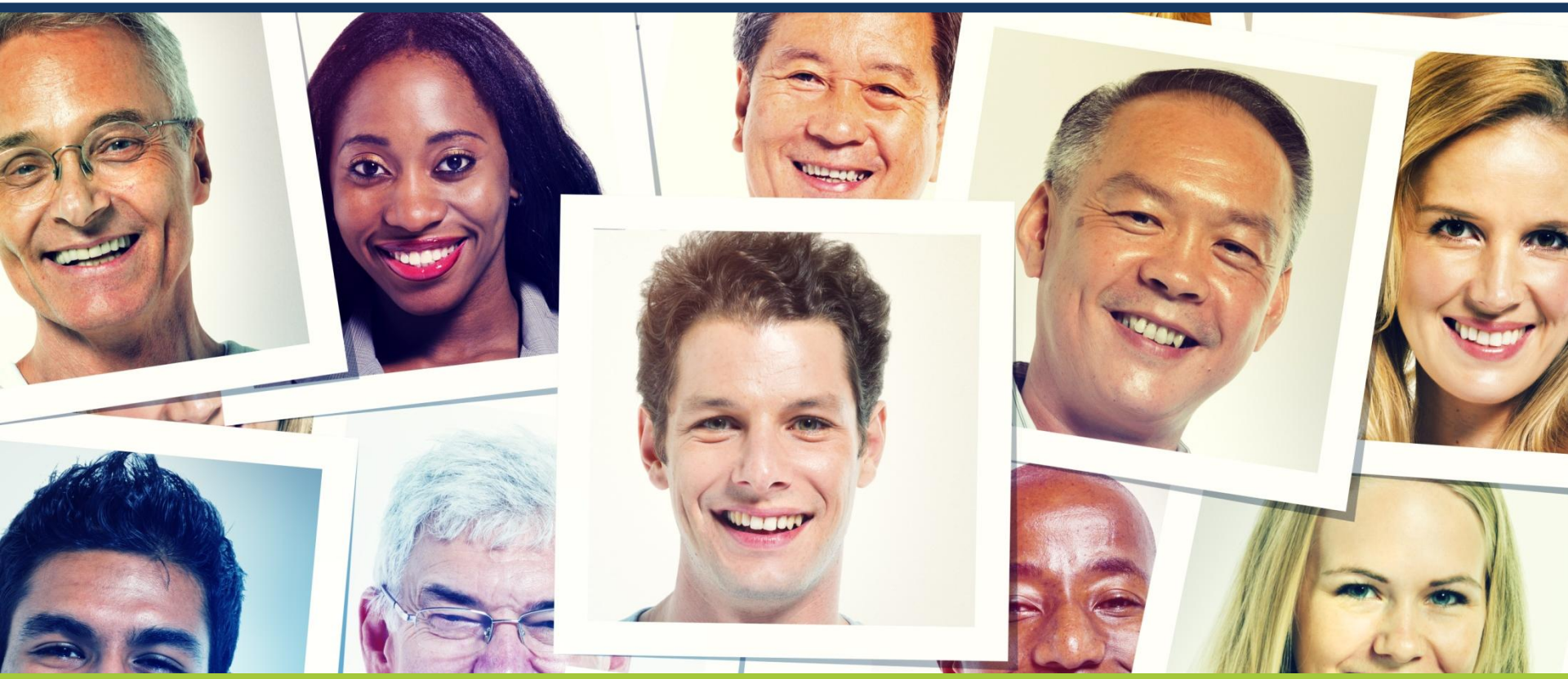
CARE COMPASS NETWORK

Care Compass Network Panel

Communication Preferences Survey Results

September Panel Engagement 2015



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- This report details the findings of the Communication Preferences Survey conducted in September 2015. Care Compass Network partnered with Research and Marketing Strategies, Inc. (RMS) to create an online panel to engage in a series of research studies. The objective of this research was to **better understand members' preferences regarding healthcare communication, and to gauge awareness of Care Compass Network and DSRIP.**

- The study consisted of an online survey that was administered to Care Compass Network panel members. The survey included 13 questions and took respondents approximately 5 minutes to complete. A total of **179 surveys were completed representing a response rate of 29% .** Two percent of members opened the survey invite but did not complete it. Fieldwork lasted from **September 23rd, 2015 to October 5th, 2015.**

- Any questions or comments regarding this market research study can be directed to Emily Palermo, Social Media and Panel Coordinator at Research & Marketing Strategies (RMS) at 1-866-567-5422 or email at EmilyP@RMSresults.com.

Note: 7 panel members unsubscribed from the panel as a result of this survey invite.

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- The online panel survey response rate was 29%, which is good, resulting in 179 completed surveys. Additionally, the respondents represented a cross section from all four of the panel groups. Responses from community resident (Panel Group 4) members was the strongest frequency representing 35%. Response totals from the Medicaid and uninsured (Panel Group 1) members was the lightest representing 15%.

- The majority of respondents are not at all or slightly familiar with either the Delivery System Reform Incentive Payment (DSRIP) program or Care Compass Network. [63% of respondents rated their awareness of DSRIP as a 1 or 2 (on a scale of 1 to 5 with 1 being 'not at all familiar' and 5 being 'very familiar'), and 61% of respondents rated their awareness of Care Compass Network as a 1 or 2 (on the same scale)].

