete interview} \\ 1 & \text{if interview is a complete interview} \end{cases}$$

Using logistic regression, ICF estimated the probability that an enrollee completed the interview given his or her characteristics:

$\Pr(y = 1 | x) = \frac{e^{x\beta}}{1 + e^{x\beta}}$, where x is a matrix of sampled enrollees and each enrollee has a set of p covariates, $\mathbf{x}'_i = (1, x_{1i}, \dots, x_{pi})$ for enrollee i . This set of covariates was used as explanatory (or predictor) variables, and $\beta = (\beta_0, \beta_1, \dots, \beta_p)$ was a set of regression coefficients, or parameters.

The predictor variables included:

- The sample design variables (VISN, Priority Group, gender, and Hispanic/Latino);
- Design variables previously used for sample stratification (OEF/OIF/OND and enrollee type);
- Seven administrative health measures (listed below);
- Demographic variables (age, urban/rural address);

- Telephone number status (valid, not valid); and
- A flag identifying whether multiple enrollees use the same telephone number.

VHA provided a file based on administrative records; the file indicated whether an enrollee had utilized any of the following VHA services in the previous year (the file did not indicate the frequency of use or amount paid for any of these benefits):

- Received long-term care benefits
 - a. Institutional
 - b. Non-institutional
- Inpatient treatment
 - a. Mental health or substance abuse
 - b. Non-mental health and non-substance abuse
- Outpatient treatment
 - a. Mental health or substance abuse
 - b. Non-mental health and non-substance abuse
- VHA pharmacy services

The utilization indicators have been used for weighting since the 2007 survey. From 2007–2010, the indicators were sourced from VHA workload files based on bed section and clinic stop. This categorization indicates *where* a Veteran received care. For the 2011 and 2012 survey, the indicators were based on service utilization from Health Service Categories (HSCs), indicating *what* care a Veteran received. A second change was to include institutional and non-institutional long-term care indicators as compared to 2007–2010, when a single measure of home health service was used.

The outcome of the model is the propensity score, the estimated probability that the enrollee is in the final sample of respondents given their characteristics (as defined by the list of predictor variables above).

After estimating each sampled enrollee’s probability of completing an interview based on the predictor variables, respondents and non-respondents were grouped into quintiles based on their propensity score. Within each quintile, respondents were ratio-adjusted to account for non-respondents. The first quintile represents the enrollees with the lowest propensity scores; this means that these enrollees are less likely to be in the final sample; thus, they receive the largest weights. The last quintile represents the enrollees with the highest propensity scores; this means that these enrollees are more likely to be in the final sample of respondents—thus, they receive the smallest weights.

Table A-1. Non-response adjustment

Percentile	Response	Non-Response	Non-Response Adjustment (NR)
0 – <20 th	211,860	1,485,526	8.01
20 th – <40 th	393,666	1,302,485	4.31
40 th – <60 th	506,344	1,192,120	3.35
60 th – <80 th	671,644	1,025,906	2.53
80 th – <100 th	804,079	893,335	2.11

To calculate the non-response adjusted weights, each respondent’s design weight w_1 was multiplied by the adjustment factor NR from the quintile where he or she fell: $w_2 = w_1 \times NR$.

Post-Stratification Adjustment

Because the 2014 sample design departed from the design used in previous years, a post-stratification adjustment was included as part of the weighting to promote comparability. The post-stratification adjustment ensures that the distribution of the weighted sample matches the distribution of the enrollee population across a stable set of dimensions, such as age and gender. Because these post-stratification dimensions are independent of the dimensions used to define sampling strata in a given year, the post-stratification adjustment facilitates flexibility in the sampling design while preserving comparability across years.

Unlike previous years, the 2014 sample stratification did not include OEF/OIF/OND status and pre-/post-enrollee status. Including these dimensions in the post-stratification adjustment restores comparability to previous years. Variables that were used to define the 2014 sampling strata were also used in the post-stratification adjustment, so that the data can be weighted to a consistent set of demographics across years, regardless of changes in the strata definitions. Finally, as the enrollee age distribution is related to both of these sets of variables, as well as to reliance measures, age was included in the post-stratification. Enrollee age was categorized into seven levels: under 35; 35–44; 45–54; 55–64; 65–74; 75–84; and 85+.

These dimensions for post-stratification were used in 2014:

- Age x gender (14 levels);
- Hispanic/Latino status (2 levels);
- Priority Group x VISN (168 levels);
- OEF/OIF/OND status (2 levels); and
- Pre/post-enrollee status (2 levels).

The post-stratification adjustment was implemented via a raking, or iterative proportional fitting, algorithm. During each iteration, the non-response-adjusted weight w_2 is ratio-adjusted to match population totals along each of the above post-stratification dimensions in turn. This iterative process continues until the weighted totals match population totals along all dimensions within a specified tolerance (in this case, by less than 1.00). For the 2014 combined sample, convergence was achieved after 15 iterations, indicating a stable adjustment. The post-stratification adjustment increased the coefficient of variation of the weights (a measure of the weighting variability) from 0.78 to 0.83, indicating that only a small increase in variance was required to achieve this bias reduction. The post-stratified weight w_3 was delivered with the weighted data and should be used as the analytic weight when generating population estimates.

Data Collection

Over the course of the data collection period, ICF attempted to contact 151,683 Veterans. Of that number, 42,324 surveys were collected. Of these interviews, 1,891 were completed with a knowledgeable proxy instead of the listed respondent; of these proxy interviews, 989 were completed by the selected Veteran’s spouse.

Table A-2 shows the distribution of completed surveys by mode.

Table A-2. Completes by mode

Total Completes	CATI Completes	CAWI Completes	PAPI Completes
42,324	25,447	5,868	11,009

- Cooperation Rate:** This is the proportion of all cooperative cases interviewed out of all eligible records. Eligibility is defined as any working telephone number that reaches the selected Veteran. For the 2014 CATI treatment group, ICF obtained an overall 79 percent cooperation rate. Cooperation rates were not calculated for the PAPI treatment group.

$$\text{Cooperation Rate} = (i+p)/((i+p)+(r+mt+o))$$

Table A-3. 1999–Present: key methodological data

	Enrollees Represented	Enrolled Population as of	Eligible Contacts	Completed Interviews	Cooperation Rate	Fielding Period
1999	3,642,537	2/3/1999	27,000	19,686	N/A	March 1999
2002	6,175,694	12/31/2001	63,126	37,528	59.4%	Apr–May 2002
2003	6,742,676	12/31/2002	65,472	41,704	63.7%	Aug–Sep 2003

