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TRICARE Inpatient Satisfaction Survey

Overall Survey Results of Hospital Inpatients: July – September 2009

Final Report

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Executive Summary

The TRICARE Inpatient Satisfaction Survey (TRISS) is a worldwide survey of the military health system (MHS) beneficiaries that has been conducted each year since 2006 by the Office of the Assistant Secretary of Defense/TRICARE Management Activity (TMA). Congress mandated the survey under the National Defense Authorization Act for Fiscal Year 1993 (P.L. 102-484) to ensure regular monitoring of MHS beneficiaries' satisfaction with inpatient care. The TRICARE Inpatient Satisfaction Survey (TRISS) reports on experiences of adults who receive medical, surgical, and obstetrics inpatient services from the Military Health System's 58 direct care (DC) military treatment facilities (MTFs) and through the MHS civilian network of providers also known as purchased care (PC) arrangements. Eligible beneficiaries include members of the Army, Air Force, Navy, Marines, Coast Guard, Public Health Service, National Oceanic and Atmospheric Administration, and activated members of the National Guard and Reserves.

This report summarizes survey results from a sample of hospital inpatients discharged from MTFs between July 1, 2009 and September 30, 2009. Of the 46,752 TRICARE hospital inpatients surveyed, 15,665 responded to the survey, for an overall response rate of 33.5%.

The TRISS includes two questions that are considered key indicators of satisfaction: (1) Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay? and (2) Would you recommend this hospital to your friends and family? For these questions, the proportion of beneficiaries who rated their hospital a 9 or 10 and the proportion of respondents who said that they would "definitely" recommend their hospital is reported.

Also included in the TRISS are questions from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey of civilian hospital inpatients. HCAHPS is a set of standardized survey questions used to collect and report meaningful and reliable inpatient satisfaction information. HCAHPS results are used as a national benchmark for civilian hospitals. The HCAHPS benchmark represents the results of three product lines (medical, surgical, and obstetrics) combined. Statistical comparisons between the MHS and the HCAHPS benchmark were conducted for only similar combined product instances, such as DC versus HCAHPS benchmarks or Service versus HCAHPS benchmarks. Specific product lines (e.g., medical, surgical, and obstetrics) are not compared to the HCAHPS benchmark.

Highlights of Results

Military Health System Overall: For both of the key indicators of satisfaction (overall rating of the hospital and willingness to recommend the hospital) the MHS is significantly below the HCAHPS benchmark. Fifty-six percent (56%) of MHS beneficiaries rated their overall hospital experience with a 9 or 10, compared with civilian HCAHPS respondents, of whom 64% rated their overall experience with a 9 or 10. Sixty-one percent (61%) of MHS beneficiaries indicated that they would definitely recommend the hospital to family and friends, compared with 68% of civilian HCAHPS respondents who indicated that they would definitely recommend their hospital to family and friends. MHS satisfaction was significantly higher than the civilian benchmark for the Discharge Information composite, and significantly lower than the civilian benchmark for the Nurse Communication and Doctor Communication composites.

Direct Care Results: Tables 1a–c present results from the two overall satisfaction questions, the HCAHPS composites, and the Department of Defense (DoD) composites for DC beneficiaries. As Table 1a shows, the proportion that rated their hospital a 9 or 10 was significantly lower among DC beneficiaries (53%) when compared with the HCAHPS civilian benchmark (64%). Similarly, a lower percentage of DC beneficiaries indicated that they would recommend the hospital to family and friends, compared with the HCAHPS civilian benchmark (58% vs. 68%). However, DC satisfaction was significantly higher than the civilian benchmark for both Communication about Medications and Discharge Information composites.

As Table 1b shows, the group most likely to rate the hospital a 9 or 10 was those receiving Medical services in Air Force MTFs, and those least likely to rate the hospital a 9 or 10 were those receiving Obstetrics services in Army MTFs. Across the Services, respondents who received obstetrics care were the least satisfied with their care. As Table 1c shows, beneficiaries receiving care in Navy OCONUS MTFs were significantly less likely than the civilian benchmark to rate the hospital a 9 or 10 and to recommend the hospital to family and friends.

Purchased Care Results: Tables 2a–b present results from the two overall satisfaction questions, the HCAHPS composites, and the DoD-specific composites for PC beneficiaries. As Table 2a shows, beneficiaries who received care from purchased care providers were less likely than the HCAHPS civilian benchmark to rate their hospital a 9 or 10 (62% vs. 65%) and less likely to recommend the hospital to family and friends (66% vs. 68%). For PC overall, all of the HCAHPS composite scores were significantly different from the civilian benchmark, with both Communications about Medications and Discharge Information composites significantly higher than the civilian benchmark, and the other composites significantly lower than the civilian benchmark. As Table 2b shows, among the services within PC regions, TRICARE beneficiaries receiving Surgical services in the North region were most likely to recommend the hospital to family and friends and to rate the hospital a 9 or 10.

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**Results:
Overall Satisfaction Measures, HCAHPS Composites, DoD
Composites, and Benchmark Comparisons**

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TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 1a. Direct Care (DC) Results (% Most Positive Results) ¹

	MHS Overall 2009	Direct Care Overall 2009	Civilian HCAHPS Benchmark	DC Medical	DC Surgical	DC Obstetric	Army	Navy	Air Force	Direct Care Overall 2008
Overall Satisfaction										
Overall Hospital Rating	55.9	53.0	63.5	61.1	58.3	42.1	51.3	52.4	59.2	53.3
Recommend Hospital	60.6	57.7	68.4	66.7	64.5	45.1	55.0	58.9	63.7	56.8
HCAHPS Composites										
Nurse Communication	70.0	69.9	74.2	75.2	71.9	63.8	69.6	69.0	72.5	68.9
Doctor Communication	75.7	75.9	79.0	76.0	81.1	72.6	74.9	76.3	78.0	76.3
Communication about Medications	65.7	67.2	58.1	65.7	68.3	67.8	66.1	68.9	67.2	67.3
Responsiveness of Hospital Staff	61.1	62.2	61.8	63.1	61.3	61.8	59.7	63.7	66.9	62.2
Pain Control	63.3	61.7	69.0	60.4	64.8	60.6	60.2	62.3	65.1	61.6
Discharge Information	84.5	85.0	80.9	81.9	88.6	85.5	83.7	86.1	86.7	83.9
DoD Composites²										
Your Family and Friends	82.3	81.4	N/A	85.1	83.8	77.2	80.4	81.5	84.3	81.5
Interaction with Other Hospital Staff	73.9	71.5	N/A	71.8	74.2	69.0	71.8	70.5	72.2	70.5
Patient Safety	69.1	67.3	N/A	70.6	70.1	62.5	67.2	67.6	67.2	65.9

¹Numbers in **bold** text are significantly different from the civilian HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the HCAHPS civilian benchmark were not performed.

²N/A (not available)—for the DoD composites, civilian benchmark data are not available for comparison because these questions are not included in the HCAHPS survey.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 1b. Direct Care (DC) Results (% Most Positive Results) ¹

	Direct Care Overall 2009	Civilian HCAHPS Benchmark	Army Medical	Army Surgical	Army Obstetric	Navy Medical	Navy Surgical	Navy Obstetric	Air Force Medical	Air Force Surgical	Air Force Obstetric
Overall Satisfaction											
Overall Hospital Rating	53.0	63.5	59.7	56.0	38.9	57.9	58.5	45.8	69.5	67.2	43.6
Recommend Hospital	57.7	68.4	64.8	60.3	40.9	66.1	67.0	50.2	72.8	76.4	46.8
HCAHPS Composites											
Nurse Communication	69.9	74.2	75.6	70.9	62.3	73.2	71.5	65.0	76.5	76.4	65.9
Doctor Communication	75.9	79.0	75.8	79.4	70.7	75.1	82.1	74.5	77.7	86.4	73.7
Communication about Medications	67.2	58.1	65.7	65.3	67.2	66.5	70.3	69.9	64.5	76.1	65.1
Responsiveness of Hospital Staff	62.2	61.8	61.3	58.5	58.8	65.5	63.6	62.7	64.9	67.5	68.0
Pain Control	61.7	69.0	58.7	62.1	59.8	61.8	64.8	61.4	62.7	76.1	61.0
Discharge Information	85.0	80.9	80.9	87.1	84.2	82.3	90.0	86.9	84.2	91.8	86.4
DoD Composites²											
Your Family and Friends	81.4	N/A	85.5	81.6	75.2	83.0	85.4	78.9	87.0	89.2	79.1
Interaction with Other Hospital Staff	71.5	N/A	72.6	72.5	70.3	68.6	75.4	69.1	73.4	78.7	65.9
Patient Safety	67.3	N/A	70.7	68.0	62.9	68.2	72.3	64.9	73.8	74.6	56.1

¹Numbers in **bold** text are significantly different from the civilian HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the HCAHPS civilian benchmark were not performed.

²N/A (not available)—for the DoD composites, civilian benchmark data are not available for comparison because these questions are not included in the HCAHPS survey.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 1c. Direct Care (DC) Outside Continental United States (OCONUS) Results (% Most Positive Results)^{1,2}

	OCONUS Overall ³	Civilian HCAHPS Benchmark	OCONUS Army	OCONUS Navy	OCONUS Air Force	OCONUS Alaska	OCONUS Europe	OCONUS Pacific
Overall Satisfaction								
Overall Hospital Rating	54.8	63.5	61.1	41.1	61.2	60.4	64.6	41.6
Recommend Hospital	61.7	68.4	66.8	49.7	67.5	58.9	74.4	49.6
HCAHPS Composites								
Nurse Communication	73.0	74.2	76.8	69.2	73.2	71.6	80.3	67.0
Doctor Communication	77.2	79.0	75.0	77.7	81.3	76.8	80.0	75.0
Communication about Medications	70.4	58.1	67.6	70.7	74.2	71.3	70.5	69.4
Responsiveness of Hospital Staff	70.0	61.8	73.0	63.2	75.7	70.9	77.2	63.2
Pain Control	66.2	69.0	66.6	64.4	65.7	62.4	74.5	57.9
Discharge Information	83.9	80.9	81.9	82.4	88.0	82.4	86.7	81.7
DoD Composites⁴								
Your Family and Friends	81.6	N/A	82.3	76.0	87.3	83.5	91.3	72.7
Interaction with Other Hospital Staff	70.6	N/A	71.4	66.6	71.9	72.2	74.3	64.1
Patient Safety	64.8	N/A	64.2	64.6	63.3	59.6	69.5	60.5

¹Survey responses were not obtained from MHS beneficiaries in Latin America; therefore, this report does not contain survey results from that region.

²Numbers in **bold text** are significantly different from the civilian HCAHPS benchmark.

³Because of the small number of OCONUS purchased care respondents, this column shows results from beneficiaries who received inpatient care OCONUS through both direct care and purchased care.

⁴N/A (not available)—for the DoD composites, civilian benchmark data are not available for comparison because these questions are not included in the HCAHPS survey.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 2a. Purchased Care (PC) Results (% Most Positive Results)

	PC Overall 2009 ¹	Civilian HCAHPS Benchmark	PC Medical	PC Surgical	PC Obstetric		North ¹	South ¹	West ¹		PC Overall 2008
Overall Satisfaction											
Overall Hospital Rating	62%	64%	57%	68%	61%		61%	63%	62		61%
Recommend Hospital	66%	68%	62%	72%	67%		66%	66%	67%		65%
HCAHPS Composites											
Nurse Communication	70%	74%	67%	73%	73%		71%	72%	68%		69%
Doctor Communication	75%	79%	69%	82%	77%		75%	77%	74%		75%
Communication about Medications	63%	58%	56%	66%	69%		62%	61%	64%		62%
Responsiveness of Hospital Staff	59%	62%	51%	61%	69%		60%	57%	60%		56%
Pain Control	67%	69%	57%	72%	71%		65%	68%	67%		66%
Discharge Information	84%	81%	78%	88%	86%		84%	84%	84%		82%
DoD Composites²											
Your Family and Friends	84%	N/A	83%	87%	83%		84%	85%	83%		83%
Interaction with Other Hospital Staff	78%	N/A	76%	82%	78%		80%	78%	76%		77%
Patient Safety	73%	N/A	71%	75%	72%		74%	72%	71%		71%

¹Numbers in **bold text** are significantly different from the Civilian HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the civilian HCAHPS benchmark were not performed.

²N/A (not available)—for the DoD composites, civilian benchmark data are not available for comparison because these questions are not included in the HCAHPS survey.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 2b. Purchased Care (PC) results (% Most Positive Results)

	PC Overall 2009¹	Civilian HCAHPS Benchmark	North Medical	North Surgical	North Obstetric	South Medical	South Surgical	South Obstetric	West Medical	West Surgical	West Obstetric
Overall Satisfaction											
Overall Hospital Rating	62%	64%	56%	70%	58%	58%	68%	64%	59%	66%	62%
Recommend Hospital	66%	68%	61%	74%	67%	62%	69%	67%	64%	71%	67%
HCAHPS Composites											
Nurse Communication	70%	74%	67%	74%	73%	67%	74%	76%	65%	71%	72%
Doctor Communication	75%	79%	69%	83%	76%	71%	83%	81%	68%	80%	87%
Communication about Medications	63%	58%	54%	67%	70%	57%	64%	66%	58%	66%	72%
Responsiveness of Hospital Staff	59%	62%	49%	62%	69%	50%	59%	66%	53%	60%	71%
Pain Control	67%	69%	55%	72%	69%	58%	71%	74%	59%	71%	71%
Discharge Information	84%	81%	78%	90%	86%	78%	88%	87%	79%	88%	86%
DoD Composites²											
Your Family and Friends	84%	N/A	82%	87%	84%	85%	88%	83%	81%	86%	82%
Interaction with Other Hospital Staff	78%	N/A	76%	83%	82%	77%	81%	76%	74%	81%	74%
Patient Safety	73%	N/A	72%	76%	74%	73%	74%	69%	68%	74%	71%

¹Numbers in **bold text** are significantly different from the Civilian (HCAHPS benchmark). Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the civilian HCAHPS benchmark were not performed.

²N/A (not available)—for the DoD composites, civilian benchmark data are not available for comparison because these questions are not included in the HCAHPS survey.

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Results of the Trust Questions

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Table 3a. Direct Care (DC) Results (% Most Positive Results)

Trust Question	DC Overall	DC Medical	DC Surgical	DC Obstetric	Army	Navy	Air Force
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs.¹	47%	46%	54%	43%	46%	47%	47%
Your health care provider was always thoughtful and thorough.	85%	84%	89%	84%	84%	86%	88%
You completely trusted your health care provider's decisions about which medical treatments were best for you.	84%	83%	90%	81%	83%	83%	86%
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	84%	82%	90%	83%	83%	85%	87%
All in all, you had complete trust in your health care provider.	85%	84%	91%	82%	84%	85%	88%
Your health care provider did not refer you to a specialist when needed.¹	36%	36%	43%	30%	35%	35%	36%
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	84%	84%	88%	81%	83%	84%	87%
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.¹	17%	18%	23%	13%	17%	18%	18%

¹Numbers in these rows represent the percentage of respondents who “strongly disagreed” with the statement. Numbers in the other cells represent the percentage of respondents who either “strongly agreed” or “somewhat agreed” with the statement.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 3b. Direct Care (DC) Results (% Most Positive Results)

Trust Question	Army Medical	Army Surgical	Army Obstetric	Navy Medical	Navy Surgical	Navy Obstetric	Air Force Medical	Air Force Surgical	Air Force Obstetric
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs. ¹	47%	52%	42%	44%	54%	46%	47%	63%	39%
Your health care provider was always thoughtful and thorough.	83%	87%	82%	83%	91%	86%	89%	92%	85%
You completely trusted your health care provider's decisions about which medical treatments were best for you.	83%	88%	81%	80%	90%	82%	88%	94%	80%
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	82%	88%	81%	80%	92%	85%	86%	95%	84%
All in all, you had complete trust in your health care provider.	83%	89%	80%	82%	92%	85%	90%	95%	81%
Your health care provider did not refer you to a specialist when needed. ¹	36%	42%	28%	36%	41%	33%	37%	48%	28%
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	83%	85%	80%	81%	90%	83%	88%	94%	81%
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care. ¹	17%	23%	13%	20%	23%	14%	20%	26%	12%

¹Numbers in these rows represent the percentage of respondents who "strongly disagreed" with the statement. Numbers in the other cells represent the percentage of respondents who either "strongly agreed" or "somewhat agreed" with the statement.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 3c. Direct Care (DC) Outside Continental United States (OCONUS)¹ Results (% Most Positive Results)

Trust Question	OCONUS ² Overall	OCONUS Army	OCONUS Navy	OCONUS Air Force	OCONUS Alaska	OCONUS Europe	OCONUS Pacific
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs. ³	49%	51%	44%	52%	47%	59%	40%
Your health care provider was always thoughtful and thorough.	89%	90%	85%	92%	87%	93%	85%
You completely trusted your health care provider's decisions about which medical treatments were best for you.	86%	86%	85%	88%	82%	90%	84%
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	86%	85%	86%	88%	86%	90%	83%
All in all, you had complete trust in your health care provider.	88%	88%	87%	91%	87%	92%	86%
Your health care provider did not refer you to a specialist when needed. ³	37%	41%	30%	35%	34%	46%	27%
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	87%	84%	89%	89%	78%	92%	86%
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care. ³	21%	25%	18%	16%	18%	28%	14%

¹Survey responses were not obtained from MHS beneficiaries in Latin America; therefore, the report does not contain survey results from that region.

²Because of the small number of OCONUS purchased care respondents, this column shows results from beneficiaries who received inpatient care OCONUS through both direct care and purchased care.

³Numbers in these rows represent the percentage of respondents who "strongly disagreed" with the statement. Numbers in the other cells represent the percentage of respondents who either "strongly agreed" or "somewhat agreed" with the statement.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 4a. Purchased Care (PC) Results (% Most Positive Results)

Trust Question	PC Overall	PC Medical	PC Surgical	PC Obstetric	North	South	West
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs.¹	47%	40%	53%	50%	47%	47%	46%
Your health care provider was always thoughtful and thorough.	85%	81%	91%	85%	85%	85%	85%
You completely trusted your health care provider’s decisions about which medical treatments were best for you.	86%	81%	93%	86%	86%	87%	86%
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	84%	78%	90%	86%	83%	85%	84%
All in all, you had complete trust in your health care provider.	87%	82%	93%	87%	87%	87%	87%
Your health care provider did not refer you to a specialist when needed.¹	38%	34%	44%	38%	37%	39%	38%
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	86%	83%	92%	85%	86%	86%	86%
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.¹	21%	17%	25%	23%	20%	22%	21%

¹Numbers in these rows represent the percentage of respondents who “strongly disagreed” with the statement. Numbers in the other cells represent the percentage of respondents who either “strongly agreed” or “somewhat agreed” with the statement.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table 4b. Purchased Care (PC) Results (% Most Positive Results)

Trust Question	North Medical	North Surgical	North Obstetric	South Medical	South Surgical	South Obstetric	West Medical	West Surgical	West Obstetric
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs. ¹	41%	54%	50%	40%	54%	51%	39%	51%	51%
Your health care provider was always thoughtful and thorough.	81%	92%	85%	81%	90%	86%	80%	90%	86%
You completely trusted your health care provider's decisions about which medical treatments were best for you.	81%	93%	88%	82%	92%	88%	82%	92%	84%
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	77%	90%	86%	80%	90%	86%	78%	90%	86%
All in all, you had complete trust in your health care provider.	81%	93%	89%	82%	94%	88%	82%	94%	87%
Your health care provider did not refer you to a specialist when needed. ¹	34%	43%	35%	35%	44%	41%	33%	44%	40%
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	83%	92%	85%	84%	90%	86%	82%	92%	85%
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care. ¹	17%	26%	20%	16%	27%	27%	18%	23%	24%

¹Numbers in these rows represent the percentage of respondents who "strongly disagreed" with the statement. Numbers in the other cells represent the percentage of respondents who either "strongly agreed" or "somewhat agreed" with the statement.

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How to Read the DoD TRISS Report

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Communication with Nurses
How often did nurses treat you with courtesy and respect?

Survey composites and questions

Current reporting period

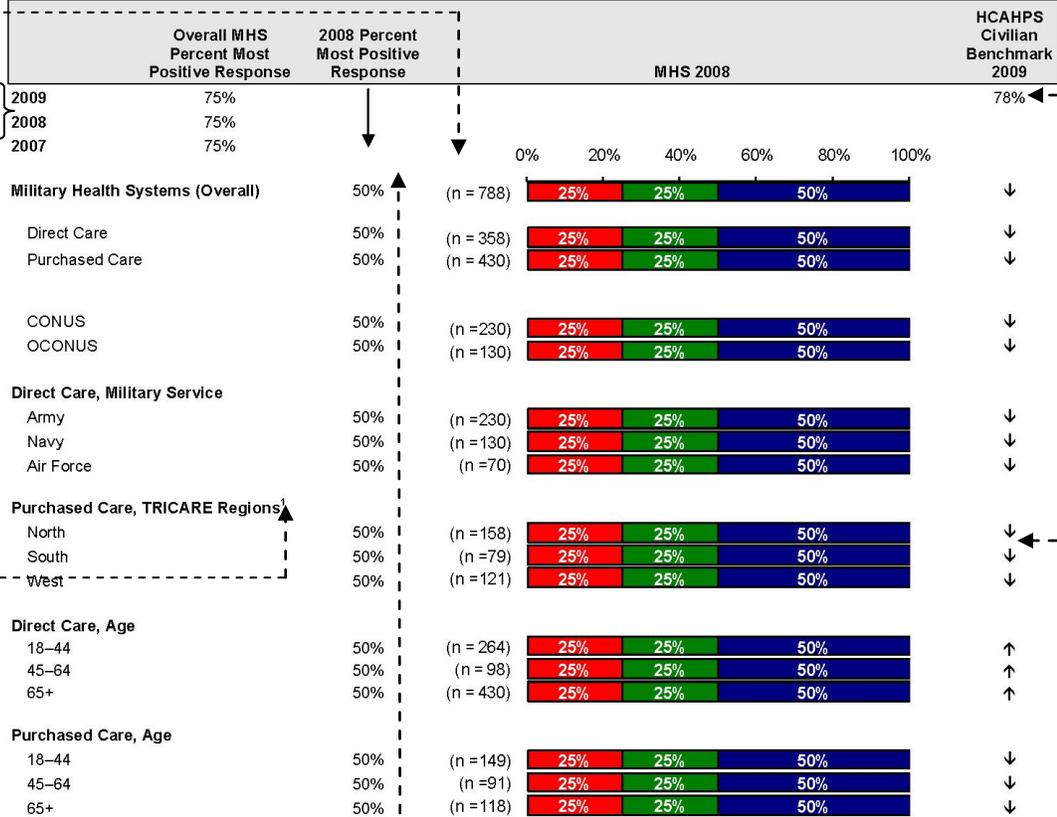
2009 Sample size

Never + Sometimes Usually Always

Answer choices

Overall trending results

Data Comparisons: Numeric footnotes indicate that survey responses differed significantly by subgroup. Narrative text describing observed difference is found at the bottom of the page.



1. Narrative comments about significant differences in the most positive category among subgroups will be included here

Arrow represents statistically significant differences, at the 95% confidence level, or from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2009 HCAHPS civilian score.

The percentage of most positive responses is provided for each HCAHPS question and composite included in the TRISS in 2009, 2008 and 2007 for visual analysis of trends. Because 2008 was the first time the 8 Trust questions were administered on the TRISS, trend data are available only for 2009 and 2008 for the Trust questions in this report.

The percentage of most positive responses is provided for each HCAHPS question and composite in the HCAHPS civilian survey. Arrows in the column represent MHS scores that are higher or lower than the HCAHPS civilian score. Civilian benchmark data were not compared to TRISS data by product type, and were not available for DoD questions or Composites, or for the Trust questions.

How to Read the DoD TRISS Report (continued)

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Communication with Nurses (continued)

How often did nurses treat you with courtesy and respect?



	2008 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2009
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)				
Medical	50%	(n = 788)	25% 25% 50%	
Surgical	50%	(n = 358)	25% 25% 50%	
Obstetric	50%	(n = 430)	25% 25% 50%	
Purchased Care (South)				
Medical	50%	(n = 297)	25% 25% 50%	
Surgical	50%	(n = 130)	25% 25% 50%	
Obstetric	50%	(n = 167)	25% 25% 50%	
Purchased Care (West)²				
Medical	50%	(n = 249)	25% 25% 50%	
Surgical	50%	(n = 134)	25% 25% 50%	
Obstetric	50%	(n = 115)	25% 25% 50%	
Direct Care (OCONUS), Service				
Army	50%	(n = 242)	25% 25% 50%	
Navy	50%	(n = 94)	25% 25% 50%	
Air Force	50%	(n = 148)	25% 25% 50%	
Direct Care (OCONUS), Region				
Alaska	50%	(n = 242)	25% 25% 50%	
Europe	50%	(n = 94)	25% 25% 50%	
Pacific	50%	(n = 148)	25% 25% 50%	
Coast Guard Sponsored Sample Member				
Direct Care		(n = 242)	25% 25% 50%	
Purchased Care		(n = 94)	25% 25% 50%	

2. Narrative comments about significant differences in the most positive category among subgroups will be included here

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2009 HCAHPS civilian score.

This category represents sample members who are members of the Coast Guard, or their dependents. 2007 was the first year this category was reported.

HCAHPS civilian benchmark scores were not compared statistically to the scores for the Medical, Surgical, and Obstetrics categories; therefore, no arrows are shown in this column.

Introduction

Purpose of the TRICARE Inpatient Satisfaction Survey

RTI International (a trade name of Research Triangle Institute) is conducting the TRICARE Inpatient Satisfaction Survey (TRISS) for the Department of Defense TRICARE Management Activity (DoD-TMA). The purpose of this project is to collect and analyze data from TRICARE beneficiaries about their experiences and satisfaction with recent inpatient hospital care provided by the TRICARE direct care (DC) system and purchased care (PC) network. The DoD-TMA staff will use the survey results for program evaluation, performance management, and decision support for the military health system (MHS). TRISS uses the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey as the model for the data collection instrument and procedures to facilitate benchmarking of the information about military care facilities with their civilian counterparts.

Survey Methods

Survey Population: The population for the annual TRISS Mail Survey is MHS beneficiaries worldwide who had an inpatient hospital stay at a military treatment facility (MTF) for DC or at a civilian network facility for PC during the reference period of July 1, 2009, through September 30, 2009. The survey sample consisted of 46,859 TRICARE inpatients of whom 31,003 received care from an MTF and 15,856 received care from a civilian facility that is part of the Military Health System (MHS) network of providers. Over the entire MHS, of the 46,752 inpatients surveyed, 15,665 responded to the survey, for an overall response rate of 33.5%.

TRICARE beneficiaries eligible for inclusion in the survey

- were 18 years or older at the time of admission,
- admitted for at least one overnight stay in the hospital,
- had a nonpsychiatric and non-substance-abuse principal diagnosis at discharge,
- were alive at the time of discharge, and
- had a normal discharge from the hospital.

Patients who did not have a normal discharge and those who had a diagnosis of abortion, false labor, antepartum, or stillbirth were excluded from the survey sample.

Survey Instrument: There were three different survey instruments that corresponded to three types of hospital services *or* products: medical, surgical, and obstetrics care. The 2009 TRISS *incorporated* questions from the following sources:

- HCAHPS questions—All 27 questions from the HCAHPS survey developed by the Agency for Healthcare Research and Quality and the Centers for Medicare &

Medicaid Services are included in the 2009 TRISS. The HCAHPS survey consists primarily of questions that ask respondents to report about their experiences with the care and services they received in the hospital. Questions related to the same topic are grouped together in “composites” which allow easy identification of patterns in the results. Questions that fall within a composite are also analyzed together. There are six HCAHPS composite measures.

For this report, the MHS results are compared to the 2009 HCAHPS results. For more information about the HCAHPS composites, visit

https://www.cahps.ahrq.gov/content/products/HOSP/PROD_HOSP_Intro.asp?p=1022&s=221

or

<http://www.hcahponline.org/>.

- **DoD questions**—DoD questions were developed and tested by other survey organizations under contract with DoD-TMA prior to the implementation of the 2006 TRISS. The DoD questions were generated to provide action items at the MTF level. Statistical analysis was conducted to create three composite measures that summarize results from 13 DoD questions.
- **Trust questions**—For the first time this year, TRISS also included eight (8) questions to assess beneficiaries’ trust in the health care provider who was primarily responsible for their care during the hospital stay. Four of the trust questions were adapted from the Community Tracking Survey Household and Followback Surveys developed by the Center for Studying Health System Change and four were adapted from the Interpersonal Trust in a Physician–Short Form. For five of the trust questions, the proportion of beneficiaries that either “strongly agreed” or “somewhat agreed” with each statement is reported. For three of the trust questions, the proportion of respondents who disagreed with the statement (which is the most favorable response) is reported. Civilian benchmark data are not available for comparison with the trust questions because these questions are not part of the HCAHPS survey.

Table 5 provides a list of composite measures (bold lettering) and the questions within the composites, as well as the eight Trust questions that were included in the 2009 TRISS. Full details on the survey methodology are presented in *Appendix A*.

Table 5. Composite Measures and Questions

HCAHPS Composites

Communication with Nurses

During this hospital stay, how often did nurses treat you with courtesy and respect?

During this hospital stay, how often did nurses listen carefully to you?

During this hospital stay, how often did nurses explain things in a way you could understand?

Communication with Doctors

During this hospital stay, how often did doctors treat you with courtesy and respect?

During this hospital stay, how often did doctors listen carefully to you?

During this hospital stay, how often did doctors explain things in a way you could understand?

Communication about Medications

Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?

Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?

Responsiveness of Hospital Staff

During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?

How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?

Pain Control

During this hospital stay, how often was your pain well controlled?

During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?

Discharge Information

During this hospital stay, did doctors, nurses, or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?

During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

DoD Composites

Your Family and Friends

How often did doctors treat your family or close friend with courtesy and respect?

During this hospital stay, how often did nurses treat your family or close friend with courtesy and respect?

Interaction with Other Hospital Staff

How often did the staff who took blood from you treat you with courtesy and respect?

How often did the staff who took blood from you do this without causing you too much pain?

During this hospital stay, how often did staff check your identification band before taking your blood?

How often did the staff starting your IVs treat you with courtesy and respect?

How often did the staff starting your IVs do this without causing you too much pain?

During this hospital stay, how often did staff check your identification band before starting your IV?

How often did the radiology staff treat you with courtesy and respect?

During this hospital stay, how often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound, or any other radiological test or treatment?

Patient Safety

During this hospital stay, how often did you see staff wash their hands or use gloves before treating or checking you?

During this hospital stay, when doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves?

During this hospital stay, how often did staff check your identification band before giving you any medicines, even over-the-counter medicines like Tylenol or ibuprofen?

(continued)

Table 5. Composite Measures and Questions (continued)

Trust Questions

Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs.

Your health care provider was always thoughtful and thorough.

You completely trusted your health care provider's decisions about which medical treatments were best for you.

Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.

All in all, you had complete trust in your health care provider.

Your health care provider did not refer you to a specialist when needed.

You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.

You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.

Presentation of Results and Statistical Testing

We present survey findings in the following sections:

1. HCAHPS composites and questions. Results from each composite are followed by results from the questions that comprise the composite.
2. DoD composites and questions. Results from each composite are followed by results from the questions that comprise the composite.
3. DoD questions. Results from DoD questions that are not part of a composite and were analyzed individually.
4. Trust Questions. The eight questions regarding trust in providers that were added to the TRISS survey for the first time last year.

Results of each survey question and composite are presented on two to three pages using bar charts that provide information about the percentage of beneficiaries who provided each possible response to each question included in the 2009 TRISS. In addition, we conducted chi-square tests and *t*-tests to determine whether responses among different subgroups surveyed vary significantly. Specifically, we conducted statistical analyses to compare results among the following subgroups:

1. DC and PC;
2. CONUS (continental United States) and OCONUS (outside the continental United States);
3. among DC, military service—Army, Navy, and Air Force;
4. among DC, age groups—18 to 44, 45 to 64, and 65 or older;
5. among PC, TRICARE region—North, South, and West;
6. among PC, age groups—18 to 44, 45 to 64, and 65 or older;
7. among each product line (medical, surgical, obstetrics)—DC and PC;
8. among PC beneficiaries, within each region—medical, surgical, and obstetrics;
9. among DC beneficiaries, within each Service branch—Army, Navy, and Air Force;
10. among OCONUS DC beneficiaries—Army, Navy, and Air Force;
11. among OCONUS DC beneficiaries—Alaska, Europe, and Pacific; and
12. among Coast Guard Sponsored beneficiaries—DC and PC.

Note that results presented as whole numbers were rounded using the Microsoft Excel rounding function.

Also included in the TRISS are questions from the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey of civilian hospitals. HCAHPS is a set of standardized survey questions used to collect and report meaningful and reliable inpatient satisfaction information. HCAHPS results are used as a national benchmark for civilian

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hospitals. The HCAHPS benchmark represents the results of three product lines (medical, surgical, and obstetrics) combined. TRISS statistical comparisons between the MHS and the HCAHPS benchmark are provided for subgroups such as DC versus HCAHPS or Service versus HCAHPS. Data about specific product lines (e.g., medical, surgical, and obstetrics) are not compared to the HCAHPS benchmark. The civilian HCAHPS benchmark data included in the analyses are based on 4 quarters of data from patients discharged from civilian hospitals in calendar Quarter 3, 2008 through calendar Quarter 2, 2009 (July 2008 – June 2009).

Reviewers and users of TRISS results should note that statistical tests comparing results of the various subgroups have limited power when based on samples sizes of fewer than 100 respondents. Where applicable throughout the report footnotes denote estimates with low precision due to sample size of fewer than 100. Additionally, cells with fewer than 15 responses are not included in the report. Analysis of data from a nonresponse bias telephone survey of a subsample of the mail survey nonrespondents revealed that some of the results displayed in this report are biased and that the bias is large depending on the outcomes of interest. More information about the results of the nonresponse bias survey will be available in a forthcoming separate report titled *Nonresponse Bias Analysis on the 2009 TRICARE Inpatient Satisfaction Survey*.

Survey Results:
Overall Satisfaction Questions

Overall Satisfaction: Rating of Hospital

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?



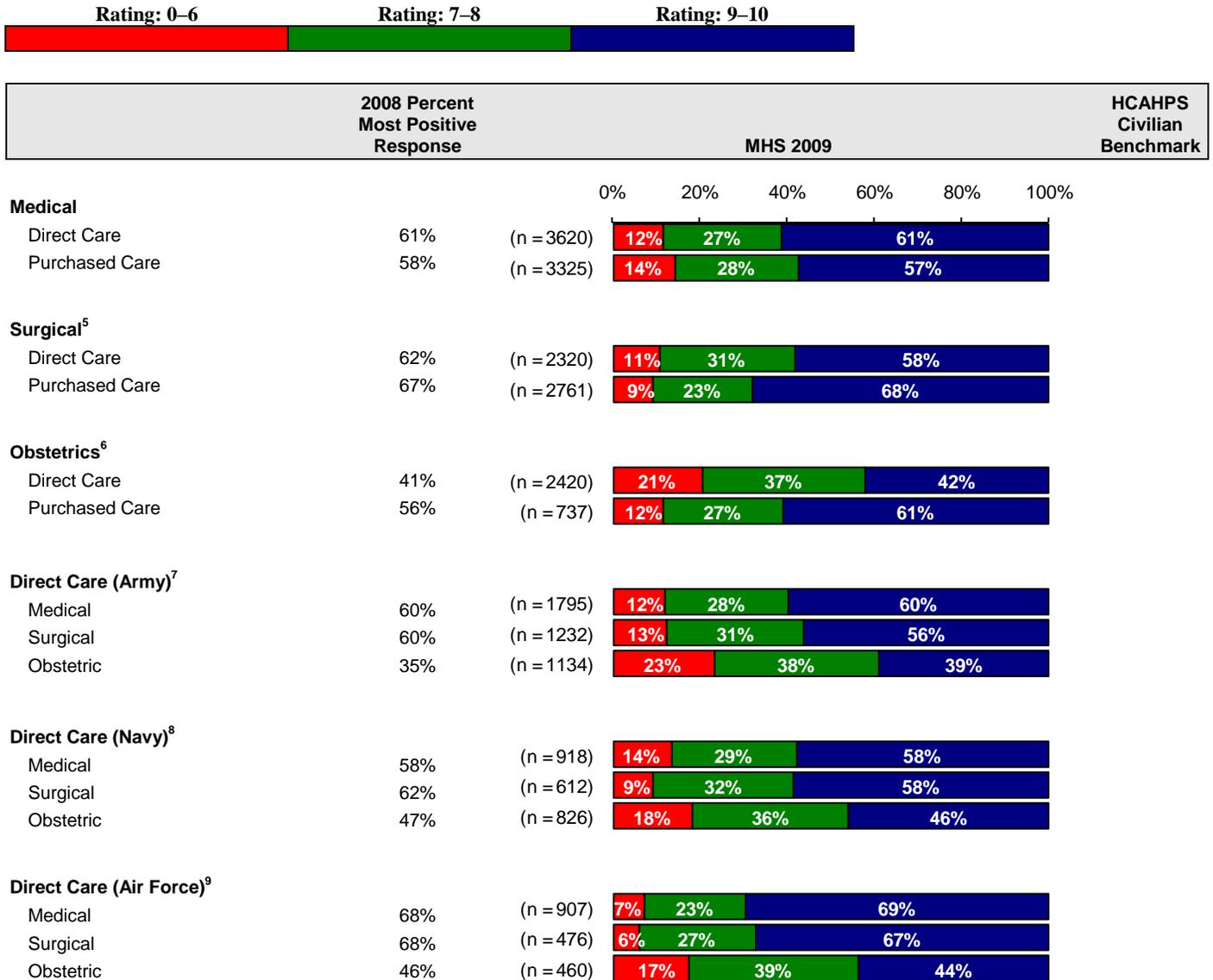
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	56%			64%
2008	56%			
2007	54%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	56%	(n = 15183)		↓
Direct Care	53%	(n = 8360)		↓
Purchased Care	61%	(n = 6823)		↓
CONUS	56%	(n = 14513)		↓
OCONUS	56%	(n = 670)		↓
Direct Care, Military Service²				
Army	51%	(n = 4161)		↓
Navy	54%	(n = 2356)		↓
Air Force	59%	(n = 1843)		↓
Purchased Care, TRICARE Regions				
North	58%	(n = 2460)		↓
South	63%	(n = 2055)		
West	61%	(n = 2247)		
Direct Care, Age³				
18–44	45%	(n = 3572)		↓
45–64	69%	(n = 2504)		↑
65+	82%	(n = 2284)		↑
Purchased Care, Age⁴				
18–44	55%	(n = 1120)		↓
45–64	63%	(n = 1615)		
65+	65%	(n = 4088)		

- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries, those in Air Force MTFs were significantly more likely than in Navy or Army MTFs to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than in other age groups to rate their hospital a 9 or 10 ($p < .05$). Furthermore, those aged 65+ were significantly more likely than in other age groups to rate their hospital a 9 or 10 ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than in other age groups to rate their hospital a 9 or 10 ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Overall Satisfaction: Rating of Hospital (continued)

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay? (continued)

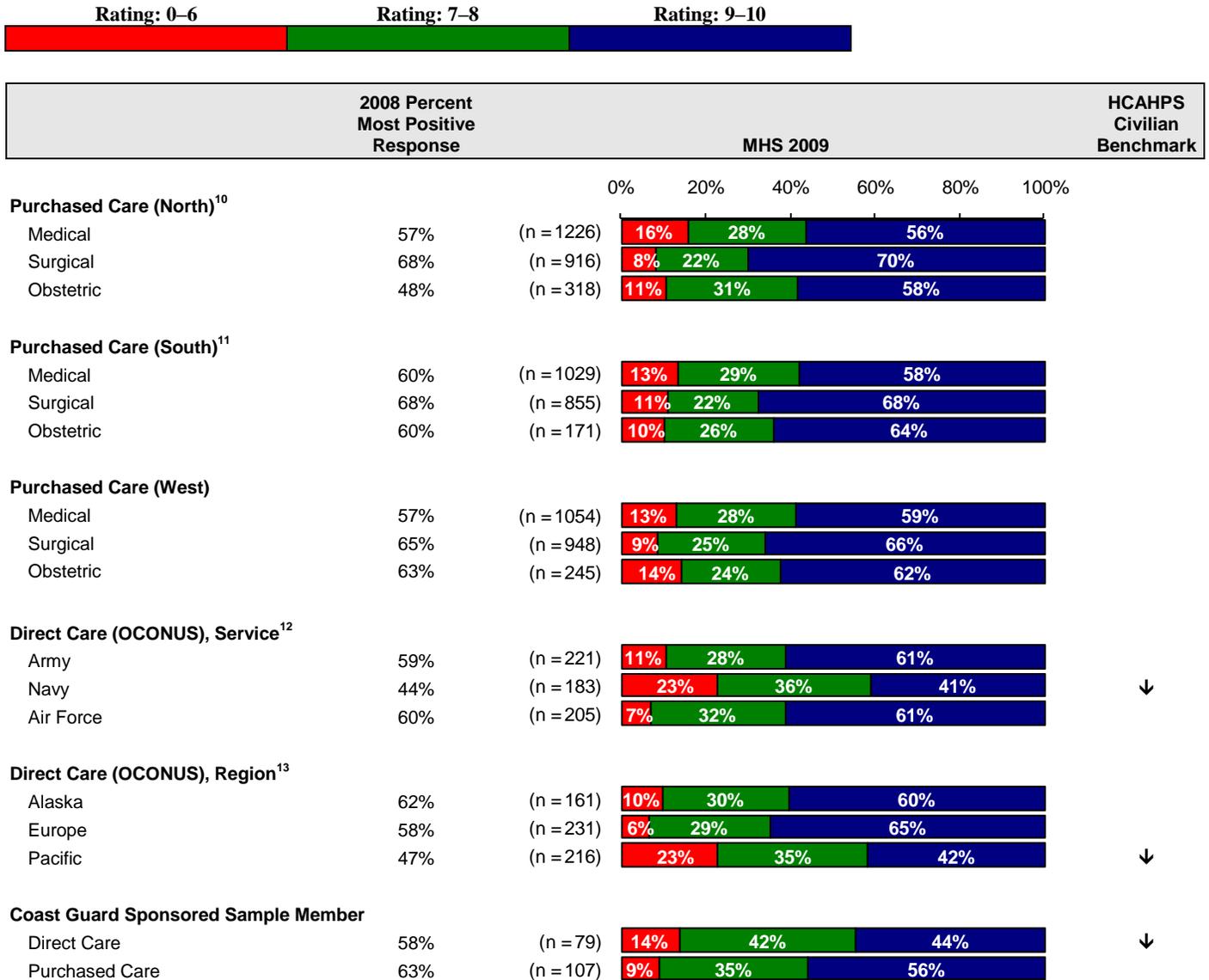


- Among beneficiaries receiving Surgical services, those in Direct Care were significantly less likely than those in Purchased Care to rate their hospital a 9 or 10 ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to rate their hospital a 9 or 10 ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Overall Satisfaction: Rating of Hospital (continued)

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay? (continued)



10. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to rate their hospital a 9 or 10 ($p < .05$).

11. Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical services to rate their hospital a 9 or 10 ($p < .05$).

12. Among Direct Care OCONUS beneficiaries, those in Navy MTFs were significantly less likely than those in Army MTFs or Air Force MTFs to rate their hospital a 9 or 10 ($p < .05$).

13. Among Direct Care OCONUS beneficiaries, those in the Pacific region were significantly less likely than those in the Alaskan or European regions to rate their hospital a 9 or 10 ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Overall Satisfaction: Willingness to Recommend

Would you recommend this hospital to your friends and family?



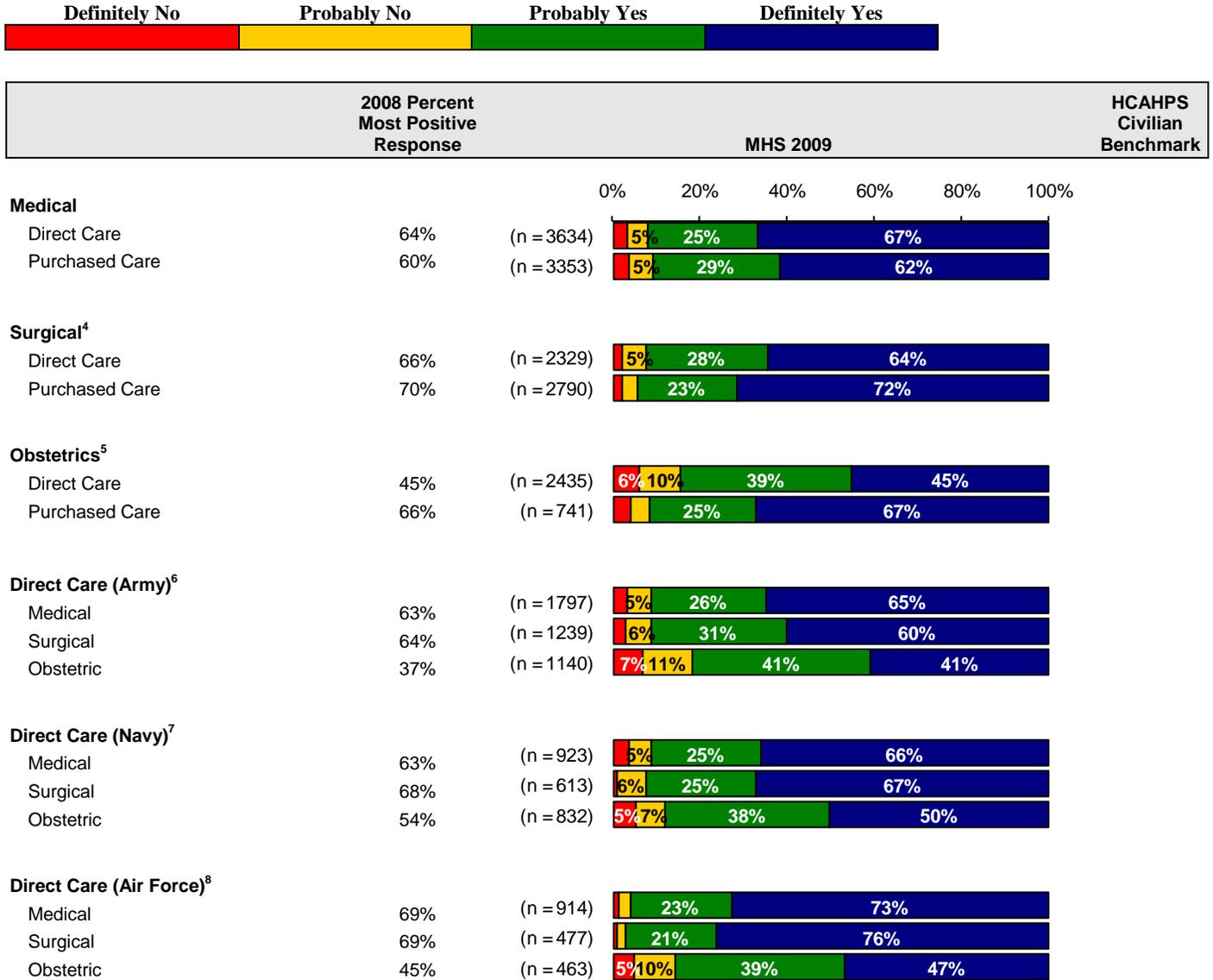
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009					HCAHPS Civilian Benchmark	
2009	61%							68%	
2008	60%								
2007	57%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹		60%	(n = 15282)	5%	30%	61%		↓	
Direct Care		57%	(n = 8398)	7%	32%	58%		↓	
Purchased Care		65%	(n = 6884)	5%	26%	66%		↓	
CONUS		59%	(n = 14610)	6%	30%	60%		↓	
OCONUS		63%	(n = 672)	5%	31%	62%		↓	
Direct Care, Military Service²									
Army		54%	(n = 4176)	5%	8%	33%	55%	↓	
Navy		60%	(n = 2368)	6%	31%	59%	↓		
Air Force		59%	(n = 1854)	5%	28%	64%	↓		
Purchased Care, TRICARE Regions									
North		63%	(n = 2485)	5%	25%	66%	↓		
South		65%	(n = 2071)		27%	66%	↓		
West		66%	(n = 2267)	5%	25%	67%			
Direct Care, Age³									
18–44		49%	(n = 3589)	5%	9%	37%	49%	↓	
45–64		73%	(n = 2506)		23%	74%	↑		
65+		82%	(n = 2303)	1%	15%	83%	↑		
Purchased Care, Age									
18–44		63%	(n = 1133)	5%	5%	26%	64%	↓	
45–64		65%	(n = 1615)	5%	26%	67%			
65+		66%	(n = 4136)		26%	68%			

- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to recommend the hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Navy or Air Force MTFs to recommend the hospital to friends and family ($p < .05$). Furthermore, those in Air Force MTFs were significantly more likely than those in Navy or Army MTFs to recommend the hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to recommend the hospital to friends and family ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to recommend the hospital to friends and family ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Overall Satisfaction: Willingness to Recommend (continued)

Would you recommend this hospital to your friends and family? (continued)

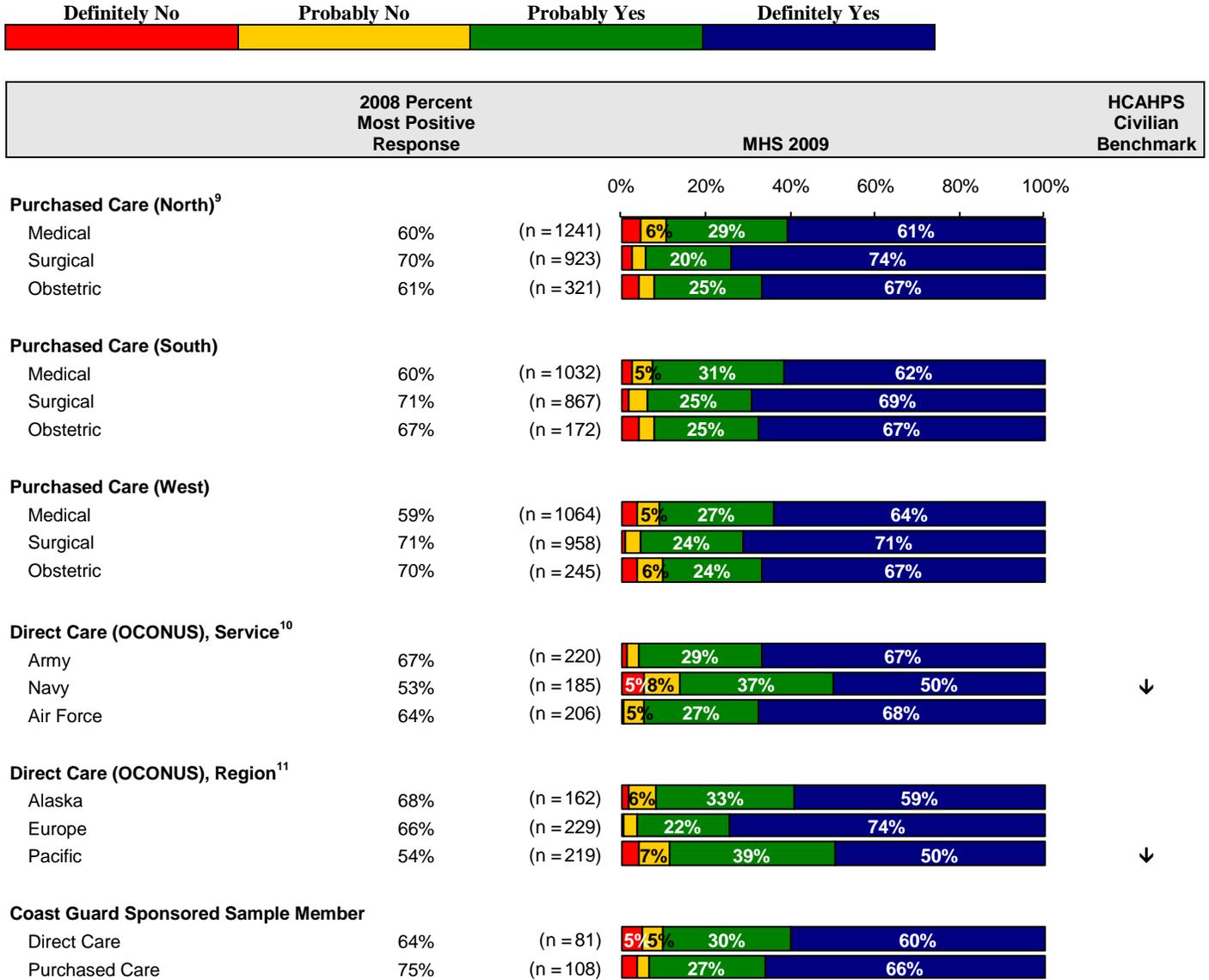


- Among beneficiaries receiving Surgical services, those in Direct Care were significantly less likely than those in Purchased Care to recommend the hospital to friends and family ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to recommend the hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to recommend the hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to recommend the hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to recommend the hospital to friends and family ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Overall Satisfaction: Willingness to Recommend (continued)

Would you recommend this hospital to your friends and family? (continued)



9. Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to recommend the hospital to friends and family ($p < .05$).

10. Among Direct Care OCONUS beneficiaries, those in Navy MTFs were significantly less likely than those in Army or Air Force MTFs to recommend the hospital to friends and family ($p < .05$).

11. Among Direct Care OCONUS beneficiaries, those in European MTFs were significantly more likely than those in Alaskan or Pacific MTFs to recommend the hospital to friends and family ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Survey Results:
HCAHPS Composites and Questions

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Communication with Nurses

This composite combined responses from three questions regarding how often nurses communicated well with patients



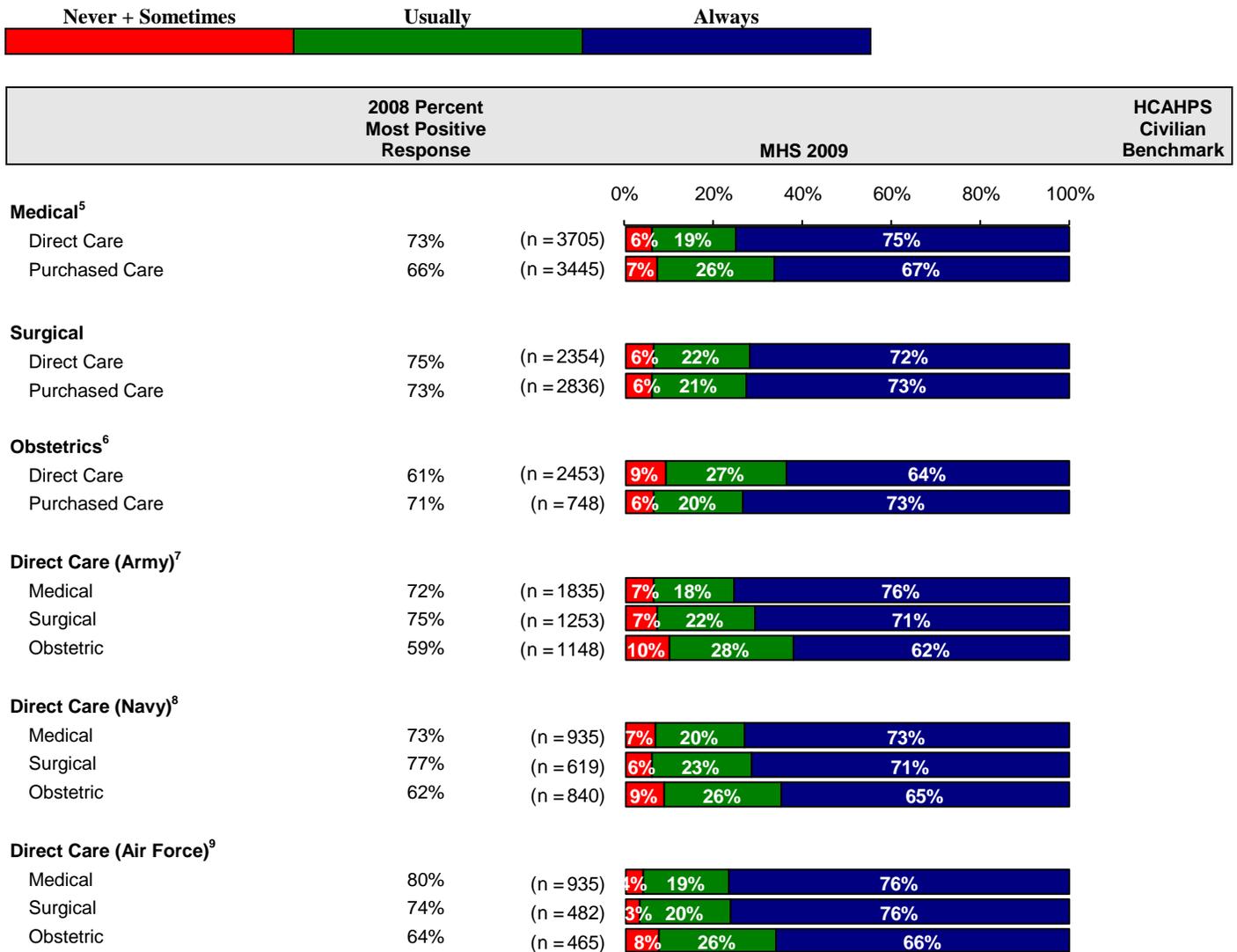
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009			HCAHPS Civilian Benchmark			
2009	70%					74%			
2008	69%								
2007	66%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	69%	(n = 15541)	7%	23%	70%				↓
Direct Care	69%	(n = 8512)	7%	23%	70%				↓
Purchased Care	69%	(n = 7029)	7%	23%	70%				↓
CONUS	69%	(n = 14861)	7%	23%	70%				↓
OCONUS	75%	(n = 680)	5%	22%	73%				
Direct Care, Military Service¹									
Army	68%	(n = 4236)	8%	22%	70%				↓
Navy	69%	(n = 2394)	8%	23%	69%				↓
Air Force	72%	(n = 1882)	5%	22%	72%				
Purchased Care, TRICARE Regions²									
North	69%	(n = 2533)	7%	22%	71%				↓
South	70%	(n = 2107)	6%	22%	72%				↓
West	68%	(n = 2326)	7%	24%	68%				↓
Direct Care, Age³									
18–44	65%	(n = 3613)	9%	25%	66%				↓
45–64	78%	(n = 2542)	17%		79%				↑
65+	78%	(n = 2357)	18%		78%				↑
Purchased Care, Age⁴									
18–44	69%	(n = 1146)	8%	21%	70%				↓
45–64	71%	(n = 1635)	6%	21%	73%				
65+	69%	(n = 4248)	6%	26%	69%				↓

1. Among Direct Care beneficiaries, those treated in Air Force facilities were significantly more likely than those treated in Army or Navy facilities to report most positive results for Communication with Nurses ($p < .05$).
2. Among Purchased Care beneficiaries, those treated in the West region were significantly less likely than those treated in the South region to report most positive results for Communication with Nurses ($p < .05$).
3. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive results for Communication with Nurses ($p < .05$).
4. Among Purchased Care beneficiaries, those aged 65 and older were significantly less likely than those aged 45–64 to report most positive results for Communication with Nurses ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

This composite combines responses from three questions regarding how often nurses communicated well with patients.