- Suggested effective ways to reach out to the community to build awareness are: (1) Community events, (2) Social media, (3) TV advertising, (4) Radio advertising, and (5) Print advertising.

- The most effective (top ranked) way(s) suggested to reach out to the community are: Social media (23%), TV advertising (20%), Mail (16%), and Community events (12%).

- Lastly, most respondents felt the community knows nothing or very little about DSRIP and Care Compass Network. Respondents reported that a good way to share information about DSRIP and/or Care Compass Network would be at physician offices.

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- About half of respondents provided a score of 1 (on a scale of 1 to 5), indicating that they are not at all familiar with the Delivery System Reform Incentive Payment (DSRIP) program.
- Not surprisingly, Healthcare Providers (Panel Group 2) and Community Organization Employees (Panel Group 3) are the most familiar.
- Medicaid and uninsured community members (Panel Group 1) are the least familiar.

	Q1: On a scale of 1 to 5, with 1 being 'not at all familiar' and 5 being 'very familiar,' how familiar are you with the Delivery System Reform Incentive Payment (DSRIP) program? n179; Single Response					
	Not at all familiar 1	2	3	4	Very familiar 5	Mean Score
	48%	15%	17%	10%	10%	2.2
Medicaid or Uninsured Panel Members	70%	19%	11%	-	-	1.4
Healthcare Provider Panel Members	26%	15%	28%	13%	18%	2.8
Community Organization Employee Panel Members	17%	23%	22%	22%	16%	2.9
Community Resident Panel Members	76%	8%	10%	3%	3%	1.5

- Approximately one third of respondents provided a score of 1 (on a scale of 1 to 5), indicating that they are not at all familiar with Care Compass Network.
- Healthcare Providers (Panel Group 2) and Community Organization Employees (Panel Group 3) are the most familiar with Care Compass Network.
- Medicaid and uninsured community members (Panel Group 1) have a very low familiarity, however they are slightly more familiar with Care Compass Network than they are with DSRIP.

	Q2: On a scale of 1 to 5, with 1 being 'not at all familiar' and 5 being 'very familiar,' how familiar are you with Care Compass Network? n179; Single Response					
	Not at all familiar 1	2	3	4	Very familiar 5	Mean Score
	35%	26%	19%	13%	7%	2.3
Medicaid or Uninsured Panel Members	44%	22%	19%	15%	-	2.0
Healthcare Provider Panel Members	28%	26%	18%	13%	15%	2.6
Community Organization Employee Panel Members	18%	23%	27%	20%	12%	2.8
Community Resident Panel Members	48%	31%	11%	8%	2%	1.8

- Nearly all respondents provided a score of 1 or 2 (on a scale of 1 to 5), indicating that they think the local community is not familiar with the Delivery System Reform Incentive Payment (DSRIP) program.

Q3: On a scale of 1 to 5, with 1 being 'not at all informed' and 5 being 'very informed,' how informed do you think the local community is about the Delivery System Reform Incentive Payment (DSRIP) program? n179; Single Response					
Not at all informed 1	2	3	4	Very informed 5	Mean Score
62%	29%	6%	3%	-	1.5

- The vast majority of respondents provided a score of 1 or 2 (on a scale of 1 to 5), indicating that they think the local community is not familiar with Care Compass Network.

Q4: On a scale of 1 to 5, with 1 being 'not at all informed' and 5 being 'very informed,' how informed do you think the local community is about Care Compass Network?

n179; Single Response

Not at all informed 1	2	3	4	Very informed 5	Mean Score
59%	30%	9%	2%	-	1.5

- According to respondents, the top 3 most effective ways to reach out to community members to inform them about Care Compass Network healthcare activities are community events (73%), social media (69%), and TV advertising (65%).

Q5: What are effective ways to reach out to community members to inform them about Care Compass Network healthcare activities?
n179; Multiple Response

Category:	n	%
Community events	130	73%
Social media	124	69%
TV advertising	117	65%
Radio advertising	107	60%
Print advertising	104	58%
Mail	88	49%
Email	78	44%
Text messages	21	12%
Phone calls	16	9%
Other[1]	14	8%

Top 3 Suggested Means

[1] See "Other" responses on page 10.

Q5[1] (IF CHOSE OTHER): Please specify.

n14; Open-Ended

- 2-1-1, local phone, internet resource for access to service information.
- Billboards.
- Both Lourdes and UHS could put something on their system screen savers that would reach a lot of viewers. Lourdes has an upcoming Medical Mission Scheduled for 10/24/2015 at St. Mary's and we could have someone from Care Compass Network present.
- Channel messaging and value through primary care.
- Flyers and posters.
- I am not familiar at all.
- I don't know.
- Local blog Odessafile.com and local schools.
- Newspaper article, billboards, and signs in healthcare facilities.
- Pennysaver and other free newspapers - consumers read these regularly and it is a free communication tool.
- Presentations to major county departments: Health Dept, Mental Health, DSS, Office for Aging, Law Enforcement, EMTs, community colleges, universities, and local entities (Head Start programs, WIC, Cooperative Extension, child care centers, YMCA, YWCA, parent home visiting programs, home health agencies, and nursing homes)
- Providers, CBOs, and word of mouth.
- Public TV and radio information.
- Use local healthcare providers to get the word out!

- According to respondents, the most effective way to reach out to community members to inform them about Care Compass Network healthcare activities is social media (23%), TV advertising (20%), and mail (16%) trailing closely behind.