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	Enrollees Represented	Enrolled Population as of	Eligible Contacts	Completed Interviews	Cooperation Rate	Fielding Period
2005	6,704,149	12/31/2004	57,870	42,094	72.7%	Sep–Dec 2005
2007	7,186,950	9/30/2006	85,307	42,587	49.9%	Jul–Sep 2007
2008**	7,339,531	4/30/2008	72,716	42,460	58.4%	Sep–Dec 2008
2010	7,804,639	9/30/2009	71,808	42,920	59.8%	May–Aug 2010
2011	7,895,108	9/30/2010	57,820	43,633	75.0%	Mar–May 2011
2012	8,013,308	9/30/2011	53,073	49,115	85.0%	Mar–Jun 2012
2013	8,303,957	9/30/2012	47,231	42,046	77.0%	Apr–Aug 2013
2014	8,486,965	9/30/2013	46,249	42,324	79.0%	Feb–July 2014

**In 2008, an additional stratum was added based on OEF/OIF/OND status

*Based on the American Association for Public Opinion Research cooperation rates as defined in the section above

Source: 1999, 2002, 2004, 2005, 2007, 2008, 2010, and 2012 VHA Survey of Enrollees

- Click on the **STOP** button to exit the questionnaire. You may do so at any point. You may re-enter where you left off by going to <http://www.vhasurvey.com>
- If you close your browser without clicking STOP, you will need to wait 10 minutes before you can re-enter the questionnaire and continue where you left off.

///PROGRAMMER: START TIMER t_ett1_length///

///ASK ALL///

INTRODUCTION

INTRO2B. This survey asks about how you use VA services and what types of services you do or do not use.

Your name and answers will be linked. However, VA will protect your identity and answers to the full extent allowed under the law. Your answers will in no way affect your benefits. No information that you provide will be released to the general public in a way that can be traced back to you.

This survey has been reviewed and approved by the VHA Office of the Assistant Deputy Under Secretary for Health for Policy and Planning and the Office of Management and Budget. If you have any questions regarding the legitimacy of this survey, you may call the Department of Veterans Affairs in Washington, D.C. at 1-877-222-8387.

///ASK ALL///

INTRO2AA. Your participation is voluntary – you can choose to skip any question or end the survey at any time without an explanation. Your benefits will not change as a result of your answering any questions. Your benefits will also not be affected if you choose not to participate or to not answer a question.

///ASK ALL///

///REQUIRE RESPONSE///

PREPROXY. <NAME> was randomly selected from a list of Veterans who enrolled to use VA health care services. Are you <NAME>, or will you be taking the survey on behalf of <NAME>?

01 I am <NAME>.

02 I will be taking the survey on behalf of <NAME>.

///ASK IF PREPROXY=02/// ///

///REQUIRE RESPONSE///

PROXY. This survey is about how many Veterans use VA services and what types of services they do or do not use. <NAME>'s name and answers will be linked. However, VA will protect <NAME>'s identity and answers to the extent allowed under the law. Your answers will in no way affect <NAME>'s benefits. No information that you provide will be released to the general public in a way that can be traced back to <NAME>.

This is an important survey. Would you be able to answer questions about <NAME>'s health care, health benefits and health status?

- 01 Yes ///GO TO PROXY2///
- 02 No ///TERM AS DISPO=6///

///ASK IF PROXY=01///

PROXY2. This survey will take approximately 15-30 minutes. Your participation on behalf of **<NAME>** is voluntary – you can choose to skip any question or end the survey at any time without an explanation. **<NAME>'s** benefits will not change as a result of your answering any questions. **<NAME>'s** benefits also will not be affected if you choose not to participate or to not answer a question

///ASK IF PROXY=01///

RELATION Before you begin, please indicate how you would describe your relationship to **<NAME>**? Are you **<NAME>'s**...

- 01 Spouse
- 02 Significant other
- 03 Parent
- 04 Sibling
- 05 Child
- 06 Some other relative
- 07 Friend
- 08 Caregiver
- 09 Guardian or Attorney
- 10 Social Worker or Case Worker
- 97 Some other relation
- 88 NO ANSWER ///HIDDEN///

///PROGRAMMER: END TIMER t_ett1_length///

///PROGRAMMER: START TIMER t_ett2_length///
HEALTH BENEFITS

///ASK IF PROXY=01///

PRETA. Please remember when answering that you are talking about **<NAME>**.

/IF PREPROXY=1 OR PROXY=01 ASK/

The first questions ask about health care benefits...

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "Are you"

/IF PREPROXY=02/ <TEXTSUB1> = "Is <NAME>"

/IF PREPROXY=01/ <TEXTSUB2> = "I don't"

/IF PREPROXY=02/ <TEXTSUB2> = "<NAME> doesn't"

PREA1. <TEXTSUB1> enrolled in VA health care?

- 01 Yes
- 02 No
- 03 <TEXTSUB2> remember enrolling
- 88 NO ANSWER ///HIDDEN///

//ASK IF PREA1=01//
//IF PREPROXY=01/ <TEXTSUB1> = "you"
//IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

PREA1a: Did <textsub1> enroll in VA for health care within the last five years?

- 01 Yes
- 02 No

- 88 NO ANSWER ///HIDDEN///

//IF PREA1a=01//
//IF PREPROXY=01/ <TEXTSUB1> = "you"
//IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"
//IF PREPROXY=01/ <TEXTSUB2> = "me"
//IF PREPROXY=02/ <TEXTSUB2> = "<NAME>"

PREA1b What is the primary reason that <textsub1> enrolled?

[INTERVIEWER: DO NOT READ] [SINGLE RESPONSE]

- 01 Recent discharge from service
- 02 Loss of or reduction in other health insurance benefits
- 03 Other economic circumstances
- 04 To meet the requirement for health insurance coverage under the new health reform law
- 05 Moved closer to a VA facility
- 06 A VA facility opened close to <textsub2>
- 07 Other (Please specify on next page)
- 88 NO ANSWER ///HIDDEN///

//IFPREA1b=07
PREA1b_O. Enter Response [Range= 1-500]

///ASK IF PREPROXY=1 OR PROXY=01///
//IF PREPROXY=01/ <TEXTSUB1> = "Are you"
//IF PREPROXY=02/ <TEXTSUB1> = "Is <NAME>"
A1. <TEXTSUB1> covered by **Medicare**?