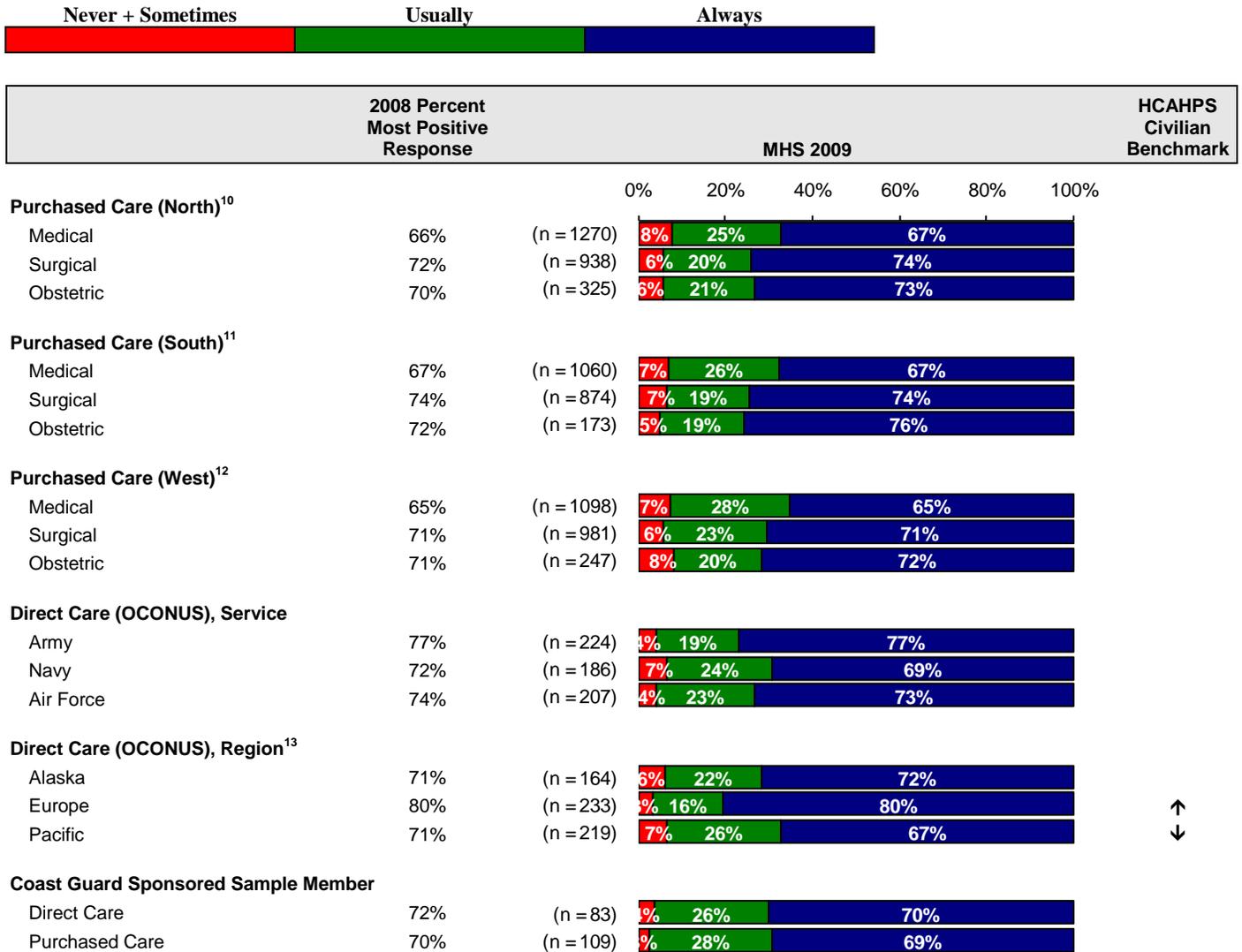


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive results for Communication with Nurses ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive results for Communication with Nurses ($p < .05$).
- Among beneficiaries treated at Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive results for Communication with Nurses ($p < .05$). Furthermore, those receiving Medical services were significantly more likely than those receiving other services to report most positive results for Communication with Nurses ($p < .05$).
- Among beneficiaries treated at Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive results for Communication with Nurses ($p < .05$).
- Among beneficiaries treated at Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive results for Communication with Nurses ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

This composite combines responses from three questions regarding how often nurses communicated well with patients.



- 10. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Nurse Communication composite ($p < .05$).
- 11. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Nurse Communication composite ($p < .05$).
- 12. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Nurse Communication composite ($p < .05$).
- 13. Among OCONUS Direct Care beneficiaries, those receiving care in Europe were significantly more likely than those receiving care in the Pacific to report most positive results for the Nurse Communication composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses

How often did nurses treat you with courtesy and respect?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	77%			81%
2008	76%			
2007	73%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)	76%	(n = 15464)	5% 18% 77%	↓
Direct Care	75%	(n = 8474)	5% 18% 76%	↓
Purchased Care	77%	(n = 6990)	5% 17% 78%	↓
CONUS	75%	(n = 14785)	5% 18% 77%	↓
OCONUS	81%	(n = 679)	17% 79%	
Direct Care, Military Service				
Army	74%	(n = 4214)	6% 18% 76%	↓
Navy	75%	(n = 2385)	5% 19% 76%	↓
Air Force	77%	(n = 1875)	18% 78%	↓
Purchased Care, TRICARE Regions				
North	76%	(n = 2520)	5% 17% 78%	↓
South	78%	(n = 2097)	17% 79%	
West	76%	(n = 2311)	5% 19% 76%	↓
Direct Care, Age¹				
18–44	70%	(n = 3594)	7% 21% 72%	↓
45–64	85%	(n = 2531)	12% 85%	↑
65+	87%	(n = 2349)	11% 86%	↑
Purchased Care, Age²				
18–44	74%	(n = 1141)	7% 18% 75%	↓
45–64	78%	(n = 1626)	15% 81%	
65+	79%	(n = 4223)	18% 79%	↓

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that nurses "always" treated them with courtesy and respect ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that nurses "always" treated them with courtesy and respect ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses treat you with courtesy and respect?



	2008 Percent Most Positive Response		MHS 2009					HCAHPS Civilian Benchmark
			0%	20%	40%	60%	80%	100%
Medical³								
Direct Care	81%	(n = 3683)	13%					82%
Purchased Care	75%	(n = 3424)	19%					76%
Surgical								
Direct Care	80%	(n = 2349)	5%	18%				78%
Purchased Care	80%	(n = 2822)	16%					79%
Obstetrics⁴								
Direct Care	66%	(n = 2442)	7%	23%				70%
Purchased Care	76%	(n = 744)	6%	15%				79%
Direct Care (Army)⁵								
Medical	80%	(n = 1823)	13%					82%
Surgical	80%	(n = 1249)	6%	18%				77%
Obstetric	63%	(n = 1142)	8%	24%				68%
Direct Care (Navy)								
Medical	81%	(n = 930)	5%	15%				81%
Surgical	83%	(n = 619)	18%					79%
Obstetric	67%	(n = 836)	6%	22%				72%
Direct Care (Air Force)⁶								
Medical	85%	(n = 930)	12%					85%
Surgical	78%	(n = 481)	18%					80%
Obstetric	69%	(n = 464)	6%	25%				70%

- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that nurses "always" treated them with courtesy and respect ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that nurses "always" treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that nurses "always" treated them with courtesy and respect ($p < .05$). Furthermore, those receiving Medical services were significantly more likely than those receiving other services to report that nurses "always" treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that nurses "always" treated them with courtesy and respect ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses treat you with courtesy and respect?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)				
Medical	74%	(n = 1263)	19% 77%	
Surgical	81%	(n = 934)	15% 81%	
Obstetric	74%	(n = 323)	6% 15% 78%	
Purchased Care (South)				
Medical	77%	(n = 1055)	18% 78%	
Surgical	81%	(n = 870)	5% 15% 80%	
Obstetric	76%	(n = 172)	16% 81%	
Purchased Care (West)				
Medical	74%	(n = 1090)	21% 74%	
Surgical	78%	(n = 975)	19% 78%	
Obstetric	78%	(n = 246)	8% 14% 78%	
Direct Care (OCONUS), Service				
Army	84%	(n = 224)	12% 86%	
Navy	79%	(n = 186)	7% 20% 73%	↓
Air Force	79%	(n = 207)	20% 78%	
Direct Care (OCONUS), Region				
Alaska	80%	(n = 164)	19% 77%	
Europe	86%	(n = 233)	10% 87%	↑
Pacific	77%	(n = 219)	5% 22% 73%	↓
Coast Guard Sponsored Sample Member				
Direct Care	74%	(n = 83)	25% 75%	
Purchased Care	75%	(n = 109)	19% 81%	

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses

How often did nurses listen carefully to you?



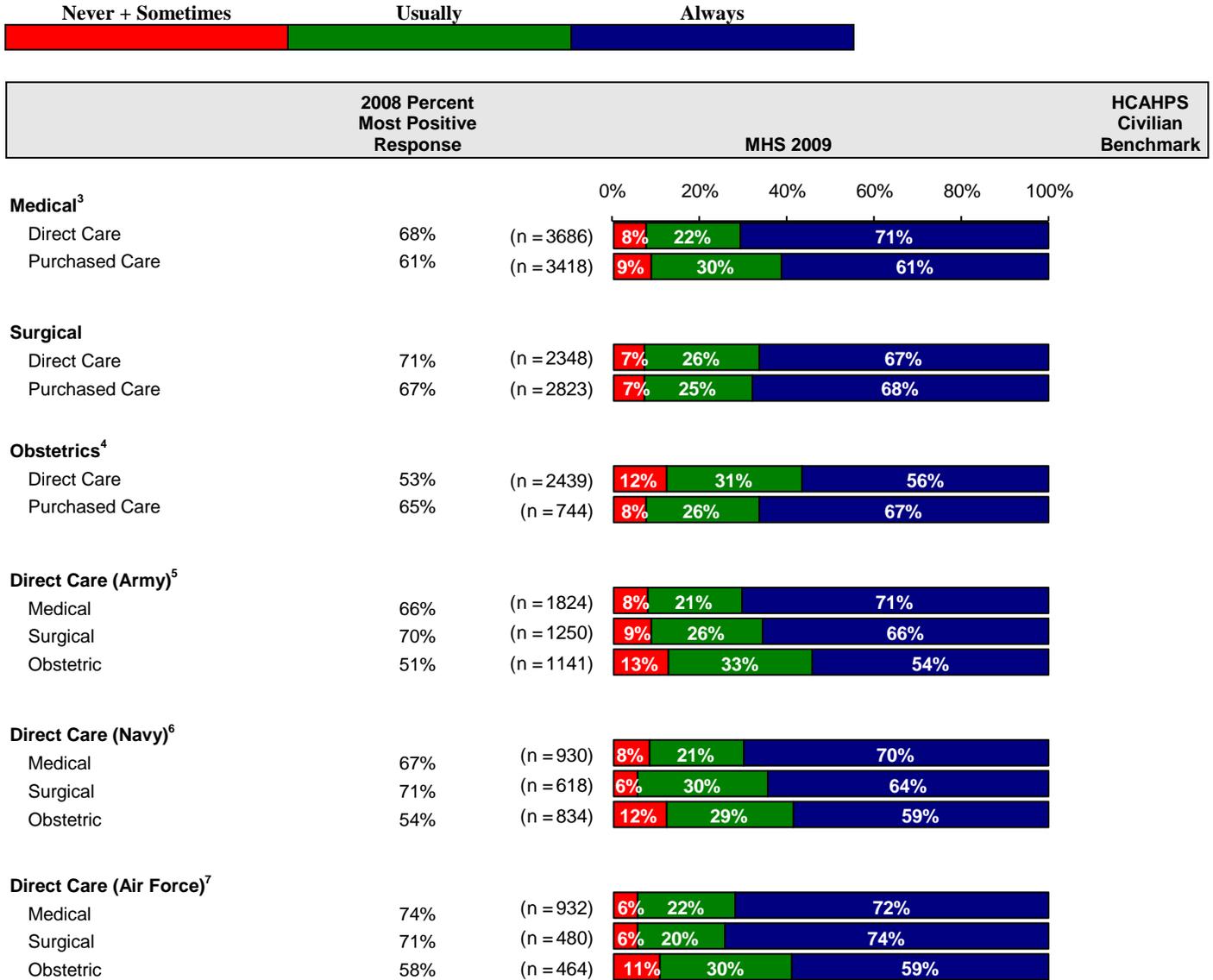
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	64%			71%
2008	63%			
2007	61%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)	63%	(n = 15458)	9% 27% 64%	↓
Direct Care	63%	(n = 8473)	9% 26% 64%	↓
Purchased Care	64%	(n = 6985)	8% 27% 65%	↓
CONUS	63%	(n = 14780)	9% 27% 64%	↓
OCONUS	68%	(n = 678)	7% 26% 68%	
Direct Care, Military Service				
Army	62%	(n = 4215)	10% 27% 63%	↓
Navy	62%	(n = 2382)	10% 27% 64%	↓
Air Force	67%	(n = 1876)	8% 25% 67%	
Purchased Care, TRICARE Regions				
North	64%	(n = 2519)	8% 26% 66%	↓
South	64%	(n = 2092)	8% 27% 66%	↓
West	63%	(n = 2311)	8% 29% 63%	↓
Direct Care, Age¹				
18–44	58%	(n = 3595)	11% 29% 60%	↓
45–64	72%	(n = 2530)	5% 21% 74%	↑
65+	74%	(n = 2348)	2% 22% 74%	↑
Purchased Care, Age²				
18–44	64%	(n = 1138)	10% 25% 64%	↓
45–64	65%	(n = 1632)	7% 24% 69%	
65+	63%	(n = 4215)	6% 31% 63%	↓

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that nurses "always" listened carefully to them (p<.05).
2. Among Purchased Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report that nurses "always" listened carefully to them (p<.05).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses listen carefully to you?

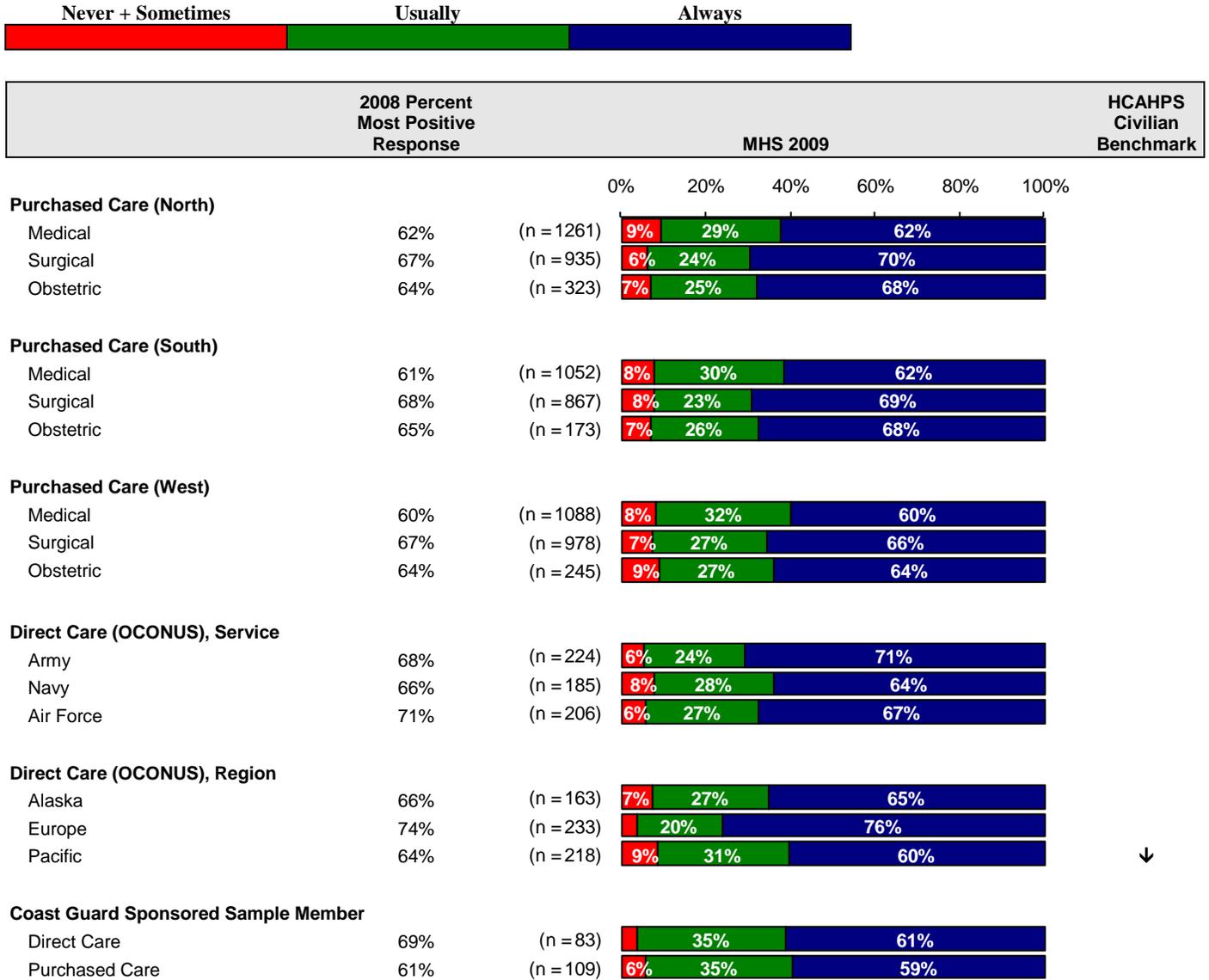


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that nurses "always" listened carefully to them ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that nurses "always" listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that nurses "always" listened carefully to them ($p < .05$). Furthermore, those receiving Medical services were significantly more likely than those receiving other services to report that nurses "always" listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving Medical services to report that nurses "always" listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving Medical services to report that nurses "always" listened carefully to them ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses listen carefully to you?



Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses

How often did nurses explain things in a way you could understand?



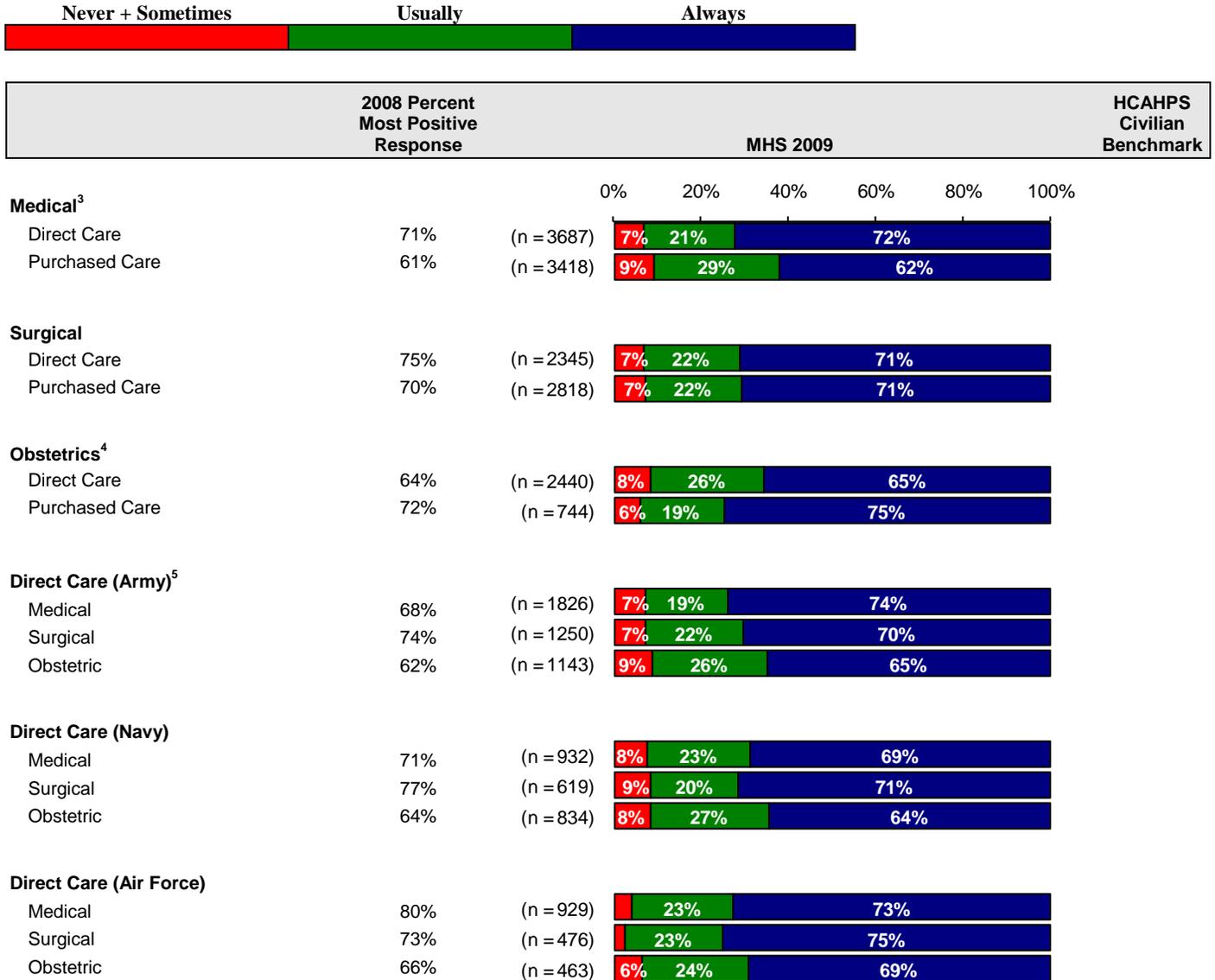
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009			HCAHPS Civilian Benchmark			
2009	69%					69%			
2008	68%								
2007	66%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	68%	(n = 15452)	8%	23%	69%				
Direct Care	69%	(n = 8472)	7%	23%	69%				
Purchased Care	67%	(n = 6980)	8%	24%	68%			↓	
CONUS	68%	(n = 14776)	8%	24%	69%				
OCONUS	75%	(n = 676)	5%	22%	72%				
Direct Care, Military Service									
Army	68%	(n = 4219)	8%	22%	70%				
Navy	69%	(n = 2385)	8%	24%	67%				
Air Force	73%	(n = 1868)	5%	23%	72%				
Purchased Care, TRICARE Regions									
North	66%	(n = 2519)	7%	24%	68%				
South	68%	(n = 2089)	8%	23%	70%				
West	65%	(n = 2310)	9%	25%	66%			↓	
Direct Care, Age¹									
18–44	66%	(n = 3599)	9%	25%	67%			↓	
45–64	76%	(n = 2530)	5%	19%	77%			↑	
65+	73%	(n = 2343)	5%	21%	74%			↑	
Purchased Care, Age²									
18–44	69%	(n = 1140)	8%	20%	71%				
45–64	69%	(n = 1629)	7%	24%	69%				
65+	64%	(n = 4211)	8%	28%	64%			↓	

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that nurses "always" explained things in a way they could understand ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups to report that nurses "always" explained things in a way they could understand ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that nurses "always" explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses explain things in a way you could understand?

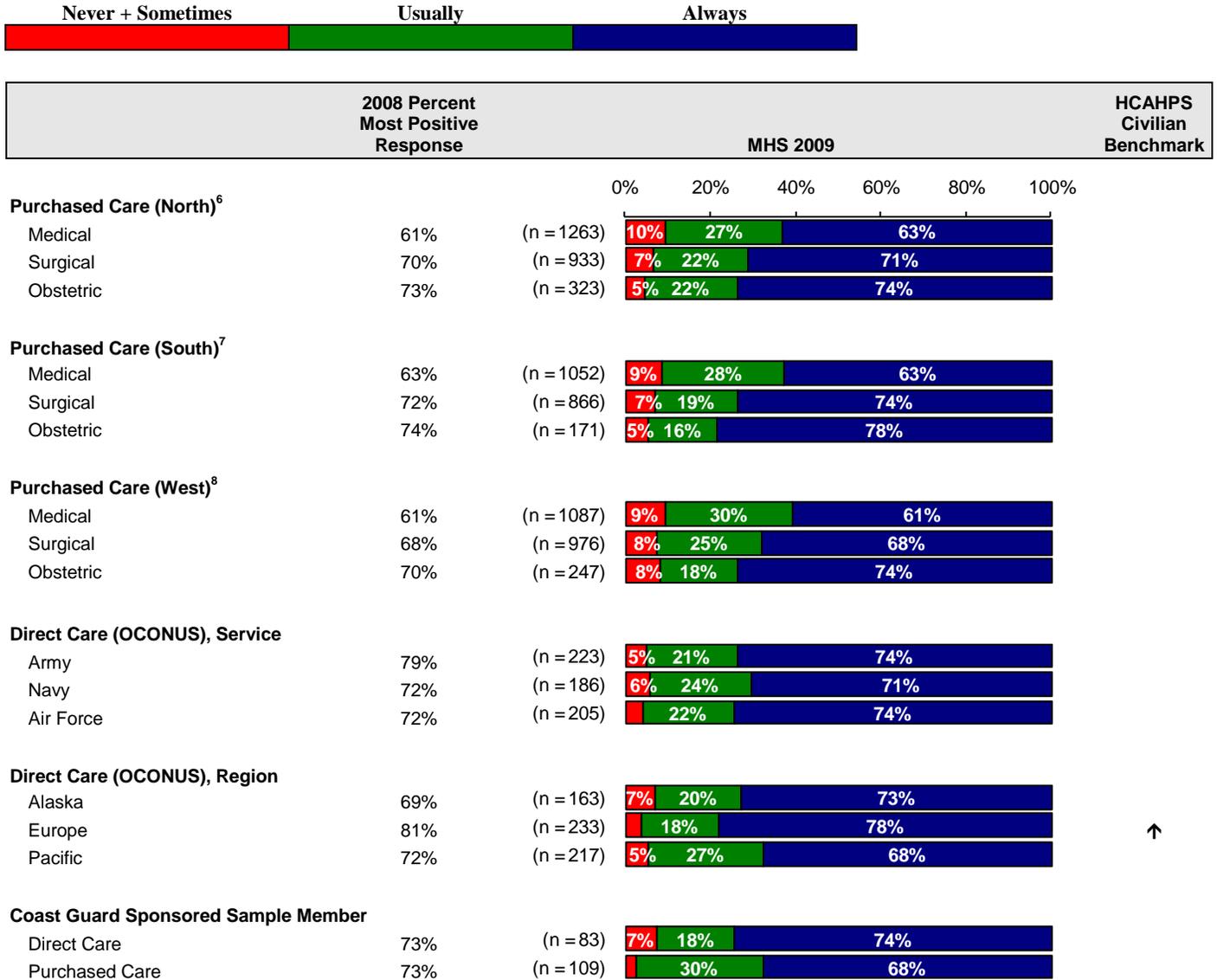


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that nurses "always" explained things in a way they could understand ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that nurses "always" explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that nurses "always" explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses explain things in a way you could understand?



- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that nurses "always" explained things in a way they could understand ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that nurses "always" explained things in a way they could understand ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that nurses "always" explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors

This composite combines responses from three questions regarding how often doctors communicated well with patients.



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	76%			79%
2008	76%			
2007	74%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)	76%	(n = 15529)	7% 18% 76%	↓
Direct Care	76%	(n = 8511)	7% 18% 76%	↓
Purchased Care	75%	(n = 7018)	7% 18% 75%	↓
CONUS	75%	(n = 14851)	7% 18% 76%	↓
OCONUS	82%	(n = 678)	6% 17% 77%	
Direct Care, Military Service¹				
Army	76%	(n = 4234)	7% 18% 75%	↓
Navy	76%	(n = 2396)	6% 17% 76%	↓
Air Force	78%	(n = 1881)	6% 16% 78%	
Purchased Care, TRICARE Regions²				
North	75%	(n = 2530)	7% 18% 75%	↓
South	75%	(n = 2105)	6% 17% 77%	
West	75%	(n = 2320)	6% 20% 74%	↓
Direct Care, Age³				
18–44	73%	(n = 3609)	8% 19% 73%	↓
45–64	82%	(n = 2544)	13% 83%	↑
65+	84%	(n = 2358)	14% 83%	↑
Purchased Care, Age⁴				
18–44	77%	(n = 1144)	8% 16% 76%	↓
45–64	72%	(n = 1635)	6% 17% 77%	↓
65+	74%	(n = 4239)	5% 21% 74%	↓

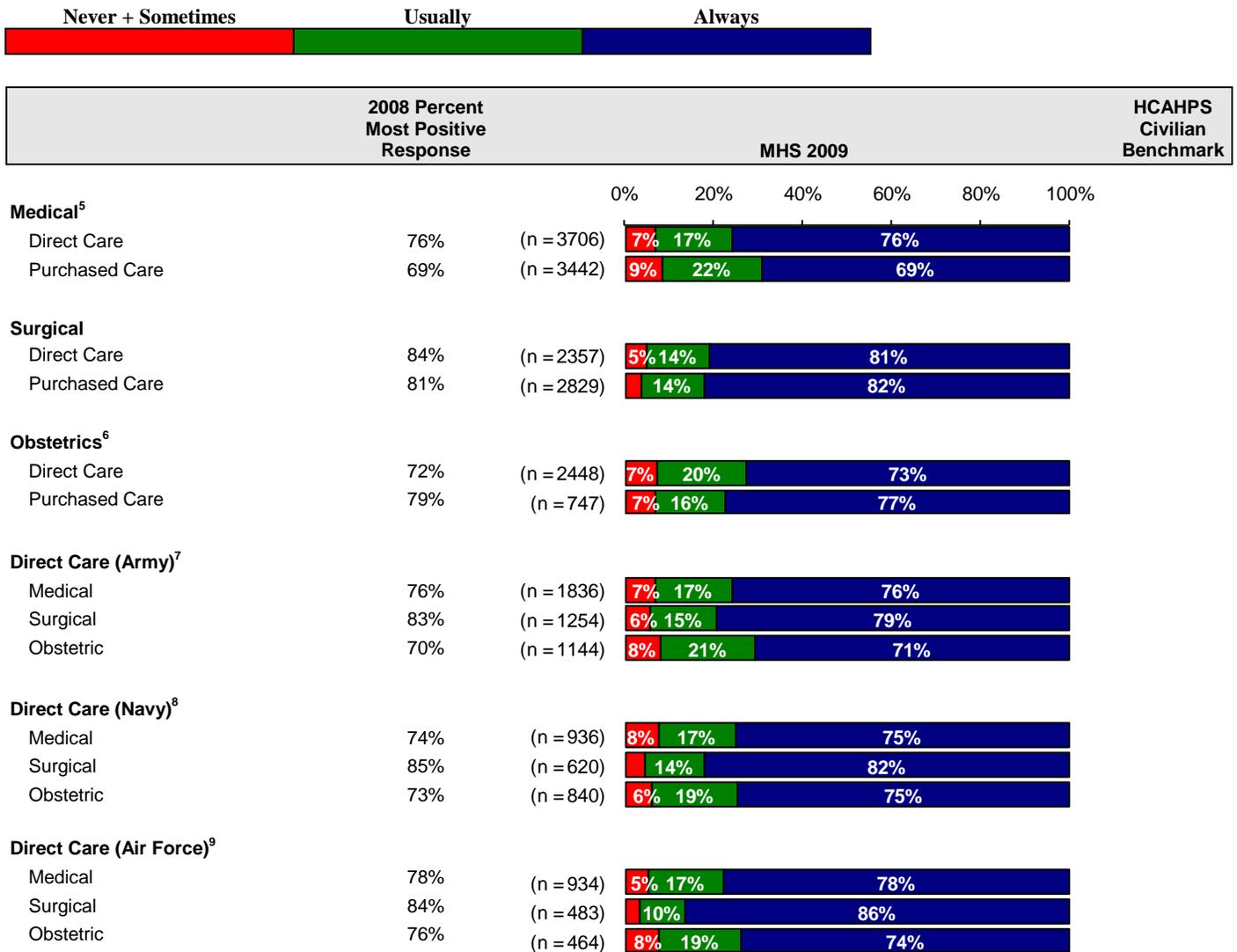
1. Among Direct Care beneficiaries, those treated in Air Force facilities were significantly more likely than those treated in Army facilities to report most positive results for the Doctor Communication composite ($p < .05$).
2. Among Purchased Care beneficiaries, those treated in the South region were significantly more likely than those treated in the West region to report most positive results for the Doctor Communication composite ($p < .05$).
3. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report most positive results for the Doctor Communication composite ($p < .05$).
4. Among Purchased Care, those aged 45–64 were significantly more likely than those aged 65+ to report most positive results for the Doctor Communication composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Communication with Doctors (continued)

This composite combines responses from three questions regarding how often doctors communicated well with patients.



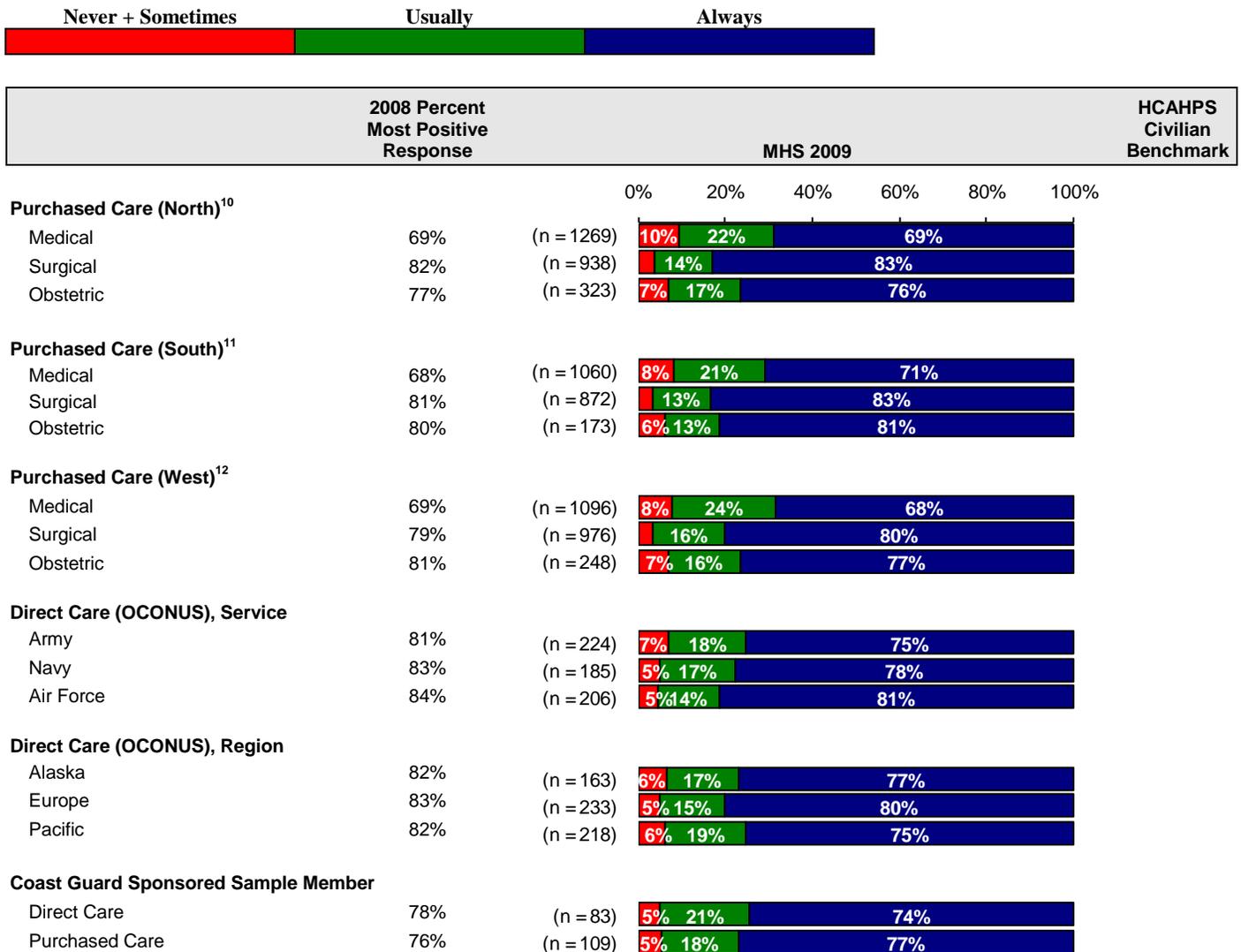
- Among those receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive results for the Doctor Communication composite ($p < .05$).
- Among those receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report most positive results for the Doctor Communication composite ($p < .05$).
- Among Direct Care beneficiaries receiving care in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$).
- Among Direct Care beneficiaries receiving care in Navy MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$).
- Among Direct Care beneficiaries receiving care in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Communication with Doctors (continued)

This composite combines responses from three questions regarding how often doctors communicated well with patients.



10. Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$). Furthermore, among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$).

11. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$).

12. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Doctor Communication composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors

How often did doctors treat you with courtesy and respect?



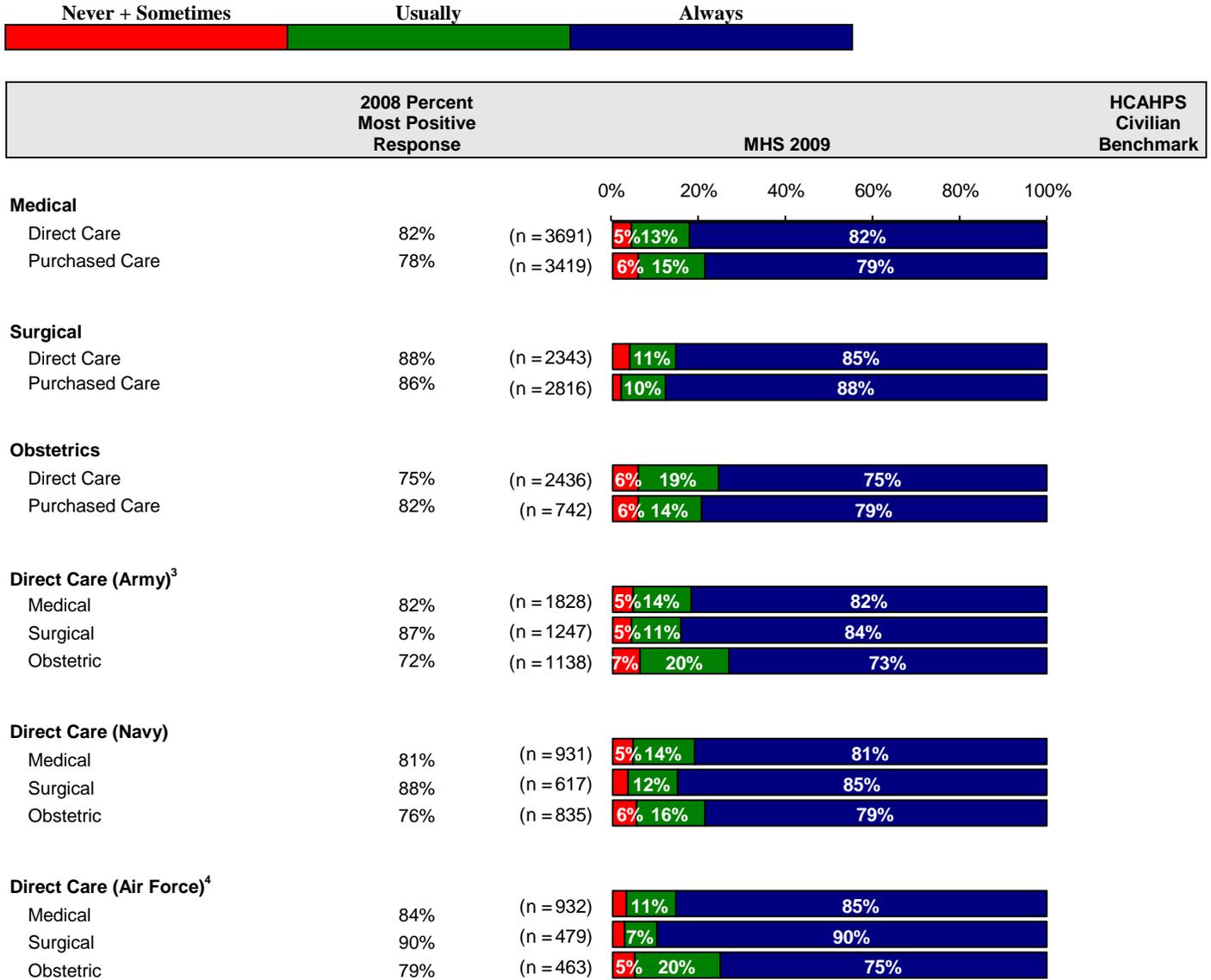
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009					HCAHPS Civilian Benchmark	
2009	81%							85%	
2008	81%								
2007	79%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	81%	(n = 15447)	5%	14%			81%	↓	
Direct Care	81%	(n = 8470)	5%	15%			80%	↓	
Purchased Care	82%	(n = 6977)	5%	13%			82%	↓	
CONUS	81%	(n = 14771)	5%	14%			81%	↓	
OCONUS	85%	(n = 676)	5%	15%			80%	↓	
Direct Care, Military Service									
Army	80%	(n = 4213)	5%	15%			79%	↓	
Navy	81%	(n = 2383)	5%	14%			81%	↓	
Air Force	83%	(n = 1874)		14%			82%		
Purchased Care, TRICARE Regions									
North	81%	(n = 2521)	5%	14%			81%	↓	
South	83%	(n = 2093)	5%	12%			84%		
West	81%	(n = 2302)		15%			81%	↓	
Direct Care, Age¹									
18–44	78%	(n = 3592)	6%	17%			76%	↓	
45–64	87%	(n = 2532)		10%			88%	↑	
65+	91%	(n = 2346)		8%			91%	↑	
Purchased Care, Age²									
18–44	81%	(n = 1134)	7%	13%			79%	↓	
45–64	79%	(n = 1627)		14%			83%	↓	
65+	84%	(n = 4216)		14%			83%	↓	

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors "always" treated them with courtesy and respect ($p < .05$). Furthermore, among Direct Care beneficiaries, those aged 65+ were significantly more likely than those in other age groups to report that doctors "always" treated them with courtesy and respect ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors "always" treated them with courtesy and respect ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors treat you with courtesy and respect?



- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that doctors "always" treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that doctors "always" treated them with courtesy and respect ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors treat you with courtesy and respect?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁵				
Medical	77%	(n = 1264)	7% 16% 77%	
Surgical	89%	(n = 935)	9% 89%	
Obstetric	80%	(n = 322)	6% 16% 78%	
Purchased Care (South)⁶				
Medical	78%	(n = 1052)	6% 13% 81%	
Surgical	87%	(n = 869)	10% 88%	
Obstetric	85%	(n = 172)	6% 11% 83%	
Purchased Care (West)⁷				
Medical	78%	(n = 1087)	5% 17% 78%	
Surgical	84%	(n = 970)	12% 86%	
Obstetric	83%	(n = 245)	6% 15% 79%	
Direct Care (OCONUS), Service				
Army	83%	(n = 224)	7% 15% 78%	
Navy	86%	(n = 185)	15% 80%	
Air Force	89%	(n = 206)	14% 83%	
Direct Care (OCONUS), Region				
Alaska	86%	(n = 163)	5% 15% 80%	
Europe	86%	(n = 233)	5% 13% 83%	
Pacific	85%	(n = 218)	5% 17% 78%	↓
Coast Guard Sponsored Sample Member				
Direct Care	84%	(n = 82)	18% 78%	
Purchased Care	86%	(n = 107)	15% 83%	

- Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to report that doctors "always" treated them with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving Medical services to report that doctors "always" treated them with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Surgical services were significantly more likely than those receiving other services to report that doctors "always" treated them with courtesy and respect ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Communication with Doctors

How often did doctors listen carefully to you?



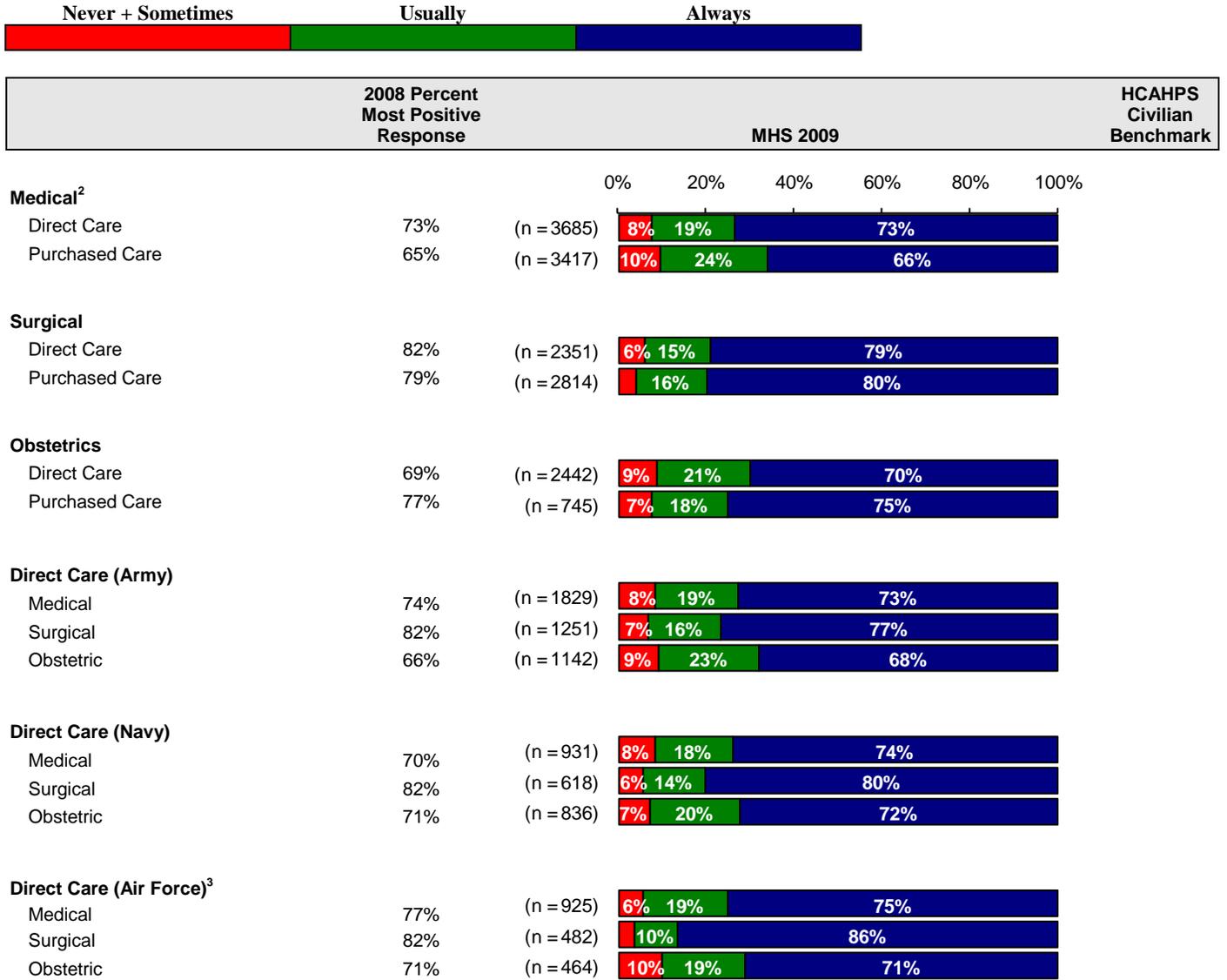
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009			HCAHPS Civilian Benchmark			
2009	73%					76%			
2008	73%								
2007	71%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	73%	(n = 15454)	8%	19%	73%				↓
Direct Care	74%	(n = 8478)	8%	19%	73%				↓
Purchased Care	73%	(n = 6976)	7%	20%	73%				↓
CONUS	73%	(n = 14778)	8%	19%	73%				↓
OCONUS	79%	(n = 676)	6%	18%	76%				
Direct Care, Military Service									
Army	73%	(n = 4222)	8%	20%	72%				↓
Navy	73%	(n = 2385)	7%	18%	75%				
Air Force	76%	(n = 1871)	7%	17%	76%				
Purchased Care, TRICARE Regions									
North	72%	(n = 2517)	8%	20%	72%				↓
South	72%	(n = 2090)	7%	18%	75%				
West	74%	(n = 2306)	7%	22%	71%				↓
Direct Care, Age¹									
18–44	70%	(n = 3600)	10%	20%	70%				↓
45–64	81%	(n = 2535)	1%	15%	80%				↑
65+	83%	(n = 2343)	1%	16%	81%				↑
Purchased Care, Age									
18–44	75%	(n = 1141)	9%	17%	74%				
45–64	69%	(n = 1625)	6%	20%	74%				
65+	72%	(n = 4210)	6%	23%	71%				↓

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors "always" listened carefully to them ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors listen carefully to you?



- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors "always" listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that doctors "always" listened carefully to them ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors listen carefully to you?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁴				
Medical	66%	(n = 1258)	11% 24% 66%	
Surgical	80%	(n = 936)	16% 80%	
Obstetric	74%	(n = 323)	9% 17% 74%	
Purchased Care (South)⁵				
Medical	64%	(n = 1053)	9% 23% 68%	
Surgical	80%	(n = 864)	15% 82%	
Obstetric	76%	(n = 173)	7% 14% 80%	
Purchased Care (West)⁶				
Medical	67%	(n = 1089)	9% 26% 65%	
Surgical	79%	(n = 971)	18% 78%	
Obstetric	82%	(n = 246)	7% 20% 73%	
Direct Care (OCONUS), Service				
Army	80%	(n = 224)	6% 22% 72%	
Navy	79%	(n = 184)	6% 16% 78%	
Air Force	81%	(n = 205)	7% 11% 82%	
Direct Care (OCONUS), Region				
Alaska	81%	(n = 162)	8% 17% 75%	
Europe	80%	(n = 232)	5% 16% 79%	
Pacific	79%	(n = 218)	7% 18% 75%	
Coast Guard Sponsored Sample Member				
Direct Care	80%	(n = 83)	23% 74%	
Purchased Care	72%	(n = 109)	6% 22% 72%	

- Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to report that doctors "always" listened carefully to them ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to report that doctors "always" listened carefully to them ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that doctors "always" listened carefully to them ($p < .05$).
- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that doctors "always" listened carefully to them ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors

How often did doctors explain things in a way you could understand?



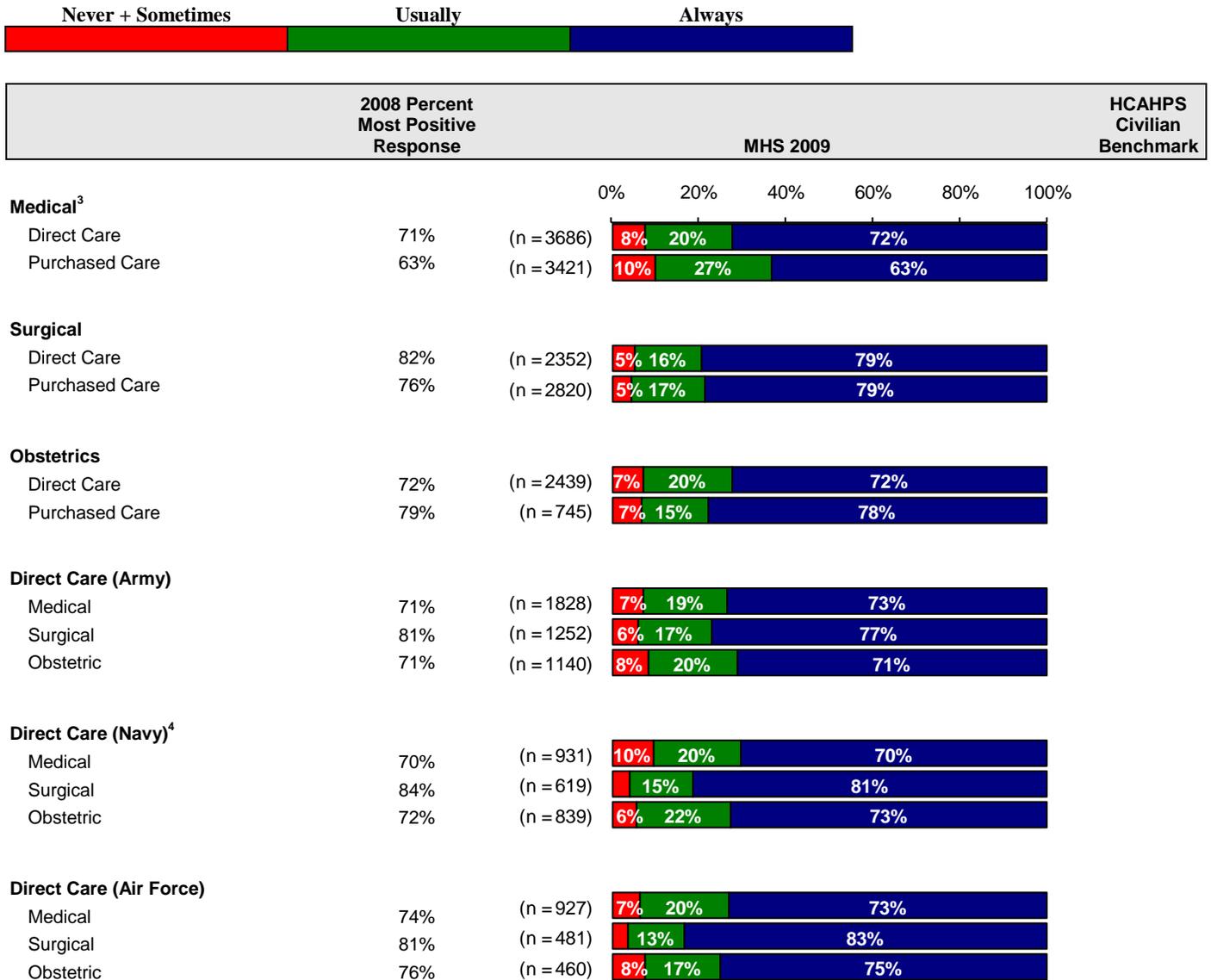
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009					HCAHPS Civilian Benchmark
2009	73%							73%
2008	73%							
2007	71%							
			0%	20%	40%	60%	80%	100%
Military Health Systems (Overall)	73%	(n = 15463)	7%	20%	73%			
Direct Care	74%	(n = 8477)	7%	19%	74%			↑
Purchased Care	71%	(n = 6986)	8%	21%	72%			
CONUS	72%	(n = 14788)	7%	20%	73%			
OCONUS	81%	(n = 675)	6%	18%	76%			
Direct Care, Military Service								
Army	74%	(n = 4220)	7%	19%	74%			
Navy	74%	(n = 2389)	7%	20%	74%			
Air Force	76%	(n = 1868)	6%	18%	76%			↑
Purchased Care, TRICARE Regions								
North	71%	(n = 2516)	8%	20%	71%			
South	71%	(n = 2096)	7%	20%	73%			
West	70%	(n = 2311)	7%	22%	71%			
Direct Care, Age¹								
18–44	72%	(n = 3597)	8%	20%	72%			
45–64	79%	(n = 2534)	15%		81%			↑
65+	79%	(n = 2346)	19%		77%			↑
Purchased Care, Age²								
18–44	76%	(n = 1142)	9%	16%	75%			
45–64	69%	(n = 1629)	7%	19%	74%			
65+	68%	(n = 4215)	7%	26%	67%			↓

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors "always" explained things in a way they could understand ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups to report that doctors "always" explained things in a way they could understand ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that doctors "always" explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors explain things in a way you could understand?