Q6 (BASED ON RESPONSES FROM Q5): Which method is the most effective way to reach out to community members to inform them about Care Compass Network healthcare activities? n179; Single Response		
Category:	n	%
Social media	41	23%
TV advertising	36	20%
Mail	28	16%
Community events	22	12%
Radio advertising	16	9%
Print advertising	15	8%
Email	13	7%
Text messages	1	1%
Phone calls	-	-
Other (As discussed in previous response)[1]	7	4%

[1] See "Other (As discussed in previous response)" responses on page 12.

[1] Q6 (IF CHOSE OTHER): Please specify.

n7; Open-Ended

- Newspaper article, billboards, and signs in health care facilities.
- Providers, CBOs, and word of mouth.
- Public TV and radio information.
- Channel messaging and value through primary care.
- Use local healthcare providers to get the word out!
- I am not familiar at all.
- I don't know.

Q7: What word or phrase comes to mind when you think of Care Compass Network?

n179; Open-Ended

❖ Note: The word cloud is a visual representation of top responses. The size of a word is directly correlated to the number of responses. More responses result in a larger word.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n17; Open-Ended; Medicaid or Uninsured Community Members (Panel Group 1)

- Awareness.
- Better healthcare in our community.
- Better, less costly healthcare.
- Cost effective healthcare.
- Don't know.
- Don't know.
- Don't know.
- Don't know.
- Fresh.
- Improve financial efficiency and health outcomes for New Yorkers.
- More help with healthcare.
- Quick quality healthcare.
- They are trying to get communities to know and understand what healthcare services are available.
- To get more people involved.
- Unsure.
- Unsure.
- Understanding.

Main comment theme:

- The opinions of Medicaid and uninsured community members who were asked this question were spilt. Many were unsure what DSRIP and Care Compass Network are hoping to achieve, or they understood that DSRIP and Care Compass Network would influence local healthcare.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n32; Open-Ended; Healthcare Providers (Panel Group 2)

- 25% reduction of unnecessary emergency department visits and hospitalization among Medicaid recipients over 5 years.
- A community approach and commitment to taking care of those that live in the community in an efficient and cost effective way.
- Audited, comprehensive, and streamlined service delivery.
- Better coordination of preventive care to help reduce unnecessary health services especially in hospitals (such as admissions and emergency room visits).
- Care coordination, keeping patients out of the emergency department , and trying to decide which health care providers get what monies available.
- Care coordination.
- Community working together to provide needed quality healthcare.
- Don't know.
- Easier access to services.
- Educate and advocate for the working poor on preventive care and being self sufficient in maintaining their health.
- Header.
- I don't know. Perhaps to improve quality of healthcare by looking at outcomes that matter for overall health and quality of life.
- I'm not really sure. I think Care Compass is hoping to coordinate care/caregiver communication/continuity to improve patients overall outcomes.
- Improve access to primary health care for those who most often rely on hospital emergency room services.
- Improve care and health of Medicaid beneficiaries.
- Improved health care within the community and at home to reduce hospitalizations, readmissions, and emergency department visits to decrease spending and improve the lives of those within the community for overall better population health.
- Improved overall management of complicated patient health cases. Lump sum reimbursement for all care and oversight of a patient's needs.
- Improved quality of care to Medicaid population, more equitable distribution of care, and decreased unnecessary use of hospital and emergency services.
- Integration of healthcare in the twin tiers, particularly for Medicaid, with a focus on value based reimbursement.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n32; Open-Ended; Healthcare Providers; **Continued** (Panel Group 2)

- Linkage for better collaboration.
- More effective use of healthcare.
- New system of care.
- Positive healthcare outcomes for individuals reimbursed through Medicaid.
- Provide adequate community outpatient services to decrease financial burden of chronic illness on society.
- Provide better access and more support for those in need of complex care management.
- Reduce health care costs for Medicaid population while maintaining or improving the quality of health care through improving care coordination and enhanced use of community based resources.
- Reduce hospitalization and emergency room visits by 25% over the next five years through a transformed delivery system.
- Reduce hospitalizations and cost of care while maintaining or improving quality.
- Reduction in inappropriate hospitalizations and reduction in inappropriate emergency department use.
- Reduction in the use of emergency room /hospital services that could be provided/addressed by PCP and preventive services - reduce Medicaid expenses and provide better and more appropriate medical treatment for our communities.
- Spend money to save money.
- Unsure.

Main comment theme:

- Of healthcare providers who were asked this question, most indicated they understood the goal of DSRIP and Care Compass Network to be reduction of unnecessary emergency department visits by 25% over the next five years. They also indicated that DSRIP and Care Compass Network would be working to provide better collaboration to improve healthcare in the region.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n47; Open-Ended; Community Organization Employees (Panel Group 3)