- 01 Yes
- 02 //SKIP TO A7// No
- 88 NO ANSWER ///HIDDEN/// ///SKIP TO A7///

///ASK IF A1=01///
///IF PREPROXY=01, <TEXTSUB1> = "<you>", ELSE <TEXTSUB1> = "<NAME>"///
///IF PREPROXY=01, <TEXTSUB2> = "your", ELSE <TEXTSUB2>= ""///

A2. Did <TEXTSUB1> choose to receive <TEXTSUB2> Medicare coverage through a Medicare Advantage Plan and not through the Original Medicare Plan?

Medicare Advantage Plans include Medicare HMOs (Health Maintenance Organizations), Medicare PPOs (Preferred Provider Organizations), Medicare Special Needs Plans, and Medicare Private Fee-for-Service Plans.

01 //SKIP TO A6// Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF A2 IN (02,88)

/IF PREPREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

///IF PREPROXY=02, <TEXTSUB2> = "", ELSE <TEXTSUB2>= "you are"///

A3. Does <TEXTSUB1> Medicare coverage pay for care if <TEXTSUB1> hospitalized?

*This type of Medicare is also sometimes called "**Part A**;" if you have it, there is generally no monthly fee or premium because you or a spouse paid for it through payroll taxes while you were working.*

01 Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF A2 IN (02,88)

/IF PREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

A4. Does <TEXTSUB1> Medicare coverage pay for doctor's office visits?

*This type of Medicare is also sometimes called "**Part B**;" if you have it, you generally pay a monthly fee or premium which may be directly deducted from your Social Security check.*

01 Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF A2 IN (02,88)

/IF PREPROXY=01/ <TEXTSUB1> = "Do you"

/IF PREPROXY=02/ <TEXTSUB1> = "Does <NAME>"

A5. <TEXTSUB1> purchase any private health care coverage to supplement Medicare; that is to pay for services Medicare does not pay for?

Types of private insurance a person can purchase to supplement Medicare include Medigap or Medicare Supplement. It does not include Medicare Advantage, Medicare + Choice, or Department of Defense's TRICARE For Life Plan for Medicare Eligible Military Retirees.

01 Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF A1=01///

//IF PREPROXY=01/ <TEXTSUB1> = "Do you"

//IF PREPROXY=02/ <TEXTSUB1> = "Does <NAME>"

A6. <TEXTSUB1> have Medicare prescription drug coverage, "**Part D**"?

01 Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

//IF PREPREPROXY=01/ <TEXTSUB1> = "Are you"

//IF PREPROXY=02/ <TEXTSUB1> = "Is <NAME>"

///IF PREPROXY=02, <TEXTSUB2> = "his or her", ELSE <TEXTSUB2>= "you"///

A7. <TEXTSUB1> currently covered by **Medicaid** for any of <TEXTSUB2> health care?

In //DISPLAY STATE FROM SAMPLE// you may know it as //DISPLAY STATE
MEDICAID PLAN NAME-- RECALL LIST FROM 2005 FOR STATE MEDICAID PLAN
NAME //.
//ONLY DISPLAY IF STATE MEDICAID PLAN IS NOT "MEDICAID", OTHERWISE DO
NOT DISPLAY//

Medicaid is a program that pays for Medical Assistance for certain individuals with low incomes and resources and is provided by your State government's social services department.

01 Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

//IF PREPROXY=01/ <TEXTSUB1> = "Are you"

//IF PREPROXY=02/ <TEXTSUB1> = "Is <NAME>"

A8. <TEXTSUB1> currently covered by the Department of Defense's TRICARE or TRICARE for Life health care programs?

01 Yes
02 No
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

//IF PREPROXY=01/ <TEXTSUB1> = "Are you"

//IF PREPROXY=02/ <TEXTSUB1> = "Is <NAME>"

///IF PROXY=01, <TEXTSUB2> = "<NAME>", ELSE <TEXTSUB2>= "you"///

///IF PROXY=01, <TEXTSUB3> = "<NAME>", ELSE <TEXTSUB2>= "you"///

- A9. <TEXTSUB1> currently covered by any other individual or group health plan, that either <TEXTSUB2>, or an employer, or someone else, such as a family member obtains for <TEXTSUB3>?

Please Do Not Count Private Medigap, Medicare Supplement, Medicare Advantage, or Medicare + Choice plans.

Please Do Count any private retiree health insurance plan.

- 01 Yes
- 02 No
- 88 NO ANSWER ///HIDDEN///

///ASK IF A9=01///

- A10. Who provides this coverage? If more than one source applies, please indicate the primary source.

- 01 Current employer, including COBRA coverage
- 02 Former employer
- 03 Individually purchased coverage
- 04 Federal, State, County, or local community health services program
- 05 Family member, such as a spouse, parent, etc.
- 97 From somewhere else (Please specify on next page)
- 88 NO ANSWER ///HIDDEN///

///ASK IF A10=97/ //

- A10_O. Who provides this coverage?

//TEXT RANGE 1-500//

///ASK IF A9=01///

- A11. Does this coverage include prescription drug coverage?

- 01 Yes
- 02 No
- 88 NO ANSWER ///HIDDEN///

///ASK IF A9=01///

- A12. Is this coverage provided through an HMO or other managed care organization?

An HMO or Health Maintenance Organization or other managed care coverage requires you to use certain doctors, hospitals, and other providers. If you use health care services or providers who are not in the plan, you pay more, or all of the cost for that health care.

- 01 Yes
- 02 No
- 88 NO ANSWER ///HIDDEN///

///PROGRAMMER: END TIMER t_ett2_length///

///PROGRAMMER: START TIMER t_ett3_length///

MEDICATION USE AND BENEFITS

///ASK IF PREPROXY=1 OR PROXY=01///

The following questions ask about medications.

///IF PREPROXY=01/ <TEXTSUB1> = "Do you"

///IF PREPROXY=02/ <TEXTSUB1> = "Does <NAME>"

A13. <TEXTSUB1> currently have a prescription drug benefit from VA?

- 01 Yes
- 02 No
- 98 I'm not sure
- 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

///IF PREPROXY=01/ <TEXTSUB1> = "you"

///IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

A15A. How many different **prescription** medications did <TEXTSUB1> use in the last 30 days?

Your best guess is fine.

_____ Record Response [0 – 50]
88 NO ANSWER ///HIDDEN///

///ASK IF A15A NOT IN (0, 88)///

///IF PREPROXY=01/ <TEXTSUB1> = "you"

///IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

A15B. Of these **prescription** medications, how many did <TEXTSUB1> obtain from VA?

Your best guess is fine.