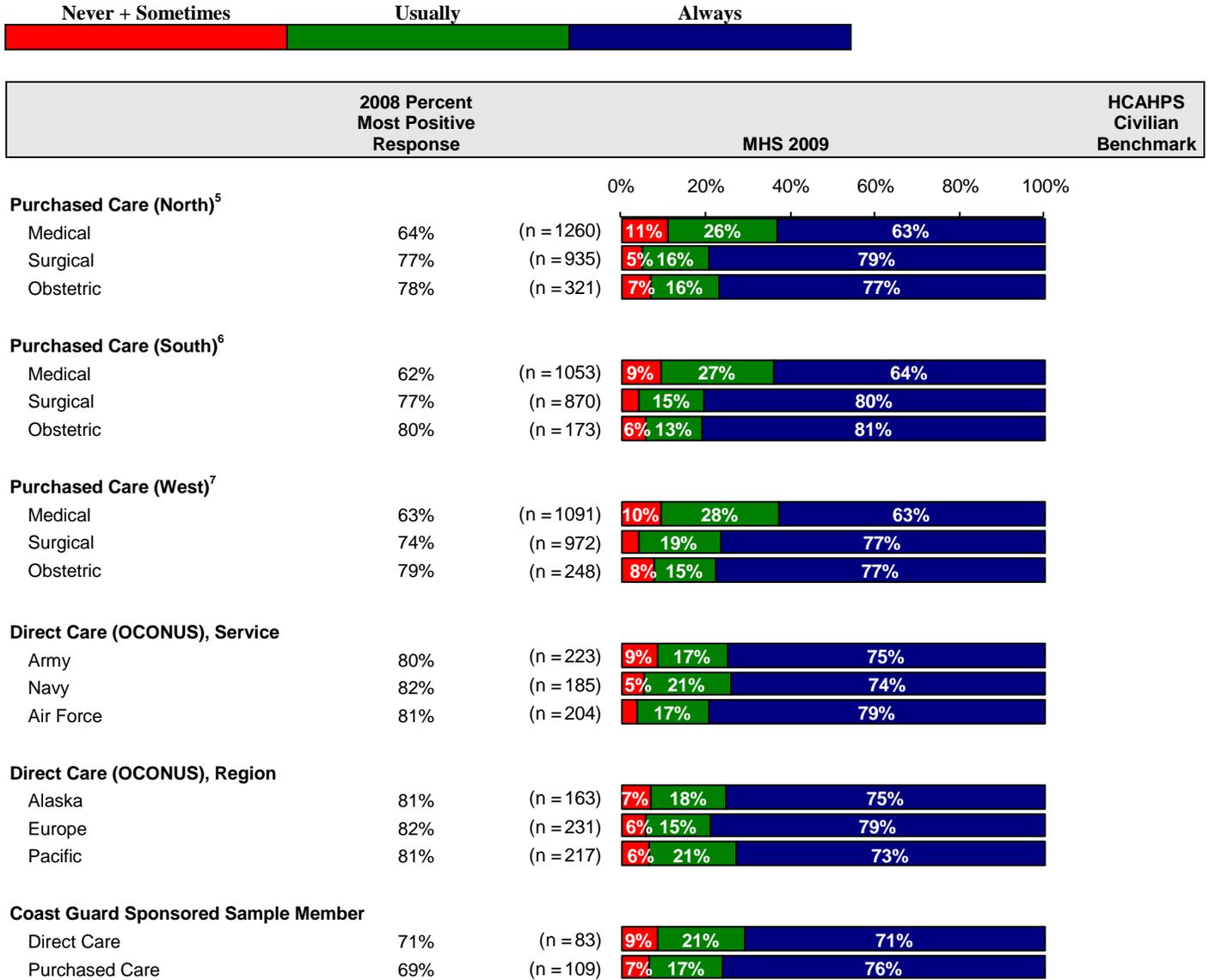


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors "always" explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that doctors "always" explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors explain things in a way you could understand?

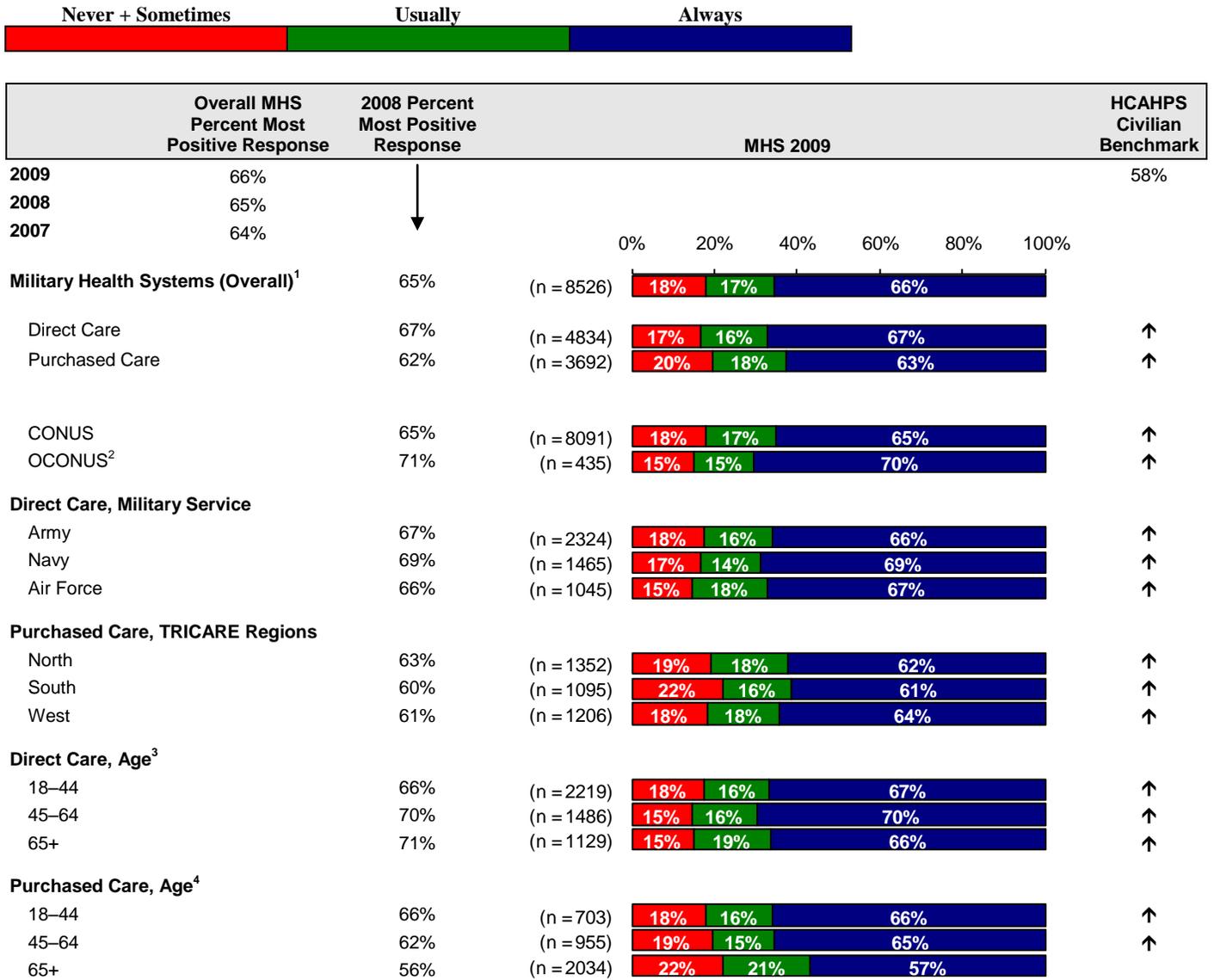


- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that doctors "always" explained things in a way they could understand ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that doctors "always" explained things in a way they could understand ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that doctors "always" explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications

This composite combines responses from two questions regarding how often hospital staff communicated well with patients about medications.



- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report most positive results for the Communications about Medications composite ($p < .05$).
- Overall, OCONUS beneficiaries were significantly more likely than CONUS beneficiaries to report most positive results for the Communications about Medications composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report most positive results for the Communication about Medications composite ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report most positive results for the Communication about Medications composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications (continued)

This composite combines responses from two questions regarding how often hospital staff communicated well with patients about medications.



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Medical⁵				
Direct Care	67%	(n = 1972)	17% 17% 66%	
Purchased Care	55%	(n = 1821)	24% 20% 56%	
Surgical				
Direct Care	71%	(n = 1456)	16% 16% 68%	
Purchased Care	65%	(n = 1439)	18% 16% 66%	
Obstetrics				
Direct Care	65%	(n = 1406)	17% 15% 68%	
Purchased Care	69%	(n = 432)	15% 16% 69%	
Direct Care (Army)				
Medical	67%	(n = 952)	16% 18% 66%	
Surgical	70%	(n = 755)	19% 16% 65%	
Obstetric	64%	(n = 617)	18% 14% 67%	
Direct Care (Navy)				
Medical	66%	(n = 536)	20% 14% 66%	
Surgical	74%	(n = 426)	13% 17% 70%	
Obstetric	69%	(n = 503)	17% 14% 70%	
Direct Care (Air Force)⁶				
Medical	66%	(n = 484)	15% 21% 64%	
Surgical	70%	(n = 275)	11% 13% 76%	
Obstetric	64%	(n = 286)	16% 18% 65%	

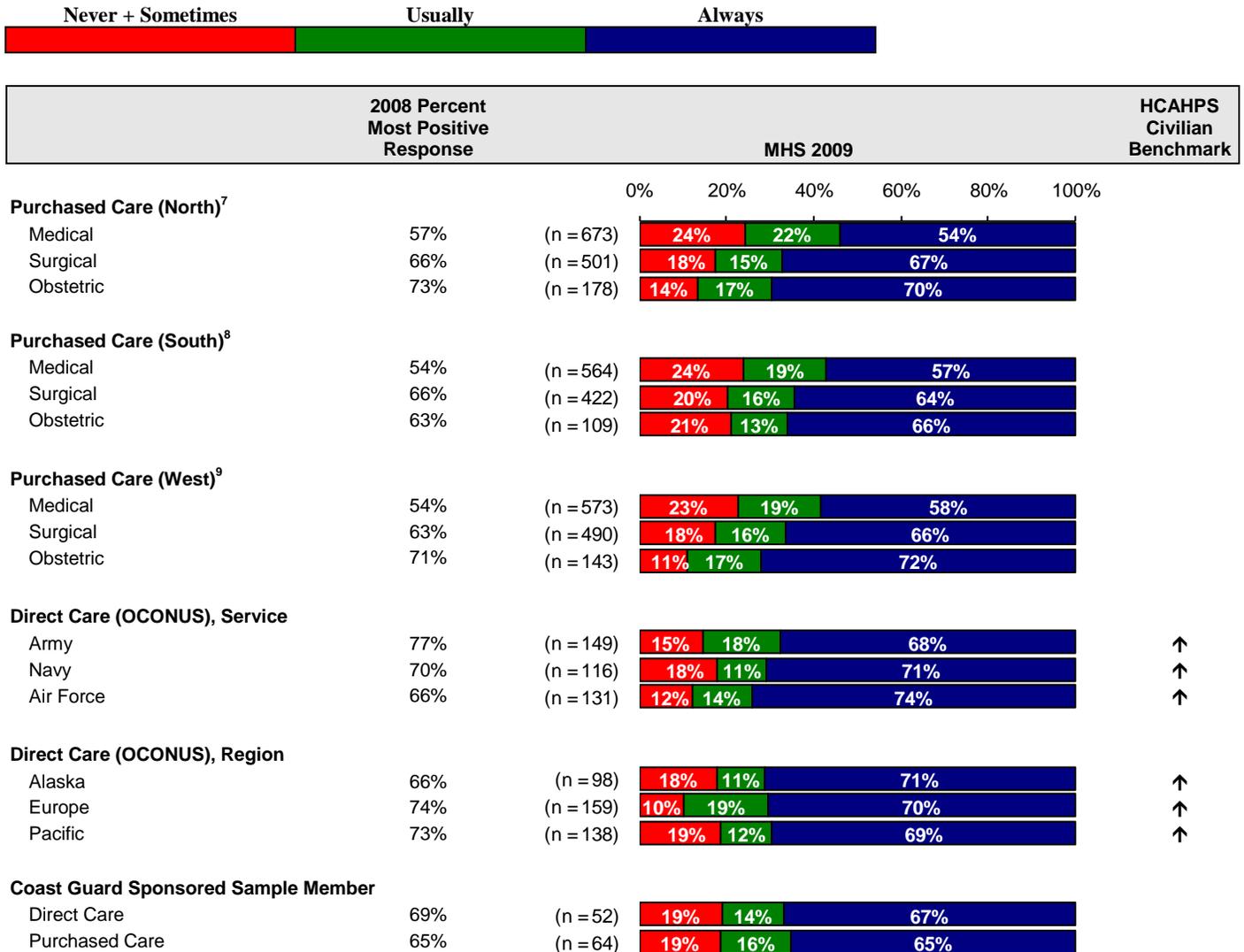
5. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive results for the Communication about Medications composite ($p < .05$).

6. Among Direct Care beneficiaries receiving care in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Communication about Medications composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications (continued)

This composite combines responses from two questions regarding how often hospital staff communicated well with patients about medications.



- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Communication about Medications composite ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Communication about Medications composite ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Communication about Medications composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications

Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009				40	
2009	78%						72%	
2008	77%							
2007	76%							
			0%	20%	40%	60%	80%	100%
Military Health Systems (Overall)¹	77%	(n = 8466)	9%	14%	78%			↑
Direct Care	79%	(n = 4804)	8%	13%	79%			↑
Purchased Care	74%	(n = 3662)	10%	15%	75%			↑
CONUS	77%	(n = 8034)	9%	14%	77%			↑
OCONUS ²	82%	(n = 432)	5%	10%	85%			↑
Direct Care, Military Service								
Army	78%	(n = 2308)	9%	13%	78%			↑
Navy	80%	(n = 1458)	8%	12%	79%			↑
Air Force	79%	(n = 1038)	5%	14%	81%			↑
Purchased Care, TRICARE Regions								
North	77%	(n = 1341)	10%	14%	76%			↑
South	73%	(n = 1085)	11%	13%	75%			↑
West	72%	(n = 1197)	9%	16%	75%			↑
Direct Care, Age								
18–44	78%	(n = 2207)	8%	13%	78%			↑
45–64	82%	(n = 1478)	6%	12%	82%			↑
65+	80%	(n = 1119)	8%	14%	78%			↑
Purchased Care, Age³								
18–44	79%	(n = 694)	7%	13%	80%			↑
45–64	75%	(n = 950)	10%	14%	77%			↑
65+	68%	(n = 2018)	13%	17%	69%			↑

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that the hospital staff always told them what the medicine was for ($p < .05$).
- Overall, OCONUS beneficiaries were significantly more likely than CONUS beneficiaries to report that the hospital staff always told them what the medicine was for ($p < .05$).
- Among Purchased Care beneficiaries, those 65+ were significantly less likely than those in other age groups to report that the hospital staff always told them what the medicine was for ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications (continued)

Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Medical⁴				
Direct Care	79%	(n = 1962)	8% 15% 77%	
Purchased Care	67%	(n = 1807)	13% 18% 69%	
Surgical				
Direct Care	82%	(n = 1442)	8% 12% 80%	
Purchased Care	78%	(n = 1427)	9% 13% 78%	
Obstetrics				
Direct Care	77%	(n = 1400)	8% 12% 81%	
Purchased Care	81%	(n = 428)	5% 11% 84%	
Direct Care (Army)				
Medical	79%	(n = 947)	7% 16% 77%	
Surgical	80%	(n = 745)	10% 13% 76%	
Obstetric	75%	(n = 616)	9% 11% 80%	
Direct Care (Navy)				
Medical	78%	(n = 534)	11% 13% 76%	
Surgical	84%	(n = 423)	5% 13% 81%	
Obstetric	80%	(n = 501)	7% 12% 81%	
Direct Care (Air Force)				
Medical	78%	(n = 481)	7% 18% 75%	
Surgical	81%	(n = 274)	8% 89%	
Obstetric	78%	(n = 283)	5% 13% 82%	

4. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that the hospital staff always told them what the medicine was for ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications (continued)

Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?



	2008 Percent Most Positive Response		MHS 2009					HCAHPS Civilian Benchmark	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁵									
Medical	71%	(n = 669)	15%	17%		68%			
Surgical	79%	(n = 495)	8%	13%		78%			
Obstetric	86%	(n = 177)	12%			84%			
Purchased Care (South)									
Medical	68%	(n = 559)	14%	17%		69%			
Surgical	79%	(n = 418)	11%	13%		76%			
Obstetric	75%	(n = 108)	7%	8%		86%			
Purchased Care (West)⁶									
Medical	62%	(n = 568)	12%	19%		69%			
Surgical	76%	(n = 488)	8%	13%		78%			
Obstetric	83%	(n = 141)	14%			82%			
Direct Care (OCONUS), Service									
Army	87%	(n = 148)	5%	11%		84%			↑
Navy	81%	(n = 114)	6%	10%		85%			↑
Air Force	79%	(n = 131)	7%			89%			↑
Direct Care (OCONUS), Region									
Alaska	77%	(n = 98)	7%	6%		87%			↑
Europe	85%	(n = 158)	10%			87%			↑
Pacific	84%	(n = 136)	6%	12%		82%			↑
Coast Guard Sponsored Sample Member									
Direct Care	82%	(n = 52)	11%	11%		78%			↑
Purchased Care	76%	(n = 64)	7%	18%		76%			↑

- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving other services to report that the hospital staff always told them what the medicine was for ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving other services to report that the hospital staff always told them what the medicine was for ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications

Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009					HCAHPS Civilian Benchmark	
2009	54%							25%	
2008	54%	↓							
2007	52%		0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	54%	(n = 8427)	27%	19%	54%			↑	
Direct Care	56%	(n = 4782)	26%	19%	55%			↑	
Purchased Care	49%	(n = 3645)	30%	20%	50%			↑	
CONUS	53%	(n = 7994)	27%	19%	53%			↑	
OCONUS	60%	(n = 433)	25%	20%	56%			↑	
Direct Care, Military Service									
Army	55%	(n = 2302)	26%	19%	54%			↑	
Navy	58%	(n = 1443)	26%	16%	58%			↑	
Air Force	53%	(n = 1037)	24%	22%	54%			↑	
Purchased Care, TRICARE Regions									
North	50%	(n = 1340)	29%	23%	49%			↑	
South	46%	(n = 1080)	33%	20%	47%			↑	
West	51%	(n = 1186)	28%	19%	53%			↑	
Direct Care, Age									
18–44	55%	(n = 2195)	27%	18%	55%			↑	
45–64	58%	(n = 1470)	23%	19%	58%			↑	
65+	61%	(n = 1117)	22%	23%	55%			↑	
Purchased Care, Age²									
18–44	53%	(n = 698)	29%	19%	52%			↑	
45–64	49%	(n = 946)	29%	17%	54%			↑	
65+	45%	(n = 2001)	31%	24%	44%			↑	

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that the hospital staff described possible side effects in a way they could understand ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that the hospital staff described possible side effects in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications (continued)

Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Medical³				
Direct Care	55%	(n = 1949)	26% 20% 55%	
Purchased Care	43%	(n = 1795)	34% 22% 44%	
Surgical				
Direct Care	61%	(n = 1444)	24% 19% 57%	
Purchased Care	52%	(n = 1422)	27% 18% 55%	
Obstetrics				
Direct Care	53%	(n = 1389)	27% 18% 55%	
Purchased Care	57%	(n = 428)	25% 20% 55%	
Direct Care (Army)				
Medical	55%	(n = 940)	25% 21% 54%	
Surgical	59%	(n = 751)	27% 19% 54%	
Obstetric	52%	(n = 611)	28% 18% 55%	
Direct Care (Navy)				
Medical	54%	(n = 530)	29% 14% 57%	
Surgical	64%	(n = 421)	21% 20% 59%	
Obstetric	57%	(n = 492)	26% 15% 59%	
Direct Care (Air Force)				
Medical	54%	(n = 479)	23% 23% 53%	
Surgical	59%	(n = 272)	18% 19% 63%	
Obstetric	49%	(n = 286)	28% 24% 49%	

3. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that the hospital staff described possible side effects in a way they could understand (p<.05).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Communication about Medications (continued)

Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?



	2008 Percent Most Positive Response		MHS 2009					HCAHPS Civilian Benchmark	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁴									
Medical	44%	(n = 670)							
Surgical	53%	(n = 492)							
Obstetric	59%	(n = 178)							
Purchased Care (South)									
Medical	39%	(n = 553)							
Surgical	52%	(n = 419)							
Obstetric	51%	(n = 108)							
Purchased Care (West)									
Medical	46%	(n = 561)							
Surgical	50%	(n = 485)							
Obstetric	60%	(n = 140)							
Direct Care (OCONUS), Service									
Army	66%	(n = 147)						↑	
Navy	59%	(n = 116)						↑	
Air Force	53%	(n = 131)						↑	
Direct Care (OCONUS), Region									
Alaska	55%	(n = 98)						↑	
Europe	63%	(n = 157)						↑	
Pacific	61%	(n = 138)						↑	
Coast Guard Sponsored Sample Member									
Direct Care	56%	(n = 52)						↑	
Purchased Care	55%	(n = 63)						↑	

4. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving other services to report that the hospital staff described possible side effects in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff

This composite combines responses from two questions regarding how responsive hospital staff were with patients.



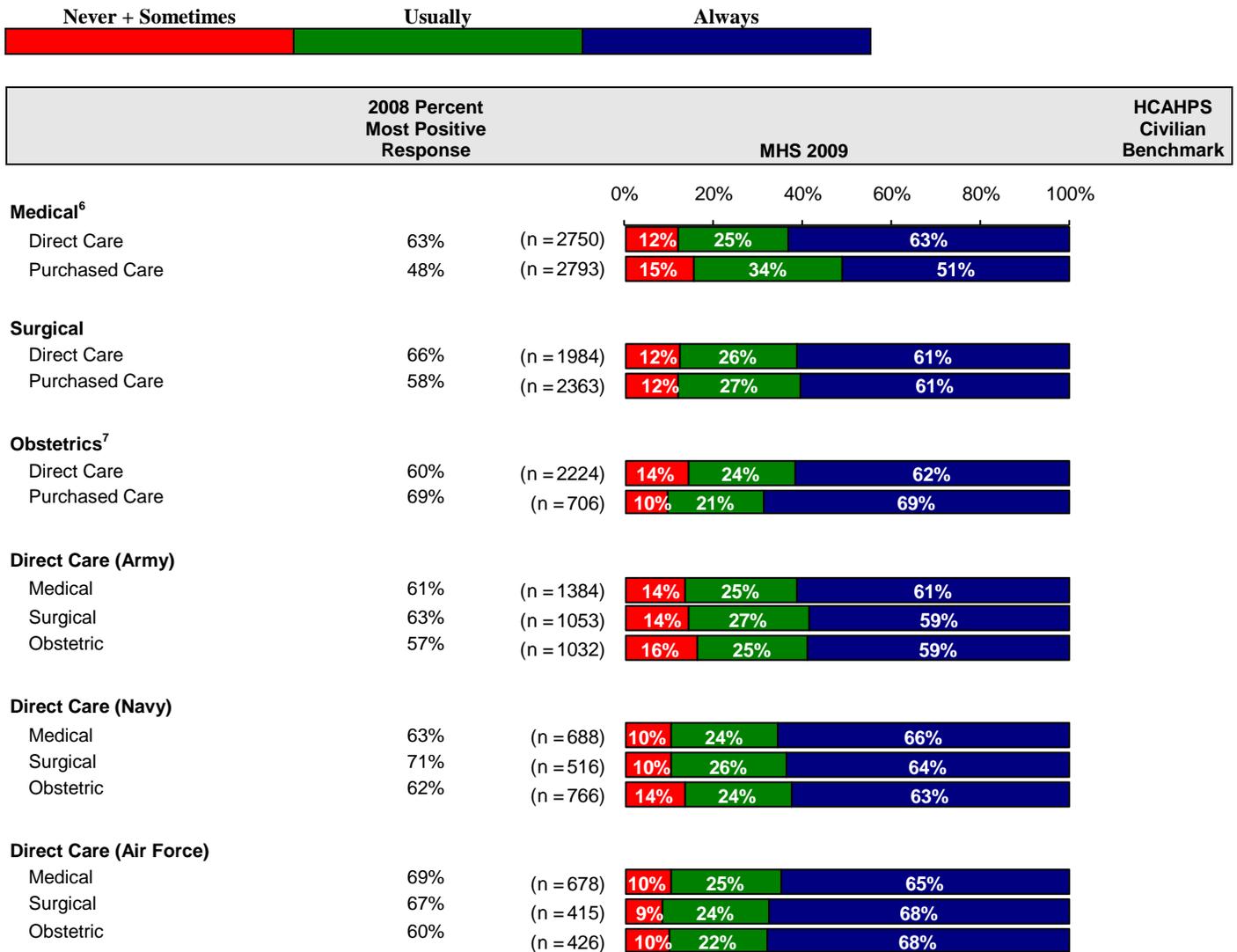
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	61%			62%
2008	60%			
2007	58%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	60%	(n = 12820)	13% 26% 61%	
Direct Care	62%	(n = 6958)	13% 25% 62%	
Purchased Care	56%	(n = 5862)	13% 28% 59%	↓
CONUS	59%	(n = 12247)	13% 26% 60%	↓
OCONUS ²	68%	(n = 573)	10% 20% 70%	↑
Direct Care, Military Service³				
Army	60%	(n = 3469)	15% 26% 60%	↓
Navy	65%	(n = 1970)	12% 24% 64%	↑
Air Force	64%	(n = 1519)	10% 23% 67%	
Purchased Care, TRICARE Regions				
North	55%	(n = 2117)	14% 27% 60%	
South	56%	(n = 1745)	13% 30% 57%	↓
West	57%	(n = 1943)	12% 28% 60%	
Direct Care, Age⁴				
18–44	60%	(n = 3182)	15% 25% 61%	
45–64	68%	(n = 1957)	9% 22% 68%	↑
65+	68%	(n = 1819)	9% 27% 64%	↑
Purchased Care, Age⁵				
18–44	61%	(n = 1048)	13% 23% 64%	↓
45–64	55%	(n = 1354)	14% 28% 59%	↓
65+	53%	(n = 3460)	12% 33% 55%	↓

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- Overall, OCONUS beneficiaries were significantly more likely than CONUS beneficiaries to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTF were significantly less likely than those in Navy or Air Force MTFs to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$). Furthermore, among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$). Furthermore, among Direct Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

This composite combines responses from two questions regarding how responsive hospital staff were with patients.



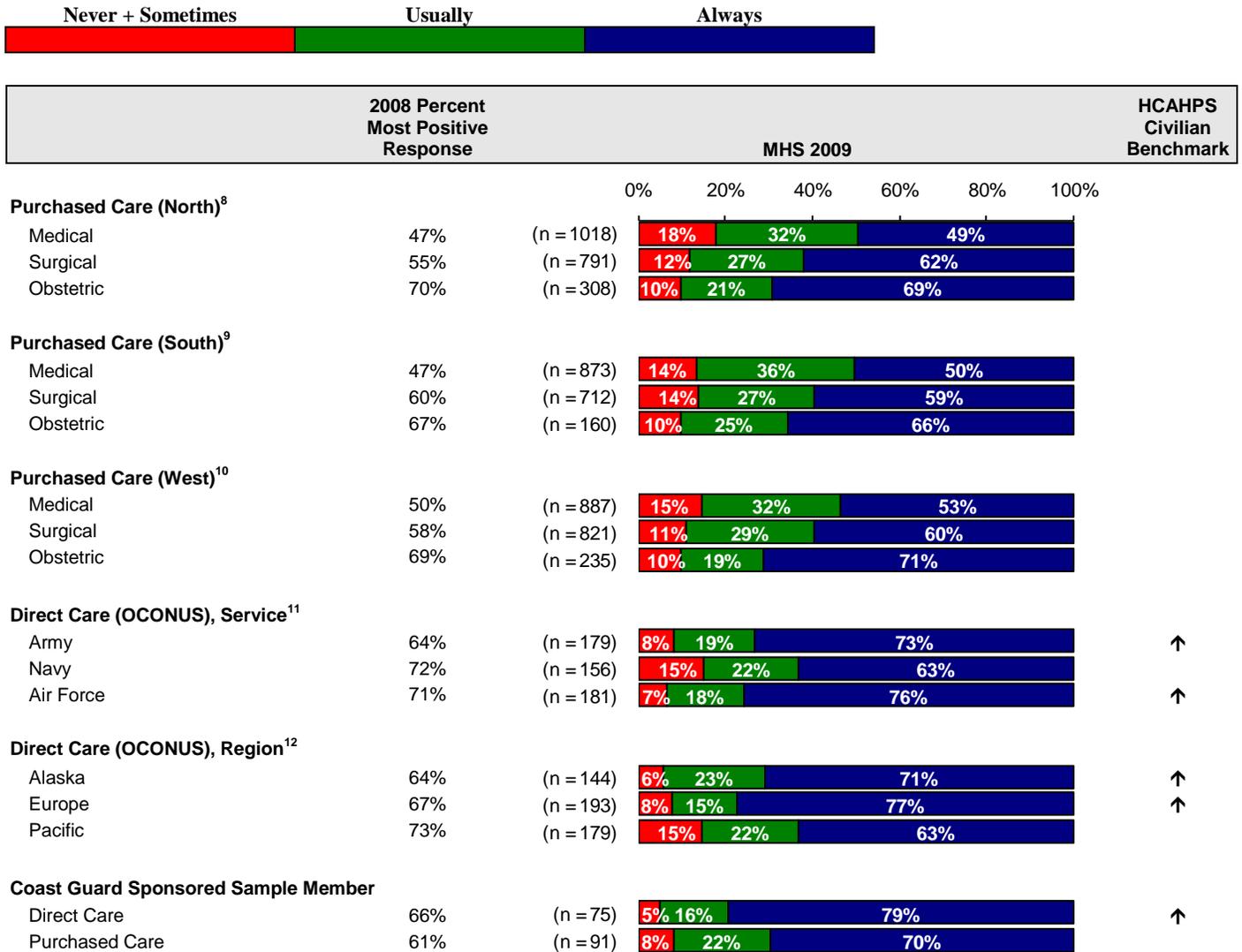
6. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those Purchased Care to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).

7. Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those Purchased Care to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

This composite combines responses from two questions regarding how responsive hospital staff were with patients.



- 8. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- 9. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- 10. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- 11. Among Direct Care OCONUS beneficiaries, those in Navy MTFs were significantly less likely than those in Air Force MTFs to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).
- 12. Among Direct Care OCONUS beneficiaries, those in European MTFs were significantly more likely than those in Pacific MTFs to report most positive results for the Responsiveness of Hospital Staff composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff

After you pressed the call button, how often did you get help as soon as you wanted it?



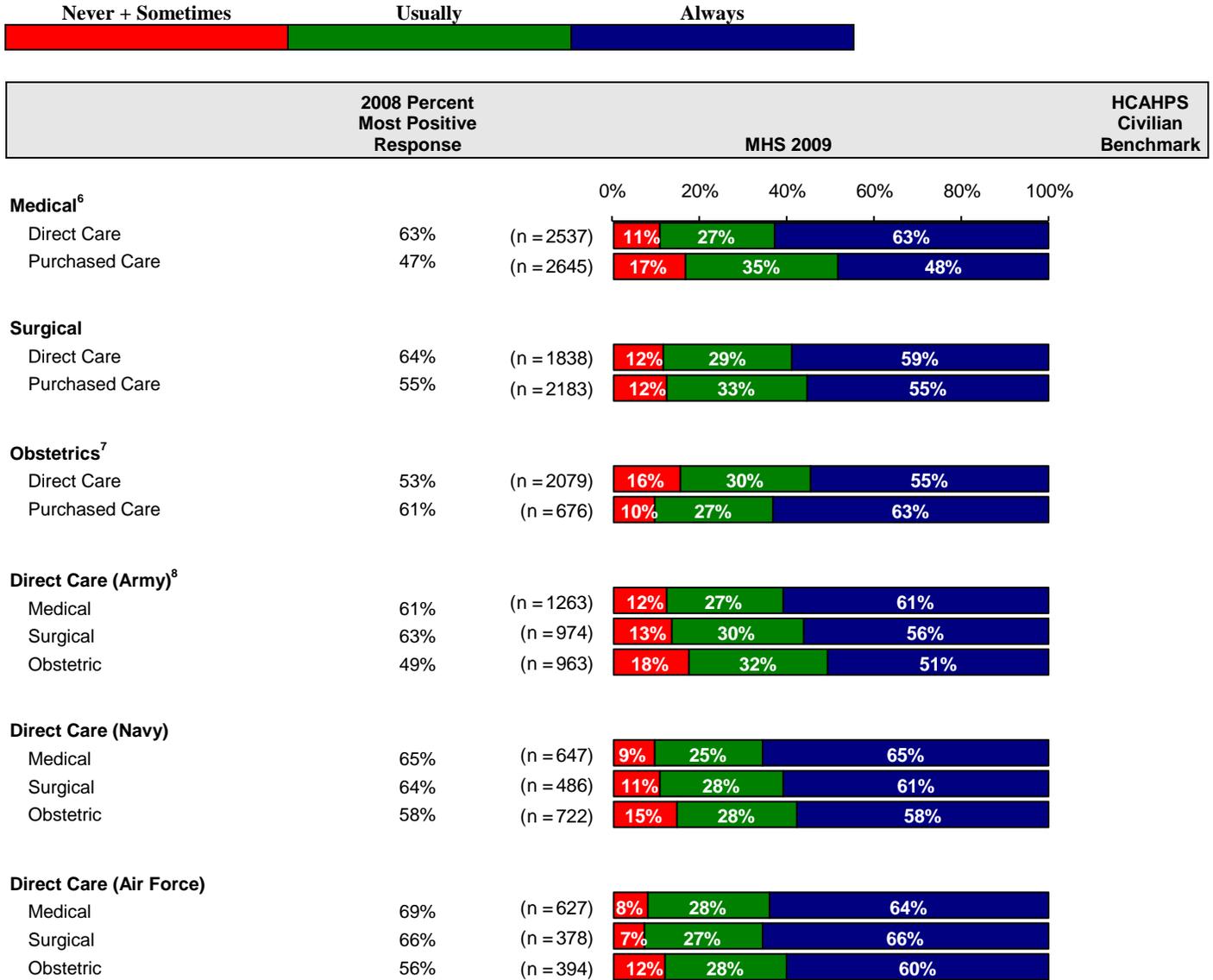
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	57%			50%
2008	57%			
2007	54%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	57%	(n = 11958)	13% 30% 57%	↑
Direct Care	59%	(n = 6454)	13% 29% 58%	↑
Purchased Care	53%	(n = 5504)	13% 32% 54%	↑
CONUS	56%	(n = 11435)	13% 31% 56%	↑
OCONUS ²	67%	(n = 523)	9% 20% 71%	↑
Direct Care, Military Service³				
Army	57%	(n = 3200)	15% 30% 56%	↑
Navy	61%	(n = 1855)	12% 27% 61%	↑
Air Force	62%	(n = 1399)	9% 28% 63%	↑
Purchased Care, TRICARE Regions				
North	52%	(n = 1993)	14% 31% 55%	↑
South	53%	(n = 1640)	12% 34% 54%	↑
West	53%	(n = 1816)	14% 32% 54%	↑
Direct Care, Age⁴				
18–44	56%	(n = 2992)	15% 30% 56%	↑
45–64	68%	(n = 1822)	8% 24% 67%	↑
65+	67%	(n = 1640)	8% 28% 64%	↑
Purchased Care, Age⁵				
18–44	56%	(n = 1004)	14% 28% 58%	↑
45–64	54%	(n = 1263)	13% 32% 55%	↑
65+	49%	(n = 3237)	13% 37% 50%	

- Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that they "always" received help as soon as they wanted it ($p < .05$).
- Overall, OCONUS beneficiaries were significantly more likely than CONUS beneficiaries to report that they "always" received help as soon as they wanted it ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Navy or Air Force MTFs to report that they "always" received help as soon as they wanted it ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that they "always" received help as soon as they wanted it ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that they "always" received help as soon as they wanted it ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

After you pressed the call button, how often did you get help as soon as you wanted it?

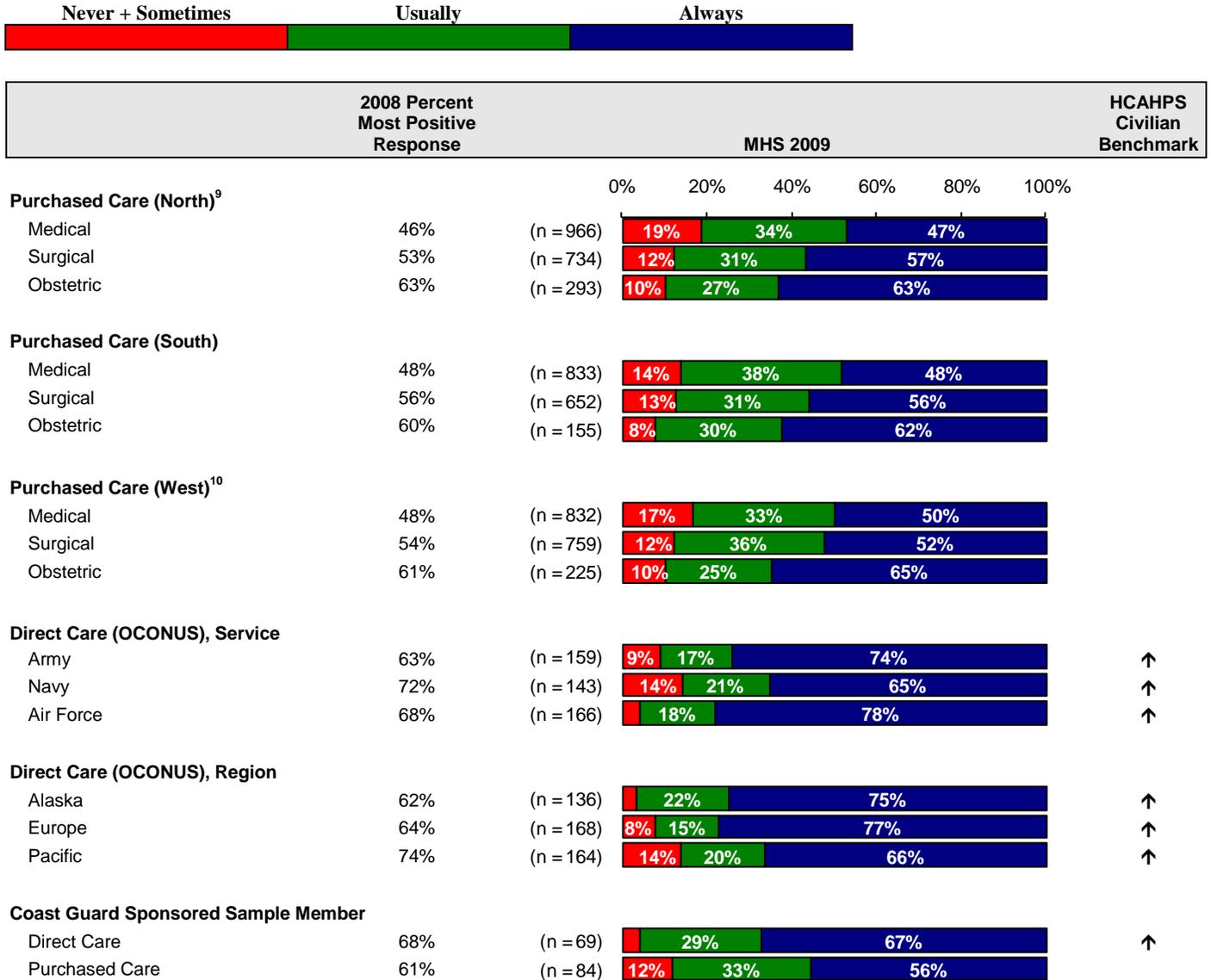


6. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that they "always" received help as soon as they wanted it (p<.05).
7. Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that they "always" received help as soon as they wanted it (p<.05).
8. Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they "always" received help as soon as they wanted it (p<.05).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

After you pressed the call button, how often did you get help as soon as you wanted it?



9. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that they "always" received help as soon as they wanted it ($p < .05$).

10. Among Purchased Care beneficiaries in the West region, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they "always" received help as soon as they wanted it ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff

How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009				HCAHPS Civilian Benchmark		
2009	65%						33%		
2008	63%	↓							
2007	62%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	63%	(n = 6806)	13%	22%	65%			↑	
Direct Care	65%	(n = 3667)	13%	21%	66%			↑	
Purchased Care	60%	(n = 3139)	12%	24%	64%			↑	
CONUS	63%	(n = 6502)	13%	22%	65%			↑	
OCONUS	70%	(n = 304)	11%	20%	69%			↑	
Direct Care, Military Service									
Army	63%	(n = 1794)	15%	21%	64%			↑	
Navy	68%	(n = 1030)	12%	21%	67%			↑	
Air Force	66%	(n = 843)	10%	19%	71%			↑	
Purchased Care, TRICARE Regions									
North	59%	(n = 1117)	13%	23%	64%			↑	
South	59%	(n = 890)	14%	26%	60%			↑	
West	62%	(n = 1099)	11%	23%	66%			↑	
Direct Care, Age									
18–44	64%	(n = 1695)	14%	20%	65%			↑	
45–64	67%	(n = 957)	10%	20%	70%			↑	
65+	68%	(n = 1015)	10%	25%	65%			↑	
Purchased Care, Age¹									
18–44	66%	(n = 593)	12%	18%	69%			↑	
45–64	56%	(n = 704)	14%	24%	62%			↑	
65+	56%	(n = 1842)	11%	30%	59%			↑	

1. Among Purchased Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Medical²				
Direct Care	62%	(n = 1286)	14% 23% 63%	
Purchased Care	49%	(n = 1320)	14% 32% 54%	
Surgical				
Direct Care	67%	(n = 1151)	13% 23% 64%	
Purchased Care	61%	(n = 1407)	12% 22% 66%	
Obstetrics				
Direct Care	66%	(n = 1230)	13% 18% 69%	
Purchased Care	76%	(n = 412)	10% 16% 74%	
Direct Care (Army)				
Medical	60%	(n = 643)	15% 24% 62%	
Surgical	63%	(n = 589)	15% 24% 61%	
Obstetric	65%	(n = 562)	15% 18% 67%	
Direct Care (Navy)				
Medical	60%	(n = 324)	11% 23% 66%	
Surgical	77%	(n = 282)	10% 23% 66%	
Obstetric	67%	(n = 424)	12% 20% 68%	
Direct Care (Air Force)				
Medical	69%	(n = 319)	13% 22% 66%	
Surgical	68%	(n = 280)	10% 21% 69%	
Obstetric	64%	(n = 244)	8% 15% 76%	

2. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?



	2008 Percent Most Positive Response		MHS 2009					HCAHPS Civilian Benchmark	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)³									
Medical	48%	(n = 480)	17%	31%	52%				
Surgical	57%	(n = 460)	11%	22%	67%				
Obstetric	76%	(n = 177)	10%	15%	75%				
Purchased Care (South)⁴									
Medical	46%	(n = 390)	13%	35%	52%				
Surgical	64%	(n = 405)	15%	22%	63%				
Obstetric	73%	(n = 95)	11%	20%	69%				
Purchased Care (West)⁵									
Medical	53%	(n = 443)	12%	31%	57%				
Surgical	61%	(n = 516)	10%	23%	67%				
Obstetric	77%	(n = 140)	10%	13%	78%				
Direct Care (OCONUS), Service									
Army	66%	(n = 81)	7%	21%	72%				↑
Navy	72%	(n = 83)	16%	22%	61%				↑
Air Force	73%	(n = 107)	9%	18%	73%				↑
Direct Care (OCONUS), Region									
Alaska	65%	(n = 79)	9%	24%	67%				↑
Europe	70%	(n = 101)	8%	15%	77%				↑
Pacific	72%	(n = 91)	15%	24%	60%				↑
Coast Guard Sponsored Sample Member									
Direct Care	65%	(n = 35)	6%		91%				↑
Purchased Care	61%	(n = 46)	12%		84%				↑

- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they always received help in getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control

This composite combines responses from two questions regarding how often pain controlled.



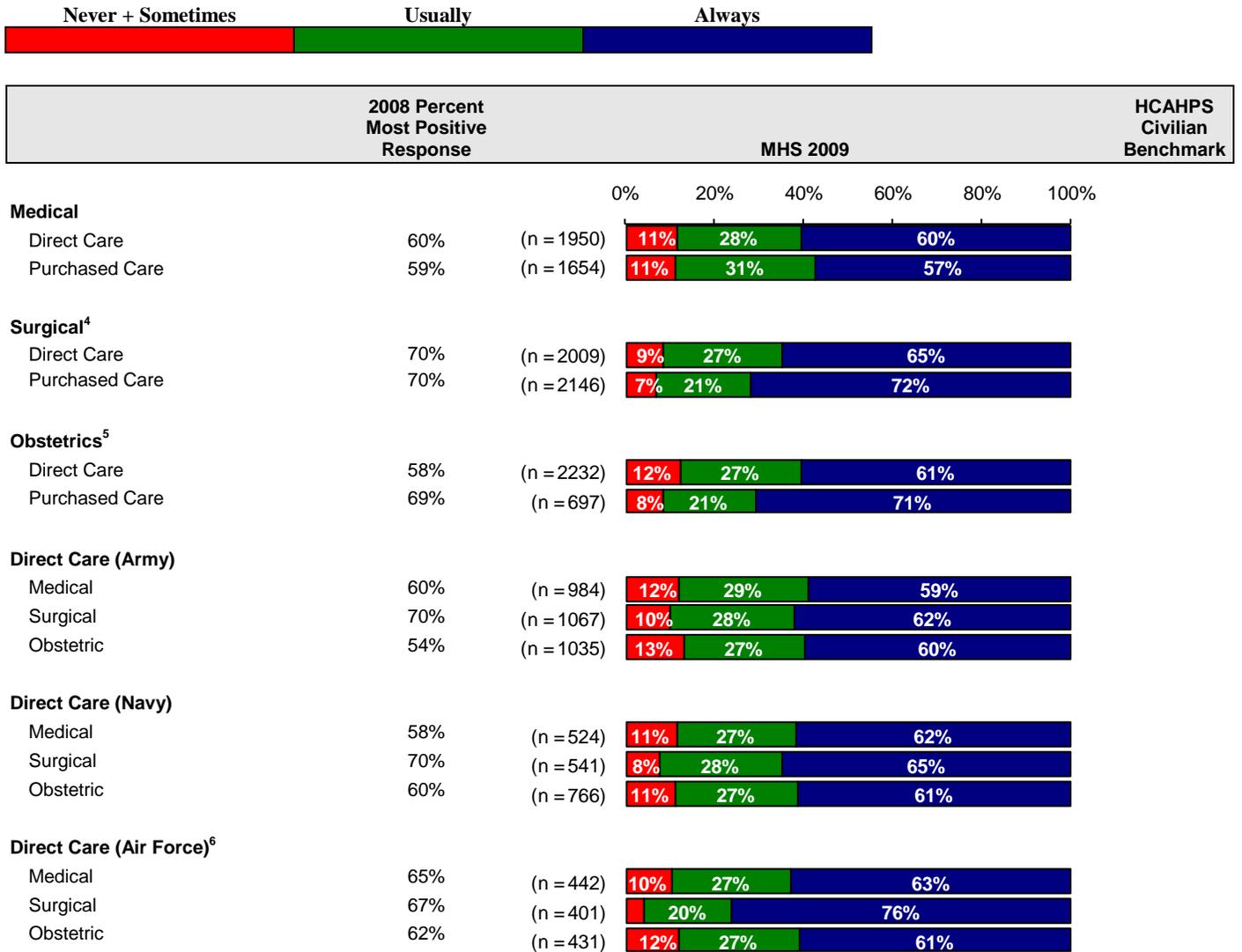
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009					HCAHPS Civilian Benchmark	
2009	63%							69%	
2008	63%								
2007	61%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	63%	(n = 10688)	10%	26%		63%			
Direct Care	62%	(n = 6191)	11%	27%		62%	↓		
Purchased Care	66%	(n = 4497)	9%	24%		67%	↓		
CONUS	63%	(n = 10145)	11%	26%		63%	↓		
OCONUS	67%	(n = 543)	7%	27%		66%			
Direct Care, Military Service²									
Army	61%	(n = 3086)	12%	28%		60%	↓		
Navy	62%	(n = 1831)	10%	27%		62%	↓		
Air Force	64%	(n = 1274)	10%	25%		65%	↓		
Purchased Care, TRICARE Regions									
North	64%	(n = 1606)	9%	25%		65%	↓		
South	67%	(n = 1357)	8%	24%		68%			
West	67%	(n = 1482)	9%	24%		67%			
Direct Care, Age³									
18–44	59%	(n = 3216)	13%	28%		59%	↓		
45–64	69%	(n = 1786)	6%	25%		69%			
65+	71%	(n = 1189)	5%	25%		70%			
Purchased Care, Age									
18–44	65%	(n = 1028)	11%	23%		67%			
45–64	66%	(n = 1204)	9%	24%		67%			
65+	68%	(n = 2265)	6%	27%		67%	↓		

- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report most positive results for the Pain Control composite ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Air Force MTFs to report most positive results for the Pain Control composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive results for the Pain Control composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control (continued)

This composite combines responses from two questions regarding how often pain controlled.

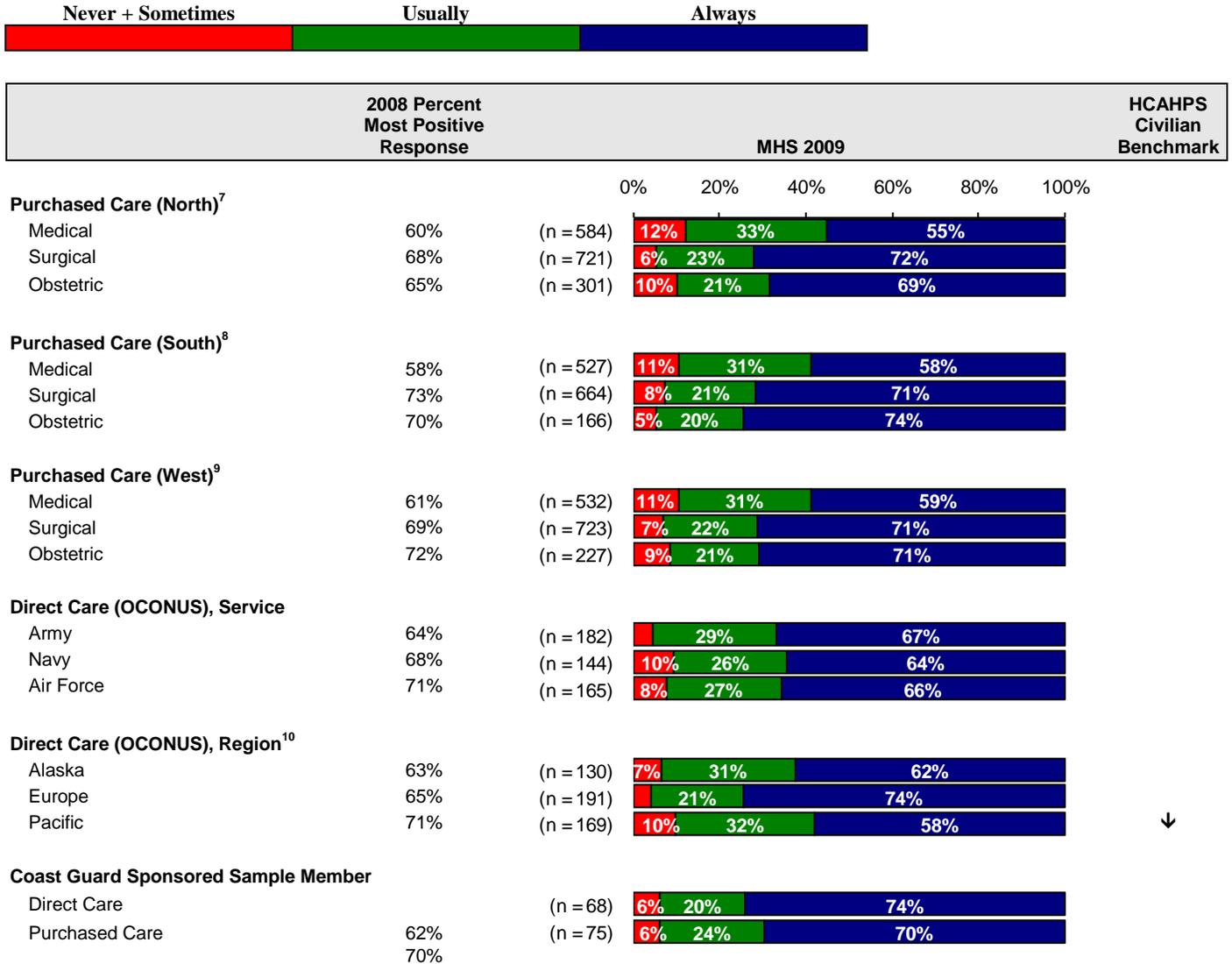


- Among those receiving Surgical services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive results for the Pain Control composite ($p < .05$).
- Among those receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive results for the Pain Control composite ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Pain Control composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control (continued)

This composite combines responses from two questions regarding how often pain controlled.



7. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Pain Control composite ($p < .05$).
8. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Pain Control composite ($p < .05$).
9. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Pain Control composite ($p < .05$).
10. Among OCONUS Direct Care beneficiaries, those in European MTFs were significantly more likely than those in Alaskan or Pacific MTFs to report most positive results for the Pain Control composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control

How often was your pain well controlled?



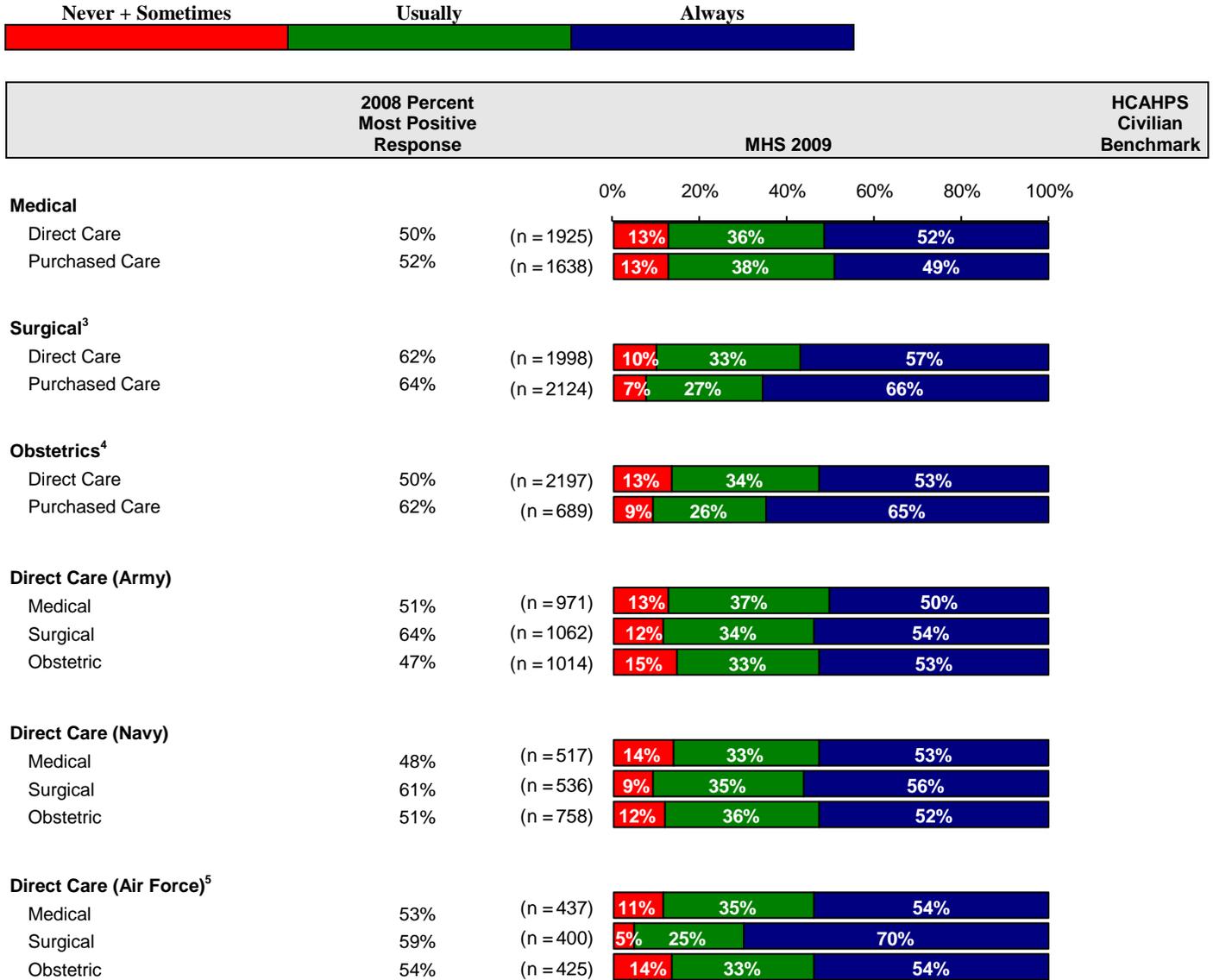
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	56%			44%
2008	55%			
2007	53%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	55%	(n = 10571)	12% 33% 56%	↑
Direct Care	53%	(n = 6120)	12% 34% 54%	↑
Purchased Care	60%	(n = 4451)	10% 30% 60%	↑
CONUS	55%	(n = 10036)	12% 33% 55%	↑
OCONUS	58%	(n = 535)	8% 34% 58%	↑
Direct Care, Military Service				
Army	53%	(n = 3047)	13% 34% 52%	↑
Navy	53%	(n = 1811)	12% 35% 53%	↑
Air Force	55%	(n = 1262)	11% 32% 58%	↑
Purchased Care, TRICARE Regions				
North	57%	(n = 1589)	10% 31% 58%	↑
South	61%	(n = 1341)	9% 30% 61%	↑
West	61%	(n = 1469)	10% 29% 61%	↑
Direct Care, Age²				
18–44	51%	(n = 3173)	14% 35% 51%	↑
45–64	61%	(n = 1773)	7% 32% 61%	↑
65+	62%	(n = 1174)	6% 34% 60%	↑
Purchased Care, Age				
18–44	58%	(n = 1016)	12% 28% 60%	↑
45–64	59%	(n = 1191)	10% 30% 60%	↑
65+	61%	(n = 2244)	7% 33% 61%	↑

- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that their pain was always well controlled ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that their pain was always well controlled ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control (continued)

How often was your pain well controlled?



- Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to report that their pain was always well controlled ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that their pain was always well controlled ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that their pain was always well controlled ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control (continued)

How often was your pain well controlled?



	2008 Percent Most Positive Response		MHS 2009					HCAHPS Civilian Benchmark	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁶									
Medical	52%	(n = 579)	13%	40%	46%				
Surgical	61%	(n = 714)	6%	28%	65%				
Obstetric	58%	(n = 296)	12%	26%	63%				
Purchased Care (South)⁷									
Medical	51%	(n = 521)	13%	36%	50%				
Surgical	68%	(n = 655)	9%	26%	65%				
Obstetric	64%	(n = 165)	5%	27%	68%				
Purchased Care (West)⁸									
Medical	54%	(n = 527)	12%	37%	52%				
Surgical	64%	(n = 717)	8%	26%	66%				
Obstetric	65%	(n = 225)	10%	25%	65%				
Direct Care (OCONUS), Service									
Army	54%	(n = 178)	7%	35%	58%				↑
Navy	59%	(n = 142)	9%	35%	56%				↑
Air Force	63%	(n = 163)	9%	35%	56%				↑
Direct Care (OCONUS), Region									
Alaska	52%	(n = 128)	7%	38%	55%				↑
Europe	56%	(n = 188)	6%	28%	67%				↑
Pacific	63%	(n = 166)	11%	41%	48%				
Coast Guard Sponsored Sample Member									
Direct Care	53%	(n = 68)	8%	22%	70%				↑
Purchased Care	63%	(n = 73)	6%	29%	65%				↑

- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that their pain was always well controlled ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that their pain was always well controlled ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that their pain was always well controlled ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control

How often did the hospital staff do everything they could to help you with your pain?



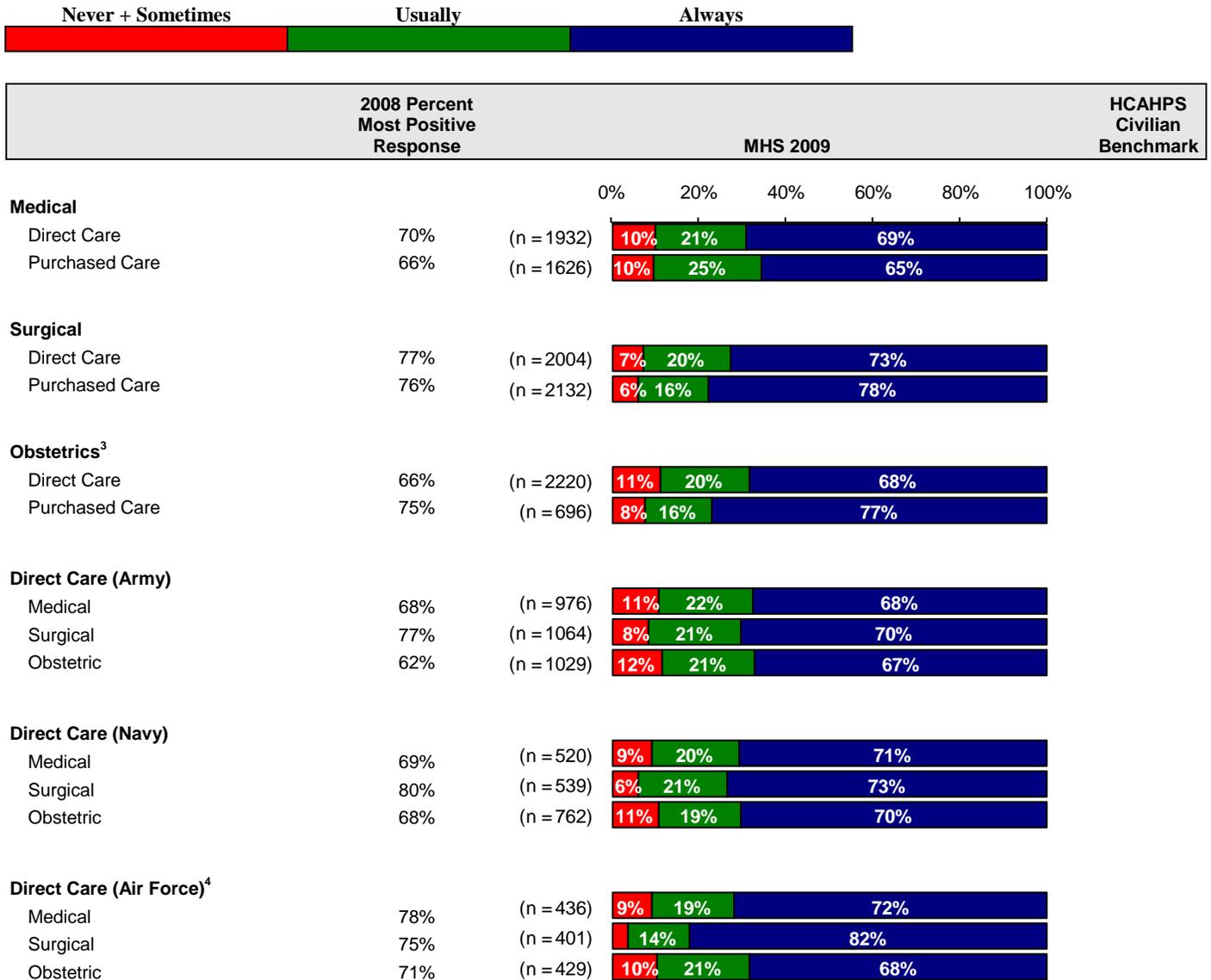
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	71%			54%
2008	71%			
2007	69%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	71%	(n = 10610)		↑
Direct Care	70%	(n = 6156)		↑
Purchased Care	73%	(n = 4454)		↑
CONUS	70%	(n = 10069)		↑
OCONUS	76%	(n = 541)		↑
Direct Care, Military Service				
Army	68%	(n = 3069)		↑
Navy	71%	(n = 1821)		↑
Air Force	74%	(n = 1266)		↑
Purchased Care, TRICARE Regions				
North	71%	(n = 1595)		↑
South	73%	(n = 1347)		↑
West	73%	(n = 1461)		↑
Direct Care, Age²				
18–44	67%	(n = 3201)		↑
45–64	77%	(n = 1778)		↑
65+	79%	(n = 1177)		↑
Purchased Care, Age				
18–44	71%	(n = 1025)		↑
45–64	73%	(n = 1194)		↑
65+	74%	(n = 2235)		↑

- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that hospital staff always did everything they could to help with pain ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that hospital staff always did everything they could to help with pain ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that hospital staff always did everything they could to help with pain ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control (continued)

How often did the hospital staff do everything they could to help you with your pain?

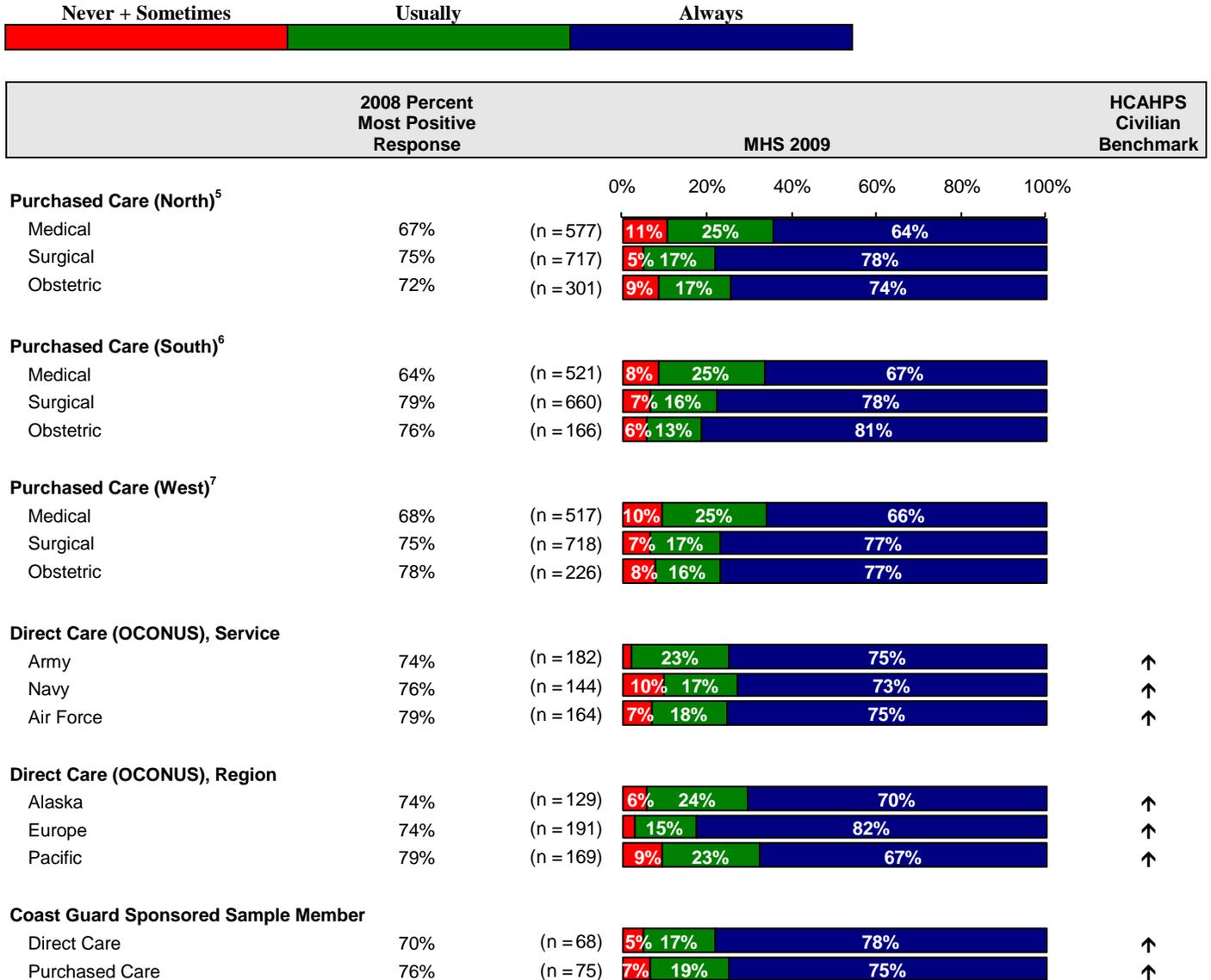


- 3. Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that hospital staff always did everything they could to help with pain ($p < .05$).
- 4. Among Direct Care beneficiaries in Air Force MTFs, those in receiving Surgical services were significantly more likely than those receiving other services to report that hospital staff always did everything they could to help with pain ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Pain Control (continued)

How often did the hospital staff do everything they could to help you with your pain?



- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that hospital staff always did everything they could to help with pain ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that hospital staff always did everything they could to help with pain ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that hospital staff always did everything they could to help with pain ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Discharge Information

This composite combines responses from two questions regarding discharge information.



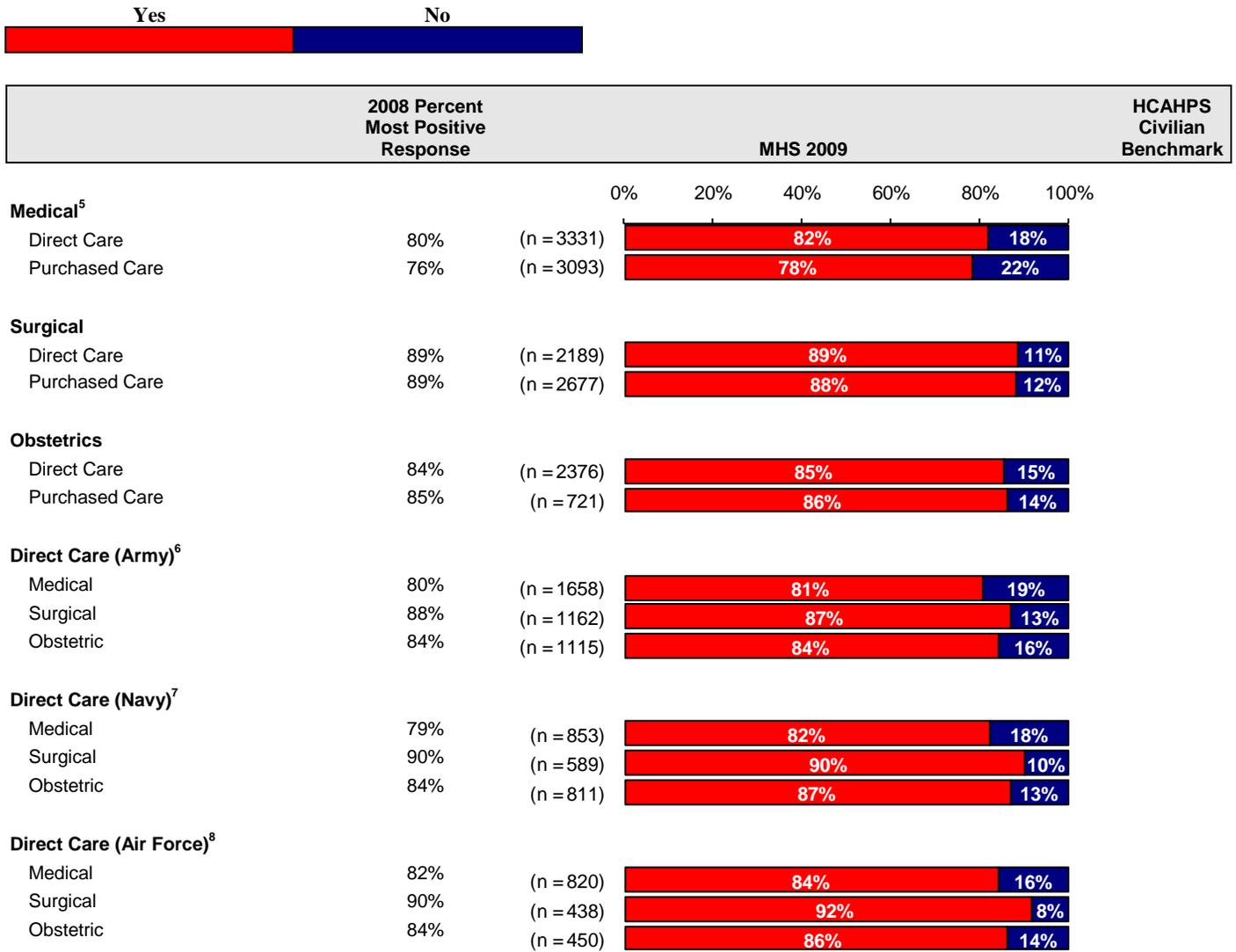
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	84%			81%
2008	83%			
2007	83%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹		83%	(n = 14387)	↑
Direct Care		84%	(n = 7896)	↑
Purchased Care		82%	(n = 6491)	↑
CONUS		83%	(n = 13757)	↑
OCONUS		86%	(n = 630)	↑
Direct Care, Military Service²				
Army		84%	(n = 3935)	↑
Navy		84%	(n = 2253)	↑
Air Force		85%	(n = 1708)	↑
Purchased Care, TRICARE Regions				
North		81%	(n = 2328)	↑
South		82%	(n = 1962)	↑
West		84%	(n = 2140)	↑
Direct Care, Age³				
18–44		83%	(n = 3451)	↑
45–64		87%	(n = 2404)	↑
65+		83%	(n = 2041)	↑
Purchased Care, Age⁴				
18–44		84%	(n = 1101)	↑
45–64		84%	(n = 1545)	↑
65+		80%	(n = 3845)	↑

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report most positive results for the Discharge Information composite ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Navy or Air Force MTFs to report most positive results for the Discharge Information composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report most positive results for the Discharge Information composite ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report most positive results for the Discharge Information composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information (continued)

This composite combines responses from two questions regarding discharge information.

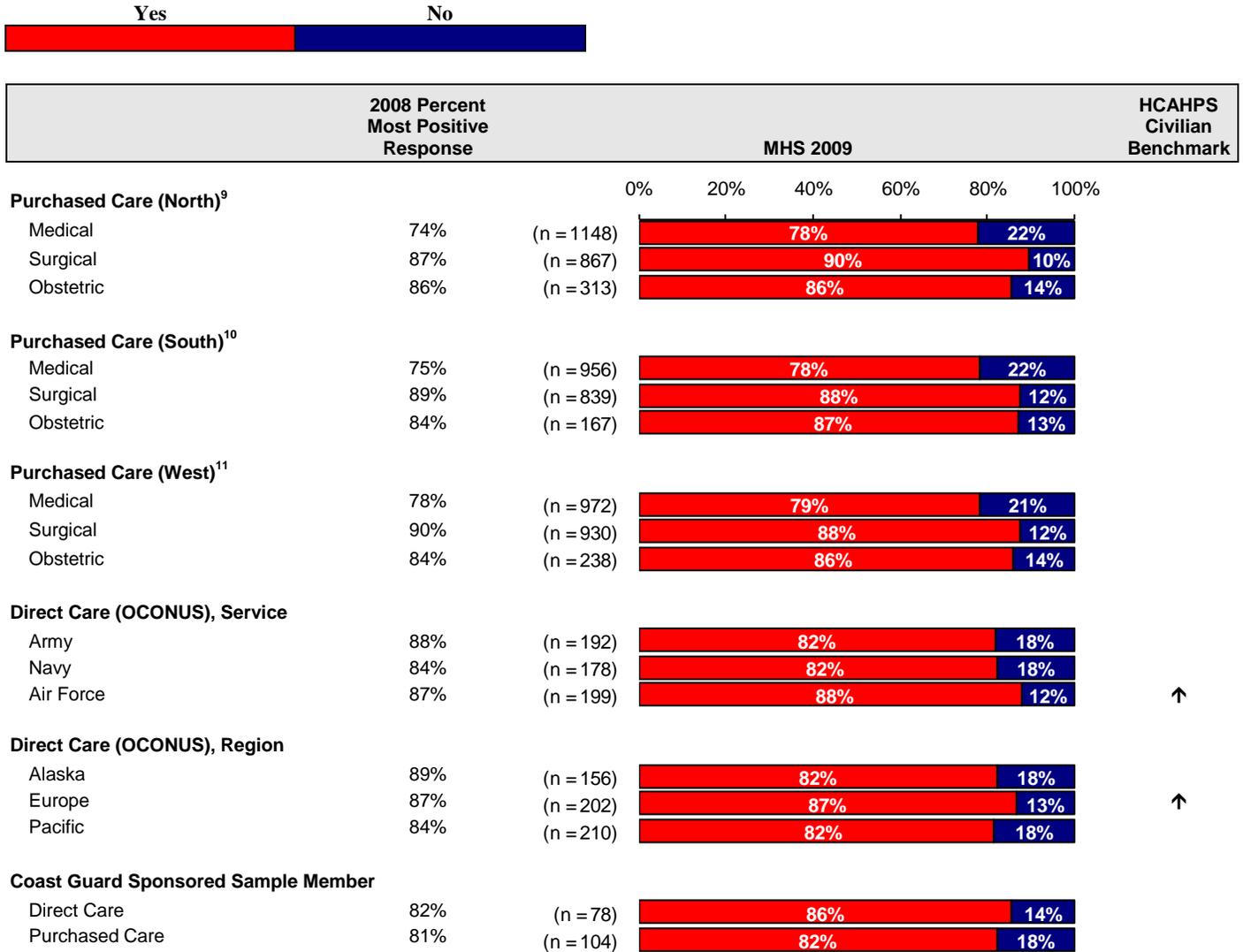


5. Among those receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive results for the Discharge Information composite ($p < .05$).
6. Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$).
7. Among Direct Care beneficiaries in Navy MTFs, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$).
8. Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information (continued)

This composite combines responses from two questions regarding discharge information.



9. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$).

10. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$).

11. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report most positive results for the Discharge Information composite ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Composite: Discharge Information

Did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009		HCAHPS Civilian Benchmark				
2009	79%				67%				
2008	78%								
2007	77%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)		78%	(n = 14221)	79%		21%			↑
Direct Care		78%	(n = 7806)	80%		20%			↑
Purchased Care		78%	(n = 6415)	79%		21%			↑
CONUS		78%	(n = 13594)	80%		20%			↑
OCONUS		81%	(n = 627)	79%		21%			↑
Direct Care, Military Service									
Army		78%	(n = 3895)	78%		22%			↑
Navy		78%	(n = 2232)	81%		19%			↑
Air Force		79%	(n = 1679)	81%		19%			↑
Purchased Care, TRICARE Regions									
North		77%	(n = 2296)	79%		21%			↑
South		77%	(n = 1947)	79%		21%			↑
West		81%	(n = 2112)	79%		21%			↑
Direct Care, Age¹									
18–44		77%	(n = 3427)	78%		22%			↑
45–64		83%	(n = 2379)	83%		17%			↑
65+		83%	(n = 2000)	82%		18%			↑
Purchased Care, Age²									
18–44		77%	(n = 1093)	77%		23%			↑
45–64		80%	(n = 1530)	82%		18%			↑
65+		79%	(n = 3792)	79%		21%			↑

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information (continued)

Did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?



		2008 Percent Most Positive Response	MHS 2009		HCAHPS Civilian Benchmark				
			0%	20%	40%	60%	80%	100%	
Medical									
Direct Care	77%	(n = 3277)	78%		22%				
Purchased Care	73%	(n = 3056)	75%		25%				
Surgical									
Direct Care	86%	(n = 2170)	86%		14%				
Purchased Care	87%	(n = 2645)	86%		14%				
Obstetrics									
Direct Care	75%	(n = 2359)	77%		23%				
Purchased Care	75%	(n = 714)	77%		23%				
Direct Care (Army)³									
Medical	77%	(n = 1632)	77%		23%				
Surgical	85%	(n = 1152)	85%		15%				
Obstetric	75%	(n = 1111)	75%		25%				
Direct Care (Navy)									
Medical	76%	(n = 846)	79%		21%				
Surgical	87%	(n = 585)	87%		13%				
Obstetric	75%	(n = 801)	80%		20%				
Direct Care (Air Force)⁴									
Medical	80%	(n = 799)	80%		20%				
Surgical	86%	(n = 433)	89%		11%				
Obstetric	75%	(n = 447)	78%		22%				

- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving other services to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Surgical services were significantly more likely than those receiving other services to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information (continued)

Did doctors, nurses or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?



	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁵				
Medical	72%	(n = 1134)	75% 25%	
Surgical	85%	(n = 853)	87% 13%	
Obstetric	76%	(n = 309)	76% 24%	
Purchased Care (South)⁶				
Medical	71%	(n = 946)	76% 24%	
Surgical	87%	(n = 835)	84% 16%	
Obstetric	72%	(n = 166)	79% 21%	
Purchased Care (West)⁷				
Medical	77%	(n = 960)	74% 26%	
Surgical	89%	(n = 916)	86% 14%	
Obstetric	76%	(n = 236)	77% 23%	
Direct Care (OCONUS), Service				
Army	85%	(n = 192)	77% 23%	↑
Navy	78%	(n = 177)	78% 22%	↑
Air Force	78%	(n = 198)	81% 19%	↑
Direct Care (OCONUS), Region				
Alaska	84%	(n = 155)	76% 24%	↑
Europe	83%	(n = 202)	85% 15%	↑
Pacific	77%	(n = 209)	75% 25%	↑
Coast Guard Sponsored Sample Member				
Direct Care	73%	(n = 76)	77% 23%	
Purchased Care	72%	(n = 103)	78% 22%	↑

- Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving Medical services to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Surgical services were significantly more likely than those receiving other services to report that the hospital staff talked with them about whether they would have the help they needed when they left the hospital ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information

Did you get information in writing about what symptoms or health problems to look out for after you left the hospital?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009		HCAHPS Civilian Benchmark				
2009	90%				71%				
2008	88%	↓							
2007	88%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	88%	(n = 14195)	90% 10%		↑				
Direct Care	89%	(n = 7791)	90% 10%		↑				
Purchased Care	86%	(n = 6404)	88% 12%		↑				
CONUS	88%	(n = 13571)	90% 10%		↑				
OCONUS	92%	(n = 624)	89% 11%		↑				
Direct Care, Military Service²									
Army	89%	(n = 3892)	89% 11%		↑				
Navy	89%	(n = 2221)	91% 9%		↑				
Air Force	90%	(n = 1678)	92% 8%		↑				
Purchased Care, TRICARE Regions									
North	85%	(n = 2295)	88% 12%		↑				
South	86%	(n = 1931)	88% 12%		↑				
West	87%	(n = 2117)	88% 12%		↑				
Direct Care, Age³									
18–44	90%	(n = 3408)	91% 9%		↑				
45–64	92%	(n = 2385)	91% 9%		↑				
65+	83%	(n = 1998)	85% 15%		↑				
Purchased Care, Age⁴									
18–44	90%	(n = 1091)	92% 8%		↑				
45–64	88%	(n = 1529)	90% 10%		↑				
65+	80%	(n = 3784)	83% 17%		↑				

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Navy or Air Force MTFs to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- Among Direct Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information (continued)

Did you get information in writing about what symptoms or health problems to look out for after you left the hospital?



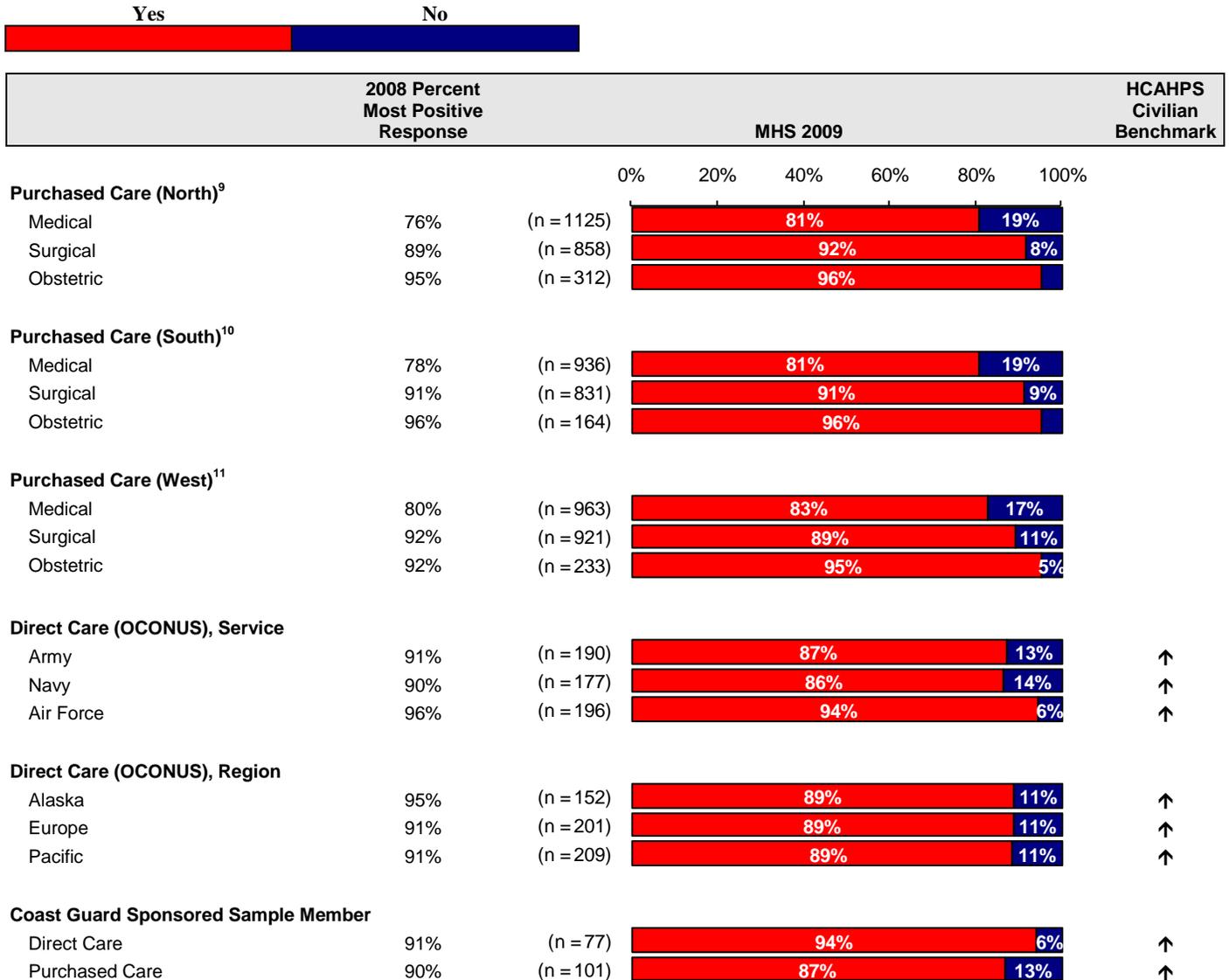
	2008 Percent Most Positive Response		MHS 2009	HCAHPS Civilian Benchmark
			0% 20% 40% 60% 80% 100%	
Medical⁵				
Direct Care	84%	(n = 3278)	85% 15%	
Purchased Care	78%	(n = 3041)	82% 18%	
Surgical				
Direct Care	92%	(n = 2168)	91% 9%	
Purchased Care	91%	(n = 2651)	91% 9%	
Obstetrics				
Direct Care	93%	(n = 2345)	94% 6%	
Purchased Care	94%	(n = 712)	96%	
Direct Care (Army)⁶				
Medical	84%	(n = 1641)	85% 15%	
Surgical	92%	(n = 1149)	89% 11%	
Obstetric	93%	(n = 1102)	93% 7%	
Direct Care (Navy)⁷				
Medical	83%	(n = 838)	85% 15%	
Surgical	92%	(n = 584)	93% 7%	
Obstetric	93%	(n = 799)	94% 6%	
Direct Care (Air Force)⁸				
Medical	85%	(n = 799)	89% 11%	
Surgical	93%	(n = 435)	94% 6%	
Obstetric	92%	(n = 444)	95% 5%	

- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Medical services were significantly less likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Medical services were significantly less likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Medical services were significantly less likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Composite: Discharge Information (continued)

Did you get information in writing about what symptoms or health problems to look out for after you left the hospital?



9. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
10. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
11. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Hospital Environment

How often were your room and bathroom kept clean?



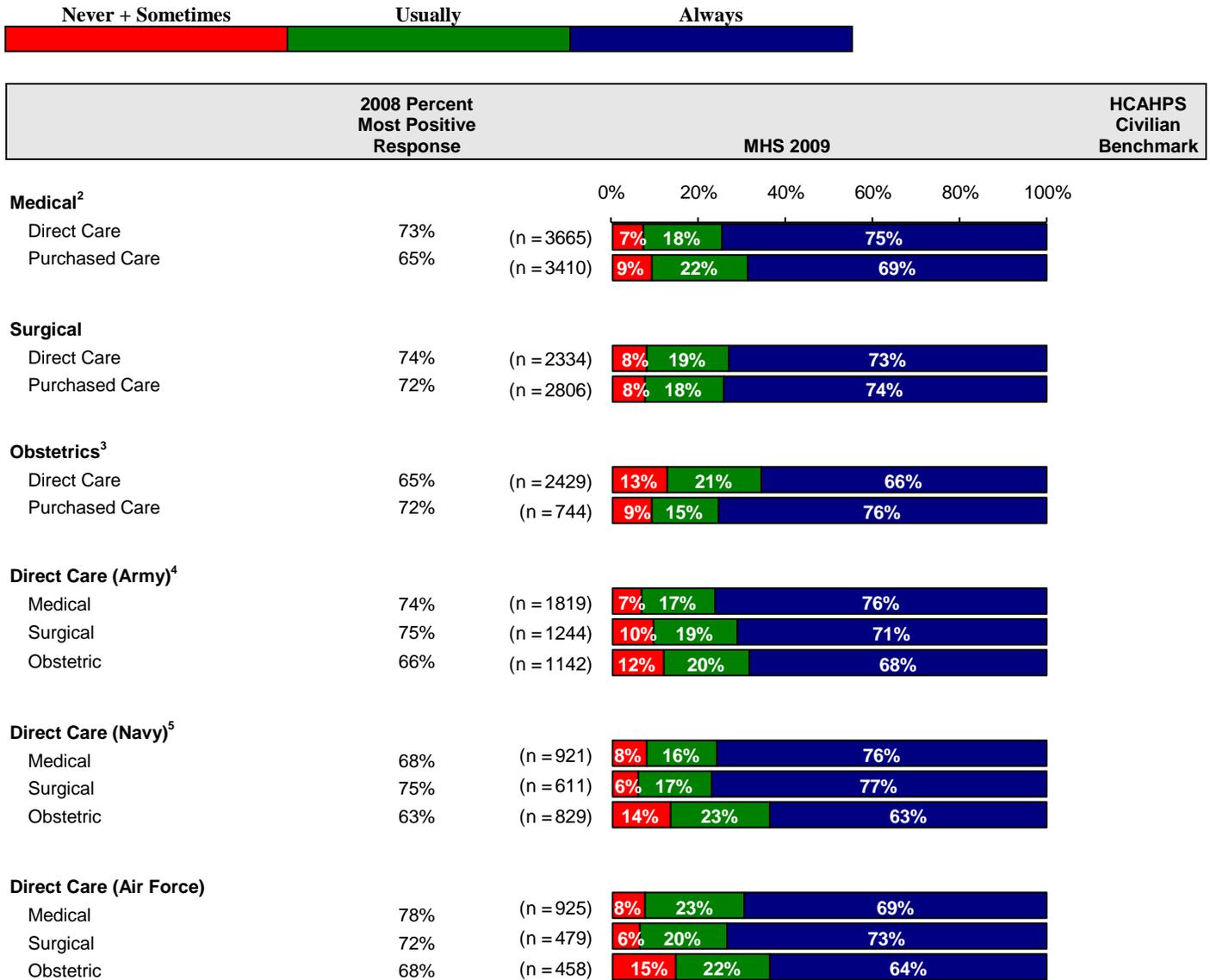
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009				HCAHPS Civilian Benchmark		
2009	71%						67%		
2008	70%	↓							
2007	68%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	70%	(n = 15388)	9%	19%	71%			↑	
Direct Care	70%	(n = 8428)	10%	20%	71%			↑	
Purchased Care	69%	(n = 6960)	9%	19%	72%			↑	
CONUS	69%	(n = 14718)	9%	20%	71%			↑	
OCONUS	73%	(n = 670)	9%	18%	73%			↑	
Direct Care, Military Service									
Army	71%	(n = 4205)	9%	19%	72%			↑	
Navy	67%	(n = 2361)	10%	20%	70%			↑	
Air Force	72%	(n = 1862)	10%	22%	68%				
Purchased Care, TRICARE Regions									
North	68%	(n = 2504)	9%	19%	72%			↑	
South	68%	(n = 2091)	9%	19%	72%			↑	
West	70%	(n = 2302)	8%	20%	72%			↑	
Direct Care, Age¹									
18–44	68%	(n = 3584)	11%	20%	69%			↑	
45–64	74%	(n = 2514)	7%	17%	75%			↑	
65+	78%	(n = 2330)	6%	20%	74%			↑	
Purchased Care, Age									
18–44	70%	(n = 1139)	9%	17%	74%			↑	
45–64	68%	(n = 1622)	9%	18%	73%			↑	
65+	68%	(n = 4199)	8%	22%	70%			↑	

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that their room and bathroom were always kept clean ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Hospital Environment (continued)

How often were your room and bathroom kept clean?

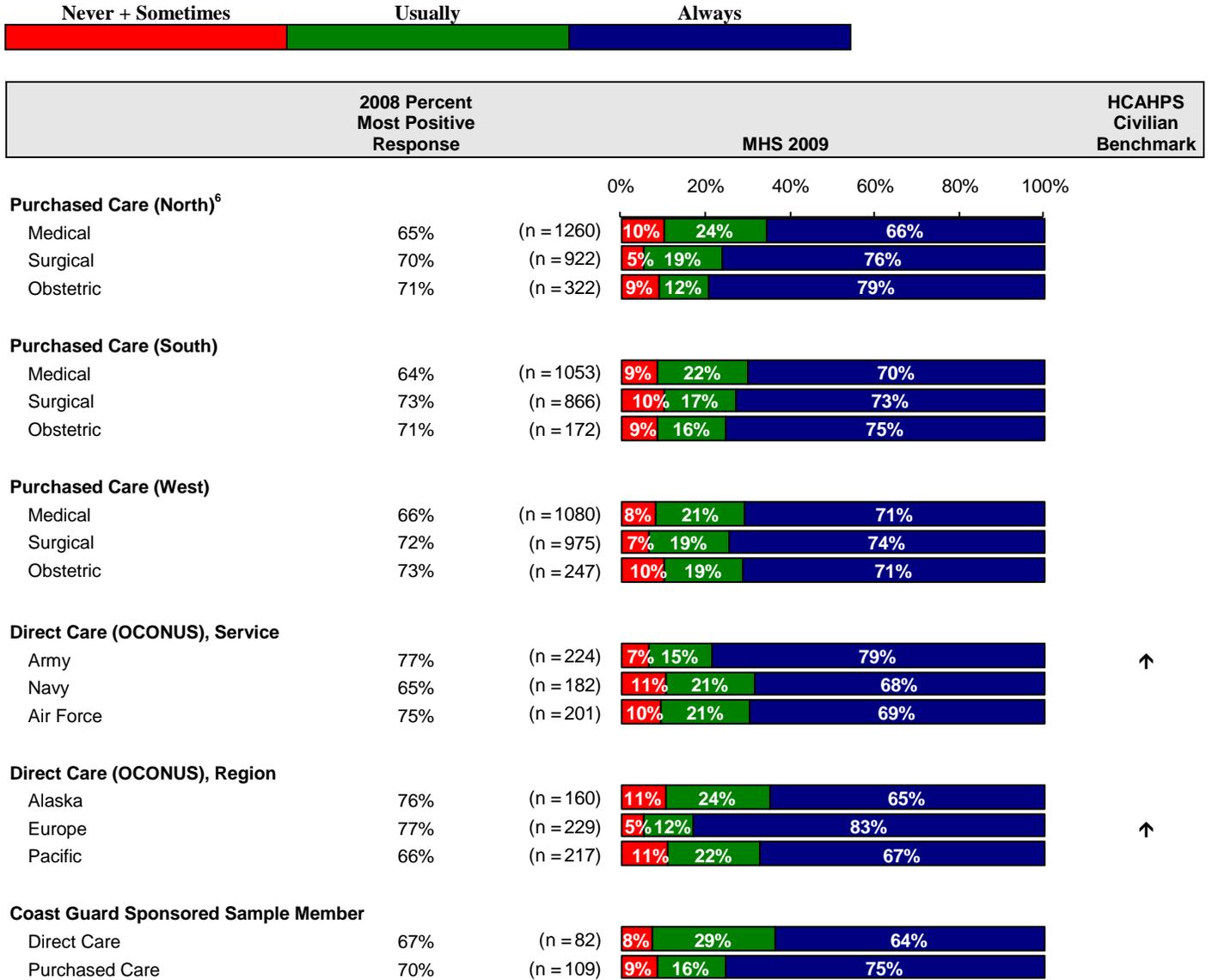


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that their room and bathroom were always kept clean ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that their room and bathroom were always kept clean ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Medical services were significantly more likely than those receiving other services to report that their room and bathroom were always kept clean ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that their room and bathroom were always kept clean ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Hospital Environment (continued)

How often were your room and bathroom kept clean?



6. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that their room and bathroom were always kept clean ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Hospital Environment

How often was the area around your room quiet at night?



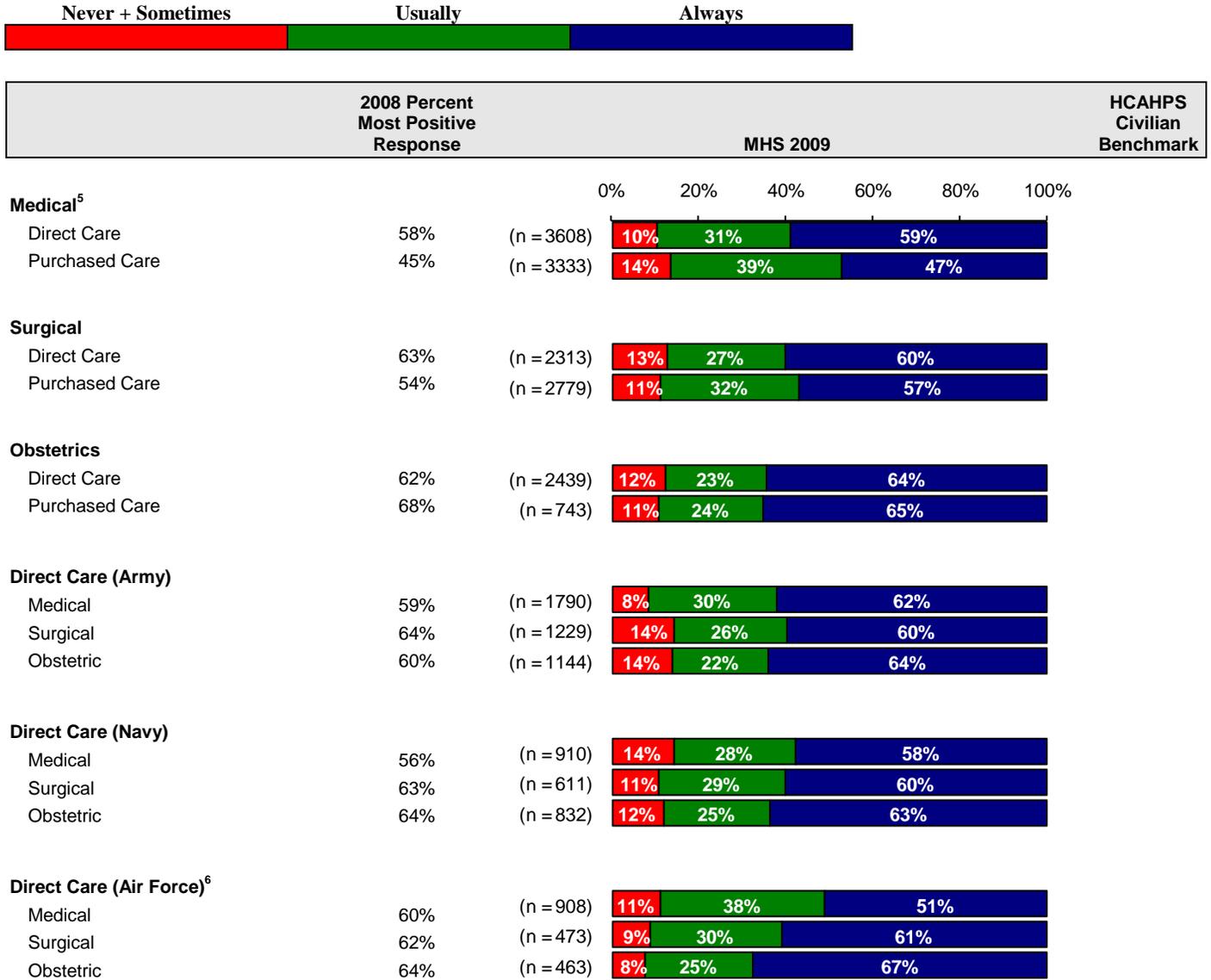
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009	HCAHPS Civilian Benchmark
2009	59%			54%
2008	58%			
2007	57%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	58%	(n = 15215)	12% 29% 59%	↑
Direct Care	61%	(n = 8360)	12% 27% 61%	↑
Purchased Care	53%	(n = 6855)	12% 33% 55%	
CONUS	58%	(n = 14541)	12% 30% 58%	↑
OCONUS ²	64%	(n = 674)	9% 23% 68%	↑
Direct Care, Military Service				
Army	61%	(n = 4163)	12% 26% 62%	↑
Navy	61%	(n = 2353)	12% 26% 61%	↑
Air Force	62%	(n = 1844)	9% 31% 59%	↑
Purchased Care, TRICARE Regions				
North	51%	(n = 2470)	12% 32% 57%	↑
South	56%	(n = 2062)	10% 35% 55%	
West	51%	(n = 2262)	14% 33% 53%	
Direct Care, Age³				
18–44	63%	(n = 3592)	13% 24% 63%	↑
45–64	57%	(n = 2504)	10% 32% 59%	↑
65+	57%	(n = 2264)	10% 35% 55%	
Purchased Care, Age⁴				
18–44	65%	(n = 1134)	11% 25% 64%	↑
45–64	49%	(n = 1613)	13% 33% 54%	
65+	45%	(n = 4108)	13% 41% 47%	↓

- Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that the area around their room was always kept quiet at night ($p < .05$).
- Overall, OCONUS beneficiaries were significantly more likely than CONUS beneficiaries to report that the area around their room was always kept quiet at night ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report that the area around their room was always kept quiet at night ($p < .05$). Furthermore, those aged 65+ were significantly less likely than those in other age groups to report that the area around their room was always kept quiet at night ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report that the area around their room was always kept quiet at night ($p < .05$). Furthermore, those aged 65+ were significantly less likely than those in other age groups to report that the area around their room was always kept quiet at night ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Hospital Environment (continued)

How often was the area around your room quiet at night?

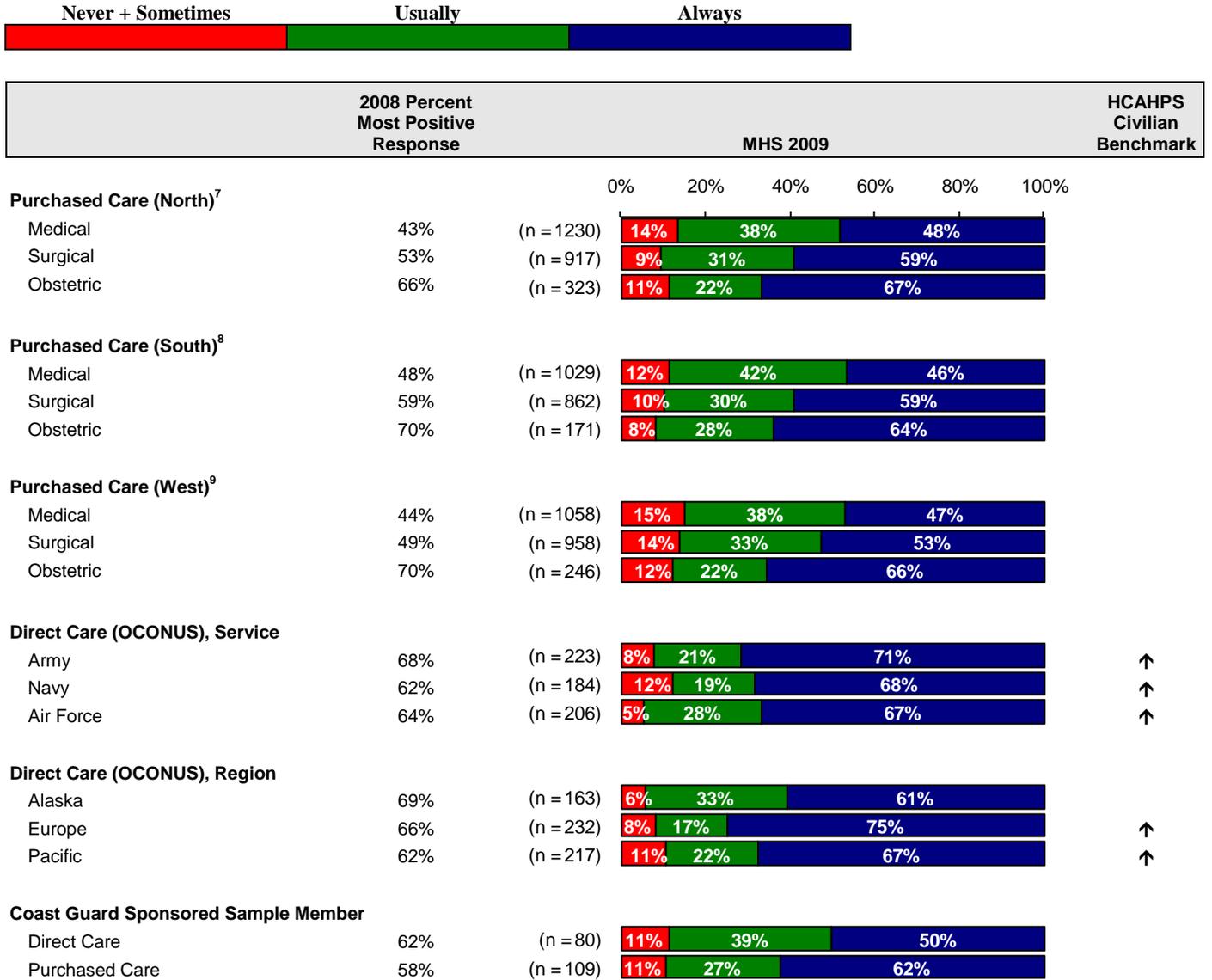


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that the area around their room was always kept quiet at night ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Medical services were significantly less likely than receiving other services to report that the area around their room was always kept quiet at night ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Hospital Environment (continued)

How often was the area around your room quiet at night?



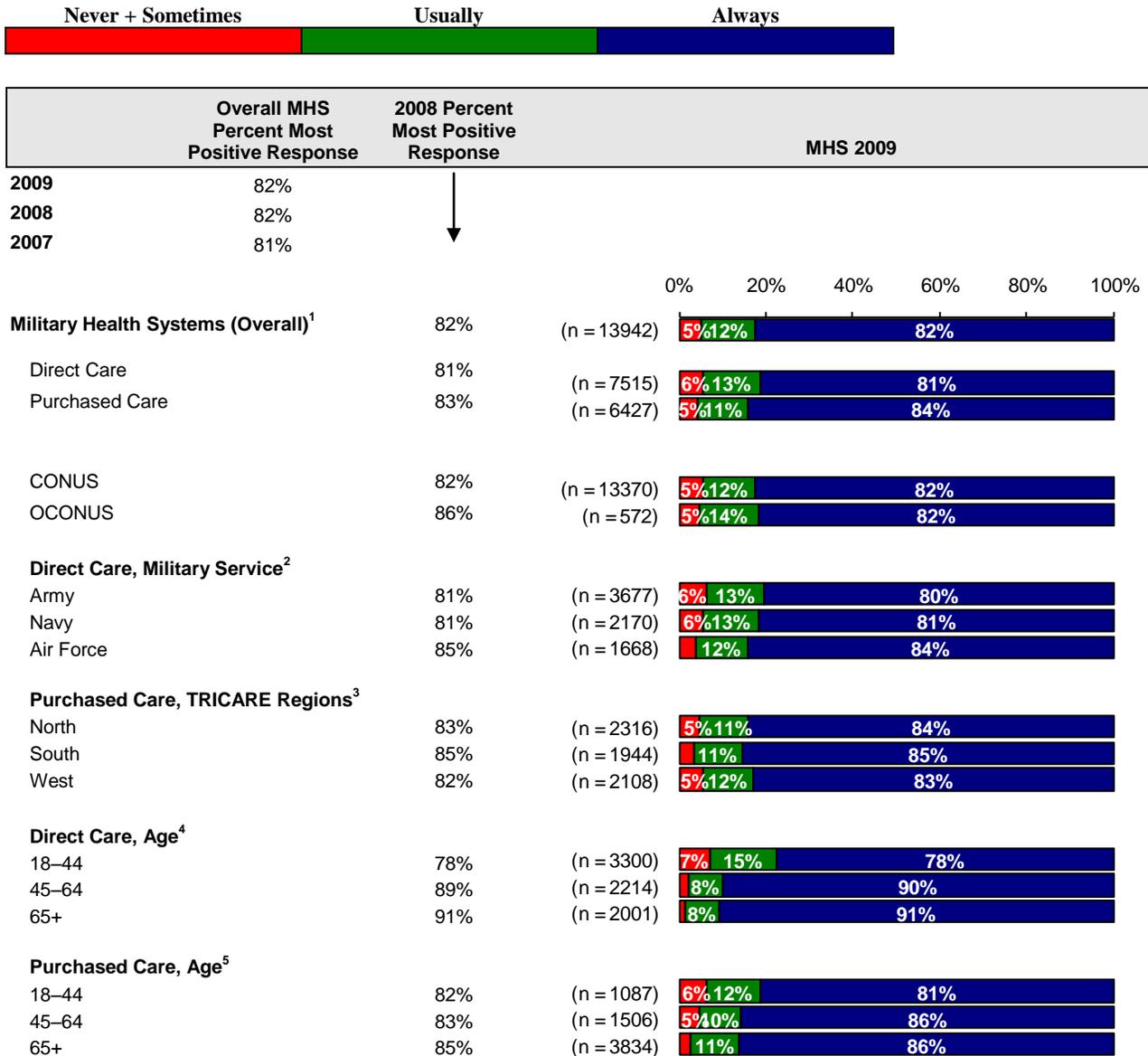
7. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that the area around their room was always kept quiet at night ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that the area around their room was always kept quiet at night ($p < .05$).
8. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to report that the area around their room was always kept quiet at night ($p < .05$).
9. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that the area around their room was always kept quiet at night ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that the area around their room was always kept quiet at night ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the HCAHPS civilian score.

Survey Results:
DoD Composites and Questions

Composite: Your Family and Friends

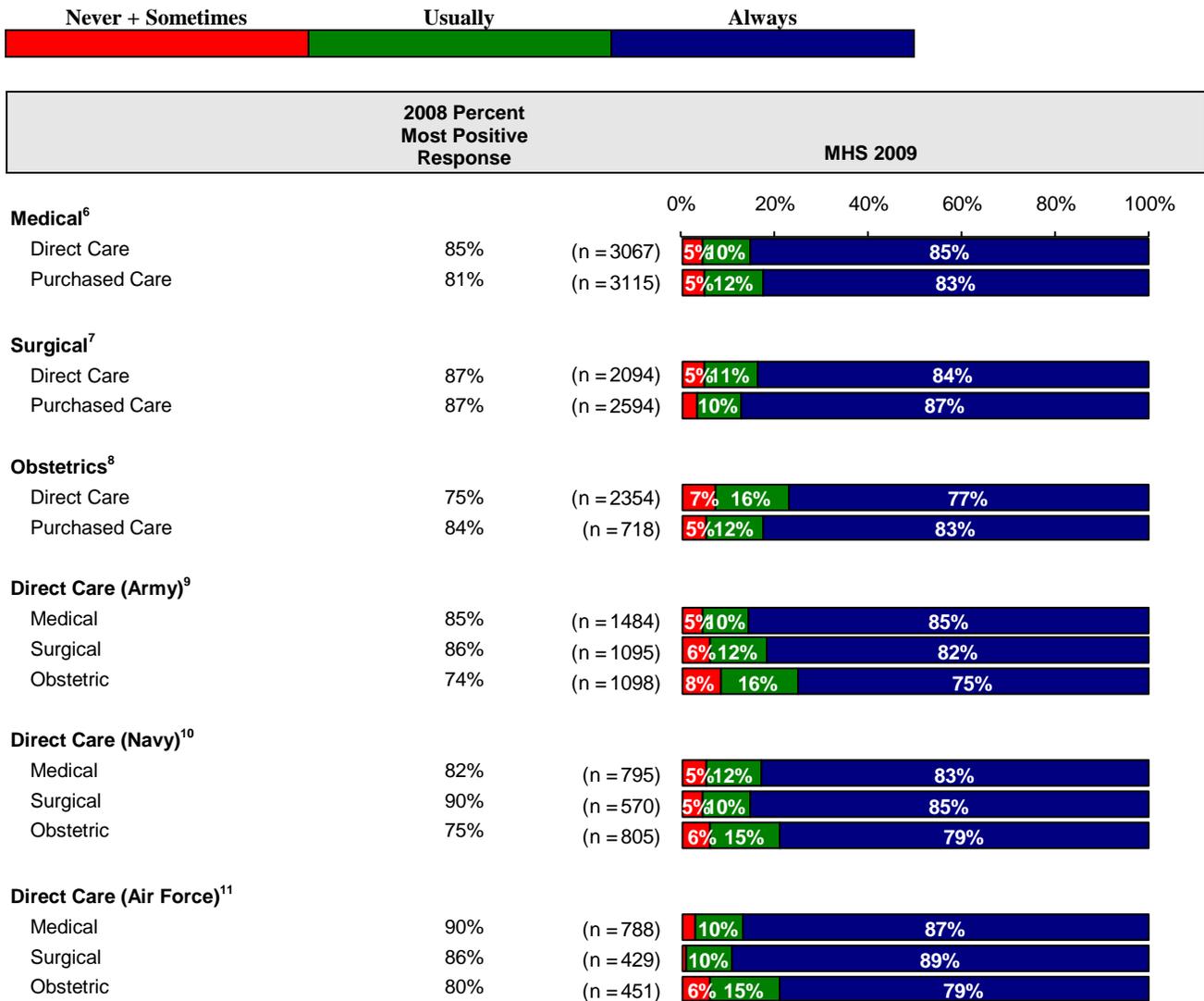
This composite combines responses from two questions about communications with family and close friends.