- 25% reduction in Medicaid beneficiary preventable/avoidable hospital admissions and emergency room utilization in our 9 county region.
- Appropriate health care with a reduced overall cost. Reducing unnecessary hospital readmissions.
- Avoiding in-patient hospitalizations and overuse of emergency room services.
- Better access to healthcare.
- Better coordination and improved outpatient care.
- Better delivery of care.
- Better healthcare.
- Better service delivery by coordinating available services to clients at a cost savings to tax payers.
- Care coordination for those in need.
- Care to everyone.
- Collaboration and cost savings.
- Community understanding.
- Comprehensive health care that is easy to get and does not duplicate anything.
- Coordinate care, meet NYS goals, align healthcare, educate consumers, reduce costs, and increase communication amongst providers.
- Coordinate health and behavioral healthcare in community to enhance an individual's treatment and prevent unnecessary hospitalizations and repeated ineffectual treatment.
- Cost effective healthcare services.
- DSRIP is trying to achieve lower New York statewide Medicaid costs by changing how services are delivered to the Medicaid population.
- Healthier community.
- Improved population health.
- Improved services and better throughout.
- Improving health outcomes and reducing healthcare cost.
- Integrated coordinated care that will reduce inpatient admissions and emergency room use among Medicaid recipients.
- Integrative health care provision and decreasing the cost of healthcare while promoting patient self-sufficiency.
- Keep healthcare systems in check.
- Lower costs and better healthcare.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n47; Open-Ended; Community Organization Employees; **Continued** (Panel Group 3)

- Managed care.
- Medical cost reductions.
- Network of down stream providers.
- Providing care to those who need it most in a cost effective, patient centered model.
- Quality care.
- Quality coordinated healthcare for individuals.
- Reduce by 25% Medicaid usage of our emergency rooms services, ideally to find patients a medical home.
- Reduce hospitalizations.
- Reduce inappropriate utilization of the emergency department by Medicaid recipients.
- Reduce Medicaid costs and re-admissions.
- Reduce Medicaid costs while trying to promote health.
- Reduce the cost of Medicaid in NYS by reducing emergency room admissions.
- Reduce unnecessary emergency department visits and hospitalizations.
- Reducing avoidable hospitalizations, increasing community understanding of care delivery system, reforming care delivery system to improve overall population health, increasing access to preventative care, primary care, etc.
- Re-investment in community based care.
- Supposedly to save money and improve healthcare for Medicaid patients.
- The reduction of avoidable emergency department visits especially in the Medicaid and uninsured population.
- The triple aim.
- To better care for patients by incorporating behavioral health and physical health together in one area.
- To effectively and efficiently help individuals access appropriate care in regards to preventative and chronic health related issues.
- To have better communication and to save money in the long run.
- Unified care and communication across disciplines.

Main comment theme:

- Of community organization employees who were asked this question, most understood that DSRIP and Care Compass Network would improve the access, quality, and coordination of local healthcare.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n34; Open-Ended; Community Residents (Panel Group 4)

- Better care coordination and reduce avoidable emergency department visits for Medicaid and uninsured population.
- Better delivery of healthcare for our region.
- Better health outcomes.
- Care.
- Change the culture of healthcare.
- Coordinated, efficiently delivered service, and follow up.
- Cost effective, and standards based practice.
- Cost reduction and improved Medicaid system.
- Develop a network of providers and services for the community.
- Don't know.
- Don't know.
- Don't know.
- Don't know.
- Don't know.
- Don't know.
- Don't know.
- Don't know.
- DSRIP - an over the top effort to facilitate healthcare reform and transformation. Care Compass Network - drive more effective and efficient use of the health care system.
- Ease for patients; all information in 1 place.
- Getting people insurance.
- Health.
- Help seniors and people with disabilities.
- Helping to understand healthcare options.
- I have no idea but it must be related to healthcare.
- I haven't had enough exposure to honestly answer. I haven't spent too much time on the website due to personal issues.
- Improved community healthcare and reduced Medicaid expenditures.

Q8 (IF AWARE OF DSRIP AND/OR CARE COMPASS NETWORK): In your own words, what are DSRIP and Care Compass Network hoping to achieve?

n34; Open-Ended; Community Residents; **Continued** (Panel Group 4)

- Increasing healthcare coverage.
- Informing public on health issues.
- More and better options for healthcare.
- Provide better care to person while avoiding last minute urgent/critical visits such as emergency room.
- Provide better health care options for people in our area - especially those on Medicaid or Medicare coverage.
- They are hoping to distribute Medicaid savings to the community for health and mental health.
- To reduce use of the emergency room services by Medicaid recipients.
- Unsure.

Main comment theme:

- The opinions of community residents who were asked this question were split. Most indicated that they were unsure what DSRIP and Care Compass Network area hoping to achieve, or understood that DSRIP and Care Compass Network would improve healthcare delivery to Medicaid community members.

- The vast majority of respondents have visited a physician's office in the past three months.

Q9: Have you visited a physician's office in the past three months? n179; Single Response		
Category:	n	%
Yes	133	74%
No	46	26%

- Approximately 4 out of 5 respondents felt having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network.

Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? n179; Single Response		
Category:	n	%
Yes	142	79%
No	37	21%

Main comment themes include:

- The respondents who said "Yes" noted that it would be a timely and reputable place to share healthcare related information with local healthcare users. Also, many people have a wait time before appointments, so it would increase the likelihood of the information being read. Respondents also noted that it would be beneficial if nurses and/or doctors themselves would provide the information to patients to ensure it is received.

- The respondents who said "No" suggested that most people who have an appointment with a physician focus on the healthcare issue at hand and do not read flyers, brochures, or pamphlet information at their office. To overcome this, office staff could hand all patients the information to ensure that everyone receives it.

