

MEDICAL PLAN SATISFACTION SURVEY

The University of California would like your feedback on its medical benefit plans. Your responses will help us determine how these benefits are working and identify potential areas for improvement. This short survey will only take 15 minutes to complete. **This paper survey may be provided to people who do not have computer access.**

- Please submit the paper survey by Friday July 18, 2014.
- Your responses are **strictly confidential and anonymous.**
- Survey administration and tabulation of the results is being conducted by the Institutional Research and Academic Planning unit within the office of the President. No individual response will be tracked.
- Please submit the survey only once, either via online or paper.
- Contact your local Benefits Office if you have any questions.

To begin, please mark the option that reflects your current status:

1. My primary job type is:
 - Faculty Faculty Retiree
 - Staff Staff Retiree

 2. I work/ed for the following UC location:
 - UC Berkeley
 - UC Davis
 - UC Davis Health System
 - UC Hastings College of Law
 - UC Irvine
 - UC Irvine Health System
 - UC Los Angeles
 - UC Los Angeles Health System
 - UC Merced
 - UC Riverside
 - UC San Diego
 - UC San Diego Health System
 - UC San Francisco
 - UC San Francisco Health System
 - UC Santa Barbara
 - UC Santa Cruz
 - UC Office of the President
 - Lawrence Berkeley National Laboratory
 - Retired

 3. My age is:
 - 18–24
 - 25–34
 - 35–44
 - 45–54
 - 55–64
 - 65–74
 - 75 or older

 4. My length of service is:
 - 0 to 9 years
 - 10 to 19 years
 - 20 to 29 years
 - 30 years or more

 5. I signed up to cover:
 - Myself only
 - Myself + Spouse/Partner
 - Myself + Child(ren)
 - Myself + my Family

 6. Did you have a new medical plan with University of California in 2014?
 - Yes **Go to Question 6a1 and 6b**
 - No **Go to Question 6a2**
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- 6a1. In which plan are you currently enrolled? (Complete if you answered “Yes” in Question 6)
 - Blue Shield Health Savings Plan
 - CORE
 - Health Net Blue & Gold
 - Kaiser
 - UC Care
 - Western Health Advantage (WHA)

 - 6b. What are the **top three reasons** you chose the new plan? (Complete if you answered “Yes” in Question 6) Please rank 1, 2, 3 for your top three choices from the list below:
 - ___ My previous plan was discontinued
 - ___ I wanted access to UC physicians and hospitals
 - ___ My doctors/providers were in the plan
 - ___ My spouse/domestic partner made the decision with or for me
 - ___ Monthly premium costs
 - ___ Low, predictable co-pays and co-insurance
 - ___ I am healthy so I don’t expect to frequently use my plan
 - ___ I want my primary care physician to manage care for me
 - ___ I prefer the flexibility of a Preferred Provider Organization (PPO)
 - ___ I prefer a Health Maintenance Organization (HMO)
 - ___ I didn’t choose—I was defaulted into a plan by UC
 - ___ Other: _____

 - 6a2. What plan have you been enrolled in for 2013 and 2014? (Complete if you answered “No” in Question 6)
 - CORE
 - Health Net Blue & Gold
 - Kaiser
 - Western Health Advantage (WHA)

To respond to the following statements, please mark the circle that most closely reflects your point of view. If the statement does not apply to your experience or you do not know, please mark "Not Applicable."

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
7. Last year, in 2013, I would have rated my overall satisfaction with my University of California medical plan as positive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. So far in 2014, I have found it easy to get an appointment with my primary care physician as soon as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. So far in 2014, I have found it easy to get an appointment with a specialist as soon as I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. So far in 2014, I have found it easy to schedule laboratory and diagnostics tests ordered by my physician	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. So far in 2014, I have received timely feedback on the results of medical visits and laboratory/diagnostic tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. So far in 2014, I have found it easy to get in touch with my health plan's customer service.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. So far in 2014, my health plan's customer service has given me the information or help I needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. So far in 2014, when I called or wrote my health plan with a complaint or problem, I was satisfied with how it was resolved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. I believe my University of California medical plan features are better than what other organizations offer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. So far in 2014, I would rate my overall satisfaction with my University of California medical plan as positive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 16a. If answered "Disagree" or "Strongly Disagree" to Question 16, please select the primary reason why you are dissatisfied:
- Plan's network of providers was too limited (Please specify the provider group/hospital you wanted): _____
 - High/unpredictable out-of-pocket expense
 - Quality of care concerns
 - Unable to get help/answers to my questions
 - Too much effort to comply with new plan procedures and paperwork
 - Other: _____

17. When I have questions about my benefits, I use the following methods to get my problem answered or resolved. Please rank 1, 2, 3 for your **top three choices** from the list below:
- ___ Contact my local benefits office or Health Care Facilitator
 - ___ Visit UCnet/atyourservice website
 - ___ Visit the plan's website
 - ___ Call the plan's customer service
 - ___ Search through plan documents and other materials on my own
 - ___ Ask a co-worker (non-HR)
 - ___ Call UC Office of the President (Retirement Administration Service Center)
 - ___ Write to UC Office of the President
 - ___ Other: _____

18. Last year, in 2013, I experienced problems with: (Choose one only)
- Accessing my providers
 - High/unpredictable out-of-pocket expenses
 - Quality of care
 - Getting help/answers to my questions
 - Other: _____
 - None of the above

19. So far in 2014, I experienced problems with: (Choose one only)
- Accessing my providers
 - High/unpredictable out-of-pocket expenses
 - Quality of care
 - Getting help/answers to my questions
 - Other: _____
 - None of the above

To respond to the following statements, please mark the circle that most closely reflects your point of view. If the statement does not apply to your experience, please mark "Not Applicable."

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Not Applicable
20. I know what's covered by my medical plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. I am satisfied with the prescription drug benefit provided through the medical plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21a. If you answered "Disagree" or "Strongly Disagree" to Question 21 above, with which issue are you most dissatisfied? (Choose one only from the list below)

- It costs me more than my previous plan
- Previous prescription is not considered covered under the new plan.
- The retail pharmacies are not convenient
- I had trouble with the current mail order provider
- The formulary (list of approved drugs) is too limited
- Other: _____

22. I am satisfied with the mental health/substance abuse benefits provided through the UC health plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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22a. If you answered "Disagree" or "Strongly Disagree" to Question 22 above, with which issue are you most dissatisfied? (Choose one only from the list below)

- Limited network providers
- Limited providers in a given specialty
- Quality of providers
- Claim issues
- In-take experience
- Care advocate support experience
- Resources on Behavioral Health carrier's website
- Other: _____

23. I know what my out-of-pocket costs will be for covered medical and prescription benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. I understand how to use my plan's network	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. I am satisfied with the hospitals and providers in my plan's network	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Before seeking care medical care, I have been able to obtain accurate estimates for the cost of treatment (physician care, tests, prescriptions drugs, hospital visits, surgery, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. I would like to see the University of California offer these features as part of its medical plan: (250 characters)

Comments Please provide any thoughts or comments about the University of California medical benefits programs: (250 characters)

Please send this survey to the central Benefits Office at your location no later than 5 p.m., Friday, July 18, 2014.

Thanks for your participation