_____ Record Response [0 – A15A]
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

///IF PREPROXY=01/ <TEXTSUB1> = "do you"

///IF PREPROXY=02/ <TEXTSUB1> = "does <NAME>"

///IF PREPROXY=01/ <TEXTSUB2> = "your"

///IF PREPROXY=02/ <TEXTSUB2> = "their"

///IF PREPROXY=01/ <TEXTSUB3> = "you"

///IF PREPROXY=02/ <TEXTSUB3> = "<NAME>"

A16. On average, how much <TEXTSUB1> spend out-of-pocket for all <TEXTSUB2> over the counter and prescription medications on a monthly basis, not including any health insurance premiums <TEXTSUB3> may pay?

Your best guess is fine. Please provide a whole number.

\$_____ Record Response [0 – 9999]
88 NO ANSWER ///HIDDEN///

///PROGRAMMER: END TIMER t_ett3_length///

///PROGRAMMER: START TIMER t_ett4_length///
HEALTH CARE SERVICES

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "you"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

PREB1. The next questions are about <TEXTSUB1> use of medical health services in 2013 from both Non-VA sources, as well as from VA.

The first question is about Non-VA provided health care services.

///ASK IF VSPLIT=2, ELSE SKIP TO PREB22///

/IF PREPROXY=01/ <TEXTSUB1> = "you"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

B11B. From October 2013 through December 2013, how many outpatient visits or trips, did <TEXTSUB1> make to any Non-VA doctor's office, hospital, or outpatient clinic?

Please do not count dental, mental health, substance abuse visits or any visits paid for by VA.

Your best guess is fine.

Record Response_____ [RANGE=0- 366]
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

PREB22 Now, the next few questions are in regards to any VA provided health care.

///ASK IF VSPLIT=2, ELSE SKIP TO B25///

/IF PREPROXY=01/ <TEXTSUB1> = "you"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

/IF PREPROXY=01/ <TEXTSUB2> = "you"

/IF PREPROXY=02/ <TEXTSUB2> = "<NAME>"

B22B. From October 2013 through December 2013, how many outpatient visits or trips did <TEXTSUB1> make that were paid for by VA?

That would include the number of times <TEXTSUB2> went to a VA doctor, hospital or clinic for **medical** care or received medical care somewhere else that was paid for by VA. Do not count dental or mental health visits or trips to a pharmacy.

Your best guess is fine.

Record Response_____ [RANGE=0-366]
88 NO ANSWER ///HIDDEN///

```
///ASK IF PREPROXY=1 OR PROXY=01///  
/IF PREPROXY=01/ <TEXTSUB1> = "you"  
/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"  
/IF PREPROXY=01/ <TEXTSUB2> = "your"  
/IF PREPROXY=02/ <TEXTSUB2> = ""  
/IF PREPROXY=01/ <TEXTSUB3> = "you plan"  
/IF PREPROXY=02/ <TEXTSUB3> = "<NAME> plans"  
/IF PREPROXY=01/ <TEXTSUB4> = "Do you"  
/IF PREPROXY=02/ <TEXTSUB4> = "Does <NAME>"  
/IF PREPROXY=01/ <TEXTSUB5> = "Your"  
/IF PREPROXY=02/ <TEXTSUB5> = "A"  
/IF PREPROXY=01/ <TEXTSUB6> = ""  
/IF PREPROXY=02/ <TEXTSUB6> = "As"  
/IF PREPROXY=01/ <TEXTSUB7> = "Do you"  
/IF PREPROXY=02/ <TEXTSUB7> = "Does <NAME>"
```

B25. Below is a list of possible ways <TEXTSUB1> could use VA for <TEXTSUB2> health care in the future. Please read them all, and then choose the one that best describes the **primary** way <TEXTSUB3> to use VA health care in the future. <TEXTSUB4> plan to use VA as....

- 01 <TEXTSUB5> primary source of health care
- 02 <TEXTSUB6> Backup to non-VA care for some minor services
- 03 A "safety net" to use only if needed
- 04 For prescriptions
- 05 For specialized care
- 06 Some other way
- 07 Or <TEXTSUB7> have no plans to use VA for health care
- 88 NO ANSWER ///HIDDEN///

```
///ASK IF B25=06///
```

```
/IF PREPROXY=01/ <TEXTSUB1> = "you"  
/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"  
/IF PREPROXY=01 <TEXTSUB2>="plan"  
/IF PREPROXY=02 <TEXTSUB2>="plans"
```

B25_O. Could you please indicate how <TEXTSUB1> primarily <TEXTSUB2> to use VA for health care in the future?

```
//TEXT RANGE 1-500//
```

```
///PROGRAMMER: END TIMER t_ett4_length///
```

/// PROGRAMMER: START TIMER t_ett5_length///

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "you"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

C1. Please indicate how <TEXTSUB1> would complete the following statement....

I **use** VA services to meet....

- 01 All of my health care needs
- 02 Most of my health care needs
- 03 Some of my health care needs
- 04 None of my health care needs
- 05 I have no health care needs
- 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=1//

/IF PREPROXY=01/ <TEXTSUB1> = "Are you"

/IF PREPROXY=02/ <TEXTSUB1> = "Is <NAME>"

C7. <TEXTSUB1> aware of the MyHealthVet Web site?

- 01 YES
- 02 NO
- 88 NO ANSWER //HIDDEN//

///IF C7=01//

/IF PREPROXY=01/ <TEXTSUB1>= "Do"

/IF PREPROXY=02/ <TEXTSUB1>="Does"

/IF PREPROXY=01/ <TEXTSUB2> = "you"

/IF PREPROXY=02/ <TEXTSUB2> = "<NAME>"

/IF PREPROXY=01/ <TEXTSUB3>= "Do"

/IF PREPROXY=02/ <TEXTSUB3>="Does"

/IF PREPROXY=01/ <TEXTSUB4>="you"

/IF PREPROXY=02/ <TEXTSUB4>="<NAME>"

/IF PREPROXY=01/ <TEXTSUB5>="your"

/IF PREPROXY=02/ <TEXTSUB5>="<NAME>'s"

/IF PREPROXY=01/ <TEXTSUB6>="your"

/IF PREPROXY=02/ <TEXTSUB6>="<NAME>'s"

/IF PREPROXY=01/ <TEXTSUB7>="I do"

/IF PREPROXY=02/ <TEXTSUB7>="<NAME> does"

C8. How <TEXTSUB1> <TEXTSUB2> use the site? <TEXTSUB3> <TEXTSUB4> use it...

Please choose all that apply.