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Your Family and Friends composite ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Air Force MTFs to report most positive responses to the Your Family and Friends composite ($p < .05$).
- Among Purchased Care beneficiaries, those in the South region were significantly more likely than those in the West region to report most positive responses to the Your Family and Friends composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive responses to the Your Family and Friends composite ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive responses to the Your Family and Friends composite ($p < .05$).

Composite: Your Family and Friends (continued)

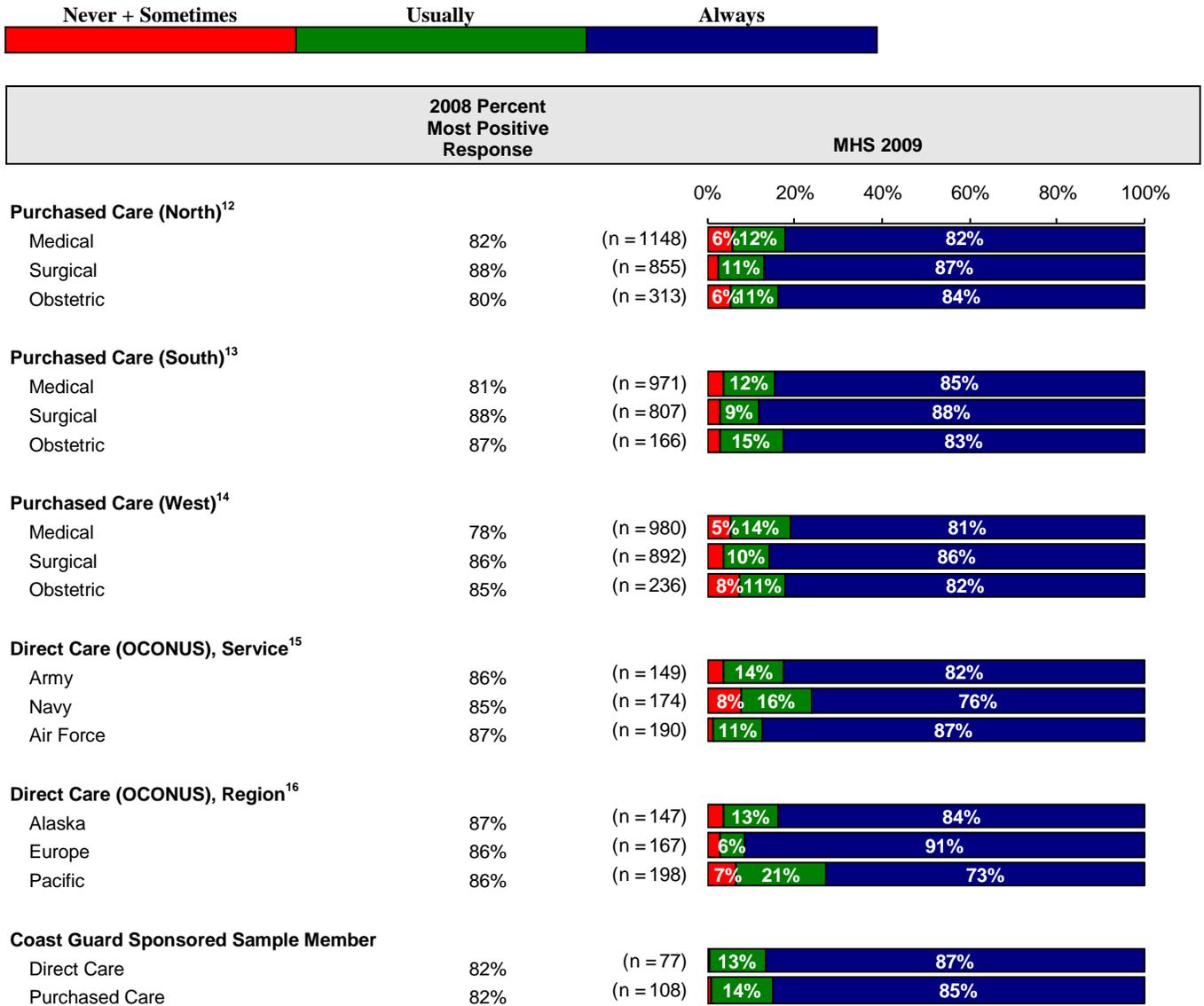
This composite combines responses from two questions about communications with family and close friends.



6. Among beneficiaries receiving Medical Services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Your Family and Friends composite ($p < .05$).
7. Among beneficiaries receiving Surgical Services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive responses to the Your Family and Friends composite ($p < .05$).
8. Among beneficiaries receiving Obstetrics Services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive responses to the Your Family and Friends composite ($p < .05$).
9. Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive responses to the Your Family and Friends composite ($p < .05$).
10. Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving Surgical services to report most positive responses to the Your Family and Friends composite ($p < .05$).
11. Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive responses to the Your Family and Friends composite ($p < .05$).

Composite: Your Family and Friends (continued)

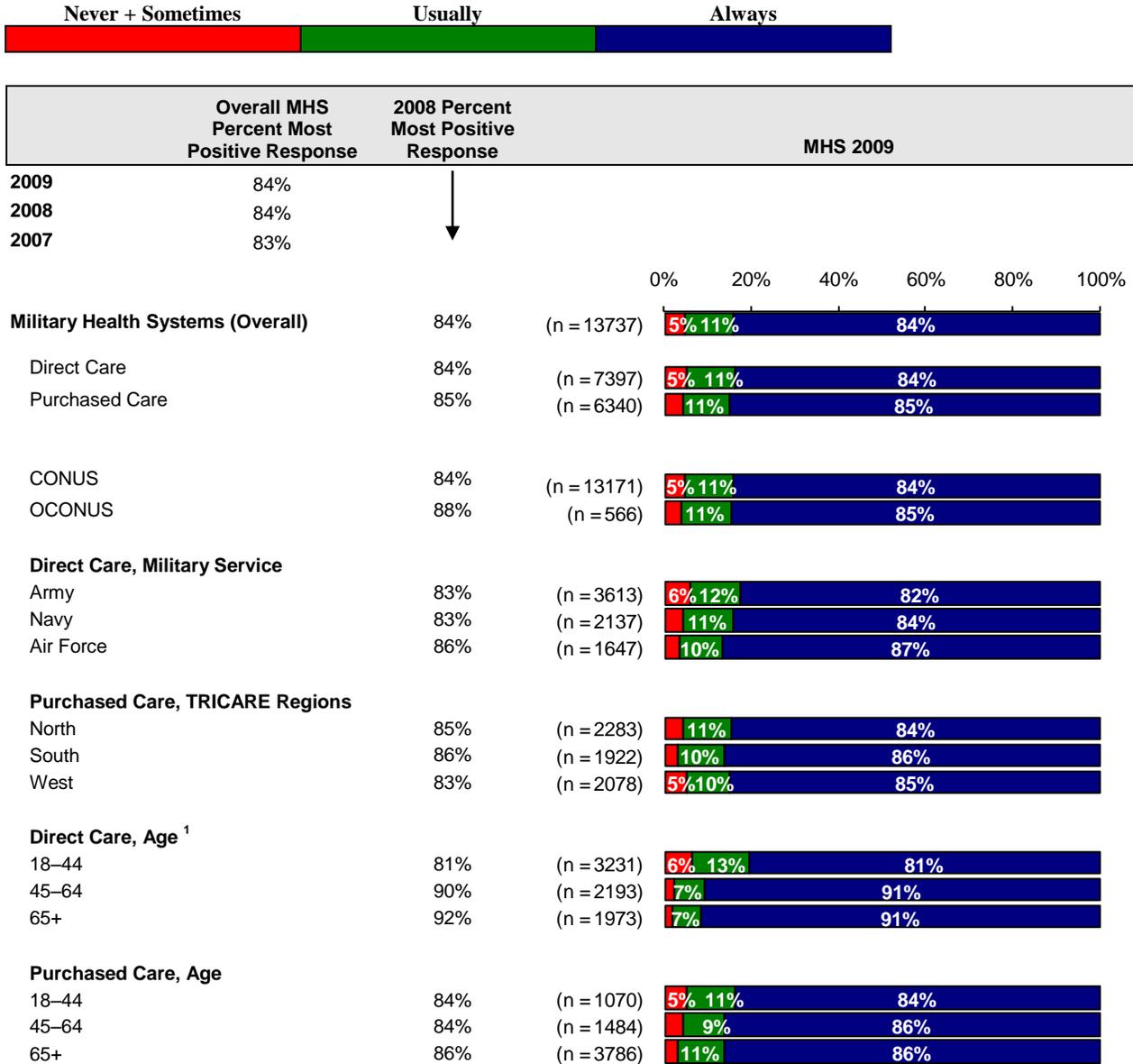
This composite combines responses from two questions about communications with family and close friends.



12. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical services to report most positive responses to the Your Family and Friends composite ($p < .05$).
13. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical services to report most positive responses to the Your Family and Friends composite ($p < .05$).
14. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical services to report most positive responses to the Your Family and Friends composite ($p < .05$).
15. Among Direct Care OCONUS beneficiaries, those in Navy MTFs were significantly less likely than those in Air Force MTFs to report most positive responses to the Your Family and Friends composite ($p < .05$).
16. Among Direct Care OCONUS beneficiaries, those in Pacific MTFs were significantly less likely than those in Alaskan or European MTFs to report most positive responses to the Your Family and Friends composite ($p < .05$).

Composite: Your Family and Friends

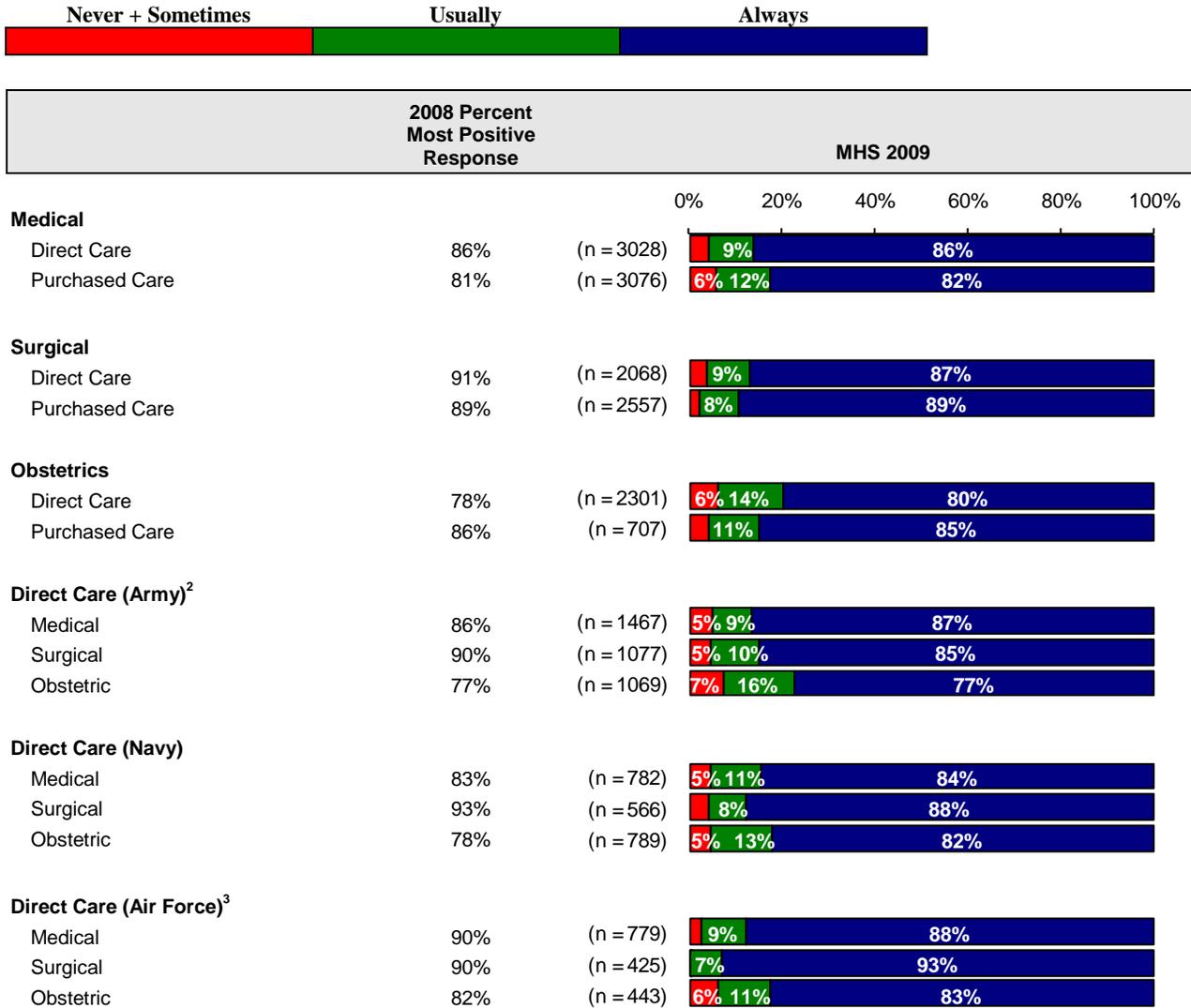
How often did doctors treat your family or close friend with courtesy and respect?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors always treated their family or close friend with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

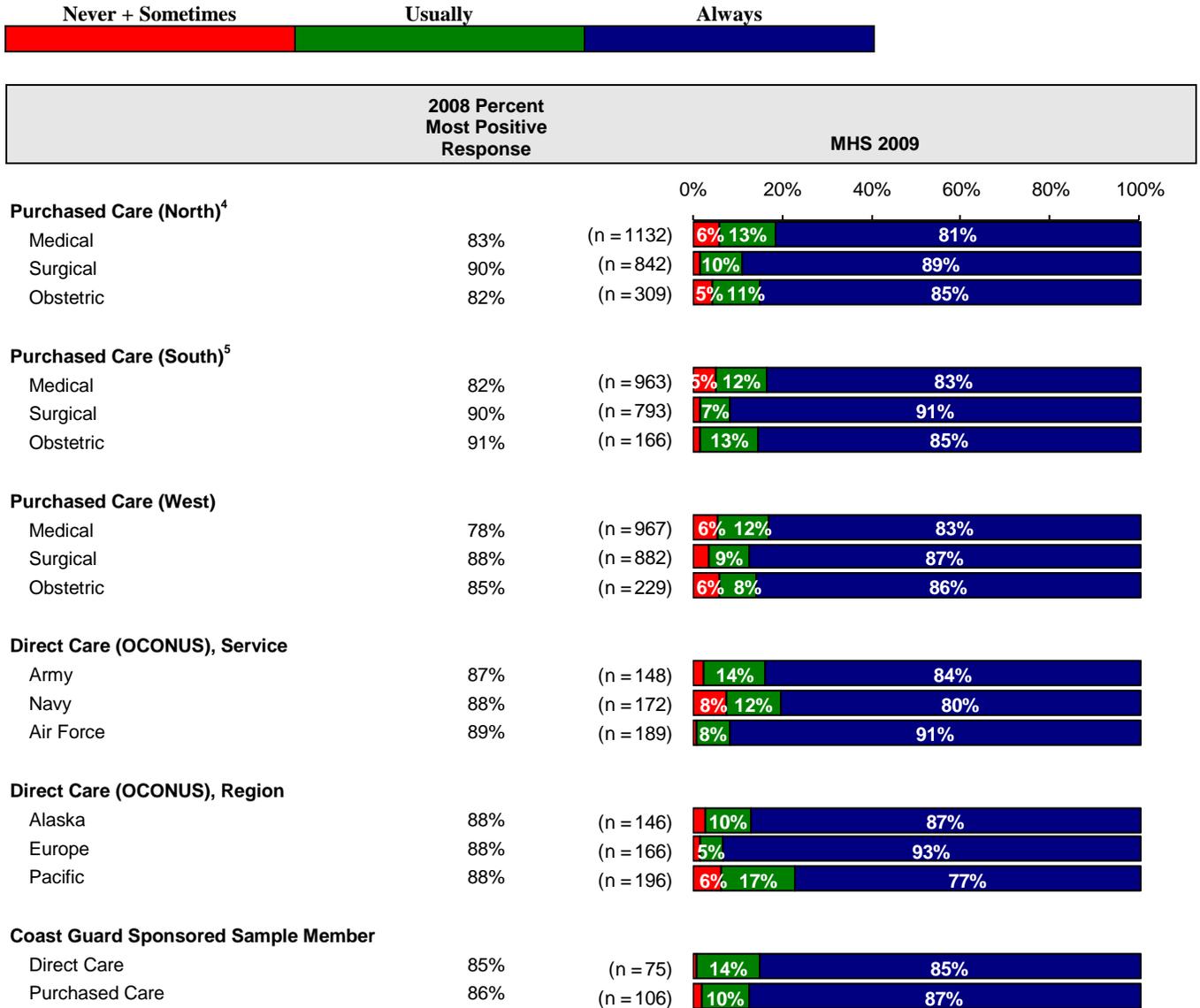
**How often did doctors treat your family or close friend with courtesy and respect?
(continued)**



- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that doctors always treated their family or close friend with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving Surgical services to report that doctors always treated their family or close friend with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

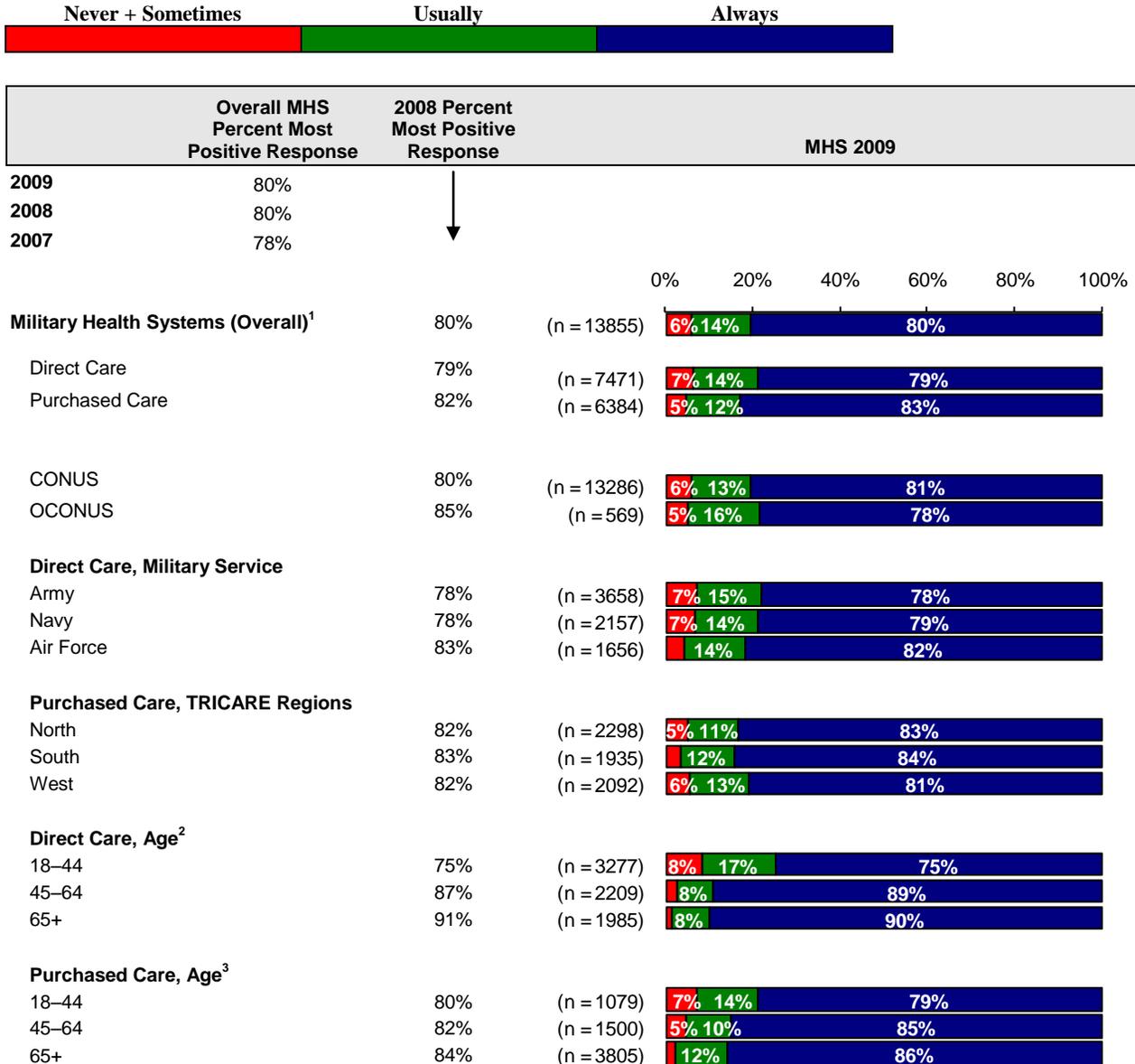
**How often did doctors treat your family or close friend with courtesy and respect?
(continued)**



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical services to report that doctors always treated their family or close friend with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving other services to report that doctors always treated their family or close friend with courtesy and respect ($p < .05$).

Composite: Your Family and Friends

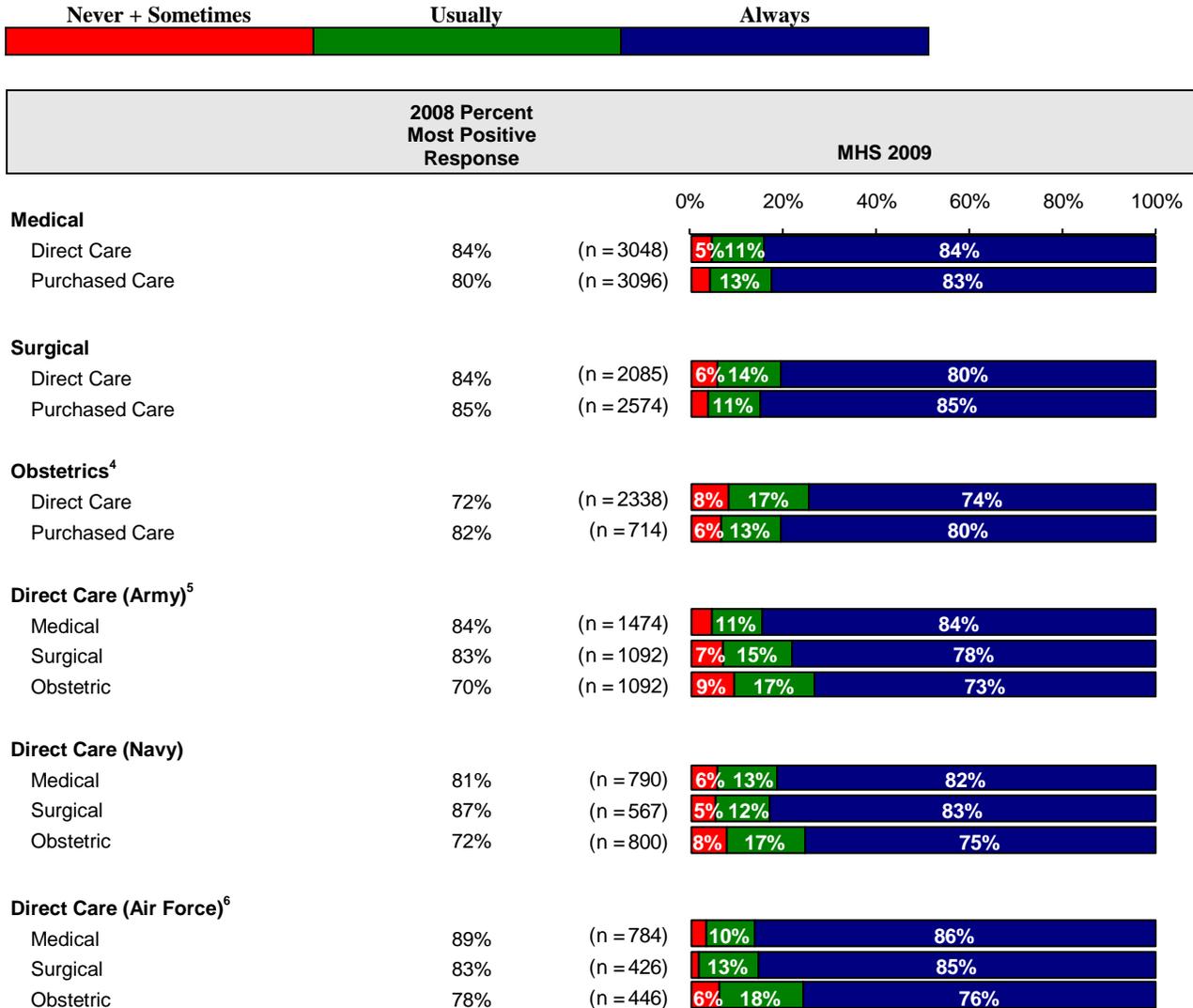
How often did nurses treat your family or close friend with courtesy and respect?



- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

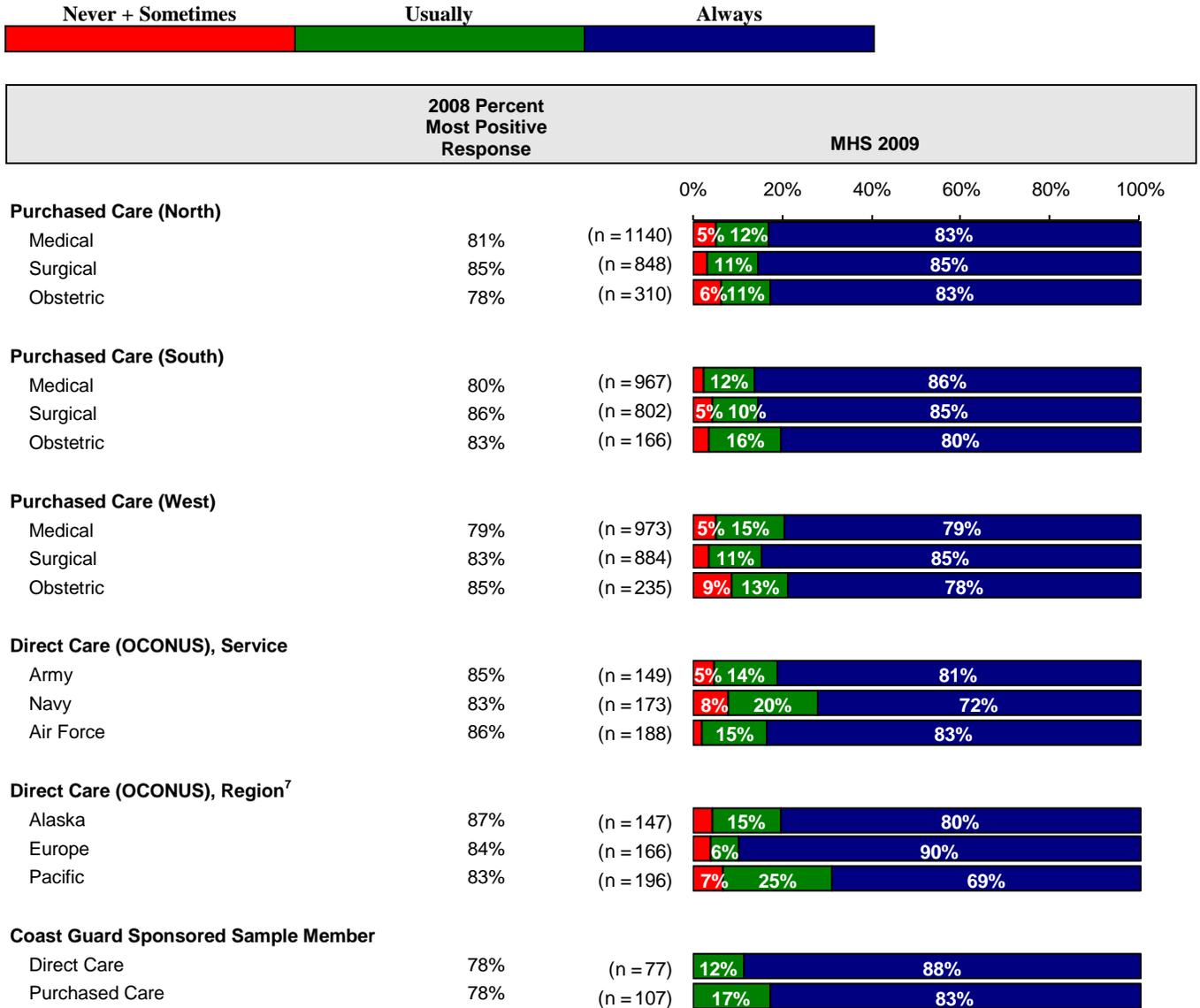
**How often did nurses treat your family or close friend with courtesy and respect?
(continued)**



- Among those receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$). Furthermore, those receiving Medical services were significantly more likely than those receiving other services to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

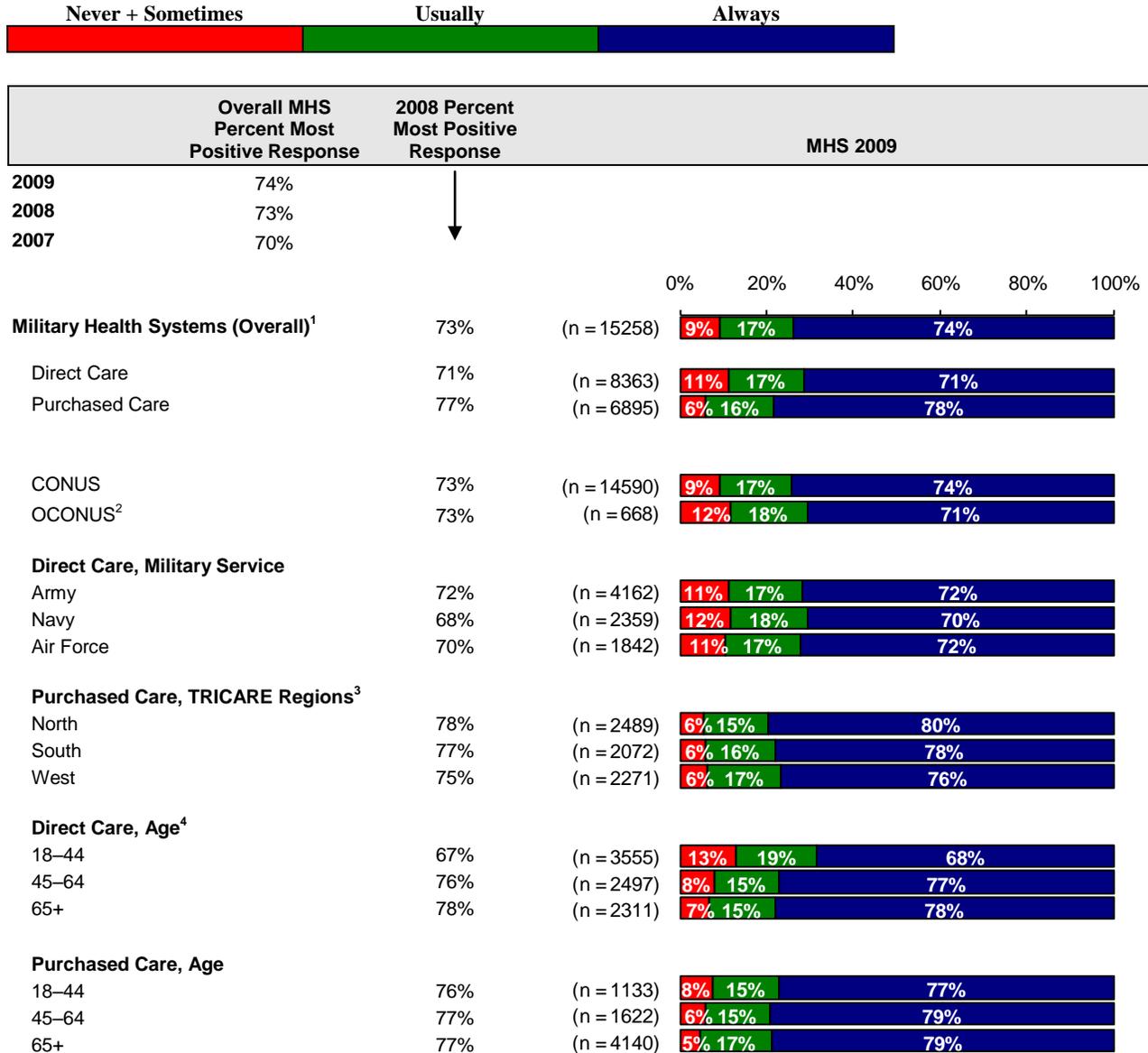
**How often did nurses treat your family or close friend with courtesy and respect?
(continued)**



7. Among Direct Care OCONUS beneficiaries, those in Pacific MTFs were significantly less likely than those in Alaskan or European MTFs to report that nurses always treated their family or close friend with courtesy and respect ($p < .05$).

Composite: Interaction with Other Hospital Staff

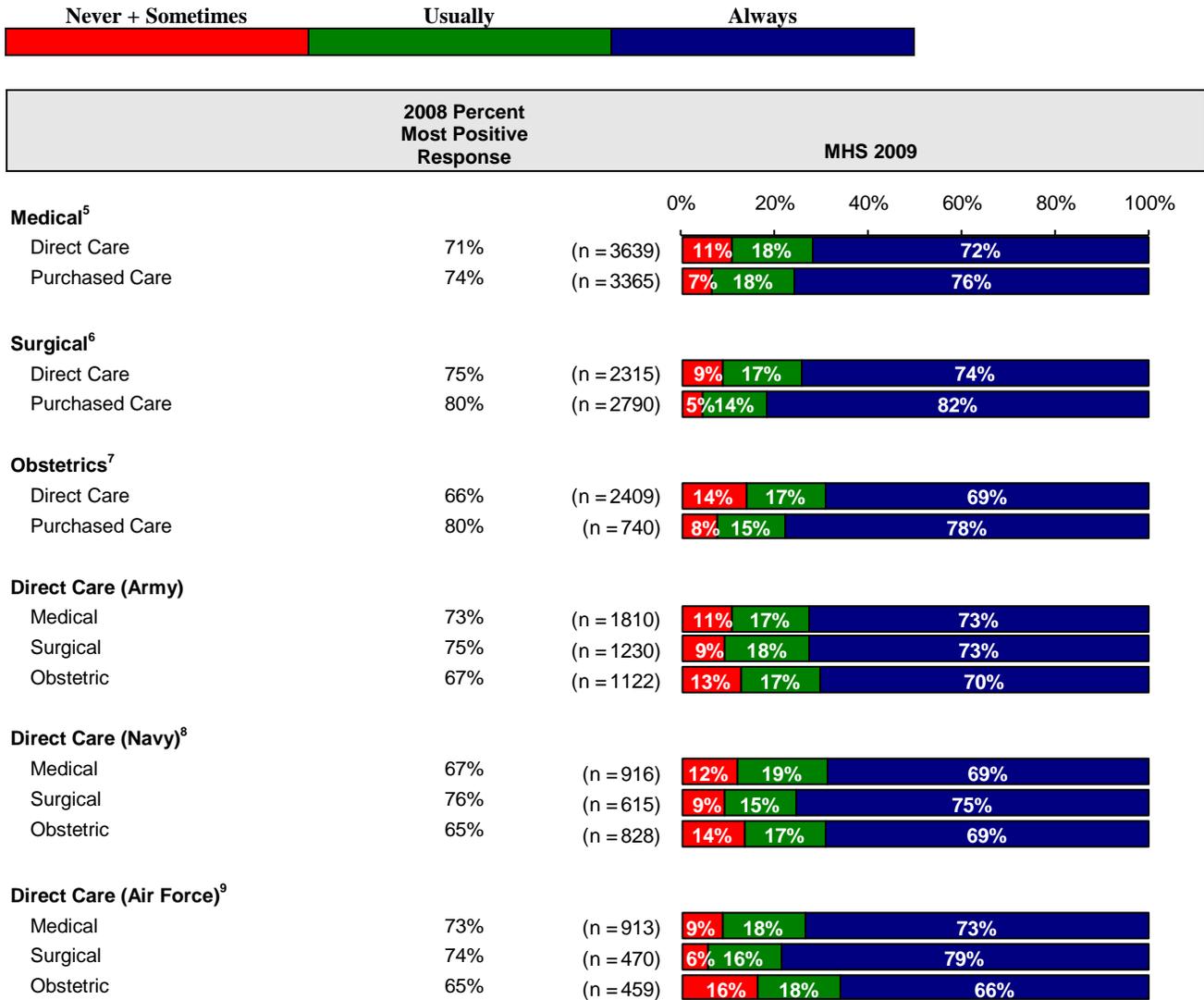
This composite combines responses from eight questions about interactions with other hospital staff.



1. Overall, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
2. Overall, CONUS beneficiaries were significantly more likely than OCONUS beneficiaries to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
3. Among Purchased Care beneficiaries, those in the North region were significantly more likely than those in the West region to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
4. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

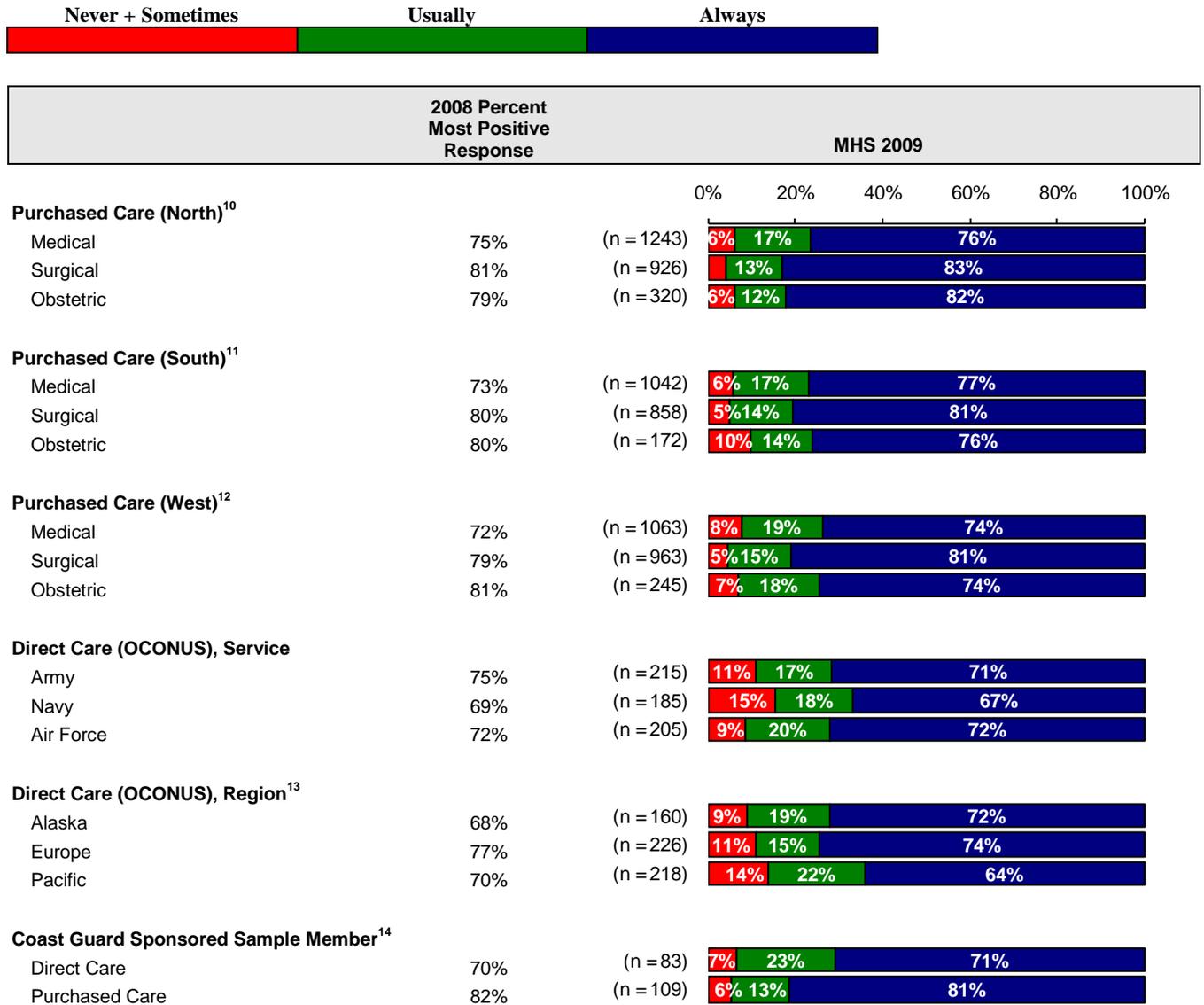
This composite combines responses from eight questions about interactions with other hospital staff.



- Among those receiving Medical services, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among those receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among those receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries receiving care in Navy MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries receiving care in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$). Furthermore, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

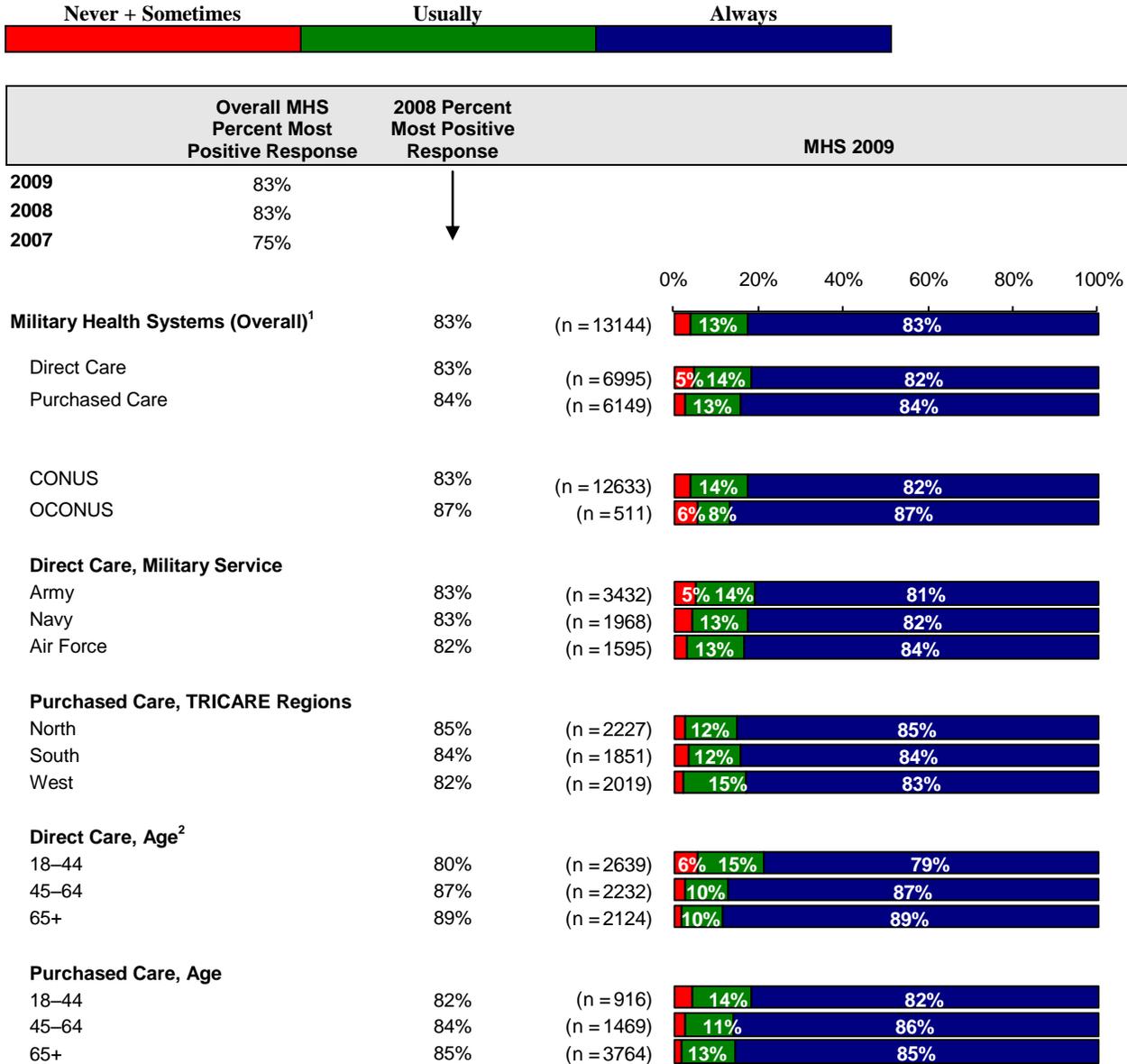
This composite combines responses from eight questions about interactions with other hospital staff.



10. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving other services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
11. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
12. Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
13. Among OCONUS Direct Care beneficiaries, those receiving care in Pacific MTFs were significantly less likely than those receiving care in Alaskan or European MTFs to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
14. Among Coast Guard members, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).

Composite: Interaction with Other Hospital Staff

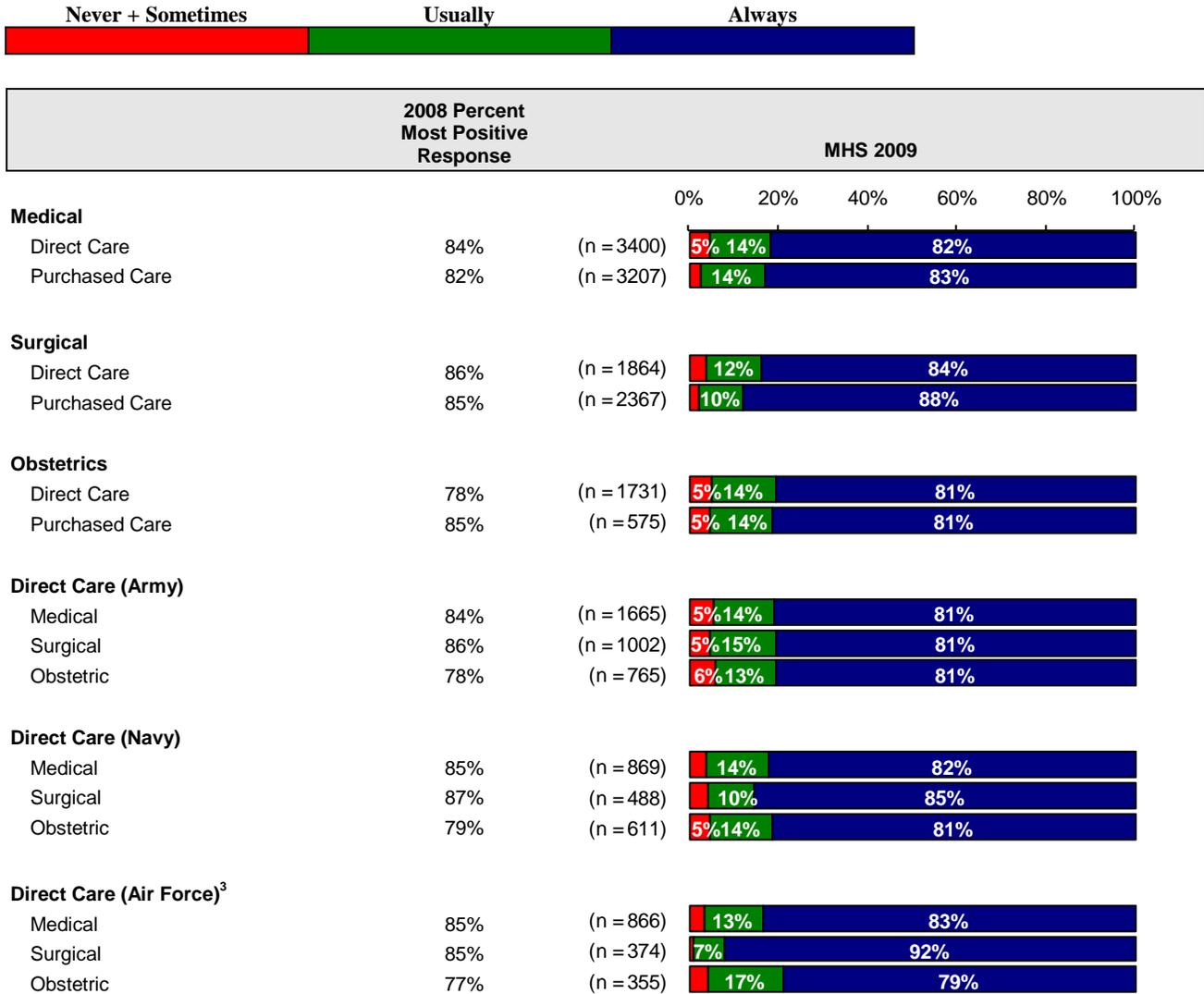
How often did the staff who took blood from you treat you with courtesy and respect?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the staff who took blood from them always treated them with courtesy and respect ($p < .05$).
2. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the staff who took blood from them always treated them with courtesy and respect ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

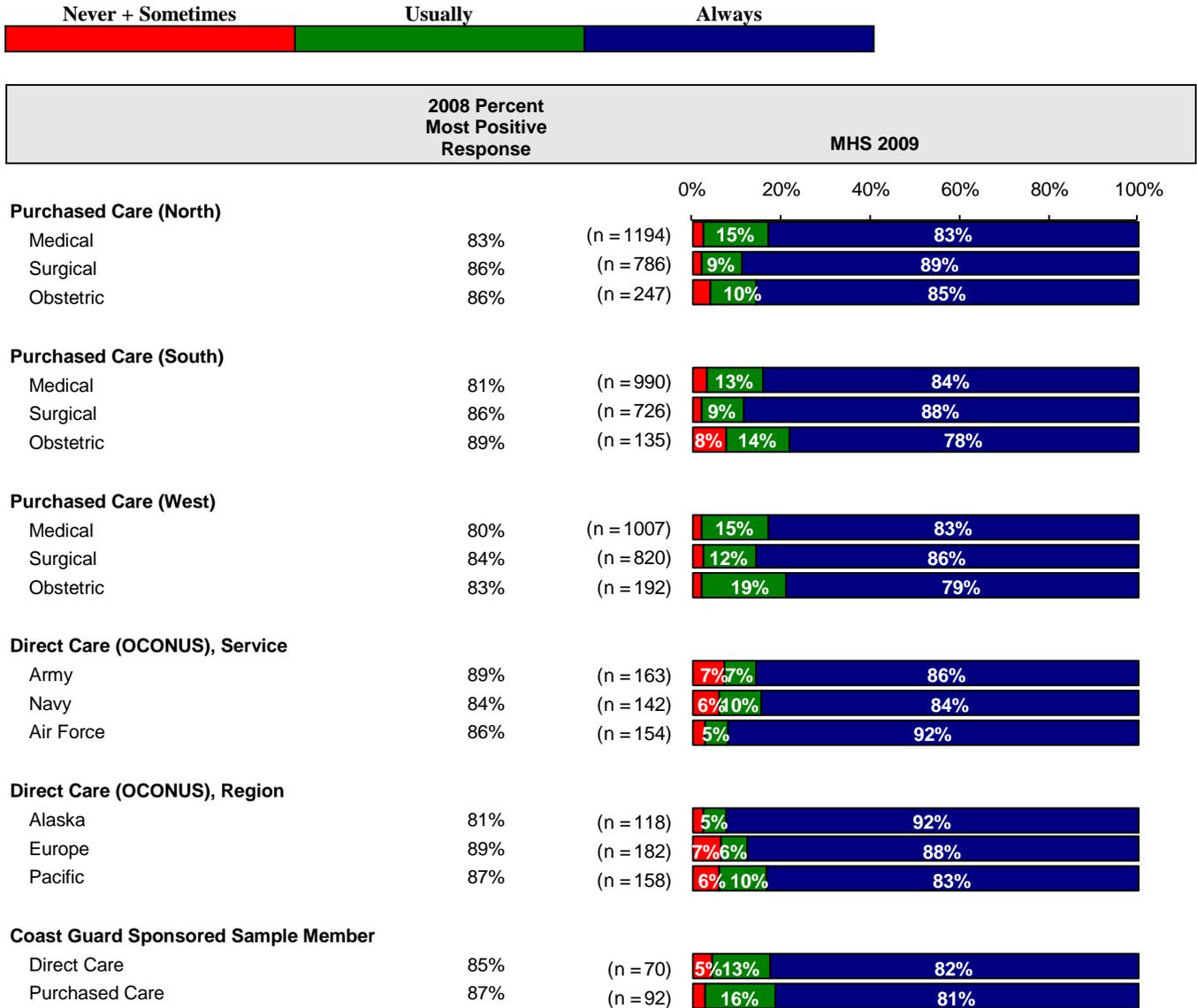
**How often did the staff who took blood from you treat you with courtesy and respect?
(continued)**



3. Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that the staff who took blood from them always treated them with courtesy and respect ($p < .05$).