Q11 (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = YES): Why?

n142; Open-Ended

- A lot of people can get the information.
- A lot of people on Medicare and Medicaid go to doctors offices, and everyone goes to the doctor's office occasionally.
- All avenues of information distribution are worth trying.
- Always have to wait and reading something worthwhile when waiting is a good thing.
- Always time to browse and you are presently health minded when there.
- Am not sure how "good" this way might be, but it is certainly one approach located where Medicaid recipients are.
- And having the staff provide information and possibly having the care provider discuss it with the patient.
- Another resource.
- Appropriate time and setting, but if people do not go to the doctor regularly it may not be enough.
- Associating with professional healthcare offices might lend it legitimacy in the eyes of consumers.
- At place of service.
- Awareness must be driven by a value proposition for each individual patient.
- Be able to understand outlets for my illnesses.
- Because I trust my doctor.
- Because lots of people go to their medical providers.
- Because most of us are waiting forever for our appointments and you look for something to read.
- Because not all people have access to social media.
- Because people have to go to the doctors and physicians are crucial in the success of DSRIP.
- Because people would be likely to read it while waiting for their appointment.
- Because the staff may have your undivided attention for a few minutes to explain it.
- Because they are healthcare providers.
- Because you are a captive audience when the provider is an hour behind.
- Because you are often sitting there looking for something to read while you wait.
- Because you have a captive user of health care.
- But only a supplement - most don't look at the brochures, posters, etc.
- Can pick up pamphlets to read at doctors office.
- Can see brochure while waiting.

Q11 **Continued** (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = YES): Why?

n142; Open-Ended

- Can target the demographic population.
- Collaboration.
- Convenient.
- Could be a positive use of wait time.
- Definitely, because while you are there you have time to read that information.
- Doctor offices help explain to patient.
- Don't know.
- Don't know.
- Easier to tell patients something when you can hand it to them. Also, it's familiar to them.
- Easy way.
- Every attempt to spread awareness is good. The community is very ignorant of the state of healthcare.
- Every possible touch point should be utilized to spread the word about DSRIP and CCN.
- Everyone visits their physician (or should) within a year period probably.
- For people to have knowledge of insurance information to people.
- For the people who go to the doctors and they can tell others about it as well.
- Frequently visited by large populations.
- Goal is to connect Medicaid patients to preventative care.
- Good exposure to patients at a time when they are thinking about it.
- Good information for doctor offices to have.
- Good place for printed.
- Good place.
- Good way to reach people.
- Good, but not the best as it misses the people who don't have a doctor.
- Having the nurse talk with patients would help… not reading materials because it's not interesting.
- Healthcare is on people's minds when they are at a physician's office.
- Healthcare system and insurance.
- Hopefully there will be someone within the doctor's office that can answer any additional questions.

Q11 **Continued** (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = YES): Why?

n142; Open-Ended

- I don't know enough about it.
- I have no idea… maybe it will be reflected in my bill?
- I might find out what this is.
- I take things more seriously coming from my physician.
- I think people will pay attention to flyers or signage provided at registration or check out.
- I'm always early for my appointment and always looking for something to read while I wait.
- Information where the need is.
- It depends on how effective the staff is at the physician's office. They must take time to explain.
- It is a trusted source of information.
- It is an opportunity to reach those already seeking care.
- It may provide some basic understanding to a limited number of people.
- It provides patient with the printed information to take with them.
- It seems to be an appropriate arena to provide the information.
- It would reach a lot of people.
- It's a natural place to obtain information about healthcare.
- It's an appropriate placement of relevant materials.
- It's at one of the sources where the network would be utilized.
- It's one option to inform those in care.
- It's when you're thinking about healthcare.
- Just one more way to get the info out.
- Lots of time to read.
- Many of the people we are trying to reduce the use of emergency room and hospital, see their doctor frequently.
- Meet people where they are.
- More awareness.
- Most people have to wait to see doctors. They will look at whatever is around, to pass the time.
- Need help in selecting healthcare.
- Not sure.

Q11 **Continued** (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = YES): Why?

n142; Open-Ended

- Offices are where patient care that is most impacted by DSRIP and Care Compass Network is delivered and most relevant.
- Often you are waiting in the waiting room. When waiting I often read info that I normally wouldn't.
- Opportunity to tie it back to the patient's healthcare and service delivery.
- Outreach.
- People are always in need of medical services, but I am not sure of their level of awareness.
- People are always looking around for something to read.
- People are thinking about health when they go to the doctor's office.
- People are usually sitting in waiting rooms and there's quiet time to read.
- People are waiting.
- People go to doctor's everyday and while waiting read.
- People have time to read things around them.
- People have time to read.
- People have time to wait.
- People look at information while waiting to be seen.
- People look up to their physician. They play a critical role in linking their patients to resources.
- People need something to read when sitting there for so long.
- People often read things laying around in doctor's offices.
- People pick up and read material while waiting.
- People tend to look through literature in the waiting room.
- People trust their physicians, and physicians have a great deal of authority in the healthcare system.
- People who are sick or not feeling 100% are people who go to a physician’s office.
- People will read anything to pass the time in the waiting room.
- People will read things while waiting.
- Person is utilizing healthcare, so active in their care management.
- Pertinent.
- Physician's offices generally offer valuable information.