/MUL=7; CODE 08 CANNOT BE COMBINED WITH CODES 01-07/

- 01 For health information
- 02 To communicate with <TEXTSUB5> healthcare provider via secure e-mail
- 03 To access <TEXTSUB6> Personal Health Record
- 04 To access lab test results

- 05 To reorder prescriptions
- 06 To schedule appointments
- 07 For some other purpose
- 08 <TEXTSUB7> not use this site.
- 88 NO ANSWER //HIDDEN//

///ASK IF PREPROXY=1 OR PROXY=1///
 /IF PREPROXY=01/ <TEXTSUB1> = "your"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"
 /IF PREPROXY=01/ <TEXTSUB2> = "My"
 /IF PREPROXY=02/ <TEXTSUB2> = "<NAME>'s"

C9. What is <TEXTSUB1> PRIMARY source for VA benefits information? Is it...

- 01 Friends or acquaintances
- 02 VA mailings (such as the patient handbook)
- 03 VA Outreach Events
- 04 Other community forums sponsored by non-VA organizations
- 05 A Veterans Service Organization such as VFW, AmVets, etc.
- 06 <TEXTSUB2> local Veterans Service Officer
- 07 Internet
- 08 Some other source
- 88 NO ANSWER //HIDDEN//

///ASK IF PREPROXY=1 OR PROXY=1//
 /IF PREPROXY=01/ <TEXTSUB1> = "you"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"
 /IF PREPROXY=01/ <TEXTSUB2> = "live"
 /IF PREPROXY=02/ <TEXTSUB2> = "lives"

C10. Would you say that <TEXTSUB1> <TEXTSUB2> in an urban area, a suburban area, or a rural area?

- 01 URBAN
- 02 SUBURBAN
- 03 RURAL
- 88 NO ANSWER //HIDDEN//

///PROGRAMMER: END TIMER t_ett5_length///

///PROGRAMMER: START TIMER t_ett6_length///

VA HEALTH CARE VIEWS

///ASK IF PREPROXY=1 OR PROXY=01///
 /IF PREPROXY=01/ <TEXTSUB1> = "you"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"
 /IF PREPROXY=01/ <TEXTSUB2> = "agree"
 /IF PREPROXY=02/ <TEXTSUB2> = "agrees"

/IF PREPROXY=01/ <TEXTSUB3> = "agree"
/IF PREPROXY=02/ <TEXTSUB3> = "agrees"
/IF PREPROXY=01/ <TEXTSUB4> = "agree nor disagree"
/IF PREPROXY=02/ <TEXTSUB4> = "agrees nor disagrees"
/IF PREPROXY=01/ <TEXTSUB5> = "disagree"
/IF PREPROXY=02/ <TEXTSUB5> = "disagrees"
/IF PREPROXY=01/ <TEXTSUB6> = "disagree"
/IF PREPROXY=02/ <TEXTSUB6> = "disagrees"
PRED5 For each of the following statements, please indicate if <TEXTSUB1> completely
<TEXTSUB2>, <TEXTSUB3>, neither <TEXTSUB4>, <TEXTSUB5>, or completely
<TEXTSUB6>.

///ASK d_quality_d12b:d_quality_d12g IF PREPROXY=1 OR PROXY=01///

///PROGRAMMER - FOR EACH SCREEN IN THIS SECTION, IF PROXY=01 PLEASE
DISPLAY: Please remember when answering that you are talking about <NAME>.

///PROGRAMMER: RANDOMIZE KEY DRIVER SUBSECTIONS (E.G. Quality, Cost) AND THE
ITEMS WITHIN EACH SUBSECTION.//

Quality //RANDOMIZE//

d_quality_d12b **Veterans like me who use VA are satisfied with the health care they receive.**

d_quality_d12g **VA health care providers treat their patients with respect.**

Would <TEXTSUB1>...

- 01 Completely Agree
- 02 Agree
- 03 Neither agree nor disagree
- 04 Disagree
- 05 Completely Disagree
- 88 NO ANSWER ///HIDDEN///

//END RANDOMIZE//

///ASK d_cost_d11a :D11C IF PREPROXY=1 OR PROXY=01///

Cost //RANDOMIZE//

d_cost_d11a **VA is the most cost-effective health care provider for Veterans like me.**

d_cost_d11c **VA offers Veterans like me the best value for our health care dollar.**

Would <TEXTSUB1>...

- 01 Completely Agree
- 02 Agree
- 03 Neither agree nor disagree
- 04 Disagree
- 05 Completely Disagree

88 NO ANSWER ///HIDDEN///
//END RANDOMIZE//

///ASK d_availability_d13b:d_availability_d13c IF PREPROXY=1 OR PROXY=01///
Availability and Accessibility of Services //RANDOMIZE//

d_availability_d13b **Veterans like me can get in and out of an appointment at VA in a reasonable time.**

d_availability_d13c **When Veterans like me go to VA for an appointment they do not wait a long time to see the doctor.**

Would <TEXTSUB1>...

- 01 Completely Agree
- 02 Agree
- 03 Neither agree nor disagree
- 04 Disagree
- 05 Completely Disagree
- 88 NO ANSWER ///HIDDEN///

//END RANDOMIZE//

///ASK d_convenience_d13e :D13F IF PREPROXY=1 OR PROXY=01///

Convenience of Location //RANDOMIZE//

d_convenience_d13e **There is a VA provider in my area that offers all of the health care services that Veterans like me need.**

d_convenience_d14a **It is easy for Veterans like me to get around in the VA health care facility.**

d_convenience_d15f **It is easy to get to my local VA facility.**

Would <TEXTSUB1>...

- 01 Completely Agree
- 02 Agree
- 03 Neither agree nor disagree
- 04 Disagree
- 05 Completely Disagree
- 88 NO ANSWER ///HIDDEN///

//END RANDOMIZE//

///ASK d_othfactors_d10c IF PREPROXY=1 OR PROXY=01///

Other Factors: Friends Using VA Services //RANDOMIZE//

d_othfactors_d10c **Veterans like me like going to VA because you can talk to other Veterans.**

Would <TEXTSUB1>...
01 Completely Agree
02 Agree
03 Neither agree nor disagree
04 Disagree
05 Completely Disagree
88 NO ANSWER ///HIDDEN///
//END RANDOMIZE//

///ASK d_knowledge_d14c : d_knowledge_d14d IF PREPROXY=1 OR PROXY=01///

Knowledge of VA Health Benefits //RANDOMIZE//

d_knowledge_d14c **I feel I know what is available to me through my VA benefits.**
d_knowledge_d14d **I understand how my VA health benefits work.**