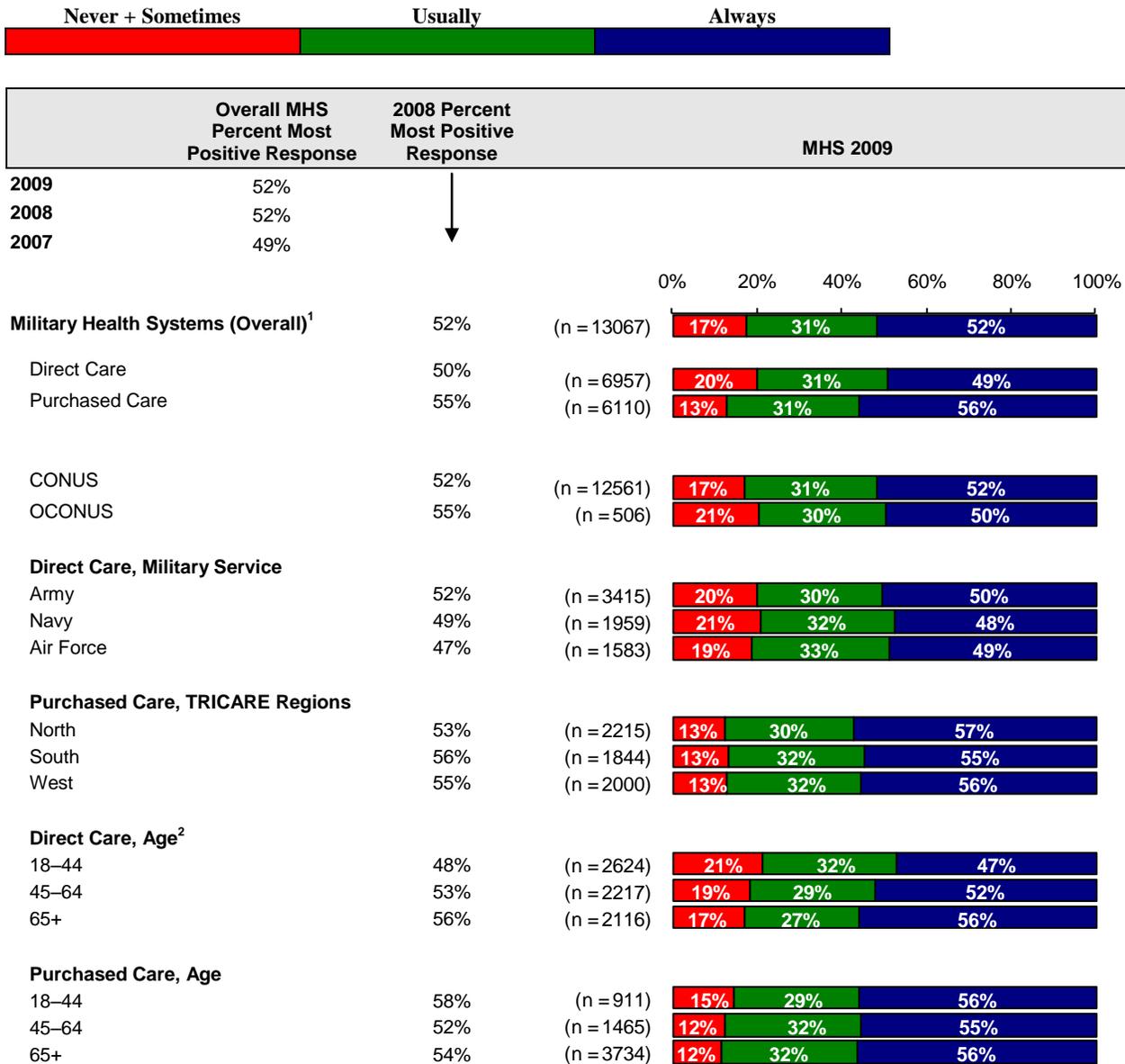
Composite: Interaction with Other Hospital Staff (continued)

**How often did the staff who took blood from you treat you with courtesy and respect?
(continued)**



Composite: Interaction with Other Hospital Staff

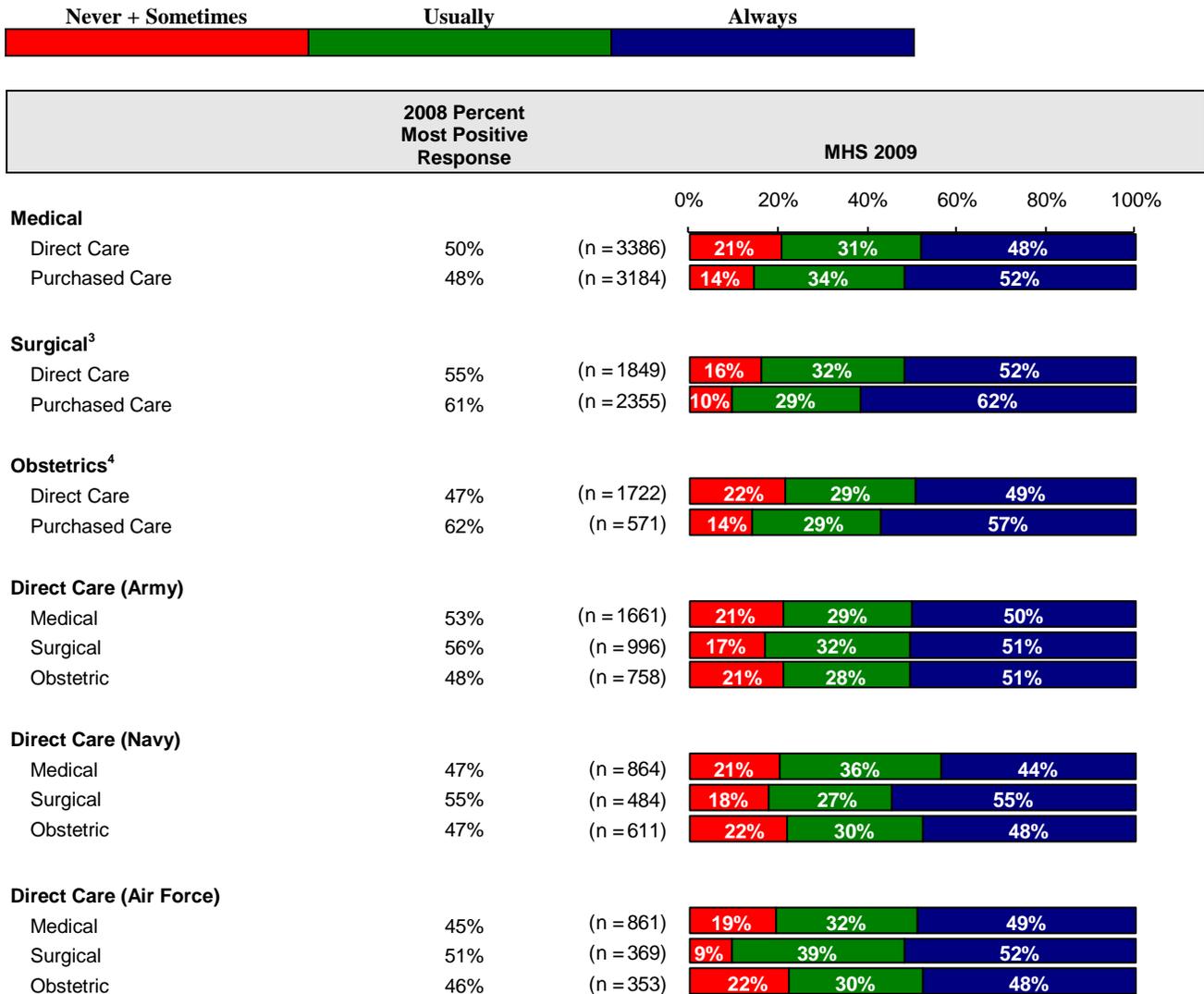
How often did the staff who took blood from you do this without causing you too much pain?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the staff who took blood from them did it without causing too much pain ($p < .05$).
2. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the staff who took blood from them did it without causing too much pain ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that the staff who took blood from them did it without causing too much pain ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

How often did the staff who took blood from you do this without causing you too much pain? (continued)

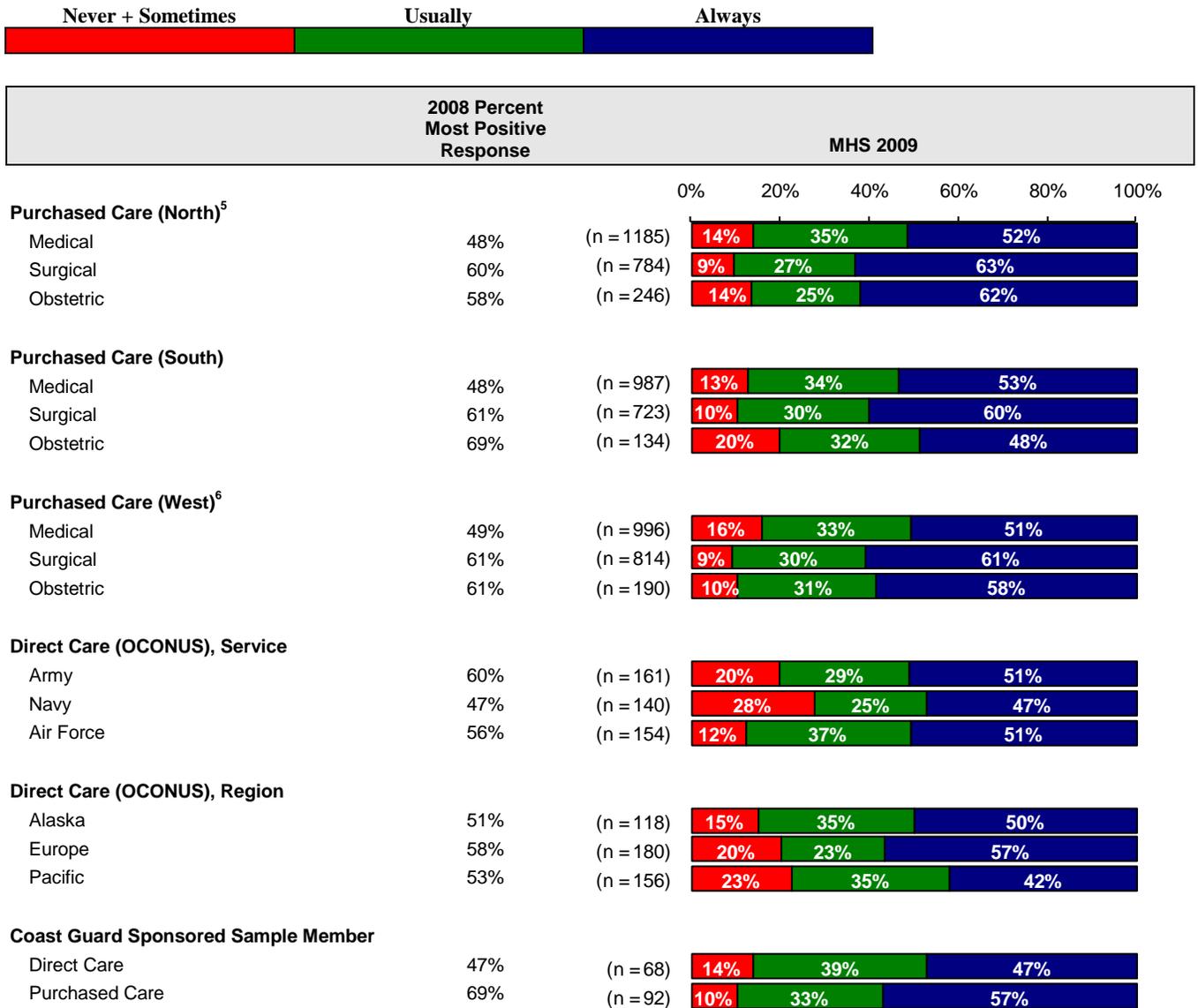


3. Among beneficiaries receiving Surgical services, those in Direct Care were significantly less likely than those in Purchased Care to report that the staff who took blood from them did it without causing too much pain ($p < .05$).

4. Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that the staff who took blood from them did it without causing too much pain ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

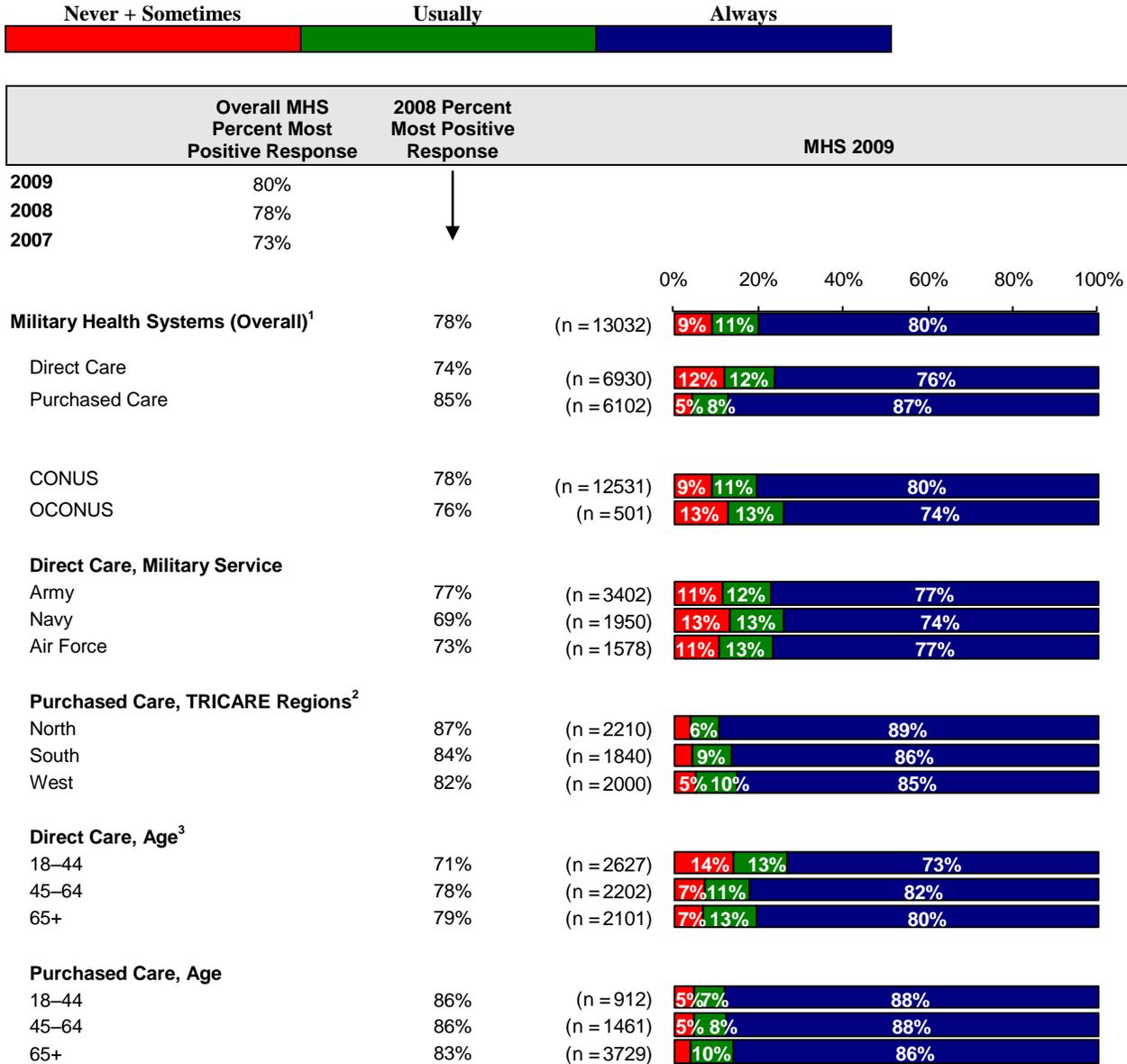
How often did the staff who took blood from you do this without causing you too much pain? (continued)



- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that the staff who took blood from them did it without causing too much pain ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving Surgical services to report that the staff who took blood from them did it without causing too much pain ($p < .05$).

Composite: Interaction with Other Hospital Staff

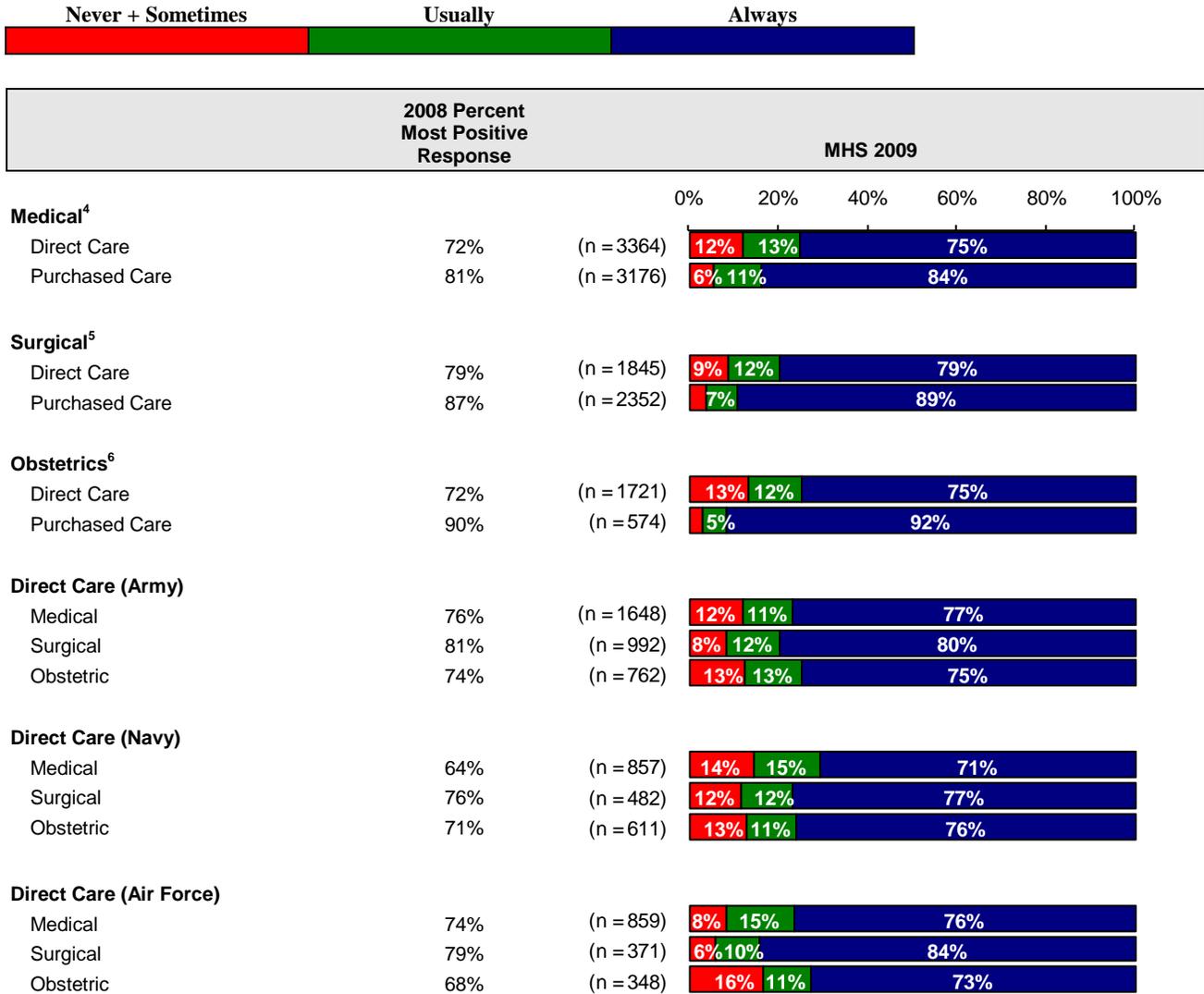
How often did staff check your identification band before taking your blood?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the staff always checked their identification bands before taking blood ($p < .05$).
2. Among Purchased Care beneficiaries, those in the North region were significantly more likely than those in the South or West regions to report that the staff always checked their identification bands before taking blood ($p < .05$).
3. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the staff always checked their identification bands before taking blood ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

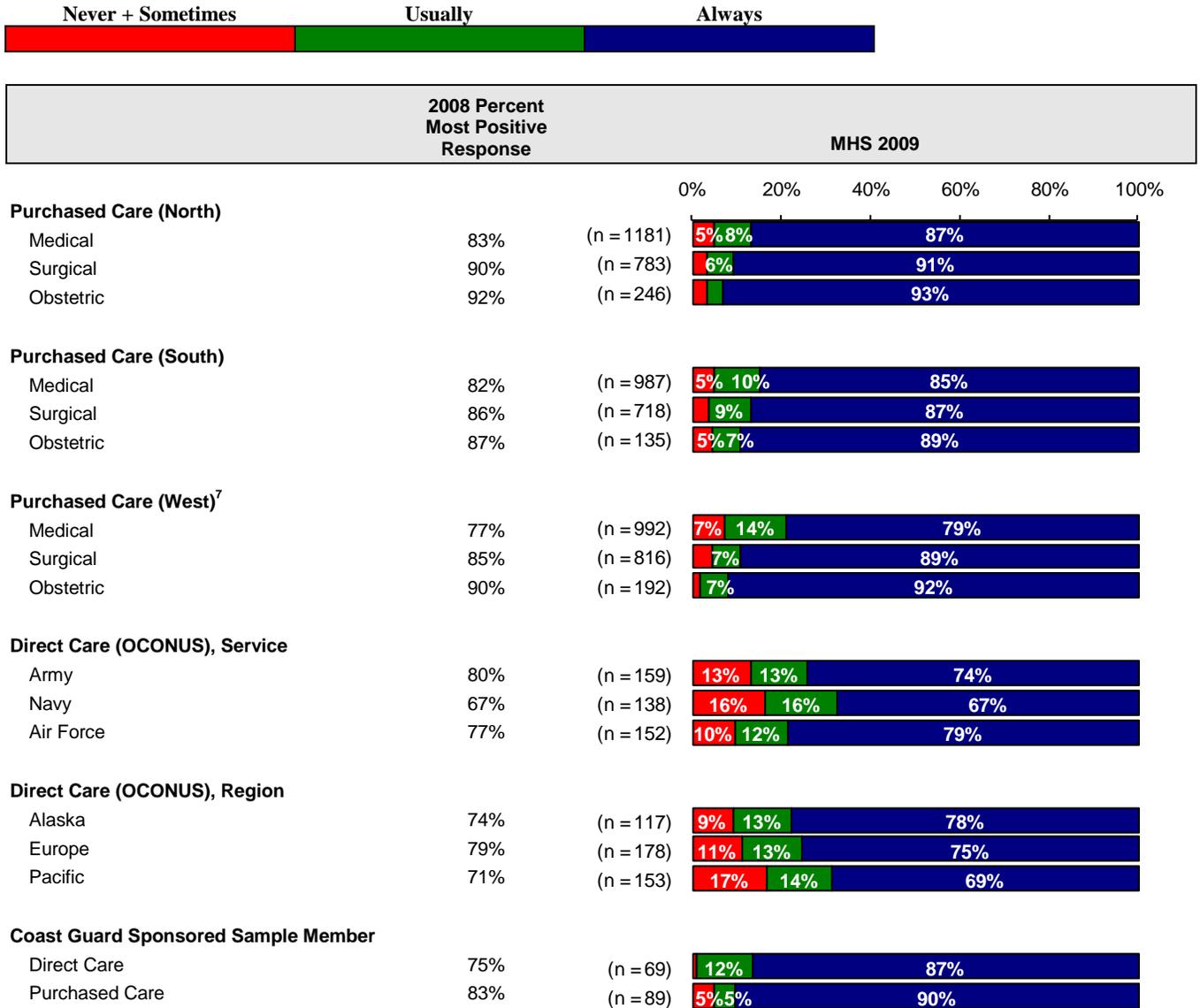
**How often did staff check your identification band before taking your blood?
(continued)**



- Among those receiving Medical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that the staff always checked their identification bands before taking blood ($p < .05$).
- Among those receiving Surgical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that the staff always checked their identification bands before taking blood ($p < .05$).
- Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that the staff always checked their identification bands before taking blood ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

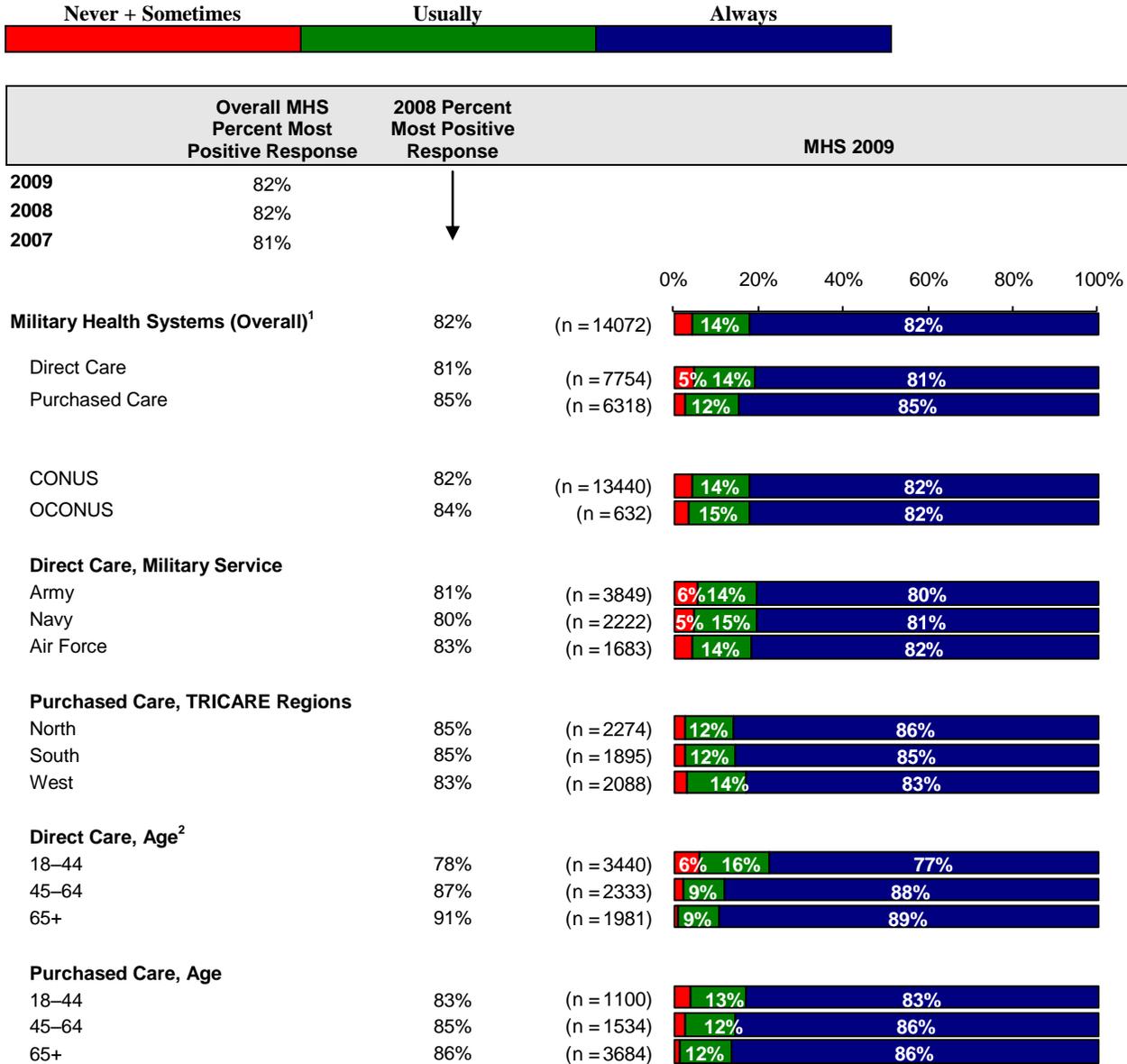
**How often did staff check your identification band before taking your blood?
(continued)**



7. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that the staff always checked their identification bands before taking blood ($p < .05$).

Composite: Interaction with Other Hospital Staff

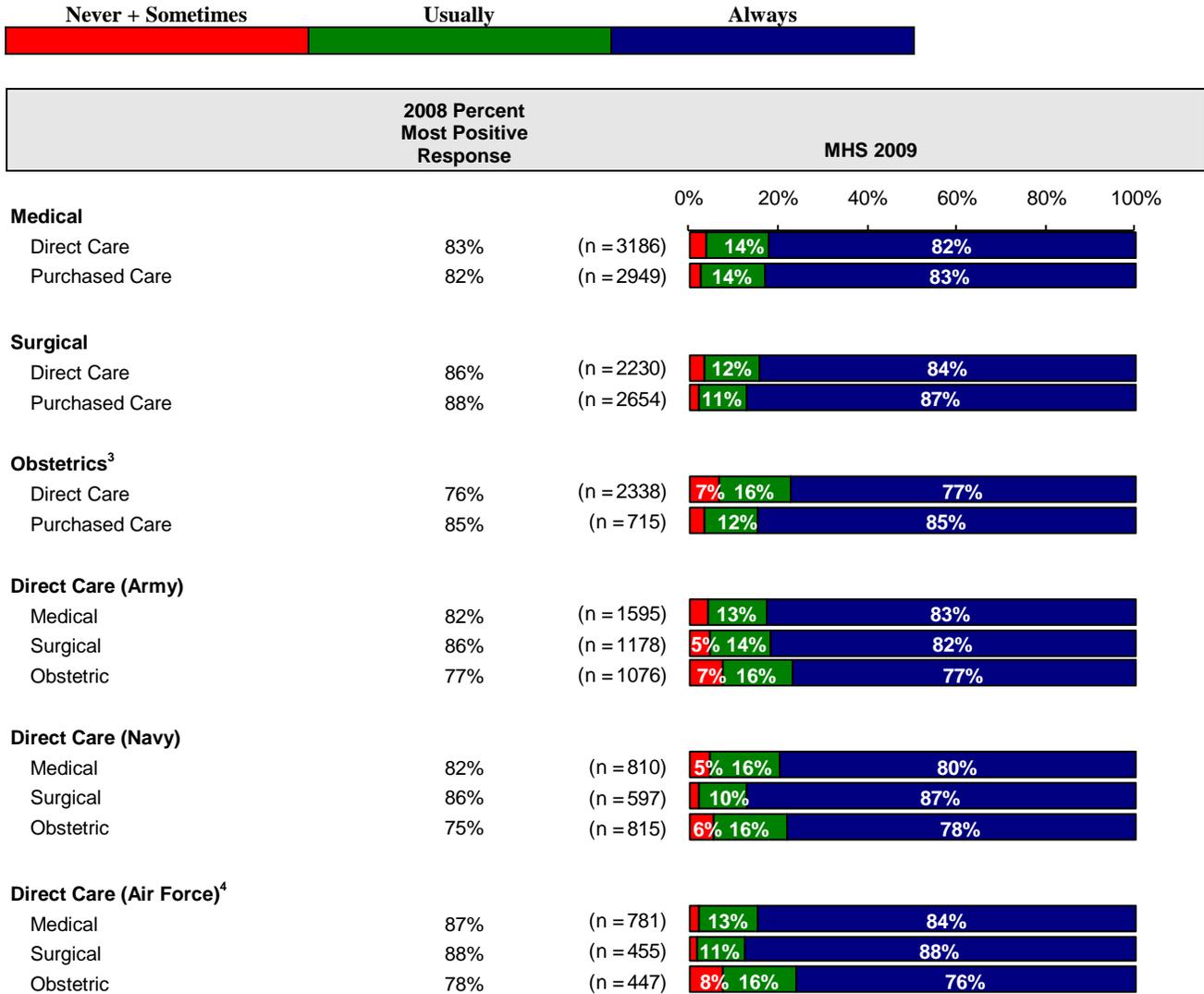
How often did the staff starting your IVs treat you with courtesy and respect?



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

**How often did the staff starting your IVs treat you with courtesy and respect?
(continued)**

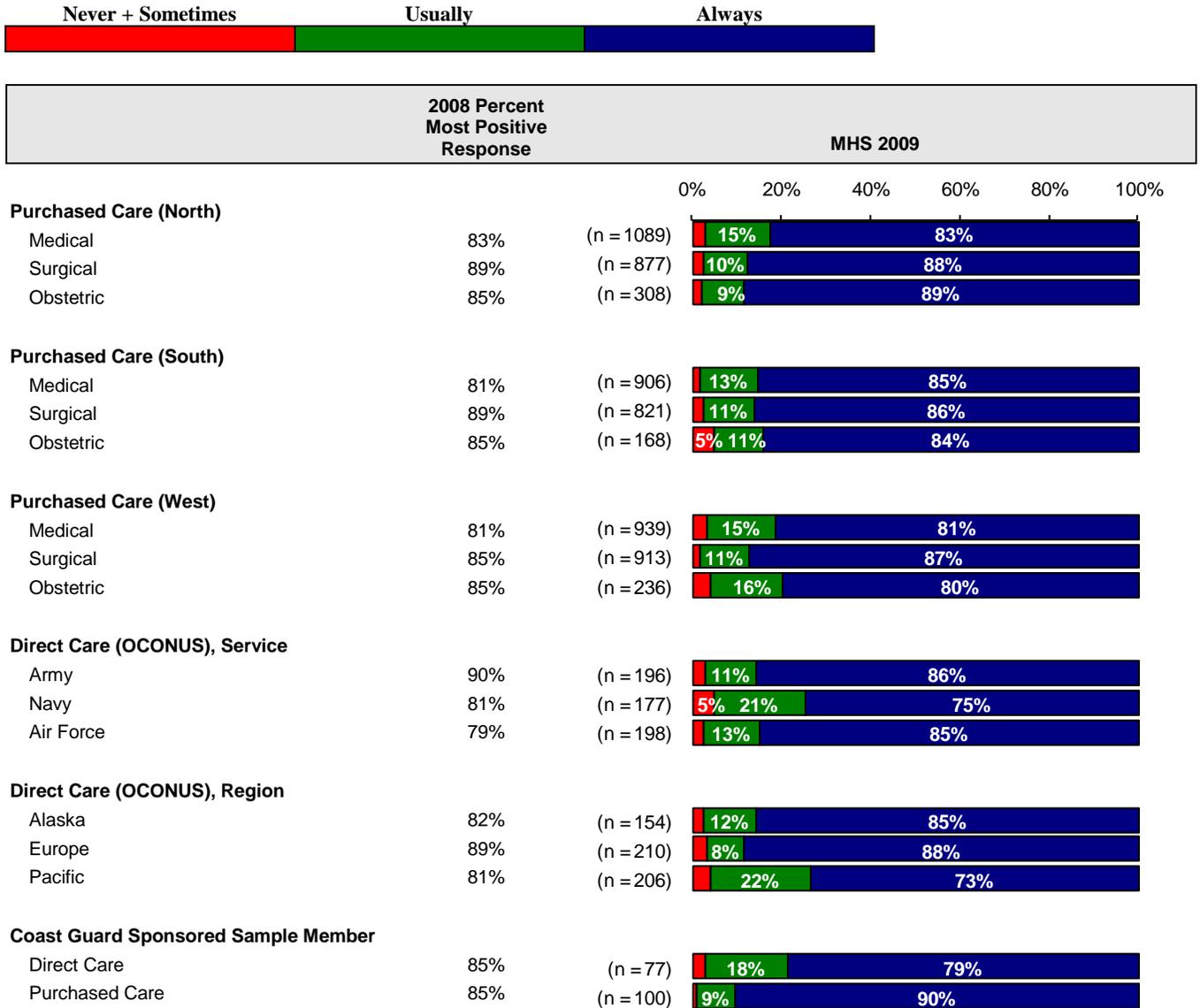


3. Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).

4. Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).

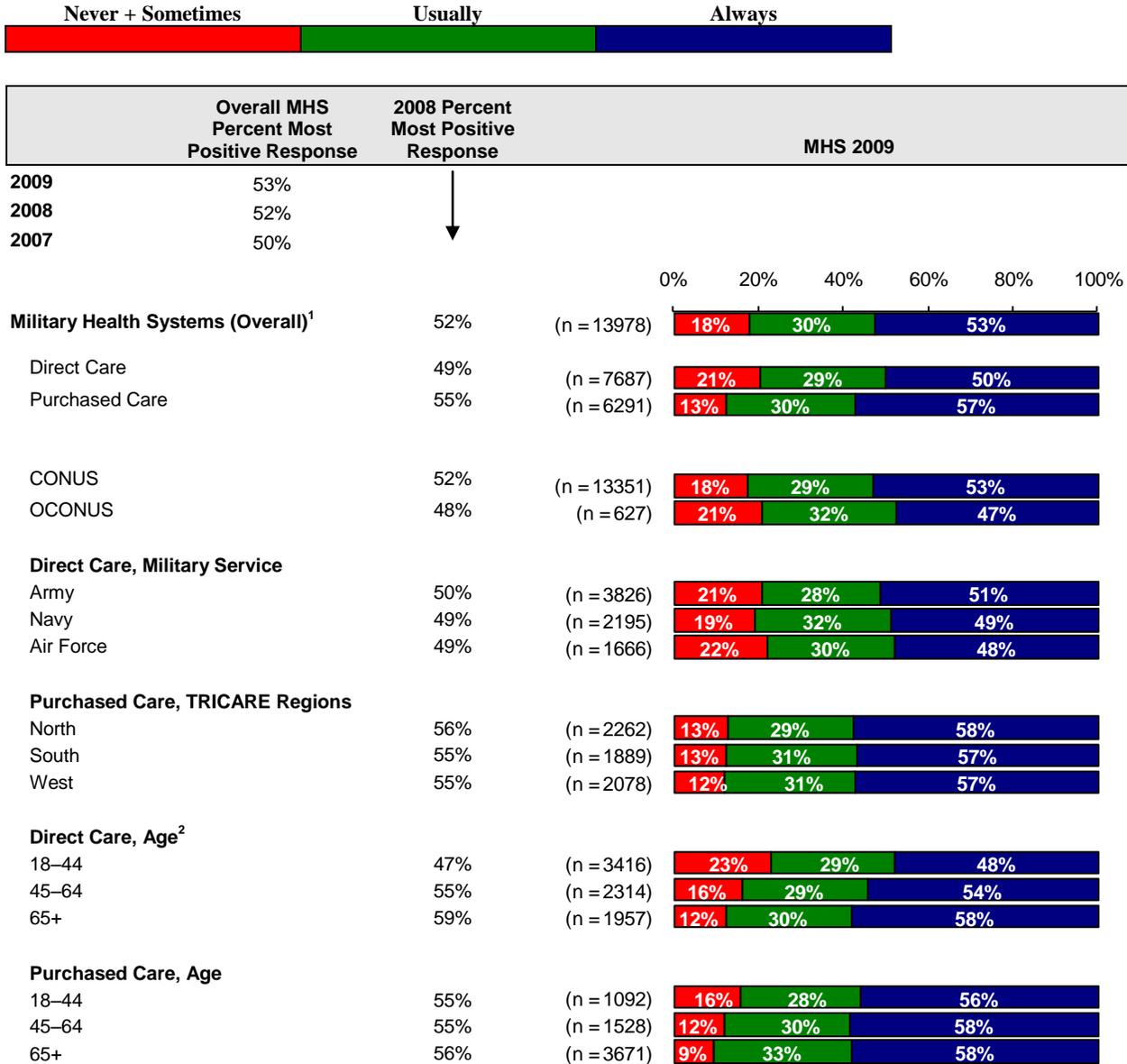
Composite: Interaction with Other Hospital Staff (continued)

**How often did the staff starting your IVs treat you with courtesy and respect?
(continued)**



Composite: Interaction with Other Hospital Staff

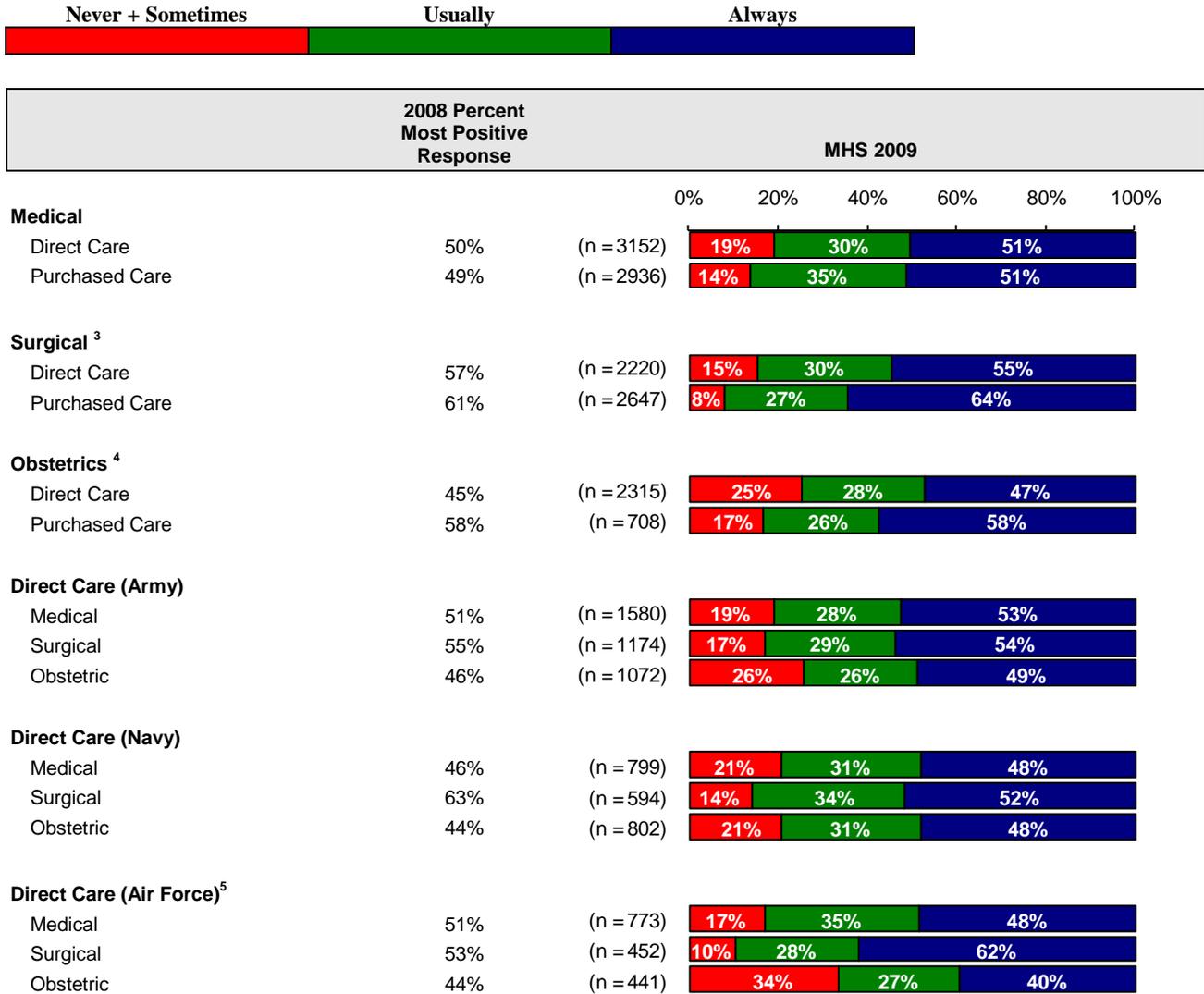
How often did the staff starting your IVs do this without causing you too much pain?



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that staff starting their IVs always did it without causing too much pain ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that staff starting their IVs always did this without causing too much pain ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that staff starting their IVs always did this without causing too much pain ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

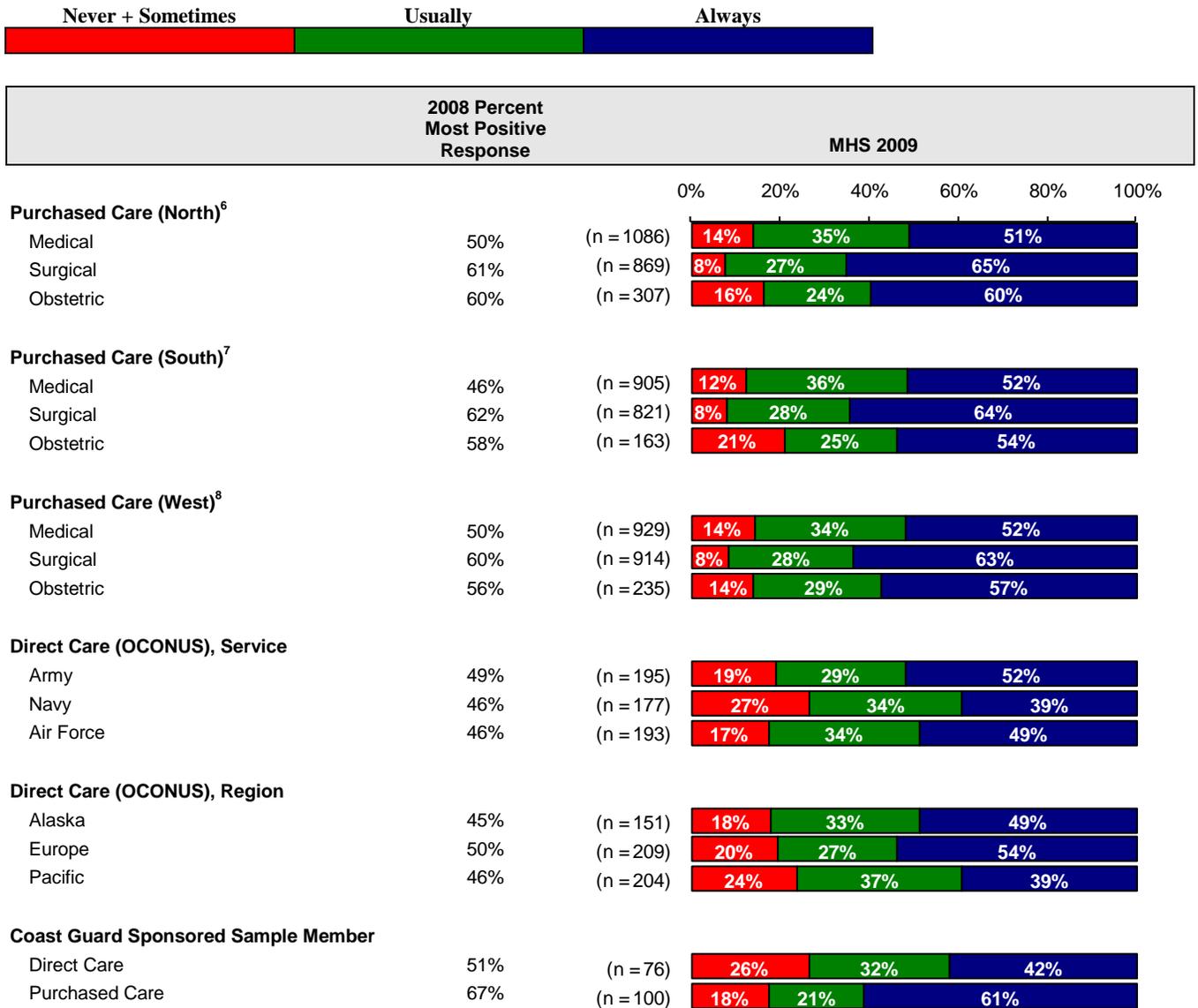
How often did the staff starting your IVs do this without causing you too much pain? (continued)



- Among those receiving Surgical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff starting their IVs always did this without causing too much pain ($p < .05$).
- Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff starting their IVs always did this without causing too much pain ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff starting their IVs always did this without causing too much pain ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that staff starting their IVs always did this without causing too much pain ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

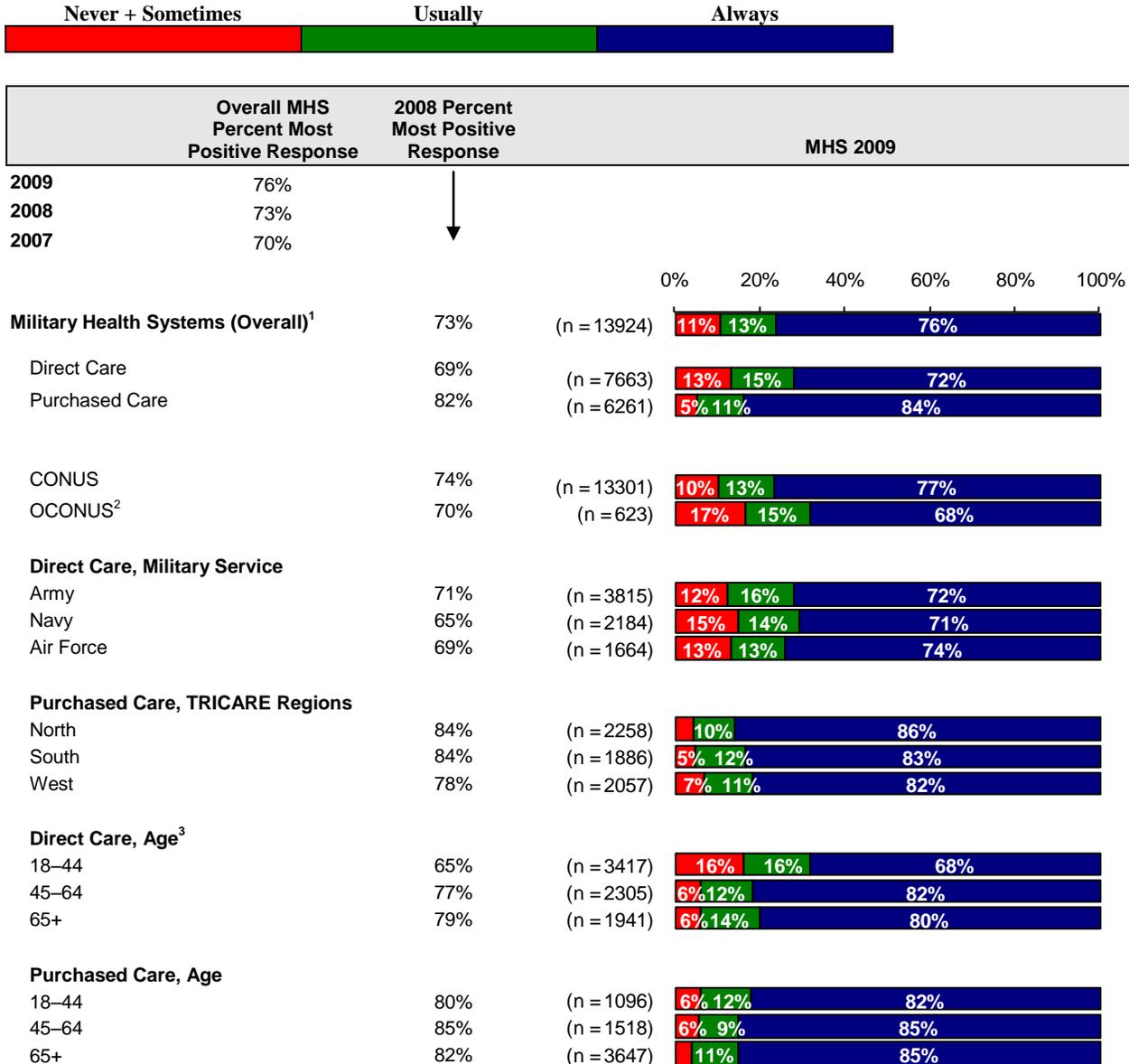
How often did the staff starting your IVs do this without causing you too much pain? (continued)



- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to report that staff starting their IVs always did this without causing too much pain ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving other services to report that staff starting their IVs always did this without causing too much pain ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving Surgical services to report that staff starting their IVs always did this without causing too much pain ($p < .05$).

Composite: Interaction with Other Hospital Staff

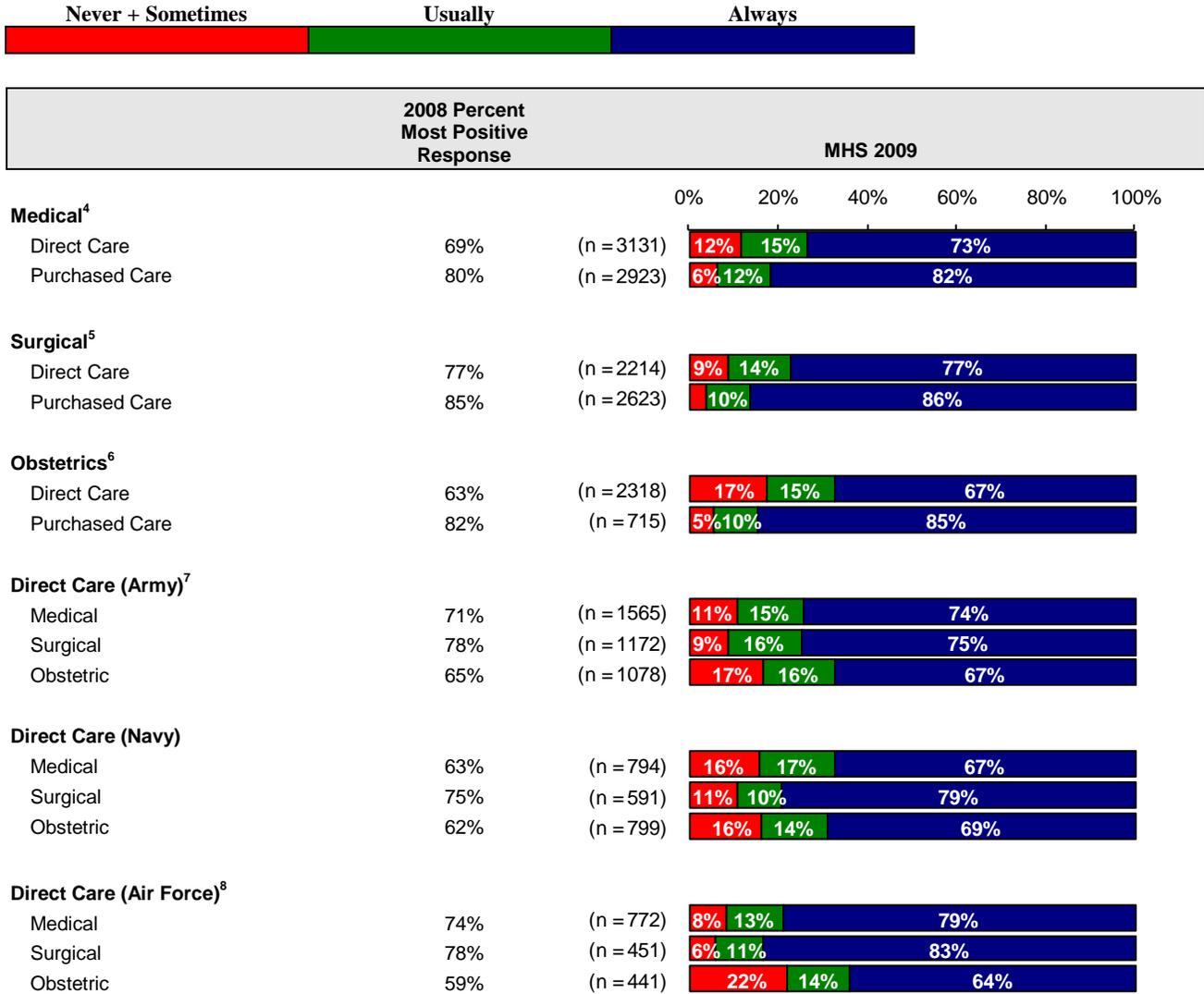
How often did staff check your identification band before starting your IV?



1. Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before starting their IV ($p < .05$).
2. Overall, CONUS beneficiaries were significantly more likely than OCONUS beneficiaries to report that staff always checked their identification band before starting their IV ($p < .05$).
3. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that staff always checked their identification band before starting their IV ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

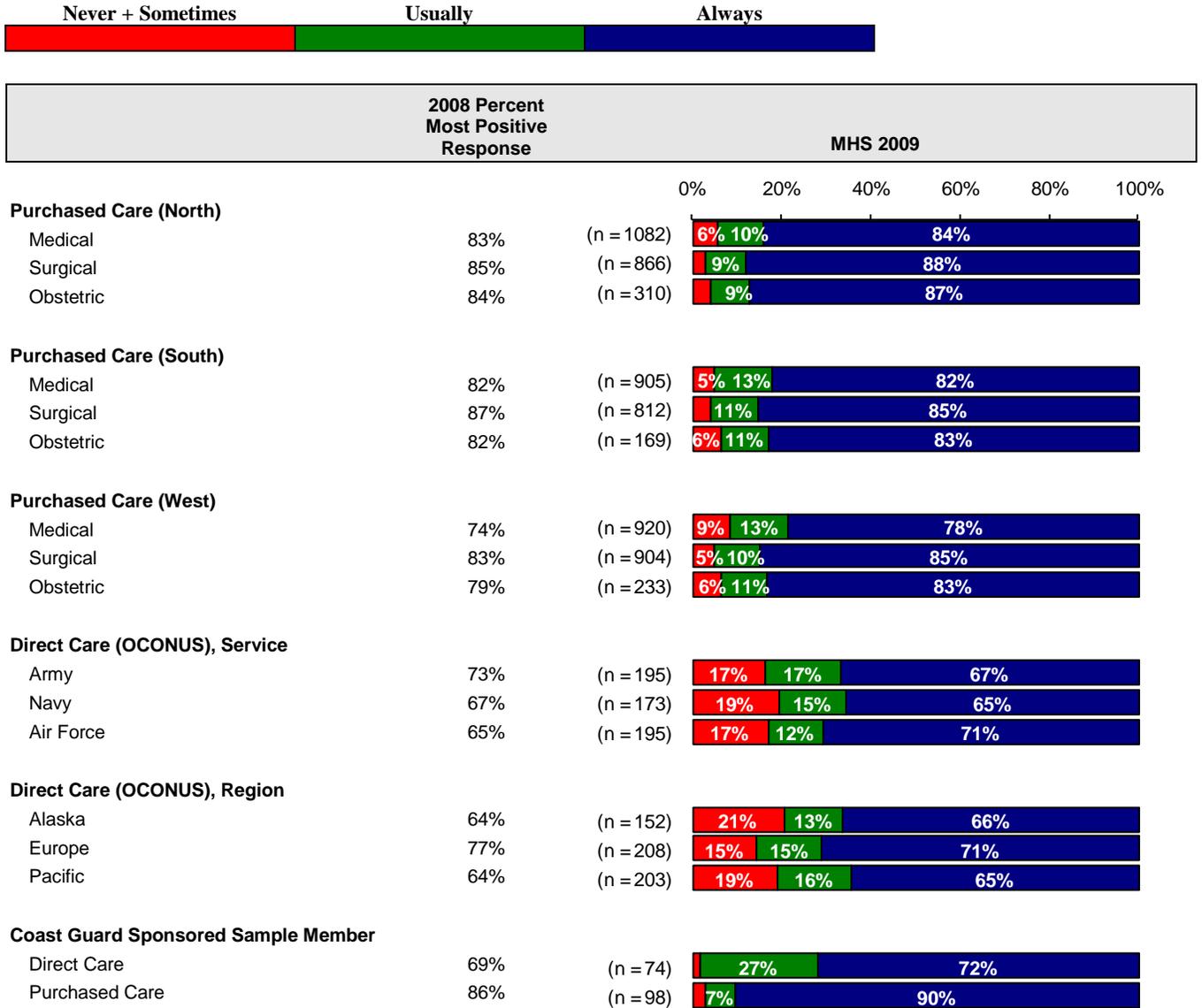
How often did staff check your identification band before starting your IV? (continued)



4. Among those receiving Medical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff always checked their identification band before starting their IV ($p < .05$).
5. Among those receiving Surgical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff always checked their identification band before starting their IV ($p < .05$).
6. Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff always checked their identification band before starting their IV ($p < .05$).
7. Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always checked their identification band before starting their IV ($p < .05$).
8. Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always checked their identification band before starting their IV ($p < .05$).