Q11 **Continued** (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = YES): Why?

n142; Open-Ended

- Primary care clinics will serve as focal points for healthcare transformation through DSRIP.
- Providing information at physician's offices reaches people who are currently seeking healthcare.
- Raise awareness of DSRIP efforts for the general population to increase community "word of mouth."
- Related.
- Relevance.
- Relevant to doctors.
- Right there where needed.
- So people know what they are.
- Someone right there to explain it to the patient.
- Something for people to read while they wait.
- Something to read while patients wait - and patients wait!
- Something to read while waiting.
- Something to read while you wait.
- That is where people are already concerned about their healthcare.
- That is where the most people would be interested in healthcare.
- That's a good place for people to receive information or healthcare in general.
- That's where sick people go.
- The answer is both. Since the client group are Medicaid recipients, primarily, a physician must be a Medicaid provider.
- The population visiting physicians is more likely to be affected by Care Compass Network/DSRIP.
- There is a lot of traffic in most offices and people are focused on healthcare when they are there.
- There is usually waiting time, and I tend to read what is on the wall.
- They are there because of their health, but it doesn't reach people who are not seeing a doctor.
- They have the tools.
- This could be key in engagement as many people have a steadier relationship with their PCP.
- To a segment of the population already connected to primary care services.
- To inform consumers and providers at all levels of engagement.

Q11 **Continued** (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = YES): Why?

n142; Open-Ended

- To inform people about what they are.
- Visibility.
- When I'm in the waiting room I will read whatever is there.
- When you are at the doctor's office you are focused on your healthcare. (Captive audience).
- While not the most effective, I think a blanket effort is best at getting the word out about anything.
- Would at least be aware of the program, now I have no idea what you are talking about.
- You are there receiving the services.
- You will reach those "in the system," but will miss those who do not seek care.
- You'd be reaching people who are using local healthcare.

Q11 (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = NO): Why?

n37; Open-Ended

- Although I would read it while sitting there, I suspect most people would be on their phones.
- Because I am poor, have my own self pay "program" and others have Medicaid and we are limited.
- Because people going to a physician's office are already proactive about their health.
- Don’t know.
- Don't go to doctor often.
- Don't know what it is.
- Focus is on reason for vast, not other information.
- I pay no attention to brochures or rack cards in physicians office.
- I rarely see people reading the pamphlets or posters at the doctors office. Handouts might work.
- I think most that contribute to higher medical costs use the emergency room more than the doctors office.
- I try not to go to the doctor. Many people don't have access to doctors.
- If people only see a doctor once a year, DSRIP needs to communicate sooner than that.
- I'm focused on my "problem at hand,“ and not looking for more general information.
- I'm not sure physicians have the time or capacity to respond to this issue.
- It seems doctors only have a small amount of time with you.
- Lack of time or willingness to educate their patient base.
- More likely to be looked at in emergency rooms or clinics.
- Most of the paperwork that is given at the PCP offices, I believe, is not even reviewed.
- Most people I know only go to the doctors when they are sick, which may be once or twice a year.
- No one there to explain, information may just be lost. Offices are too busy.
- No time to read it.
- No time.
- Nobody reads that stuff.
- Not enough people go for routine healthcare.
- Not enough time to explain and not sure MDs know the answers.
- Offices are bombarded with programs of all kinds from insurances to community programs.
- Only if the nurse or physician provides it to the patient.

Q11 **Continued** (IF Q10: Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? = NO): Why?

n37; Open-Ended

- Overloaded with pamphlets already.
- Patients don't have interest in reading.
- Partially but not effective enough since most folks don't go to the offices on a regular basis.
- People need/want information about programs and services available to them, not what DSRIP/CCN is.
- People will ignore.
- Physician offices do not even adequately communicate about their own services and processes.
- Since I don't know what these things are, I really can't answer your question.
- Too concerned with condition to consider new information.
- Unsure.
- Visits are very short.

- Nearly half of respondents would like to see/learn more about DSRIP and/or Care Compass Network.

Q12: Is there anything else you would like to see/learn about DSRIP and/or Care Compass Network? n179; Single Response		
Category:	n	%
Yes	75	42%
No	104	58%

Main comment theme of respondents who said "Yes":

- These respondents would like to better understand the purpose of DSRIP and Care Compass Network. For example, respondents would like to know details and implementation timelines for new programs and services created to achieve goals.

Q13 (IF Q12: Is there anything else you would like to see/learn about DSRIP and/or Care Compass Network? = YES): Please specify.

n10; Open-Ended; Medicaid or Uninsured Community Members (Panel Group 1)

- Everything. I really don't know anything.
- Get the word out. I don't see any information anywhere but here (in this survey).
- How can ordinary citizens get involved?
- I'd like to know more specifically what it is.
- Is it an option or something that people are coerced or forced into?
- Know more.
- Let me know where to get information.
- More information available.
- What it is?
- What it is?

Q13 (IF Q12: Is there anything else you would like to see/learn about DSRIP and/or Care Compass Network? = YES): Please specify.

n18; Open-Ended; Healthcare Providers (Panel Group 2)

- A simplified explanation of the project...understandable by the general public.
- As much as I can.
- Discussing services with our director, deputy director, supervisors, and at staff meetings.
- Facebook page.
- How the coordinated plan will function and what specific steps to be taken to do this.
- I am interested in learning more about the separate local efforts (RPUs) re-provider networking.
- I know so little about it that I don't even have articulate questions to ask.
- I would like to hear more about the care compass network.
- I'd like to be able to speak coherently on the work of these projects/organizations.
- I'm going to Google the descriptions of these programs/networks next.
- Outcomes and cost/benefit analysis.
- Simple description.
- Since I don't know what either are, I would need to know more before having any opinion.
- Timeline for execution and what ultimate goal is in terms of monetary savings/reduced admissions.
- What it is?
- What it is?
- What services are represented?
- Who is involved, who will benefit, what is the expected cost and/or savings? How is it funded?