Would <TEXTSUB1>...
01 Completely Agree
02 Agree
03 Neither agree nor disagree
04 Disagree
05 Completely Disagree
88 NO ANSWER ///HIDDEN///

///ASK d_alternative_d16d:d_alternative_d16h IF PREPROXY=1 OR PROXY=01///

Availability of NON-VA Health Care Alternatives //RANDOMIZE//

d_alternative_d16d **I have a doctor outside VA who I really like and trust.**
d_alternative_d16e **My family has a health insurance plan that covers me and the rest of the family.**
d_alternative_d16h **I tend to use the same healthcare providers as my spouse/partner and/or children**

Would <TEXTSUB1>...
01 Completely Agree
02 Agree
03 Neither agree nor disagree
04 Disagree
05 Completely Disagree
88 NO ANSWER ///HIDDEN///
//END RANDOMIZE//

///ASK d_othissues_d16c AND d_othissues_d16f IF PREPROXY=1 OR PROXY=01///

Other Issues //RANDOMIZE//

d_othissues_d16c1 I would only use VA if I did not have access to any other source of health care.

d_othissues_d16f1 Veterans who can afford to use other sources of health care should leave the VA to those who really need it.

///ASK IF C1 NE 01///

d_othissues_d16b1 If the cost of health care to me increases, I will use VA more.

///ASK IF C1 NE 04,05///

d_othissues_d16g1 My use of VA will decrease if my financial resources improve.

Would <TEXTSUB1>...

- 01 Completely Agree
- 02 Agree
- 03 Neither agree nor disagree
- 04 Disagree
- 05 Completely Disagree
- 88 NO ANSWER ///HIDDEN///

//END RANDOMIZE//

///PROGRAMMER: END TIMER t_ett6_length///

///PROGRAMMER: START TIMER t_ett7_length///

HEALTH AND LIFESTYLE

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

PREE1. The next question is about <TEXTSUB1> current health.

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

/IF PREPROXY=01/ <TEXTSUB2> = "your"

/IF PREPROXY=02/ <TEXTSUB2> = "their"

/IF PREPROXY=01/ <TEXTSUB3> = "you"

/IF PREPROXY=02/ <TEXTSUB3> = "<NAME>"

E1. Compared to other people <TEXTSUB1> age, would <TEXTSUB3> say <TEXTSUB2> health is:

- 01 Excellent
- 02 Very good
- 03 Good
- 04 Fair
- 05 Poor
- 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

PREE2. The next few questions are about cigarette smoking.

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "you"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

/IF PREPROXY=01/ <TEXTSUB2> = "your"

/IF PREPROXY=02/ <TEXTSUB2> = "<NAME>'s"

E2. Have <TEXTSUB1> smoked at least 100 cigarettes in <TEXTSUB2> entire life?

01 Yes

02 No///SKIP TO PREE5///

88 NO ANSWER ///HIDDEN/// ///SKIP TO PREE5///

///ASK IF E2IN (01,88)///

/IF PREPROXY=01/ <TEXTSUB1> = "Do you"

/IF PREPROXY=02/ <TEXTSUB1> = "Does <NAME>"

E3. <TEXTSUB1> now smoke cigarettes every day, some days, or not at all?

01 Every day

02 Some days

03 Not at all

88 NO ANSWER ///HIDDEN///

///ASK IF E2=IN (01,88)///

/IF PREPROXY=01/ <TEXTSUB1> = "have you"

/IF PREPROXY=02/ <TEXTSUB1> = "has <NAME>"

/IF PREPROXY=01/ <TEXTSUB2> = "you were"

/IF PREPROXY=02/ <TEXTSUB2> = "<NAME> was"

E4. During the past 12 months, <TEXTSUB1> stopped smoking for more than one day because <TEXTSUB2> trying to quit smoking?

01 Yes

02 No

88 NO ANSWER ///HIDDEN///

///PROGRAMMER: END TIMER_ETT7_LENGTH///

///PROGRAMMER: START TIMER_ETT8_LENGTH///

///ASK IF PREPROXY=1 OR PROXY=01///

PREE5 The next questions are for demographic purposes only.

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

E5. Which of the following best describes <TEXTSUB1> current marital status?

01 Married
 02 Widowed
 06 Registered Civil Partnership
 07 Registered Common Law Partnership
 03 Divorced
 04 Separated
 05 Single – Never Married
 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///
 /IF PREPROXY=01/ <TEXTSUB1> = "yourself"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"
 /IF PREPROXY=01 AND E5 IN (01,04, 06, 07)/ <TEXTSUB2> = "your spouse or " , ELSE
 <TEXTSUB2> = ""
 /IF PROXY=01 AND E5 IN (01,04 06, 07)/ <TEXTSUB2> = "a spouse or " , ELSE <TEXTSUB2>
 = ""
 /IF PREPROXY=01/ <TEXTSUB3> = "do you"
 /IF PREPROXY=02/ <TEXTSUB3> = "does <NAME>"
 /IF PREPROXY=01/ <TEXTSUB4> = "you"
 /IF PREPROXY=02/ <TEXTSUB4> = "<NAME>"

E6. Not including <TEXTSUB1>, how many dependents, such as <TEXTSUB2> dependent children, <TEXTSUB3> currently have? (Please enter a numeric value using "0" for none.)

"Dependent" is anyone who relies on <TEXTSUB4> for at least half of their financial support.

Record Response _____ [RANGE=0-88]
 88 NO ANSWER ///HIDDEN///

///If E6 >0 ASK//

E7a. How many of these dependents are under the age of 18 (0 to 17 years of age)?
 ENTER NUMBER _____ [RANGE=0-E6 VALUE, 88]

///IF E6>0 and E7 ne E6 ASK//

E8a. How many of these dependents are between the age of 18 and 26?
 ENTER NUMBER _____ [RANGE=0-E6, 88]

///IF SUM E7+E8a(excluding 88) > E6

[if after responding to E6_1, the sum of E7a and E8a is still greater than E6, proceed to next question]

E6_1. Earlier you indicated that you currently have //FILL_E6// total dependents. For dependents under the age of 18 you responded that you have //FILL_E7a//. For dependents 18 to 26 you responded that you have //FILL_E8a//, for a total of //FILL SUM OF E7a+E8a// dependents, which is greater than the total number of dependents you provided earlier. Please change the appropriate response below.