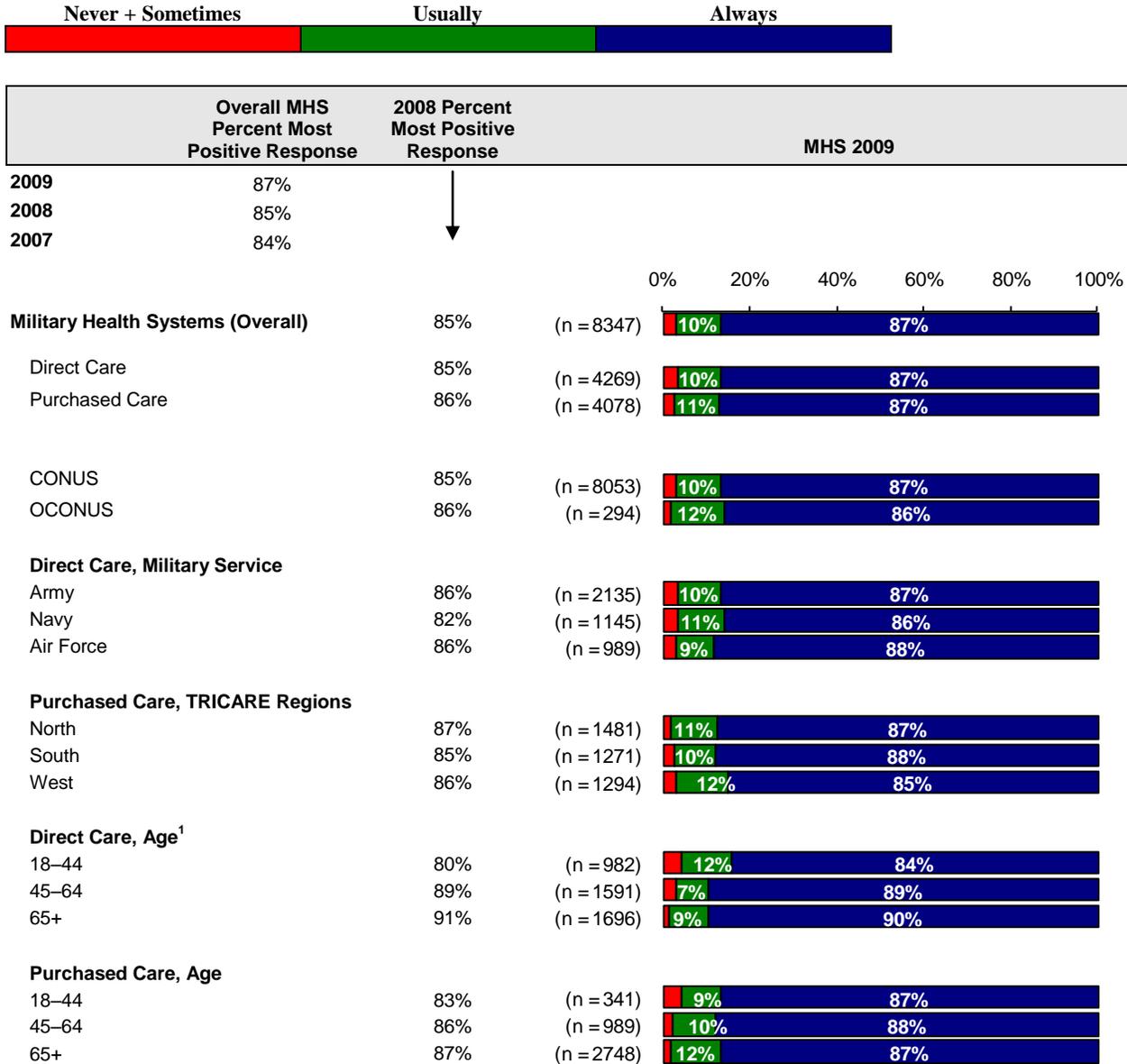
Composite: Interaction with Other Hospital Staff (continued)

How often did staff check your identification band before starting your IV? (continued)



Composite: Interaction with Other Hospital Staff

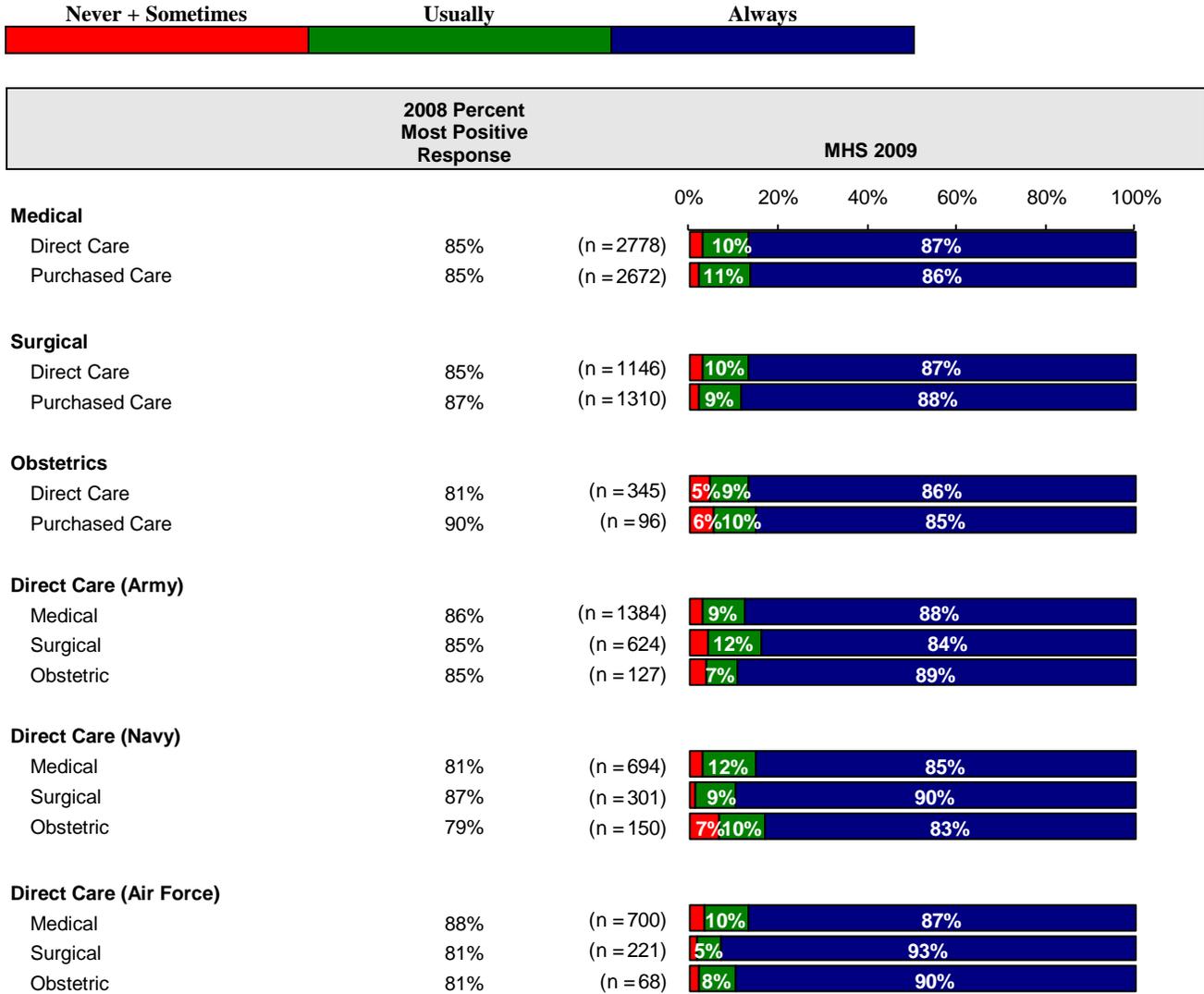
How often did the radiology staff treat you with courtesy and respect?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the radiology staff always treated them with courtesy and respect ($p < .05$).

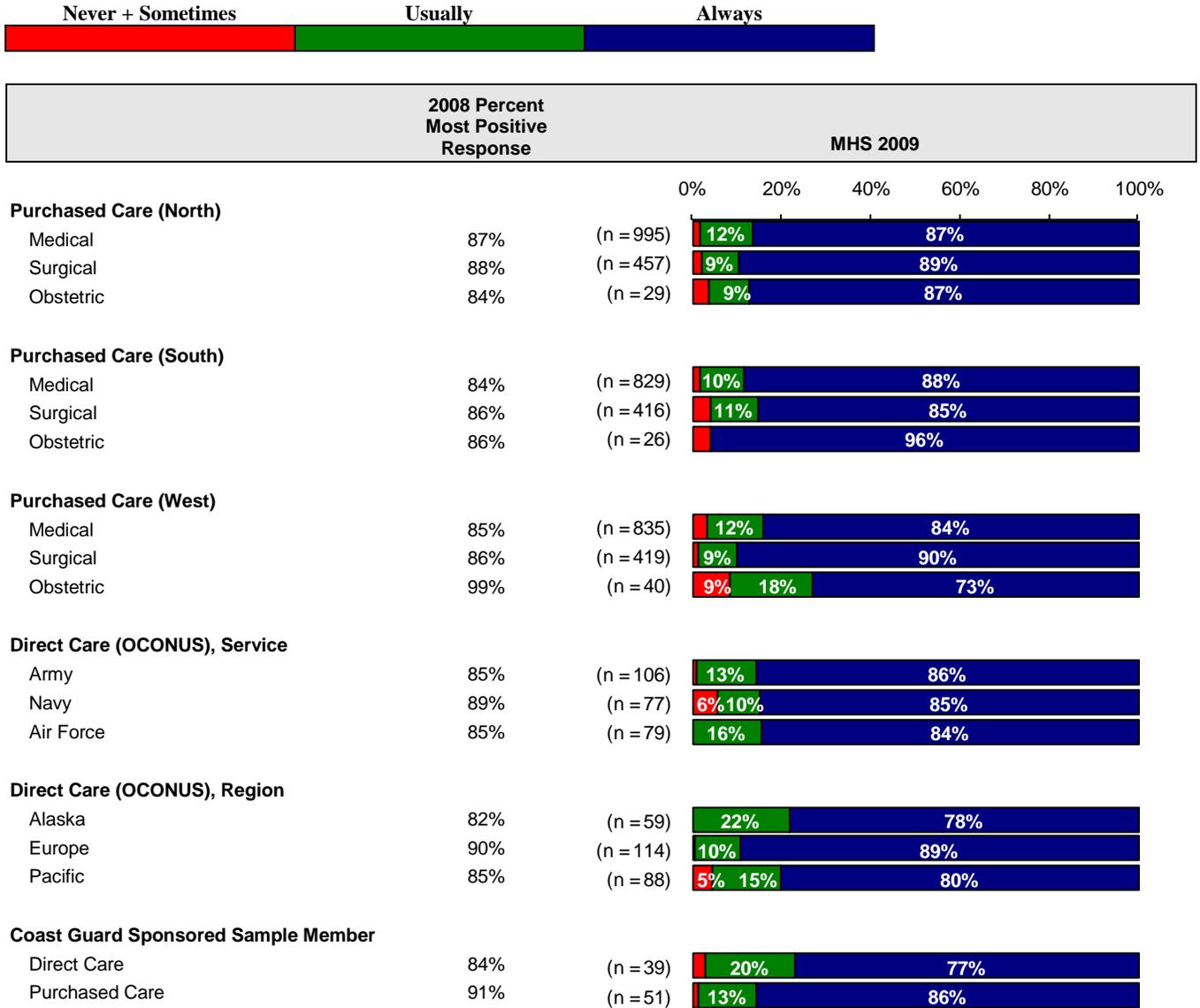
Composite: Interaction with Other Hospital Staff (continued)

How often did the radiology staff treat you with courtesy and respect? (continued)



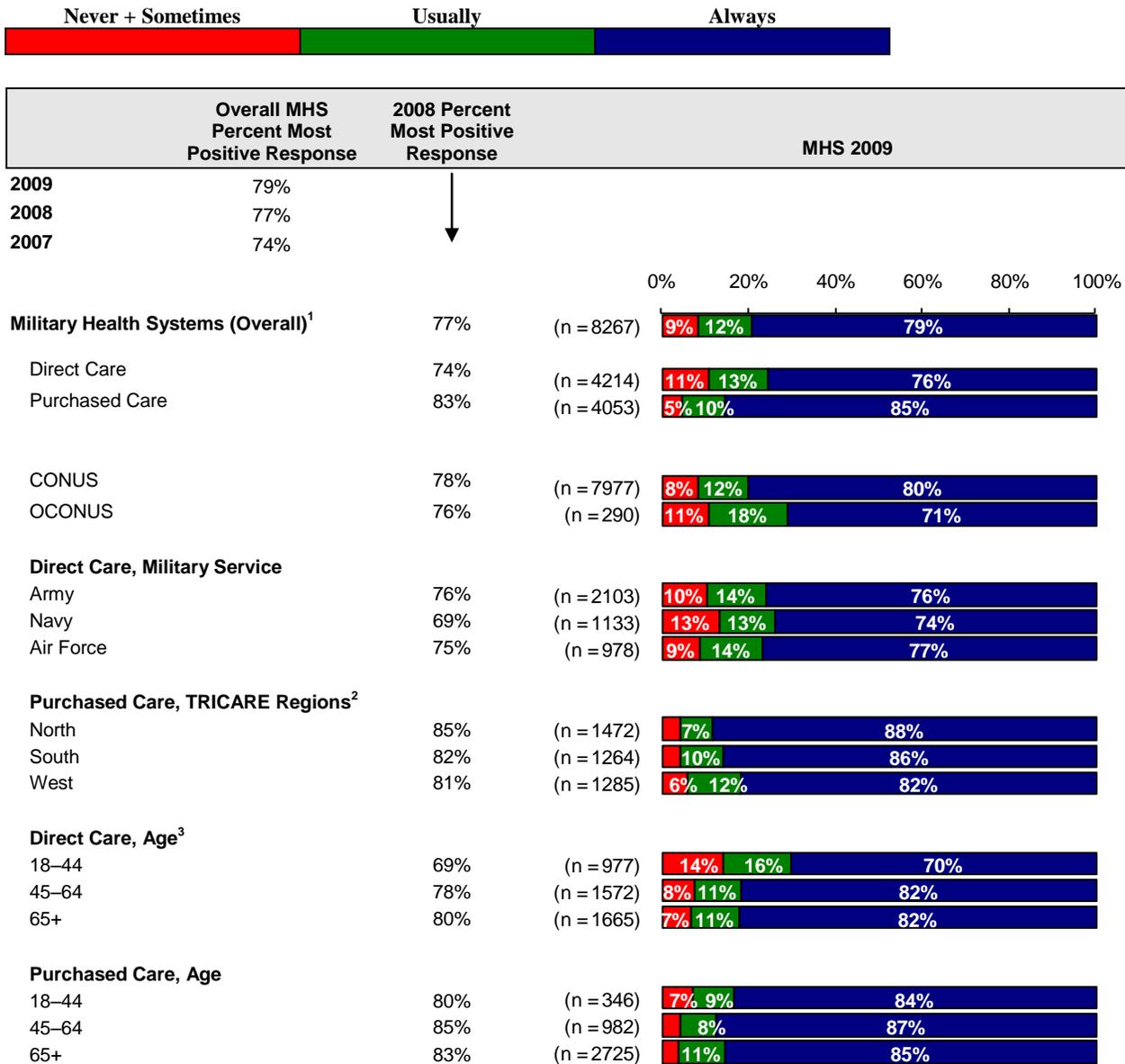
Composite: Interaction with Other Hospital Staff (continued)

How often did the radiology staff treat you with courtesy and respect? (continued)



Composite: Interaction with Other Hospital Staff

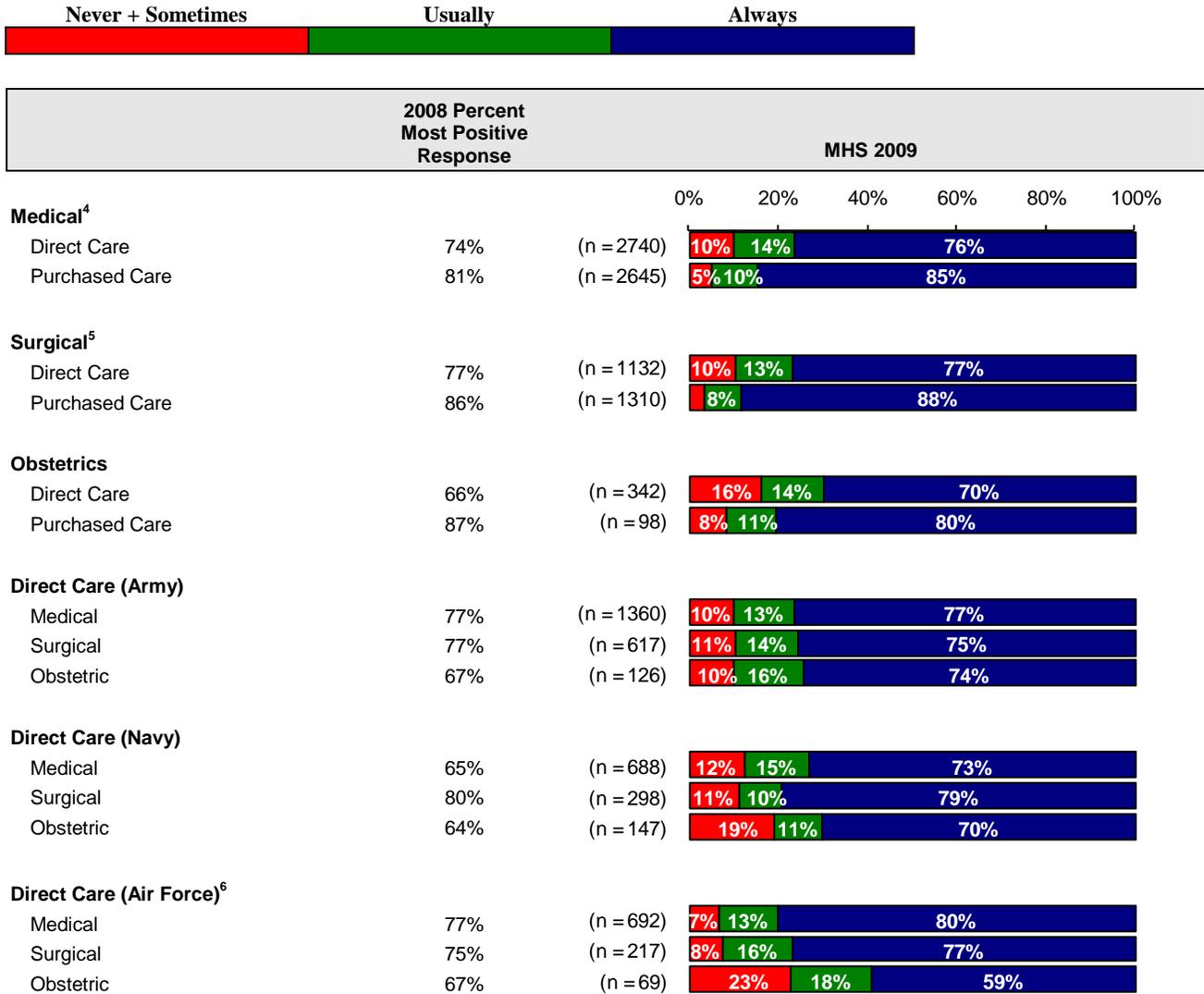
How often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound or any other radiological test or treatment?



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before doing any radiological test or treatment ($p < .05$).
- Among Purchased Care, those in the West region were significantly less likely than those in the North or South regions to report that staff always checked their identification band before doing any radiological test or treatment ($p < .05$).
- Among Direct Care, those in aged 18–44 were significantly less likely than those in other age groups to report that staff always checked their identification band before doing any radiological test or treatment ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

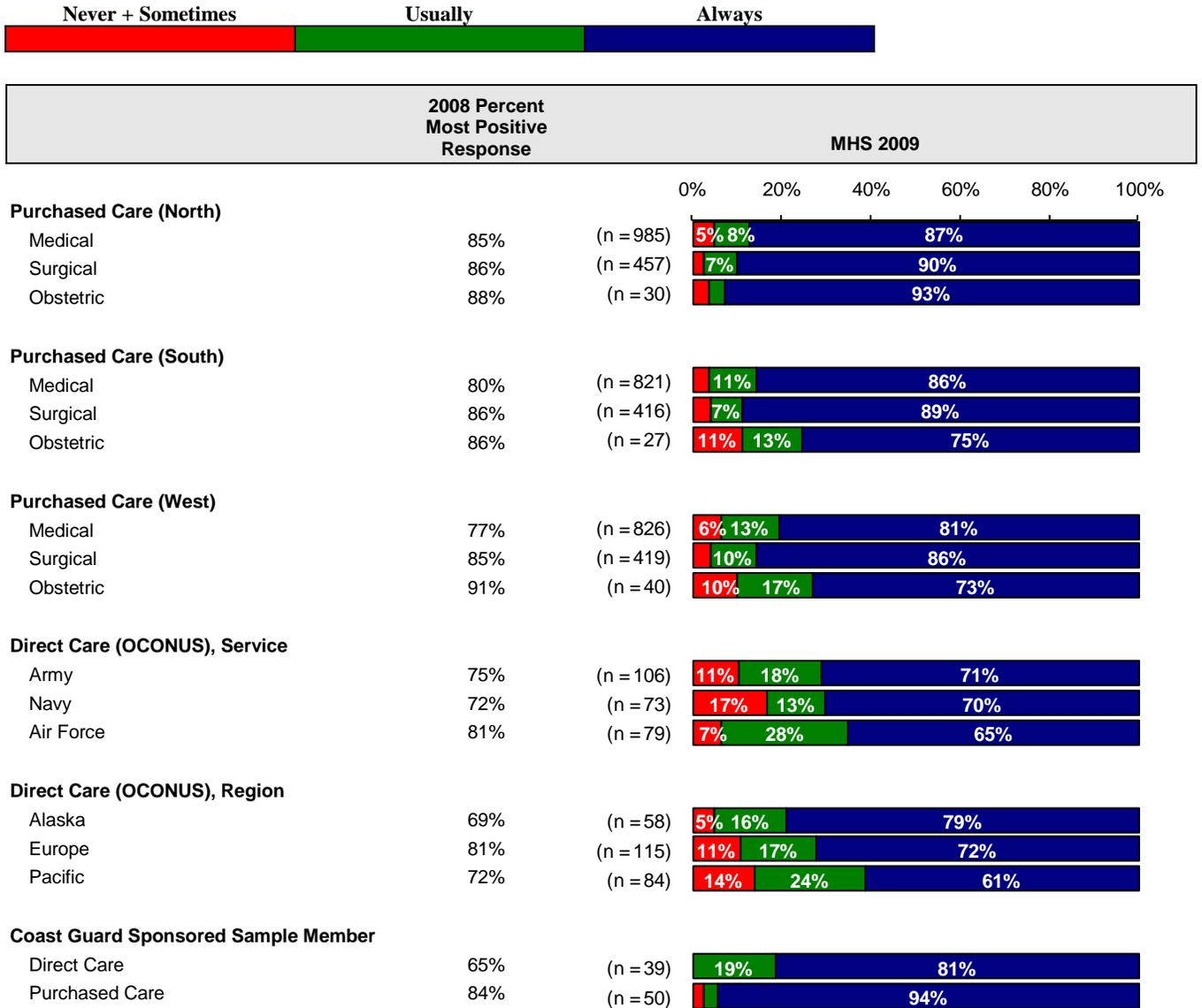
How often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound or any other radiological test or treatment? (continued)



- Among those receiving Medical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff always checked their identification band before doing any radiological test or treatment ($p < .05$).
- Among those receiving Surgical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that staff always checked their identification band before doing any radiological test or treatment ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always checked their identification band before doing any radiological test or treatment ($p < .05$).

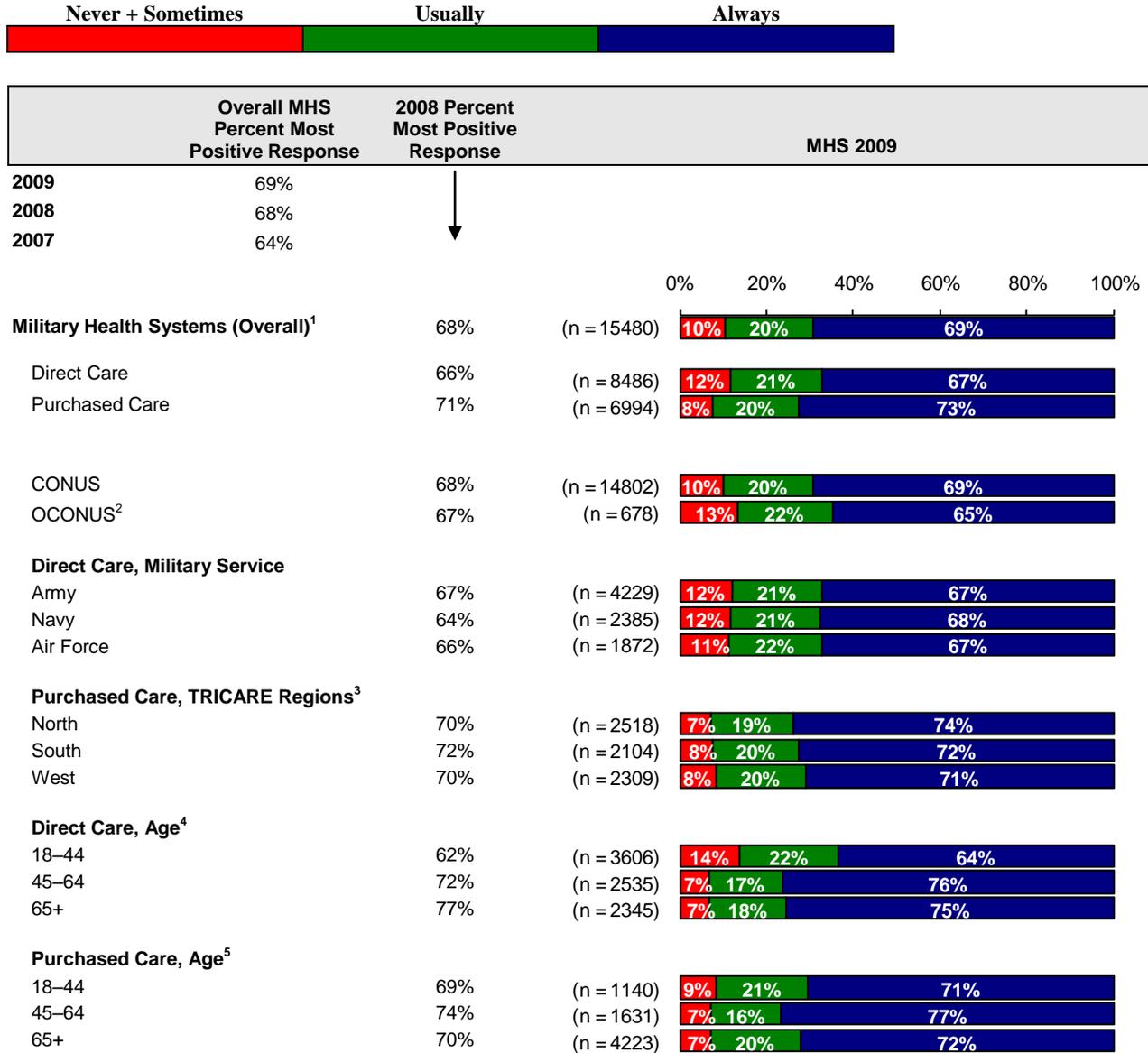
Composite: Interaction with Other Hospital Staff (continued)

How often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound or any other radiological test or treatment? (continued)



Composite: Patient Safety

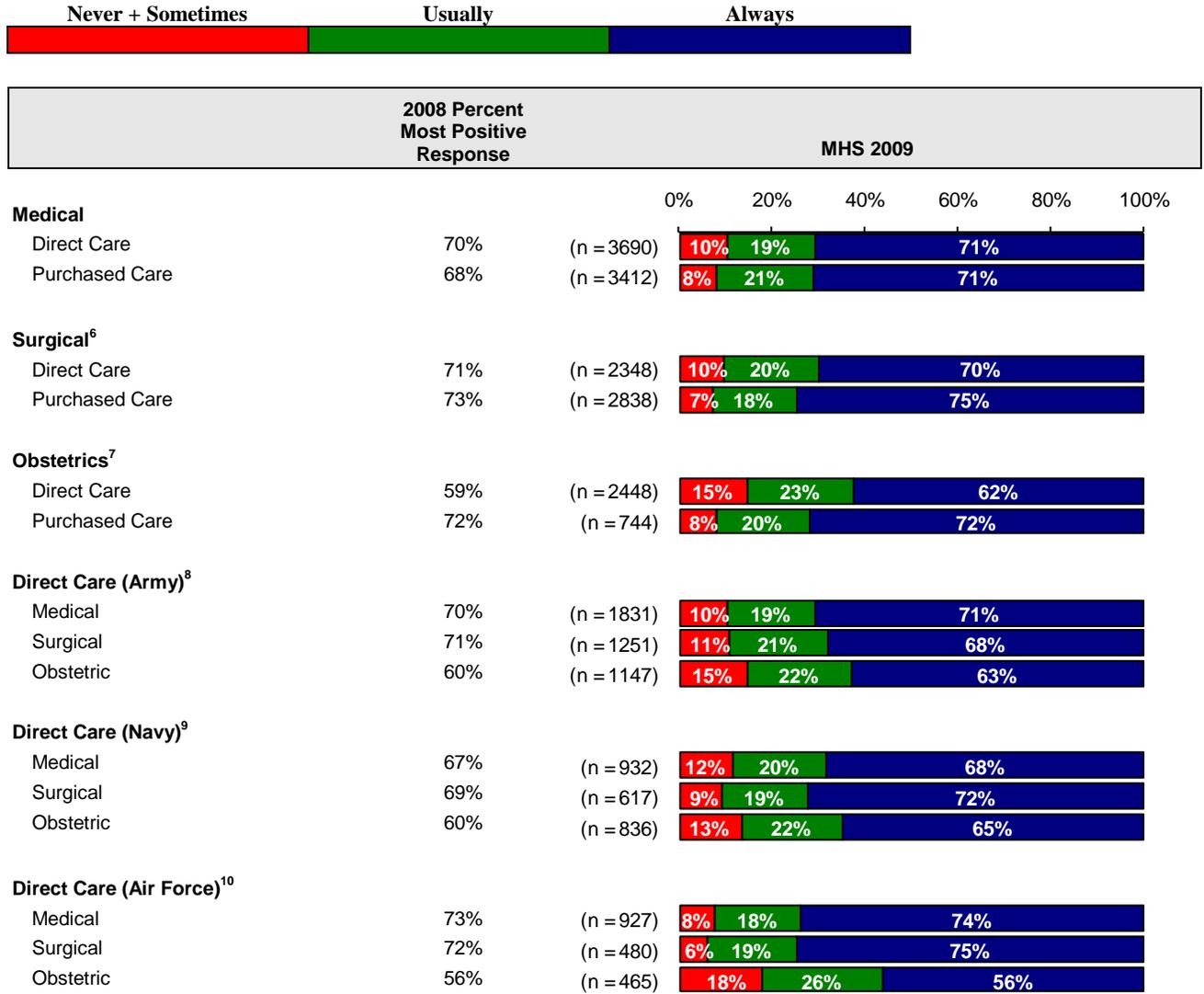
This composite combines responses from three questions about patient safety.



1. Overall, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Patient Safety composite ($p < .05$).
2. Overall, CONUS beneficiaries were significantly more likely than OCONUS beneficiaries to report most positive responses to the Patient Safety composite ($p < .05$).
3. Among Purchased Care beneficiaries, those in the North region were significantly more likely than those in the South region to report most positive responses to the Patient Safety composite ($p < .05$).
4. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report most positive responses to the Patient Safety composite ($p < .05$).
5. Among Purchased Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report most positive responses to the Patient Safety composite ($p < .05$).

Composite: Patient Safety (continued)

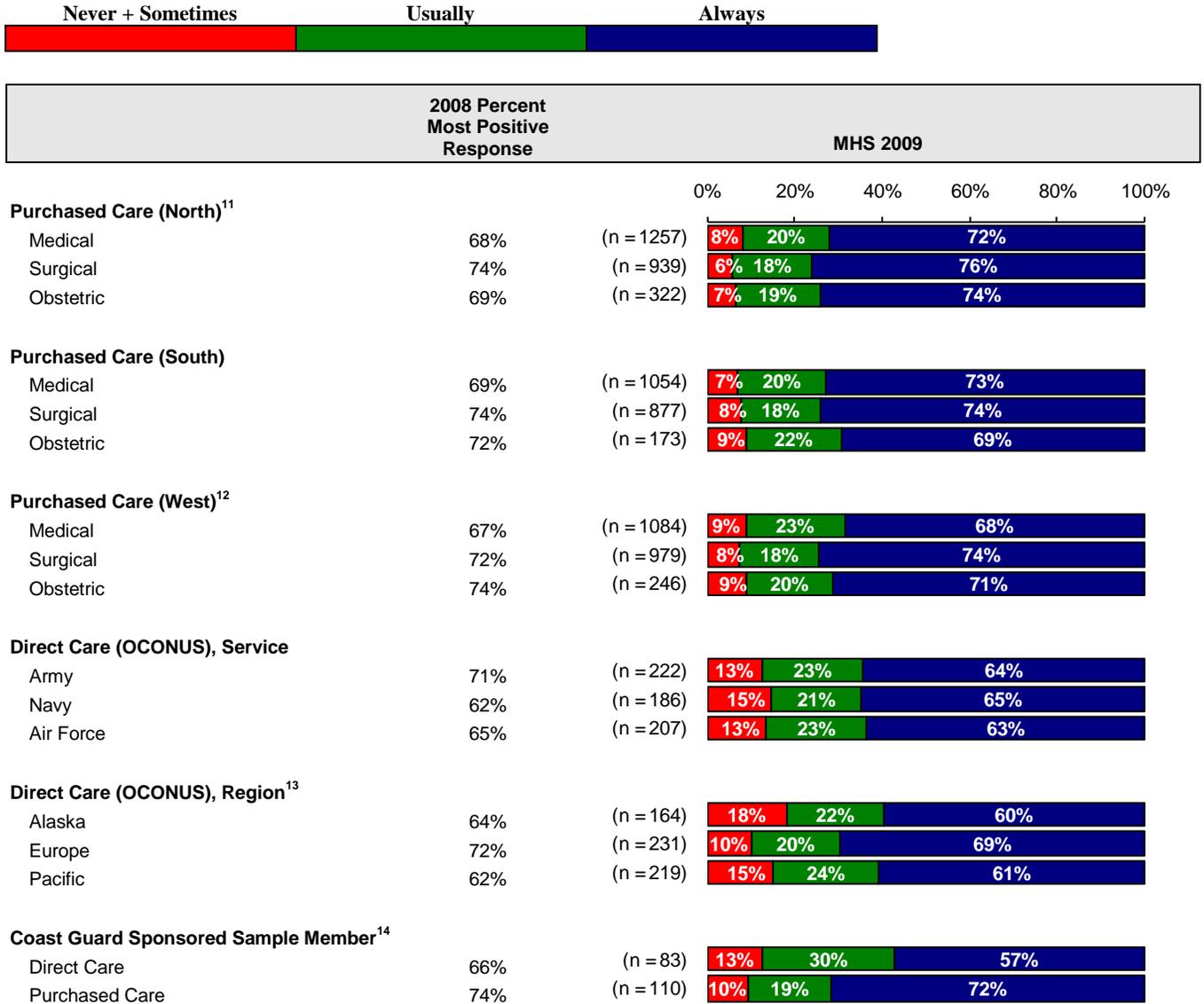
This composite combines responses from three questions about patient safety.



6. Among beneficiaries receiving Surgical services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive responses to the Patient Safety composite ($p < .05$).
7. Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report most positive responses to the Patient Safety composite ($p < .05$).
8. Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive results for the Patient Safety composite ($p < .05$).
9. Among Direct Care beneficiaries in Navy MTFs, those receiving Surgical services were significantly more likely than those receiving Obstetrics services to report most positive results for the Patient Safety composite ($p < .05$).
10. Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report most positive results for the Patient Safety composite ($p < .05$).

Composite: Patient Safety (continued)

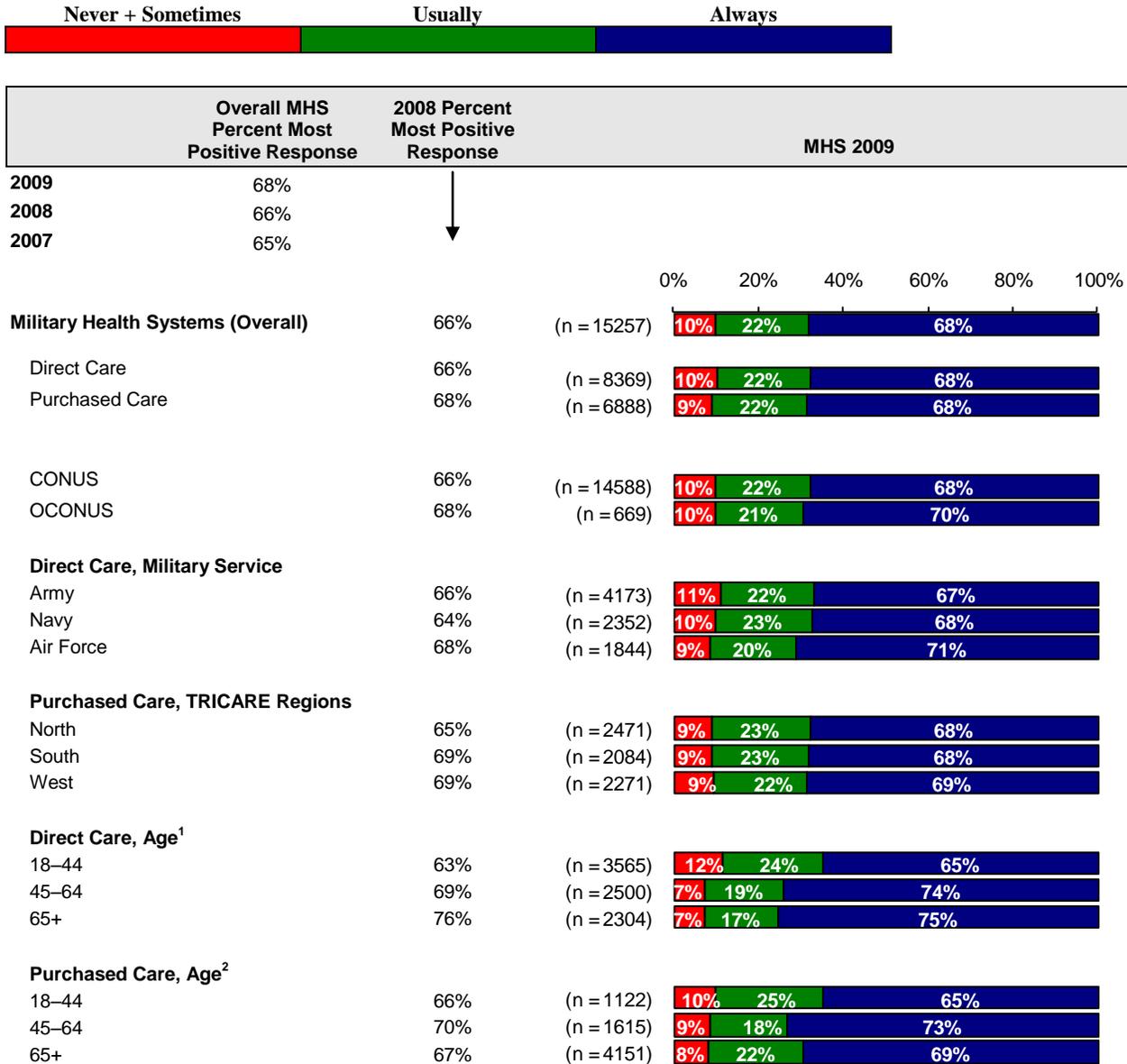
This composite combines responses from three questions about patient safety.



11. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving Surgical services to report most positive results for the Patient Safety composite ($p < .05$).
12. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving Surgical services to report most positive results for the Patient Safety composite ($p < .05$).
13. Among Direct Care OCONUS beneficiaries, those receiving care in European MTFs were significantly more likely than those receiving care in Alaskan or Pacific MTFs to report most positive results for the Patient Safety composite ($p < .05$).
14. Among Coast Guard beneficiaries, those in Purchased Care were significantly more likely than those in Direct Care to report most positive results for the Patient Safety composite ($p < .05$).

Composite: Patient Safety

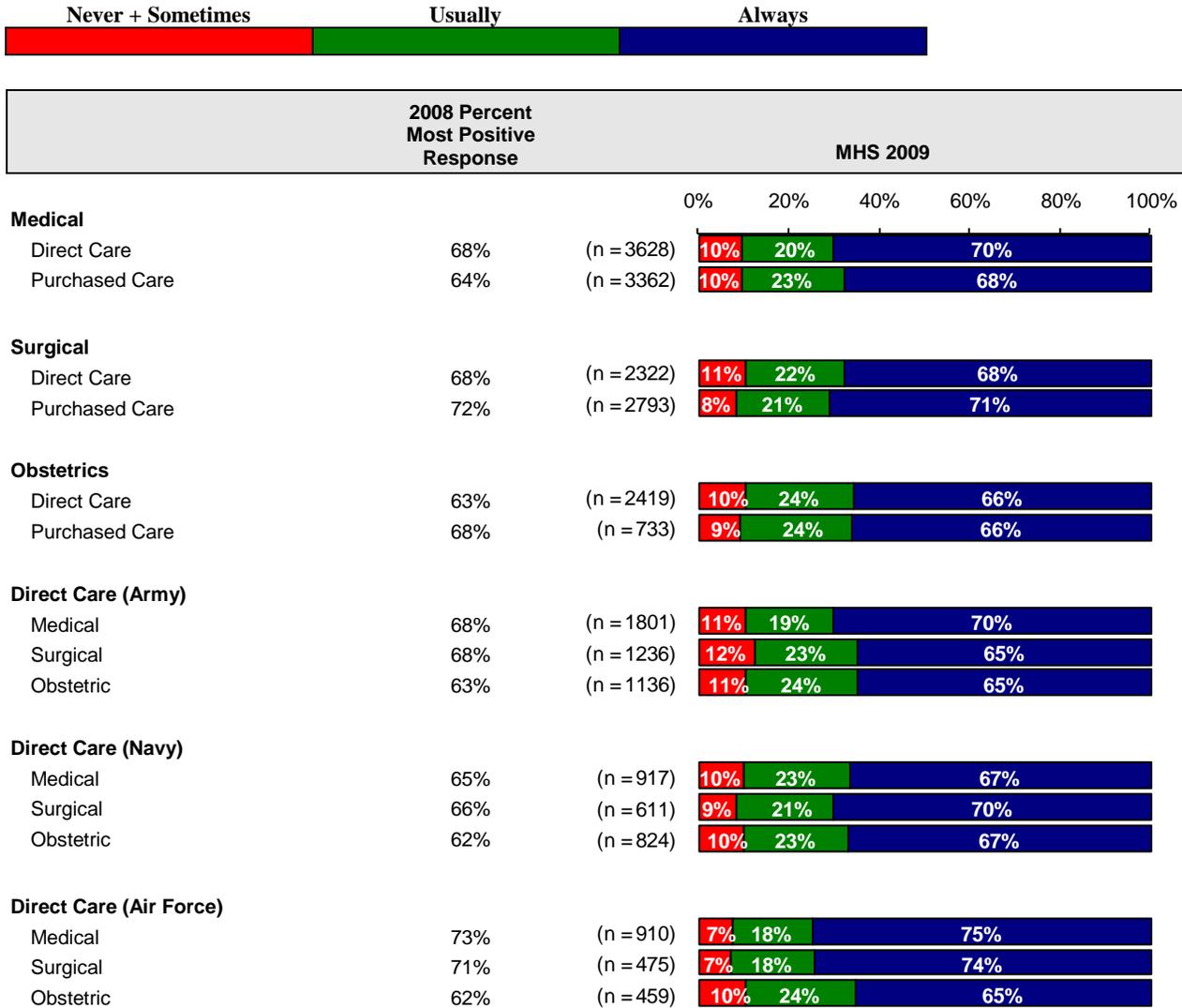
How often did you see staff wash their hands or use gloves before treating or checking you?



1. Among those in Direct Care, those in aged 18–44 were significantly less likely than those in other age groups to report that staff always washed their hands or used gloves before treating or checking on them ($p < .05$).
2. Among those in Purchased Care, those aged 18–44 were significantly less likely than those in other age groups to report that staff always washed their hands or used gloves before treating or checking on them ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups to report that staff always washed their hands or used gloves before treating or checking on them ($p < .05$).

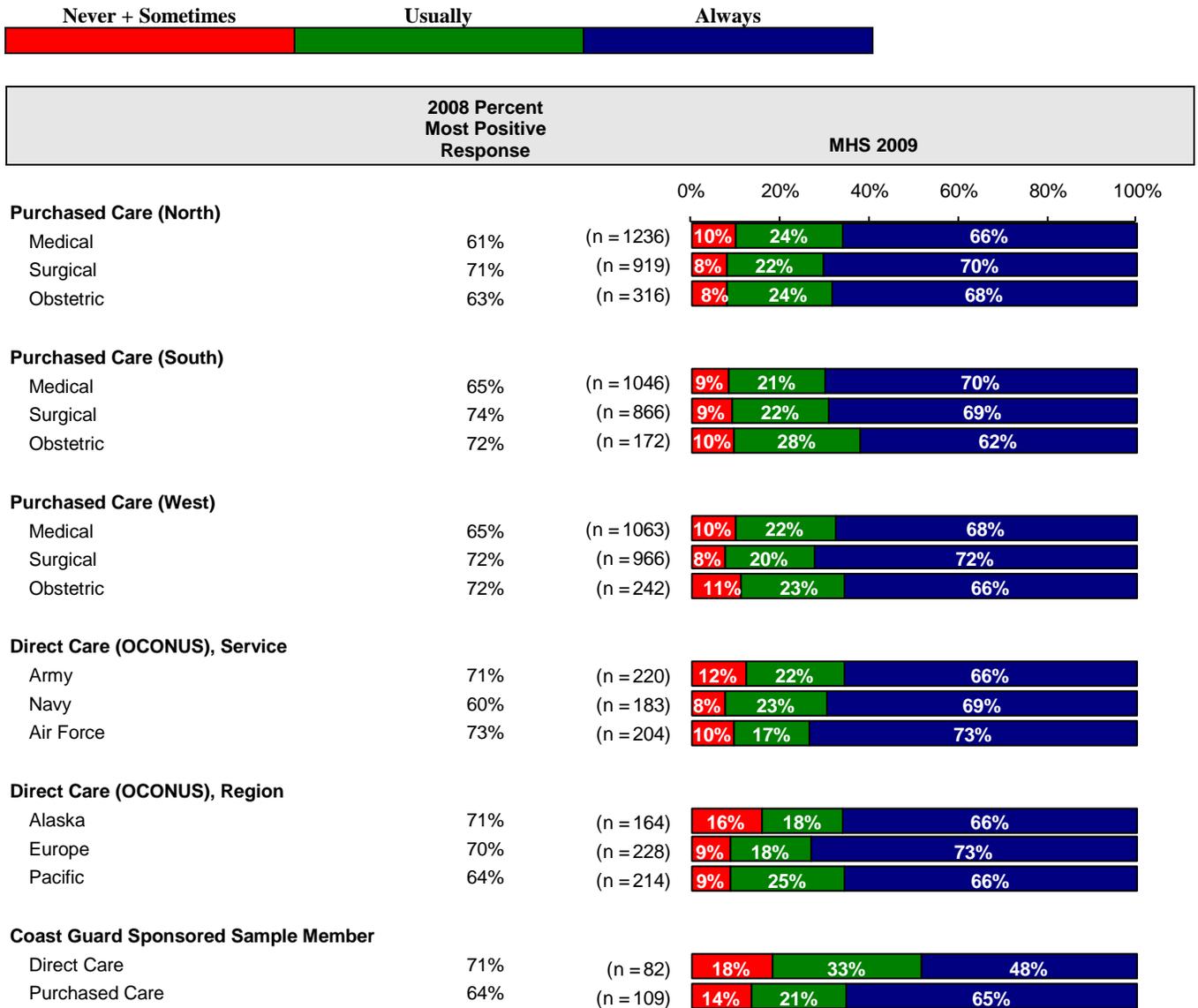
Composite: Patient Safety (continued)

How often did you see staff wash their hands or use gloves before treating or checking you? (continued)



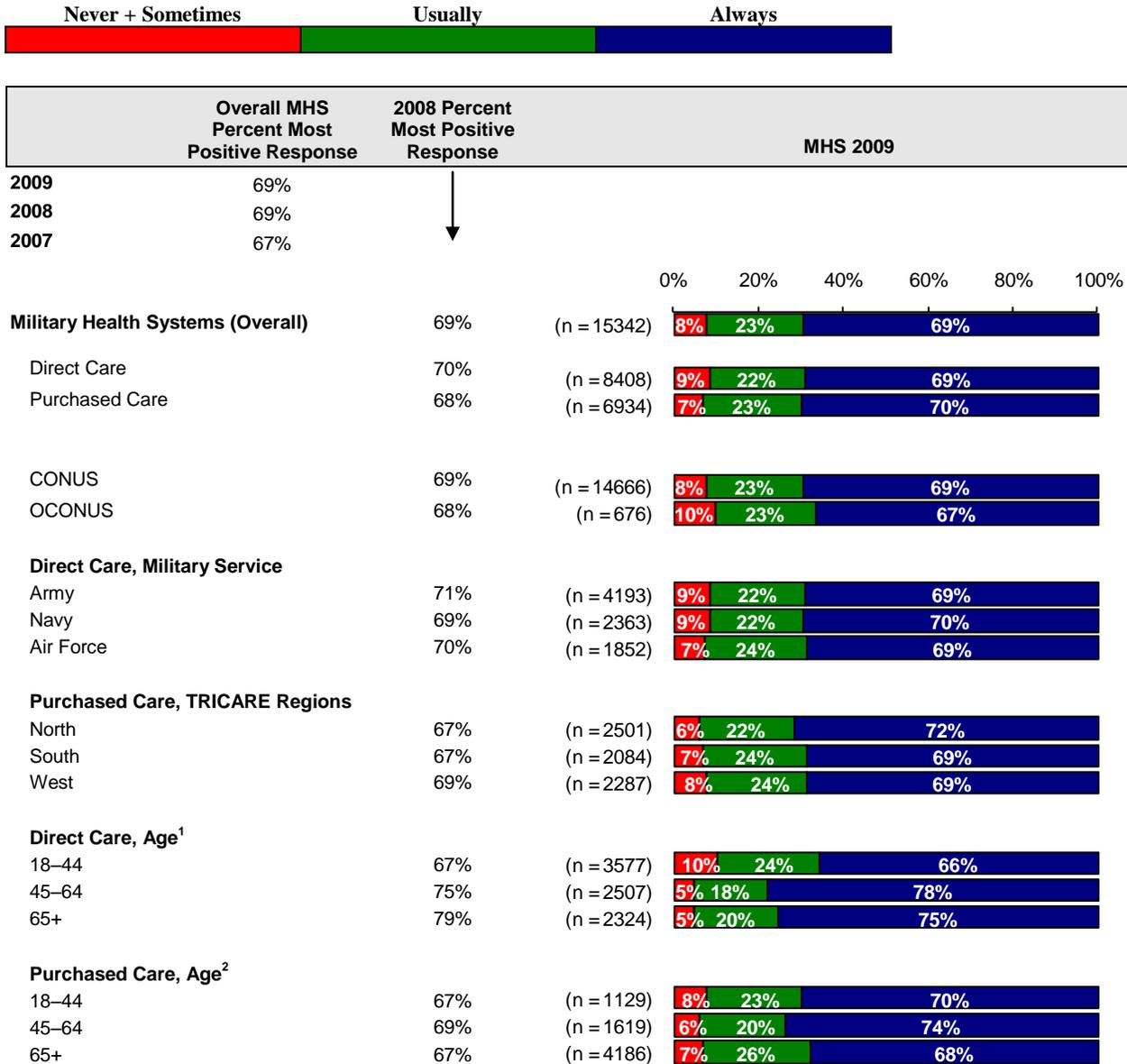
Composite: Patient Safety (continued)

How often did you see staff wash their hands or use gloves before treating or checking you? (continued)



Composite: Patient Safety

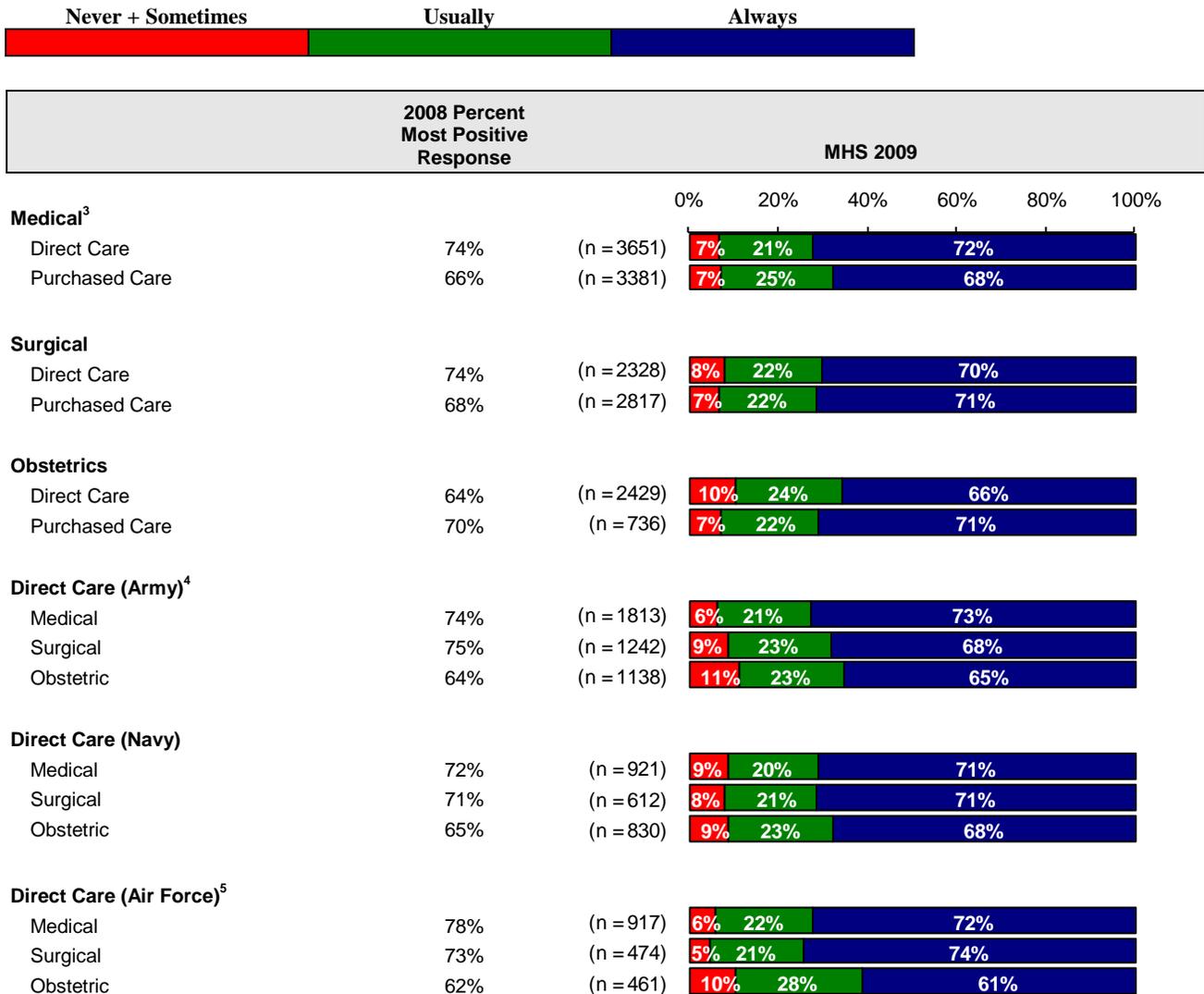
When doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves?



1. Among those in Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that staff always introduced themselves ($p < .05$).
2. Among those in Purchased Care, those aged 45–64 were significantly more likely than those in other age groups to report that staff always introduced themselves ($p < .05$).

Composite: Patient Safety (continued)

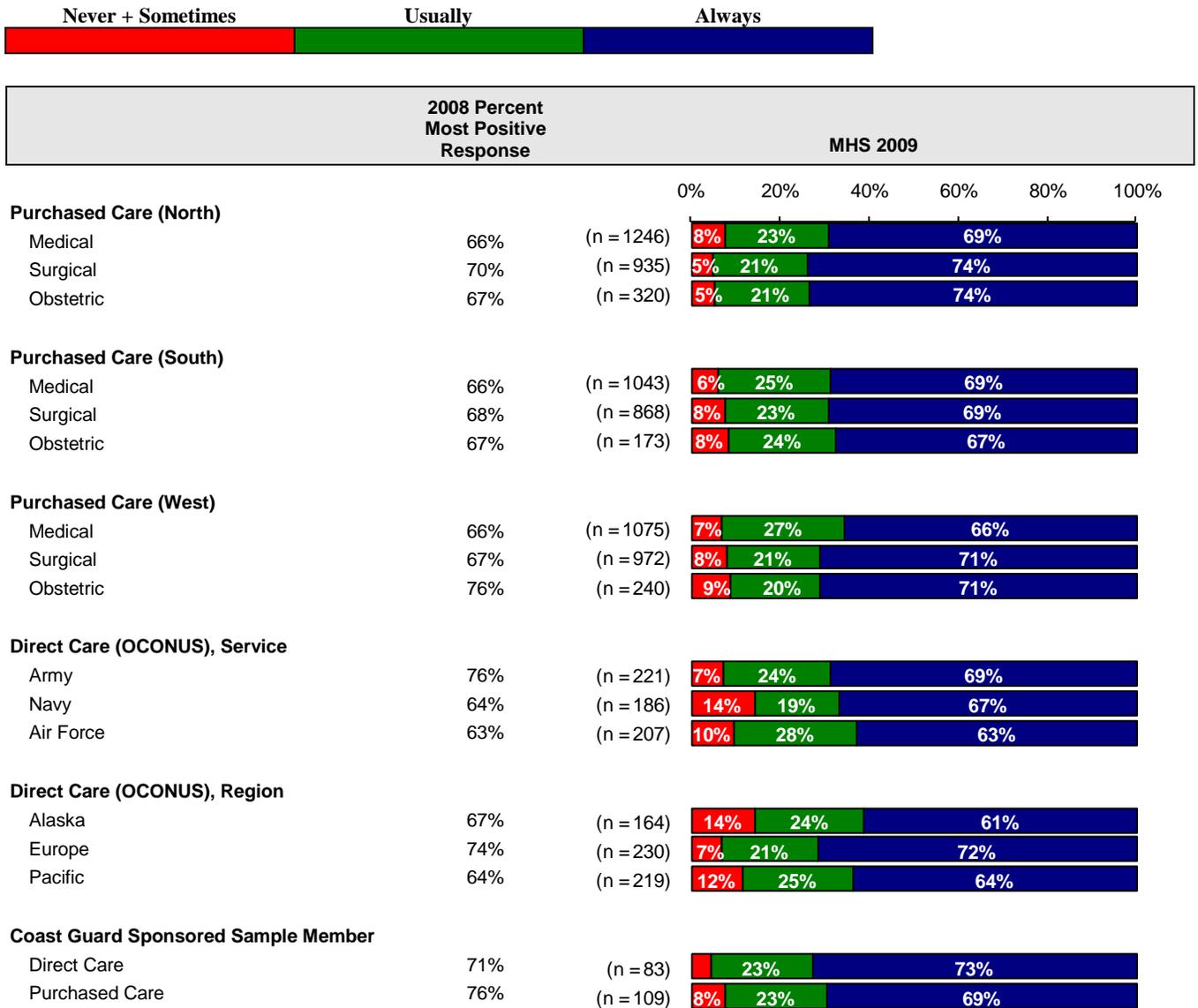
When doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves? (continued)



- Among those receiving Medical services, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that staff always introduced themselves ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Medical services were significantly more likely than those receiving Obstetrics services to report that staff always introduced themselves ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always introduced themselves ($p < .05$).