Q13 (IF Q12: Is there anything else you would like to see/learn about DSRIP and/or Care Compass Network? = YES): Please specify.

n22; Open-Ended; Community Organization Employees (Panel Group 3)

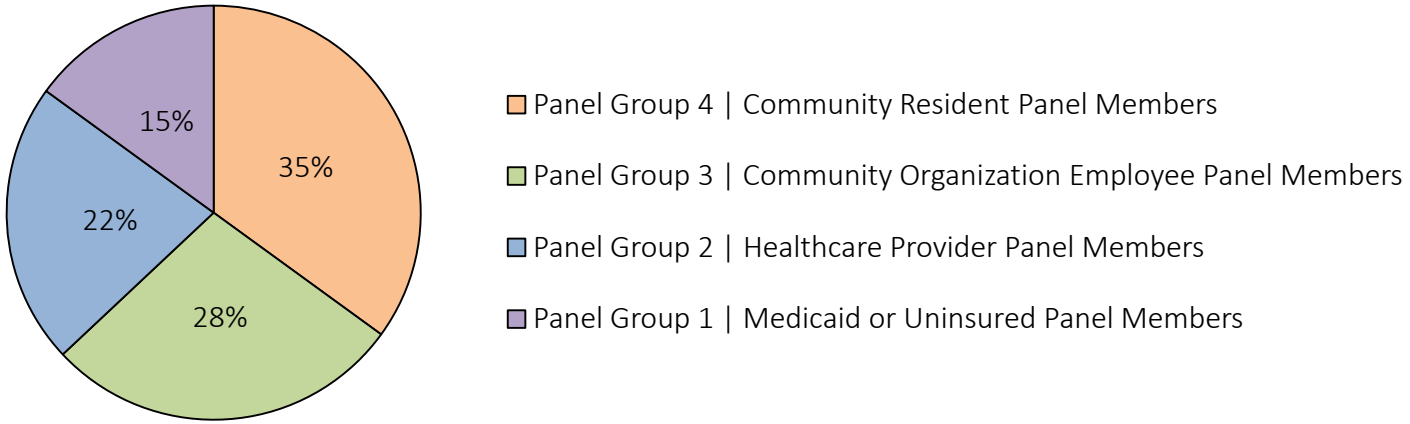
- Better description of how it will save government funds and improve care. It is a trial.
- Continued information on progress. Dealing with transportation.
- How are we doing with the initiative?
- How being a downstream provider applies to an agency working with developmentally disabled people?
- How it will affect healthcare?
- I am not educated at all about what this is.
- I have had no trainings on it, so I don't have questions yet.
- I would like some written information on this initiative.
- I would like to understand exactly how DSRIP plans to transform the delivery system.
- Methods of collaboration with community partners.
- More clarification. Many opinions on where this money will go.
- More information about goals, implementation, etc.
- Need to start having northern region RPU meetings.
- Projected return on investment/cost savings linked to patient satisfaction and quality measures.
- Promotion in the community and an increase in access to care after hours, as well as Medicaid care.
- Specifics - what is this doing in my community today? What might I see happening differently?
- Still waiting to see programs/services to start that will help people.
- What exact agencies will be available to if they meet their outcomes?
- What exactly it is?
- What it is?
- What programs are being implemented to reduce the unnecessary readmissions.
- When costs covered by who, and any extra work put on staff.

Q13 (IF Q12: Is there anything else you would like to see/learn about DSRIP and/or Care Compass Network? = YES): Please specify.

n25; Open-Ended; Community Residents (Panel Group 4)

- "Elevator speech" about each.
- Exactly what it is.
- How can non-profit agencies learn about DSRIP?
- How it might impact our area; how it interfaces with NY Health currently before the NYS Senate.
- How they will work with providers to help meet the initiative of DSRIP.
- I don't know what it is.
- I have not yet taken the time to look at information. I will peruse the web page.
- I would appreciate any printed information to be sent to me by mail.
- Just a better overview.
- Just more details!
- More seminars.
- Need to publicize more.
- Specifics.
- What are the culture changes that DSRIP and CCN are trying to make, and how do they benefit people.
- What are they?
- What are they?
- What is it? How does it work?
- What is the plan for rolling this out to the public? This is definitely not currently being publicized.
- What it is?
- What it is?
- What it is?
- What it is?
- What it is?
- When can I expect another research opportunity?
- Would like to see the pamphlet that describes it.

	Survey Respondents **Group Breakdown** n179; Single Response		
	Category:	n	%
Panel Group 4	Community Resident Panel Members	62	35%
Panel Group 3	Community Organization Employee Panel Members	51	28%
Panel Group 2	Healthcare Provider Panel Members	39	22%
Panel Group 1	Medicaid or Uninsured Panel Members	27	15%
		179	100%



Survey Respondents **County Breakdown** n179; Single Response		
Category:	% Live In	% Work In
Broome County	31%	32%
Tompkins County	14%	16%
Cortland County	9%	8%
Schuyler County	7%	8%
Tioga County	7%	4%
Chemung County	6%	4%
Steuben County	4%	5%
Chenango County	3%	3%
Delaware County	2%	3%
Other	17%	17%

Note: Respondents can join the panel if they work or live in one of the counties listed above. Additionally, not all current panel members have provided county information.