01 CHANGE DEPENDENT TOTAL [RANGE=0-88, 88, RESET E6]
02 CHANGE DEPENDENT UNDER AGE 18 [RANGE=0-E6, 88]
03 CHANGE DEPENDENT BETWEEN AGE 18-26[RANGE=0-E6, 88]

88 NO ANSWER ///HIDDEN///

PERIOD OF MILITARY SERVICE

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

PREE6A. In the following section, we would like to obtain information on <TEXTSUB1> **active duty military history**. Most Veterans have served only one continuous tour of duty, with no breaks in service; this is one term of service. Some Veterans have experienced breaks in service and had more than one tour of duty, and thus have served multiple terms of service.

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "have you"

/IF PREPROXY=02/ <TEXTSUB1> = "has <NAME>"

E6A. How many terms of active duty military service <TEXTSUB1> served?

Please do not include Reserve or National Guard training or drill periods unless "activated" at the time.

___ Record Response [1-6]

88 NO ANSWER ///HIDDEN/// ///SKIP TO E8///

///ASK IF E6A NOT IN (88)///

/IF PREPROXY=01/ <TEXTSUB1> = "you"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

/IF PREPROXY=01 AND E6A=1/ <TEXTSUB2> = "Starting with your first term..."

/IF PROXY=01 AND E6A=1/ <TEXTSUB2> = "Starting with <NAME>'s first term..."

E6AT. Please indicate the year <TEXTSUB1> started and ended each of these terms of active duty military service. <TEXTSUB2>

/START LOOP EQUAL TO E6A/

///ASK E_1_6B, E_1_6C, E_1_7 IF E6A=1-6///

///ASK E_2_6B, E_2_6C, E_2_7 IF E6A=2-6///

///ASK E_3_6B, E_3_6C, E_3_7 IF E6A=3-6///

///ASK E_4_6B, E_4_6C, E_4_7 IF E6A=4-6///

///ASK E_5_6B, E_5_6C, E_5_7 IF E6A=5-6///

///ASK E_6_6B, E_6_6C, E_6_7 IF E6A=6///

///ASK IF E6A NOT IN (88)///

E_1_6B. What year did this term of active duty military service start?

Enter Year _____ [RANGE: 1918-2014]
88 NO ANSWER ///HIDDEN///

///ASK IF E6A NOT IN (88)///

E_1_6C. What year did this term of active duty military service end?

Enter Year _____ [RANGE: 1918-2014]
88 NO ANSWER ///HIDDEN///

///PROGRAMMER: COMPARE START AND END DATE FROM E_1_6B-E_6_6B TO E_1_6C-E_6_6C. IF E_N_6C DATE < E_N_6B ///

///ASK IF E6A NOT IN (88)///

/IF PREPROXY=01/ <TEXTSUB1> = "were you"

/IF PREPROXY=02/ <TEXTSUB1> = "was <NAME>"

E_1_7. During this term of military service <TEXTSUB1> ever in or exposed to combat?

- 01 YES
- 02 NO
- 88 NO ANSWER///HIDDEN///

/END LOOP/

ABOUT YOU

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

/IF PREPROXY=01/ <TEXTSUB3> = "Are you..."

/IF PREPROXY=02/ <TEXTSUB3> = "Is <NAME>..."

E8. How would you best characterize <TEXTSUB1> employment status?

Please read all of the choices and then indicate which best describes. <TEXTSUB3>

- 01 Employed full-time
- 02 Self-employed full-time
- 03 Employed part-time
- 04 Self-employed part-time
- 05 Unemployed, looking for work, or laid off
- 06 Currently not employed – either retired, a homemaker, student, etc.
- 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "yourself"

/IF PREPROXY=02/ <TEXTSUB1> = "<NAME>"

E9. Would you describe <TEXTSUB1> as Hispanic or Latino?

- 01 Yes
- 02 No
- 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"
 /IF PREPROXY=01/ <TEXTSUB2> = "Are you..."
 /IF PREPROXY=02/ <TEXTSUB2> = "Is <NAME>..."

E10. Please read the list and indicate which of the following describes <TEXTSUB1> race.

You can choose more than one. <TEXTSUB2>

/MUL=5/

- 01 American Indian or Alaska Native
- 02 Asian
- 03 Black or African-American
- 04 Native Hawaiian or Other Pacific Islander
- 05 White
- 88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

/IF PREPROXY=01/ <TEXTSUB1> = "your"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"
 /IF PREPROXY=01/ <TEXTSUB2> = "your"
 /IF PREPROXY=02/ <TEXTSUB2> = "<NAMES>'s"

E11Y. Please report what <TEXTSUB1> total annual household income was from all sources in 2013.

Everything you report is confidential and your answer to this question will not affect your benefits.

Your best guess or estimate is fine.

\$_____ Record Response [RANGE=\$1 - \$\$999,999] ///SKIP TO E11c.///
 88 NO ANSWER ///HIDDEN///

///ASK IF E11Y IN (88)///

/IF PREPROXY=01/ <TEXTSUB1> = "your"
 /IF PREPROXY=02/ <TEXTSUB1> = "<NAME>'s"

E11a. This information is critical for VA for planning purposes. Please indicate which of the following best describes <TEXTSUB1> **2013** total annual household income from all sources. Would you say it is.....

- 01 Less than \$16,000

02 \$16,000 - \$25,999,
03 \$26,000 - \$35,999,
04 \$36,000 - \$45,999,
05 \$46,000 - \$55,999, OR
06 \$56,000 or over?
88 NO ANSWER ///HIDDEN///

///ASK IF E11A=01
E11B1. Is it...?

01 Under \$11,000, or
02 \$11,000 - \$15,999?
88 NO ANSWER ///HIDDEN///

///ASK IF E11A=02
E11B2. Is it...?

03 \$16,000 – \$20,999
04 \$21,000 - \$25,999?
88 NO ANSWER ///HIDDEN///

///ASK IF E11A=03
E11B3. Is it...?

05 \$26,000 – \$30,999
06 \$31,000 - \$35,999?
88 NO ANSWER ///HIDDEN///

///ASK IF E11A=04
E11B4. Is it...?

07 \$36,000 – \$40,999
08 \$41,000 - \$45,999?
88 NO ANSWER ///HIDDEN///

///ASK IF E11A=05
E11B5. Is it...?

09 \$46,000 – \$50,999
10 \$51,000 - \$55,999?
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///
E11c. Please record which state you are in.

///INSERT NATIONAL LIST OF TWO LETTER ABBREVIATIONS AND PR FOR
PUERTO RICO//

///PROGRAMMER: MAKE SURE THAT THE DROP DOWN LIST DOES NOT AUTO-
POPULATE WITH THE FIRST STATE ON THE DROP DOWN LIST.

/IF PROXY=01/ Can you please select which state <NAME> is in?

- _01 "Alabama"
- _50 "Alaska"
- _02 "Arizona"
- _03 "Arkansas"
- _04 "California"
- _05 "Colorado"
- _06 "Connecticut"
- _07 "Delaware"
- _08 "District of
Columbia"
- _09 "Florida"
- _10 "Georgia"
- _51 "Hawaii"
- _11 "Idaho"
- _12 "Illinois"
- _13 "Indiana"
- _14 "Iowa"
- _15 "Kansas"
- _16 "Kentucky"
- _17 "Louisiana"
- _18 "Maine"
- _19 "Maryland"
- _20 "Massachusetts"
- _21 "Michigan"
- _22 "Minnesota"
- _23 "Mississippi"
- _24 "Missouri"
- _25 "Montana"
- _26 "Nebraska"
- _27 "Nevada"
- _28 "New Hampshire"
- _29 "New Jersey"
- _30 "New Mexico"
- _31 "New York"
- _32 "North Carolina"
- _33 "North Dakota"
- _34 "Ohio"
- _35 "Oklahoma"
- _36 "Oregon"
- _37 "Pennsylvania"
- _52 "Puerto Rico"
- _38 "Rhode Island"
- _39 "South Carolina"
- _40 "South Dakota"
- _41 "Tennessee"
- _42 "Texas"
- _43 "Utah"
- _44 "Vermont"
- _45 "Virginia"
- _46 "Washington"
- _47 "West Virginia"
- _48 "Wisconsin"
- _49 "Wyoming"

95 Other
88 NO ANSWER ///HIDDEN///

///PROGRAMMER: END TIMER t_ett8_length///
///PROGRAMMER: START TIMER_ETT9_LENGTH///

///ASK IF PREPROXY=1 OR PROXY=01///

Section F. Awareness of Health Care Reform law

PREF1. VA is interested in understanding Veterans' awareness of the health care reform law, which is officially called the Patient Protection and Affordable Care Act.

01 Continue

///ASK IF PREPROXY=1 OR PROXY=01///

//IF PREPROXY=01/ <TEXTSUB1> = "do you"
//IF PREPROXY=02/ <TEXTSUB1> = "does <NAME>"
//IF PREPROXY=01/ <TEXTSUB2> = "I've"
//IF PREPROXY=02/ <TEXTSUB2> = "<NAME> has"
//IF PREPROXY=01/ <TEXTSUB3> = "I rely"
//IF PREPROXY=02/ <TEXTSUB3> = "<NAME> relies"
//IF PREPROXY=01/ <TEXTSUB4> = "me"
//IF PREPROXY=02/ <TEXTSUB4> = "<NAME>"
//IF PREPROXY=01/ <TEXTSUB5> = "I don't"
//IF PREPROXY=02/ <TEXTSUB5> = "<NAME> doesn't"

//multiple responses//

F1. How well <TEXTSUB1> understand the Patient Protection and Affordable Care Act?

[SELECT ALL THAT APPLY]

01<TEXTSUB2> followed this issue closely
02 <TEXTSUB3> on others for information about the Act
03 The Patient Protection and Affordable Care Act does not affect <TEXTSUB4>
04 <TEXTSUB5> understand this Act
88 NO ANSWER ///HIDDEN///

///ASK IF PREPROXY=1 OR PROXY=01///

//IF PREPROXY=01/ <TEXTSUB1> = "do you"
//IF PREPROXY=02/ <TEXTSUB1> = "does <NAME>"
//IF PREPROXY=01/ <TEXTSUB2> = "your"
//IF PREPROXY=02/ <TEXTSUB2> = "<NAME>'s"
//IF PREPROXY=01/ <TEXTSUB3> = "I"
//IF PREPROXY=02/ <TEXTSUB3> = "<NAME>"
//IF PREPROXY=01/ <TEXTSUB4> = "my"
//IF PREPROXY=02/ <TEXTSUB4> = "their"

F2. How <TEXTSUB1> think the health care reform law will change <TEXTSUB2> planned use of the VA health care system?

01 <TEXTSUB3> will definitely increase <TEXTSUB4> use of the VA health care system
02 <TEXTSUB3> will probably increase <TEXTSUB4> use of the VA health care system
03 <TEXTSUB3> will not change <TEXTSUB4> use
04 <TEXTSUB3> will probably decrease <TEXTSUB4> use of the VA health care system

05 <TEXTSUB3> will definitely decrease <TEXTSUB4> use of the VA health care system
88 NO ANSWER ///HIDDEN///

///PROGRAMMER: END TIMER ETT9///

///COMPLETE PAGE///

Thank you for your participation. The information you have provided will help VA to better serve all Veterans in the future. For more information on Department of Veterans Affairs (VA) services, please go to the VA Web site at www.va.gov.

Your answers have been submitted. You may now close your browser.

Appendix 1.

AL Medicaid
AK Medicaid or Medical Assistance
AZ Medicaid or Arizona Health care Cost Containment
AR Medicaid
CA Medicaid or Medi-Cal
CO Medicaid
CT Medicaid
DE Medicaid or Diamond State Health Plan
DC Medicaid or Medical Assistance
FL Medicaid
GA Medicaid or Medical Assistance
HI Medicaid or Quest/Medical Assistance
ID Medicaid or Healthy Connections
IL Medicaid
IN Medicaid or Hoosier Healthwise
IA Medicaid or Medical Assistance
KS Medicaid
KY Medicaid, Medical Assistance, or KenPAC
LA Medicaid
ME Medicaid or PrimeCare
MD Medicaid or HealthChoice
MA Medicaid or MassHealth
MI Medicaid or Medical Assistance
MN Medicaid
MS Medicaid or HealthMACS
MO Medicaid
MT Medicaid or Passport
NE Medicaid, Medical Assistance, or Nebraska Health Connection
NV Medicaid
NH Medicaid
NJ Medicaid or New Jersey Care 2000
NM Medicaid or SALUD!
NY Medicaid

NC Medicaid, Carolina, ACCESS, ACCESS II or ACCESS III, or Health care Connection
ND Medicaid
OH Medicaid
OK Medicaid, SoonerCare Plus, or SoonerCare Choice
OR Medicaid or the Oregon Health Plan
PA Medicaid, Medical Assistance, or HealthChoices
RI Medicaid, Medical Assistance, or RiteCare
SC Medicaid
SD Medicaid
TN TennCare
TX Medicaid or STAR
UT Medicaid
VT Medicaid
VA Medicaid, Medical Assistance, Medallion, Options, or Medallion II
WA N/A
WI Medicaid
WV N/A
WY Medicaid