Background and Methodology
Executive Summary
Survey Results
Appendix

Care Compass Network Panel
Community Engagement Research
Communication Preferences Survey (September Panel Engagement)
September 15, 2015

Subject Line: Spreading the Word

Email:

It's hard to believe that fall is right around the corner!

As a Care Compass Network Panel member, we want to obtain your suggestions on how we can best spread the word about our activities and the local healthcare delivery services available.

Please click here to take the survey: [Insert survey link]

The survey will take about 5 minutes to complete, and the results will remain private and nameless. At the end of the survey, you will be given the chance to enter into a raffle to win one of five separate $10 Amazon gift cards.

The information you provide will assist Care Compass Network, in association with the Delivery System Reform Incentive Payment (DSRIP) Program, in developing effective healthcare services for the region. Research & Marketing Strategies, Inc. (RMS), an independent market research firm, will be managing the responses. If you have any questions or comments, send an email to: EmilyP@RMSresults.com or call: 1-866-567-5422 and reference the Care Compass Network Panel.

Do you know anyone like yourself who may be interested in joining the Care Compass Network Panel? Feel free to send your friends and family the following sign up link: www.rmsresults.com/survey/healthcarepanel

SURVEY:

1. **On a scale of 1 to 5, with 1 being 'not at all familiar' and 5 being 'very familiar,' how familiar are you with the Delivery System Reform Incentive Payment (DSRIP) program?** Select one.

Not at all familiar				Very familiar
1	2	3	4	5

2. **On a scale of 1 to 5, with 1 being 'not at all familiar' and 5 being 'very familiar,' how familiar are you with Care Compass Network?** Select one.

Not at all familiar				Very familiar
1	2	3	4	5

Research & Marketing Strategies (RMS) **Ask.** Listen. Solve. 1

3. On a scale of 1 to 5, with 1 being 'not at all informed' and 5 being 'very informed,' how informed do you think the local community is about the Delivery System Reform Incentive Payment (DSRIP) program? Select one.

Not at all informed				Very informed
1	2	3	4	5

4. On a scale of 1 to 5, with 1 being 'not at all informed' and 5 being 'very informed,' how informed do you think the local community is about Care Compass Network? Select one.

Not at all informed				Very informed
1	2	3	4	5

5. What are effective ways to reach out to community members to inform them about Care Compass Network healthcare activities? Select all that apply.
   a. Community events
   b. Email
   c. Mail
   d. Phone calls
   e. Social media
   f. Text messages
   g. Print advertising
   h. Radio advertising
   i. TV advertising
   j. Other (Please explain)

6. (Based On Responses From Q5) Which method is the most effective way to reach out to community members to inform them about Care Compass Network healthcare activities? Select one.
   a. Community events
   b. Email
   c. Mail
   d. Phone calls
   e. Social media
   f. Text messages
   g. Print advertising
   h. Radio advertising
   i. TV advertising
   j. Other (As discussed in previous response)

7. What word or phrase comes to mind when you think of Care Compass Network? Open-ended.

Research & Marketing Strategies (RMS) Ask. Listen. Solve. 2

8. (IF Q1 or Q2 = 2-5) In your own words, what are DSRIP and Care Compass Network hoping to achieve? Open-ended.

9. Have you visited a physician's office in the past three months? Select one.
   a. Yes
   b. No

10. Do you feel having information at physician offices is a good way to spread awareness of DSRIP and/or Care Compass Network? Select one.
    a. Yes
    b. No

11. Why? Open-ended.

12. Is there anything else you would like to see/learn about DSRIP and/or Care Compass Network? Select one.
    a. Yes
    b. No

13. (IF Q12=YES) Please specify. Open-ended.

14. Would you like to be entered into a raffle to win one of five separate $10 Amazon gift cards? [Winners are drawn at the end of the month] Select one.
    a. Yes
    b. No

15. (IF ENTERED SWEEPSTAKES) Sweepstakes winners will be chosen at random and will be notified via email and phone. Please provide the following information so you may be contacted if you win. This contact information will not be connected to your survey responses, and will remain confidential. Open-ended.

First name:	
Last name:	
Telephone number:	
Email:	

On behalf of Care Compass Network and Research & Marketing Strategies, Inc. (RMS), thank you for your time today!

Please click the red submit button below to send your survey responses.

The information contained in this study has been obtained from primary sources and/or was furnished directly from the clients listed in this report. All source materials and information so gathered and presented herein are assumed to be accurate, but no implicit or expressed guarantee of data reliability can be assumed. This study has been prepared in the interest of a fair and accurate report, and therefore all of the information contained herein, and upon which opinions have been based, have been gathered from sources that Research & Marketing Strategies, Inc. (RMS) considers reliable.

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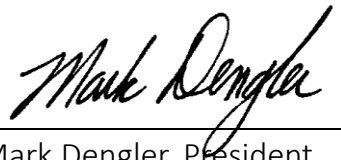
Certified by:  Date: October 22nd, 2015

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