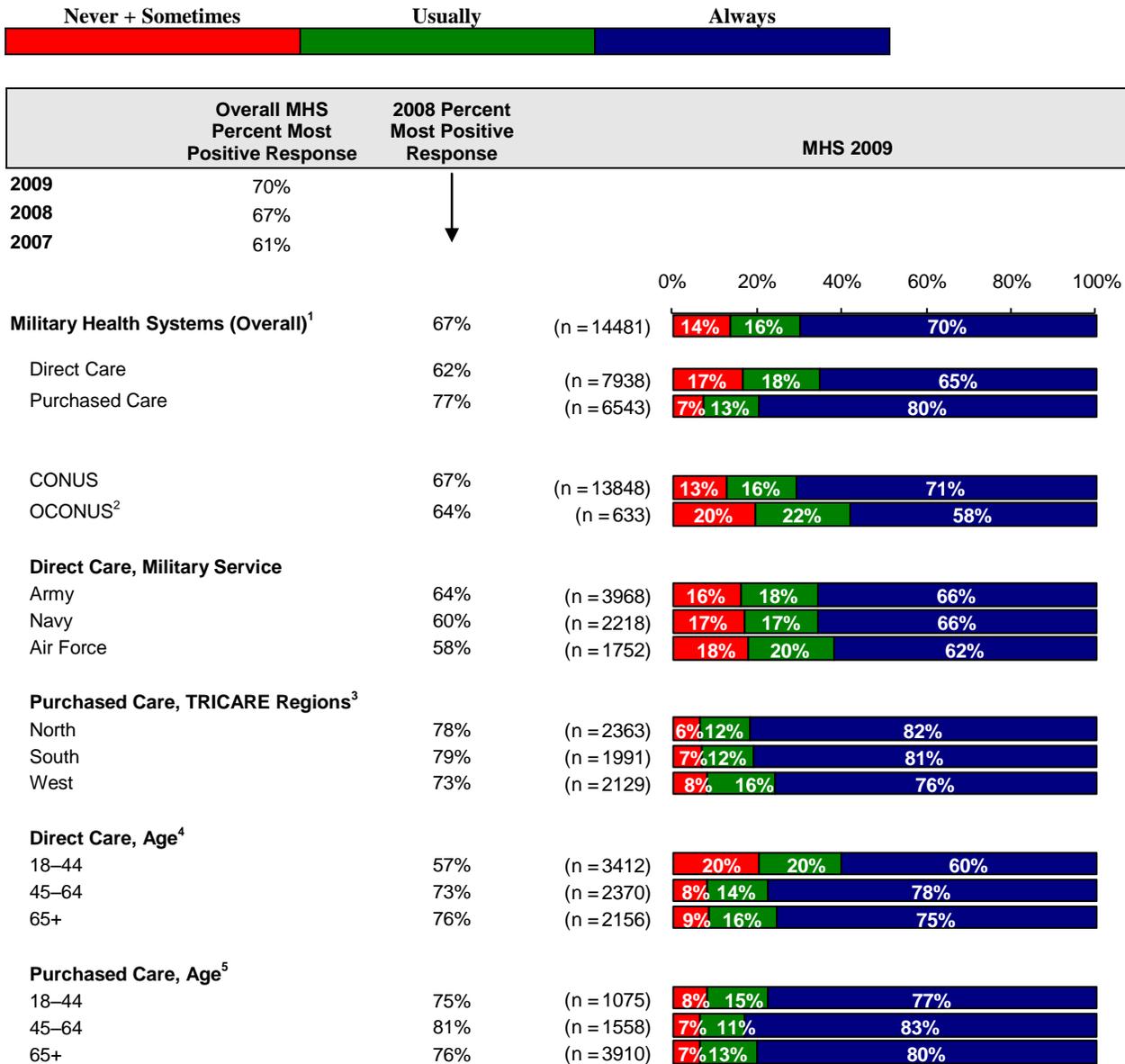
Composite: Patient Safety (continued)

When doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves? (continued)



Composite: Patient Safety

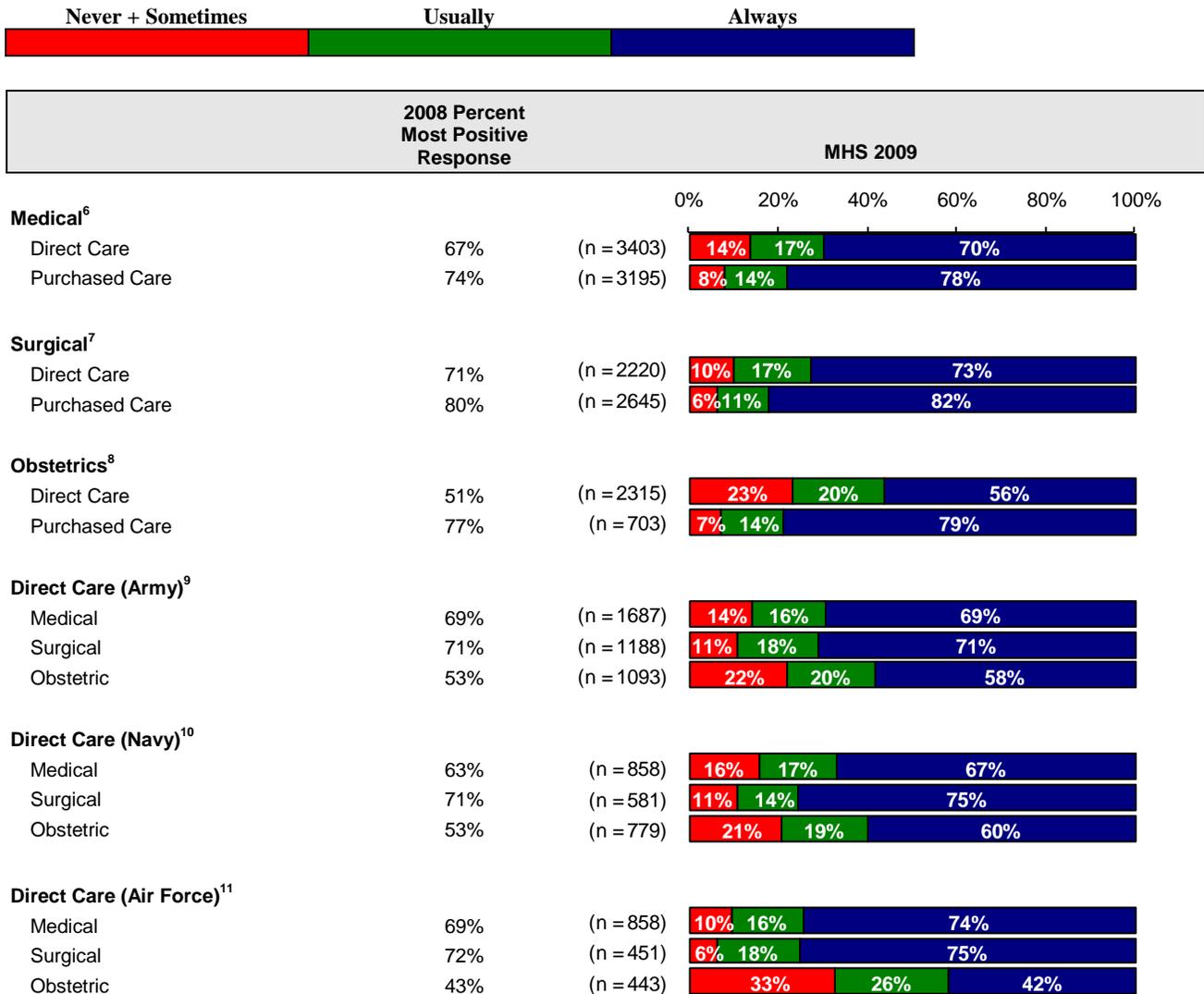
How often did staff check your identification band before giving you any medicines, even over the counter medicines like Tylenol or ibuprofen?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff always checked their identification band before giving them any medicines ($p < .05$).
2. Overall, CONUS beneficiaries were significantly more likely than OCONUS beneficiaries to report that staff always checked their identification band before giving them any medicines ($p < .05$).
3. Among Purchased Care beneficiaries, those in the West region were significantly less likely those in the North or South regions to report that staff always checked their identification band before giving them any medicines ($p < .05$).
4. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely those in other age groups to report that staff always checked their identification band before giving them any medicines ($p < .05$).
5. Among Purchased Care beneficiaries, those aged 45–64 were significantly more likely those in other age groups to report that staff always checked their identification band before giving them any medicines ($p < .05$).

Composite: Patient Safety (continued)

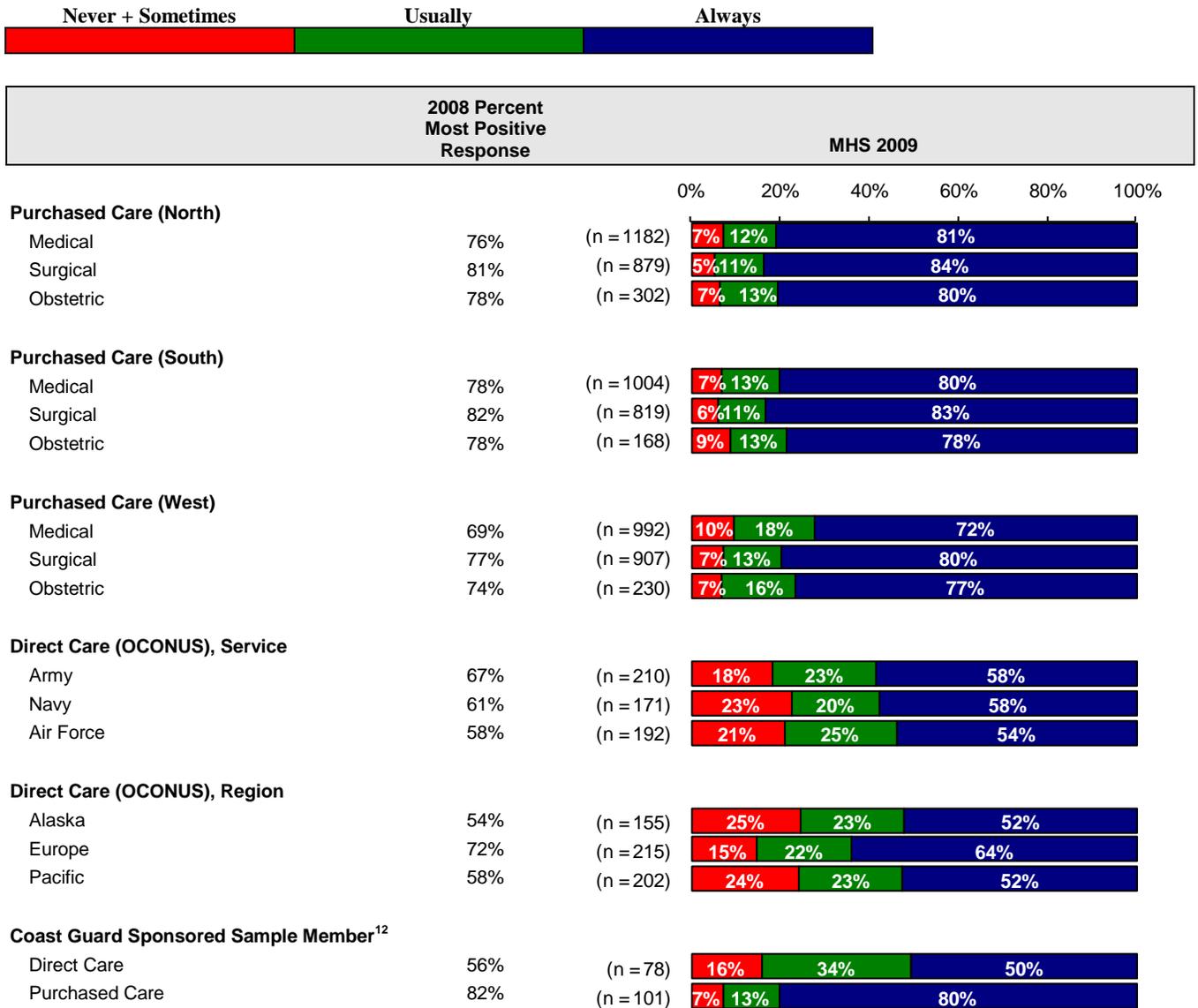
How often did staff check your identification band before giving you any medicines, even over the counter medicines like Tylenol or ibuprofen? (continued)



6. Among those receiving Medical services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff always checked their identification band before giving them any medicines ($p < .05$).
7. Among those receiving Surgical services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff always checked their identification band before giving them any medicines ($p < .05$).
8. Among those receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff always checked their identification band before giving them any medicines ($p < .05$).
9. Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always checked their identification band before giving them any medicines ($p < .05$).
10. Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always checked their identification band before giving them any medicines ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that staff always checked their identification band before giving them any medicines ($p < .05$).
11. Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always checked their identification band before giving them any medicines ($p < .05$).

Composite: Patient Safety (continued)

How often did staff check your identification band before giving you any medicines, even over the counter medicines like Tylenol or ibuprofen? (continued)

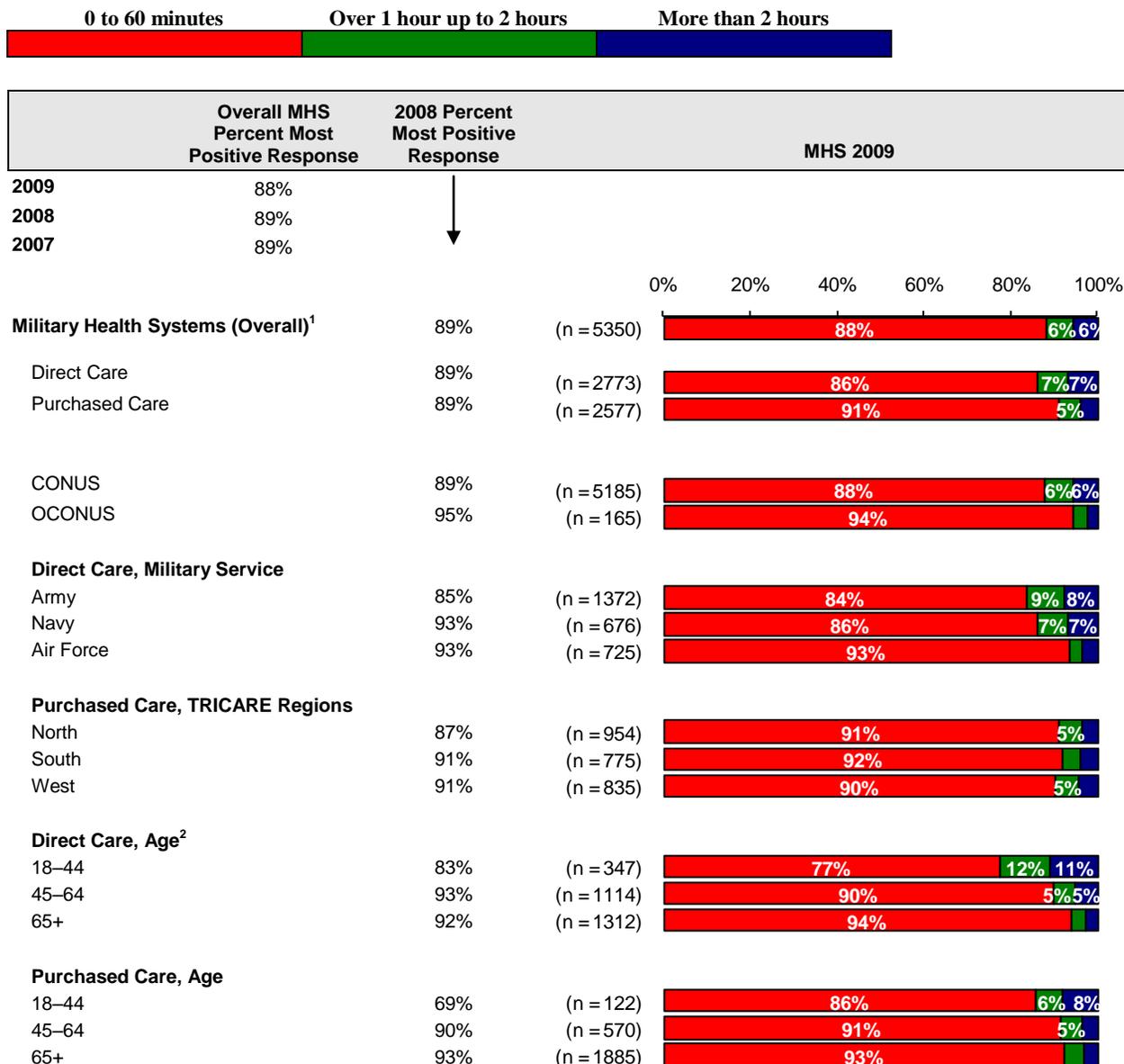


12. Among Coast Guard members, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before giving them any medicines ($p < .05$).

Survey Results:
Additional DoD Questions

Being Admitted Through the Emergency Room (Medical Questionnaire Only)

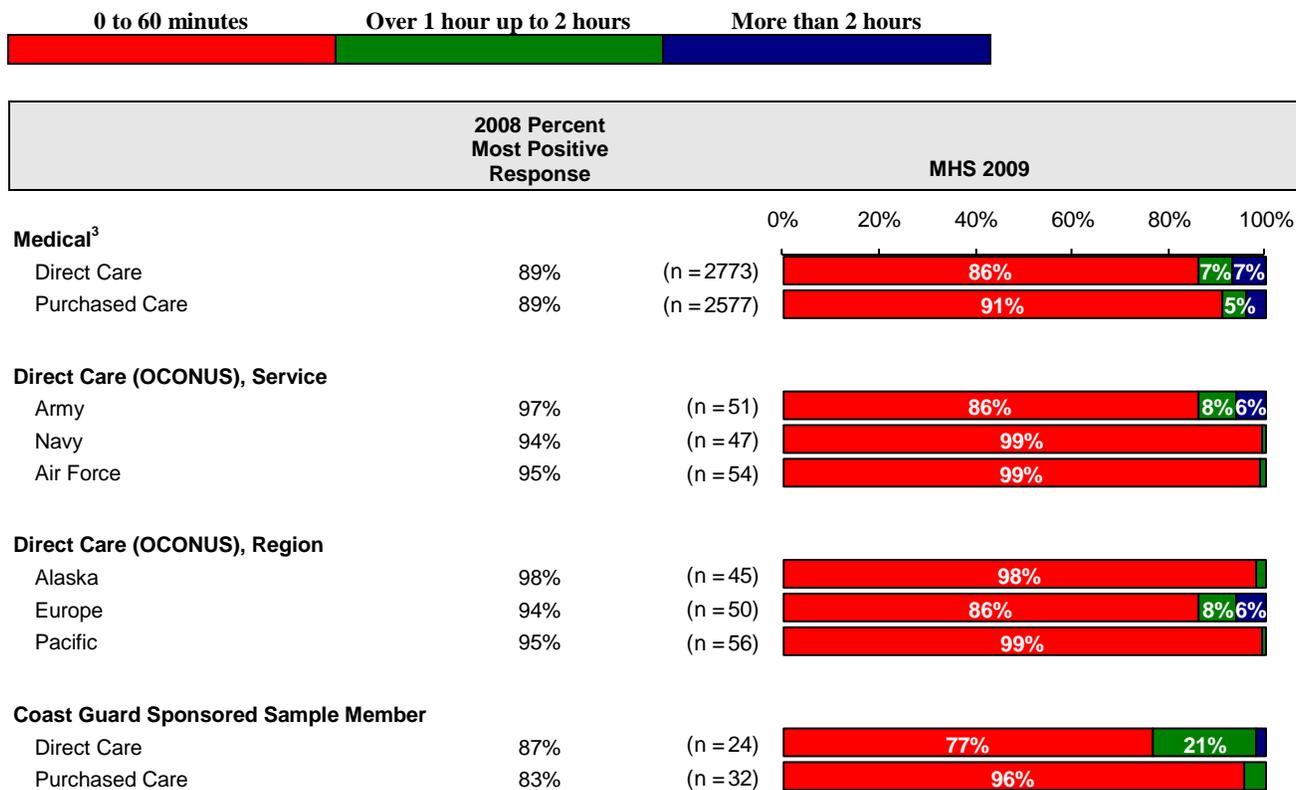
Think about when you were in the Emergency Room during this hospital stay. How long did you have to wait before someone checked your condition for the first time?



- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that they waited one hour or less before someone checked on their condition for the first time ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that they waited one hour or less before someone checked on their condition for the first time ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that they waited one hour or less before someone checked on their condition for the first time ($p < .05$).

Being Admitted Through the Emergency Room (Medical Questionnaire Only)

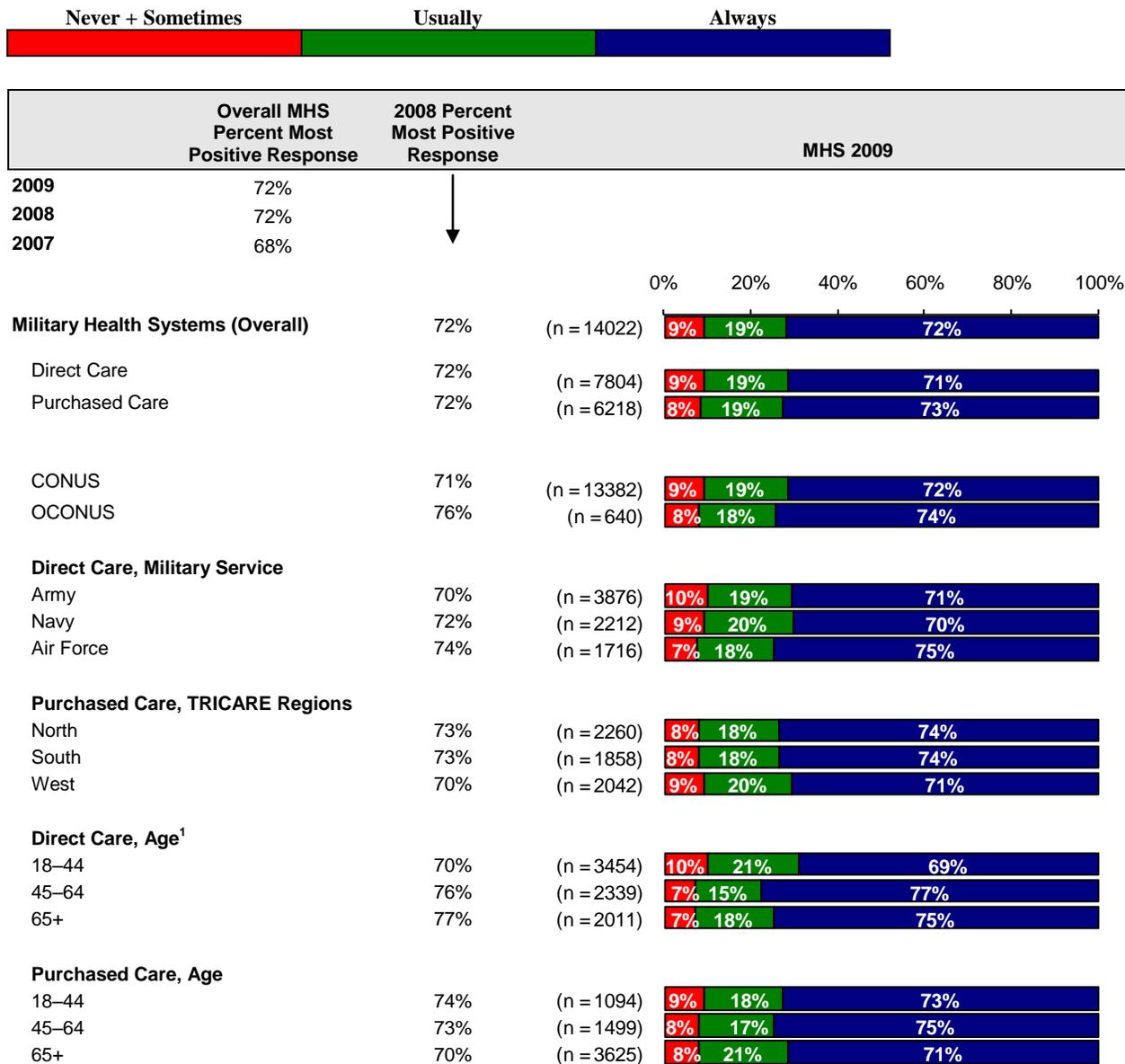
Think about when you were in the Emergency Room during this hospital stay. How long did you have to wait before someone checked your condition for the first time? (continued)



3. Among beneficiaries receiving Medical services, those in Direct Care were significantly less likely than those in Purchased Care to report that they waited one hour or less before someone checked on their condition for the first time ($p < .05$).

Your Care from Nurses

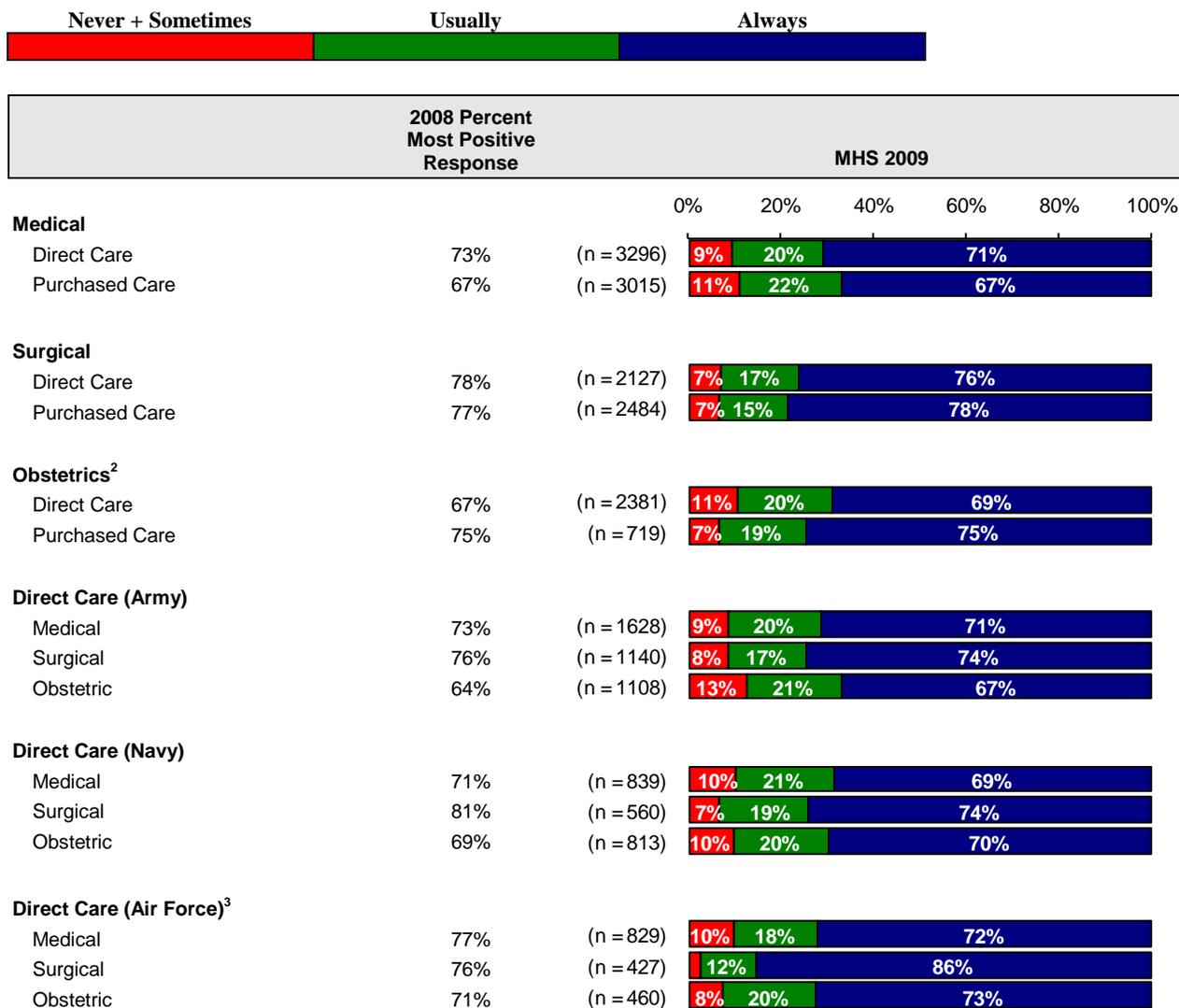
How often did you feel comfortable asking the nurses all the questions you wanted about your condition?



1. Among Direct Care beneficiaries, those age 18–44 were significantly less likely than those in other age groups to report that they always felt comfortable asking the nurses questions ($p < .05$).

Your Care from Nurses

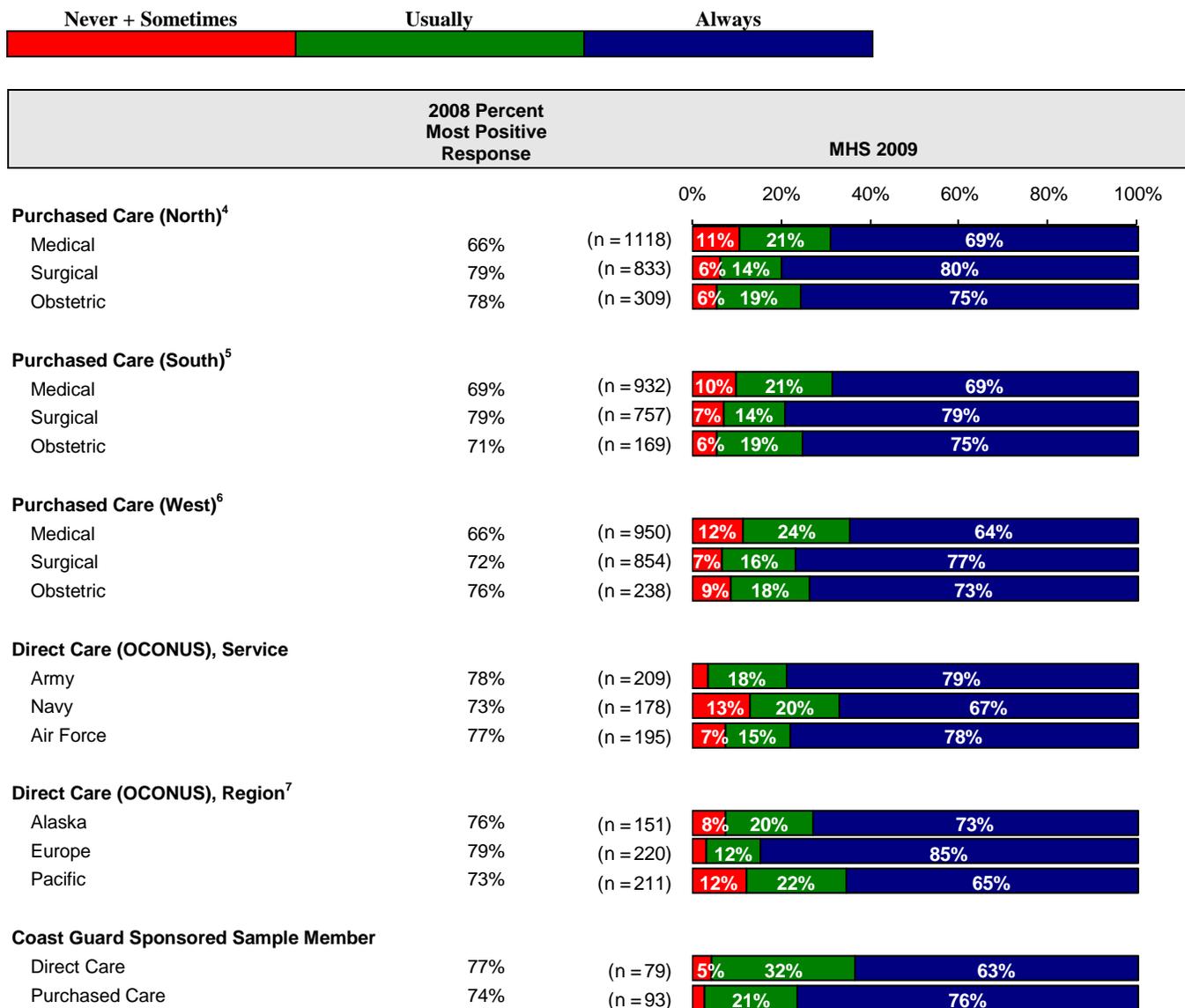
How often did you feel comfortable asking the nurses all the questions you wanted about your condition? (continued)



- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that they always felt comfortable asking the nurses questions ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that they always felt comfortable asking the nurses questions ($p < .05$).

Your Care from Nurses

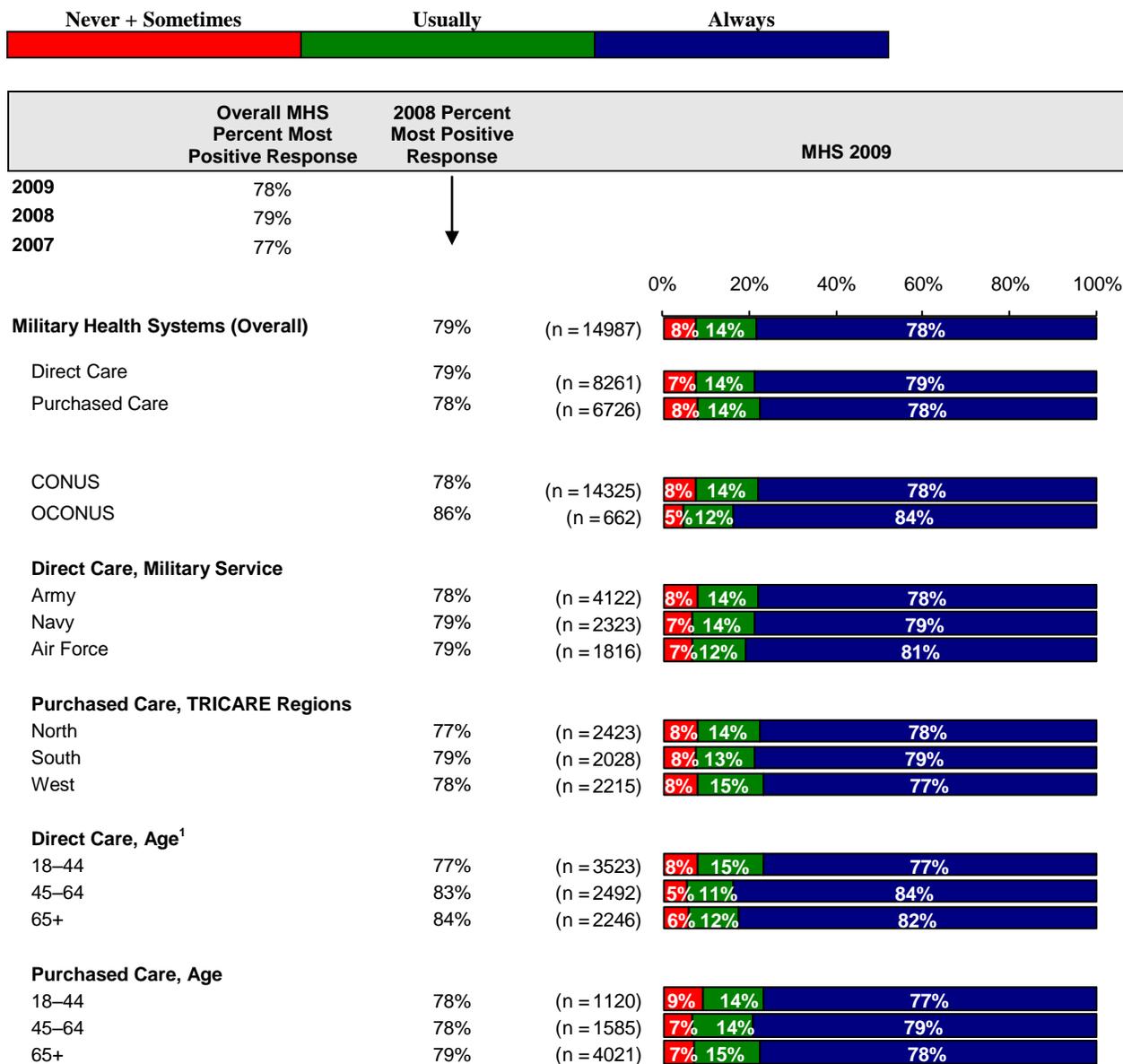
How often did you feel comfortable asking the nurses all the questions you wanted about your condition? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving other services to report that they always felt comfortable asking the nurses questions ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical services to report that they always felt comfortable asking the nurses questions ($p < .05$).
- Among Purchased Care beneficiaries in the West those receiving Medical services were significantly less likely than those receiving other services to report that they always felt comfortable asking the nurses questions ($p < .05$).
- Among Direct Care OCONUS beneficiaries, those in European MTFs were significantly more likely than those in Alaskan or Pacific MTFs to report that they always felt comfortable asking the nurses questions ($p < .05$).

Your Care from Doctors

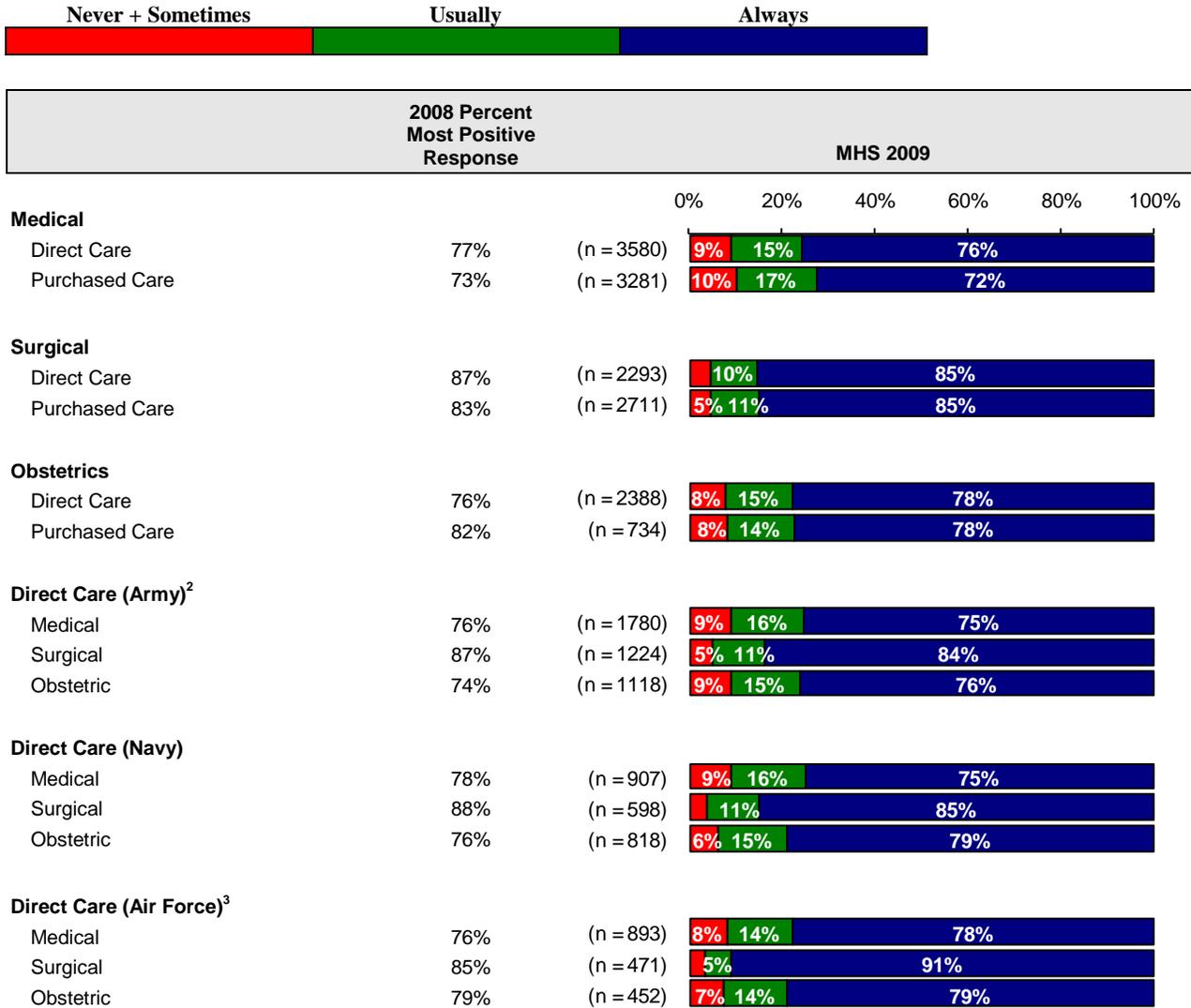
How often did you feel comfortable asking the doctors all the questions you wanted about your condition?



1. Among Direct Care beneficiaries, those age 18–44 were significantly less likely than those in other age groups to report that they always felt comfortable asking the doctors questions ($p < .05$).

Your Care from Doctors

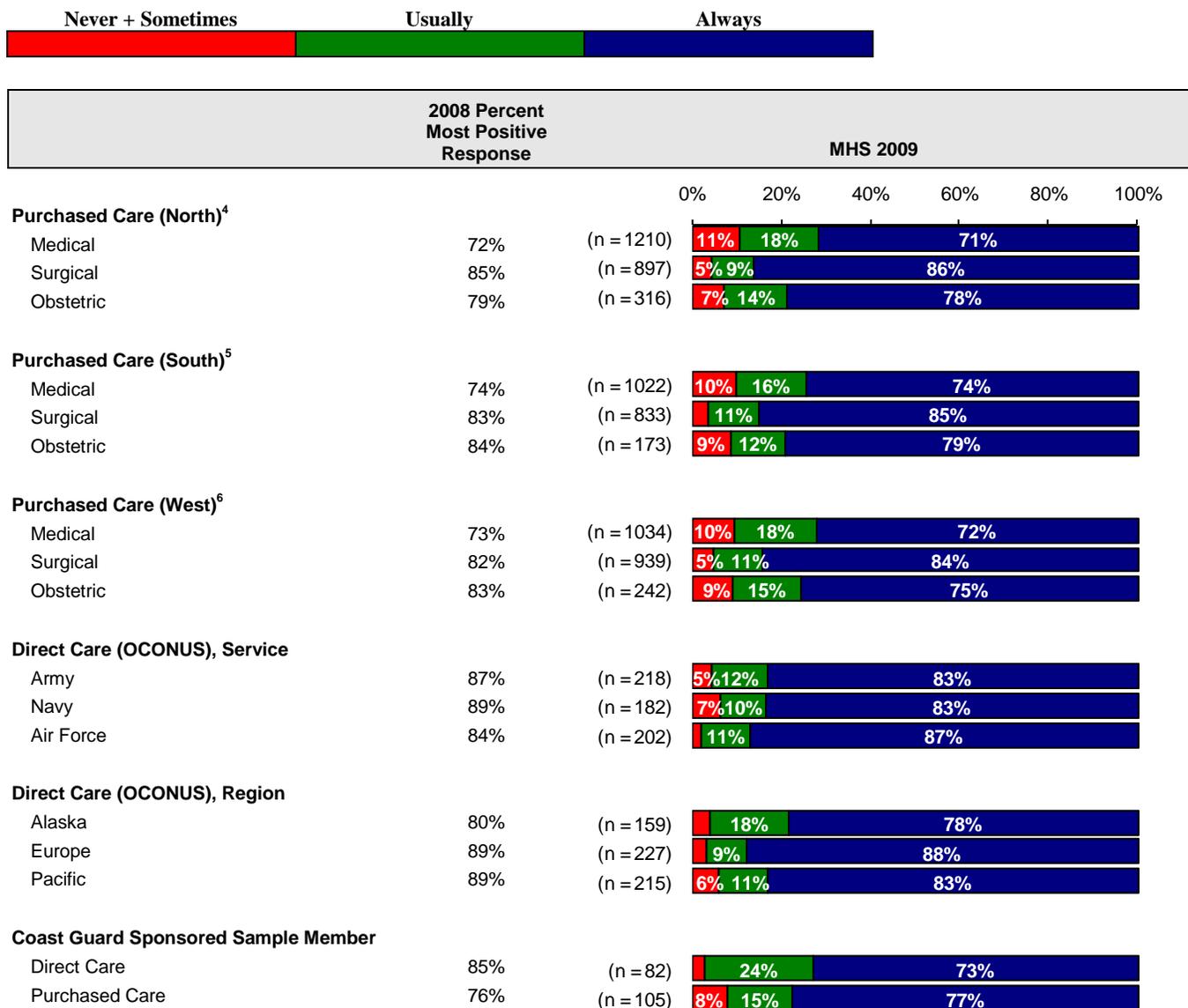
How often did you feel comfortable asking the doctors all the questions you wanted about your condition? (continued)



- Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that they always felt comfortable asking the doctors questions ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that they always felt comfortable asking the doctors questions ($p < .05$).

Your Care from Doctors

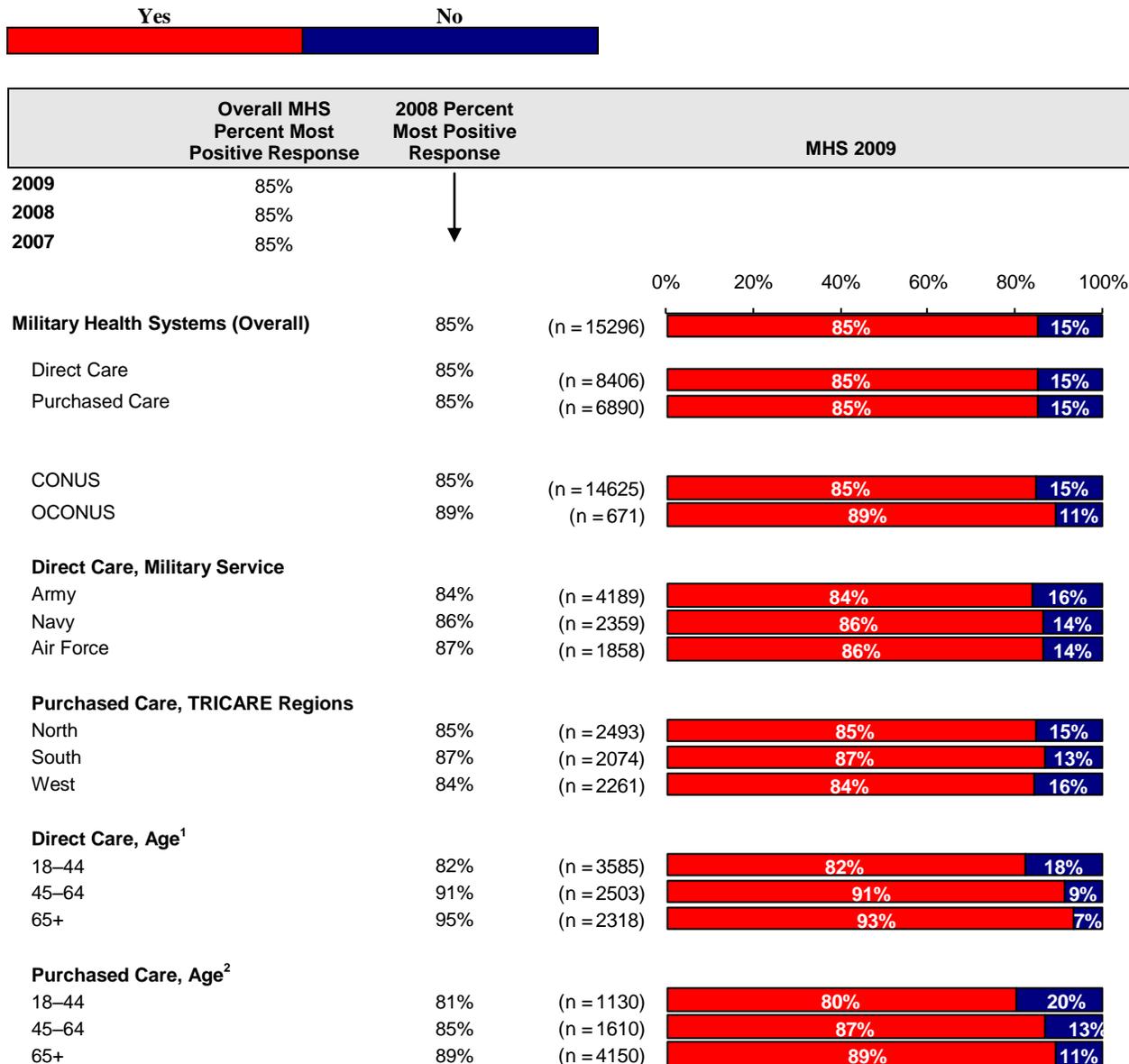
How often did you feel comfortable asking the doctors all the questions you wanted about your condition? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to report that they always felt comfortable asking the doctors questions ($p < .05$). Furthermore, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they always felt comfortable asking the doctors questions ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical services to report that they always felt comfortable asking the doctors questions ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to report that they always felt comfortable asking the doctors questions ($p < .05$).

Your Care from Doctors

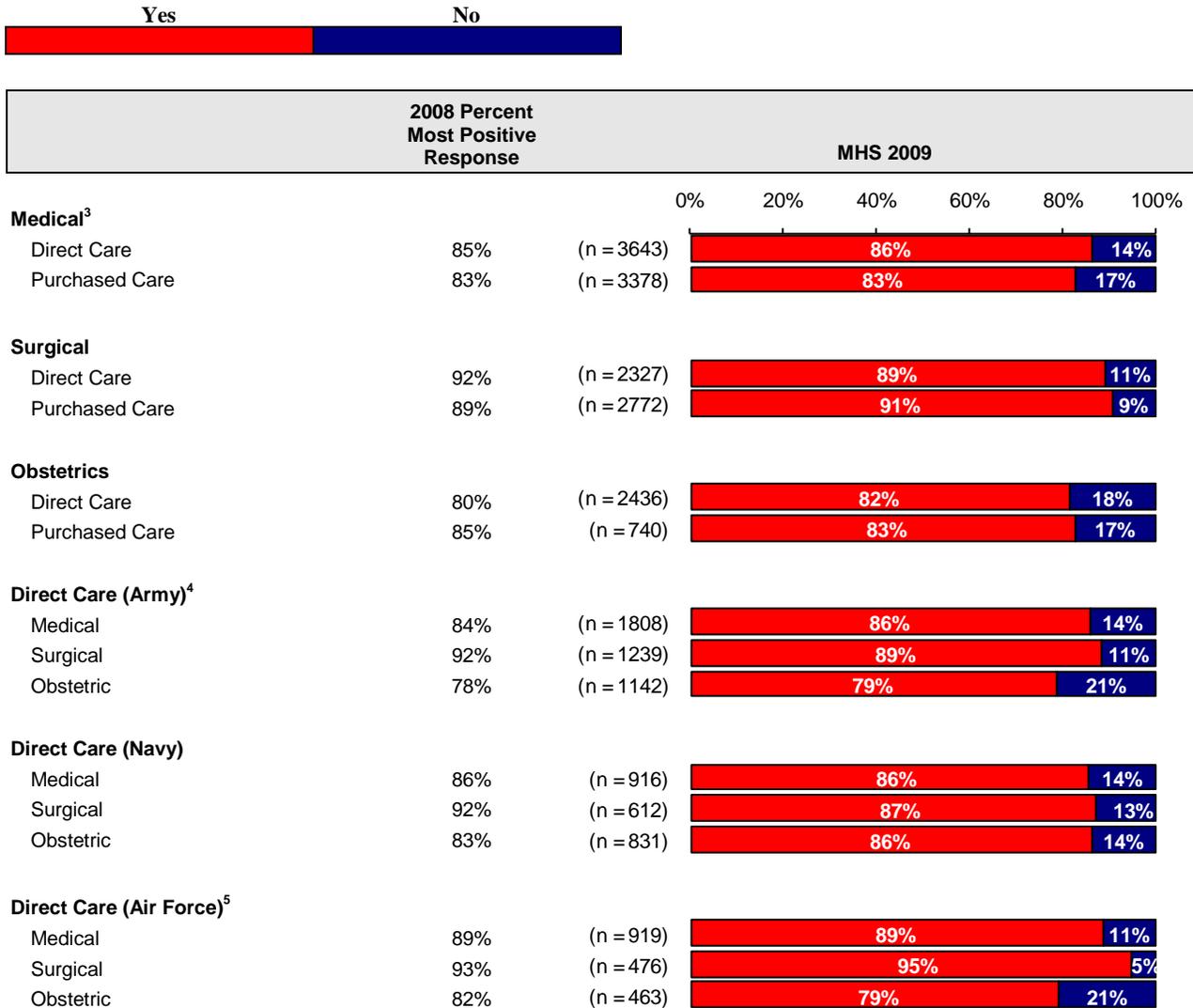
Did you feel that the doctors checked on you as much as you needed?



1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to feel that the doctors checked on them as much as they needed ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to feel that the doctors checked on them as much as they needed ($p < .05$).
2. Among Purchased Care, those aged 18–44 were significantly less likely than those in other age groups to feel that the doctors checked on them as much as they needed ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to feel that the doctors checked on them as much as they needed ($p < .05$).

Your Care from Doctors

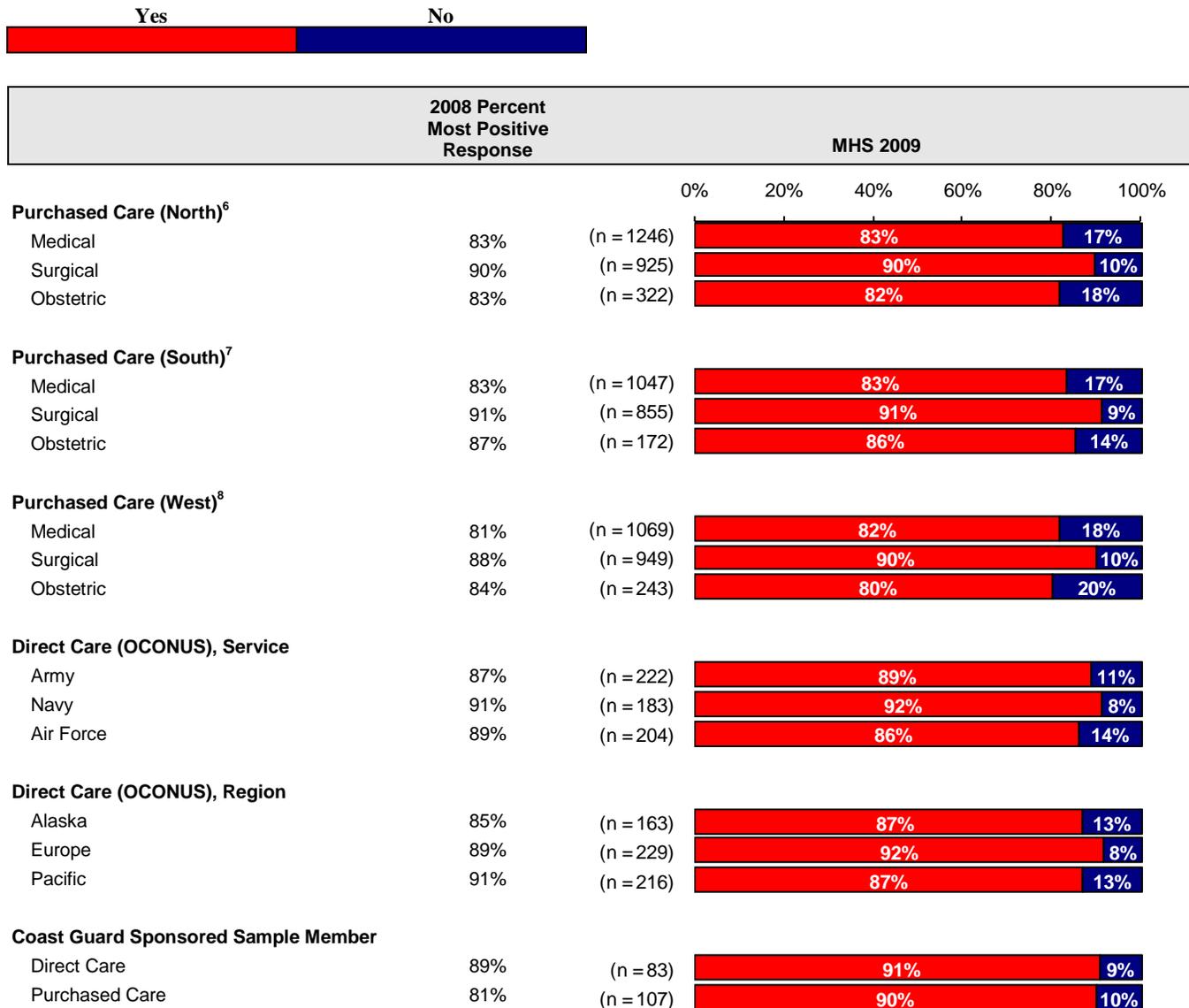
Did you feel that the doctors checked on you as much as you needed? (continued)



- Among those receiving Medical services, those in Purchased Care were significantly less likely than those in Direct Care to feel that the doctors checked on them as much as they needed ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to feel that the doctors checked on them as much as they needed ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to feel that the doctors checked on them as much as they needed ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors checked on them as much as they needed ($p < .05$).

Your Care from Doctors

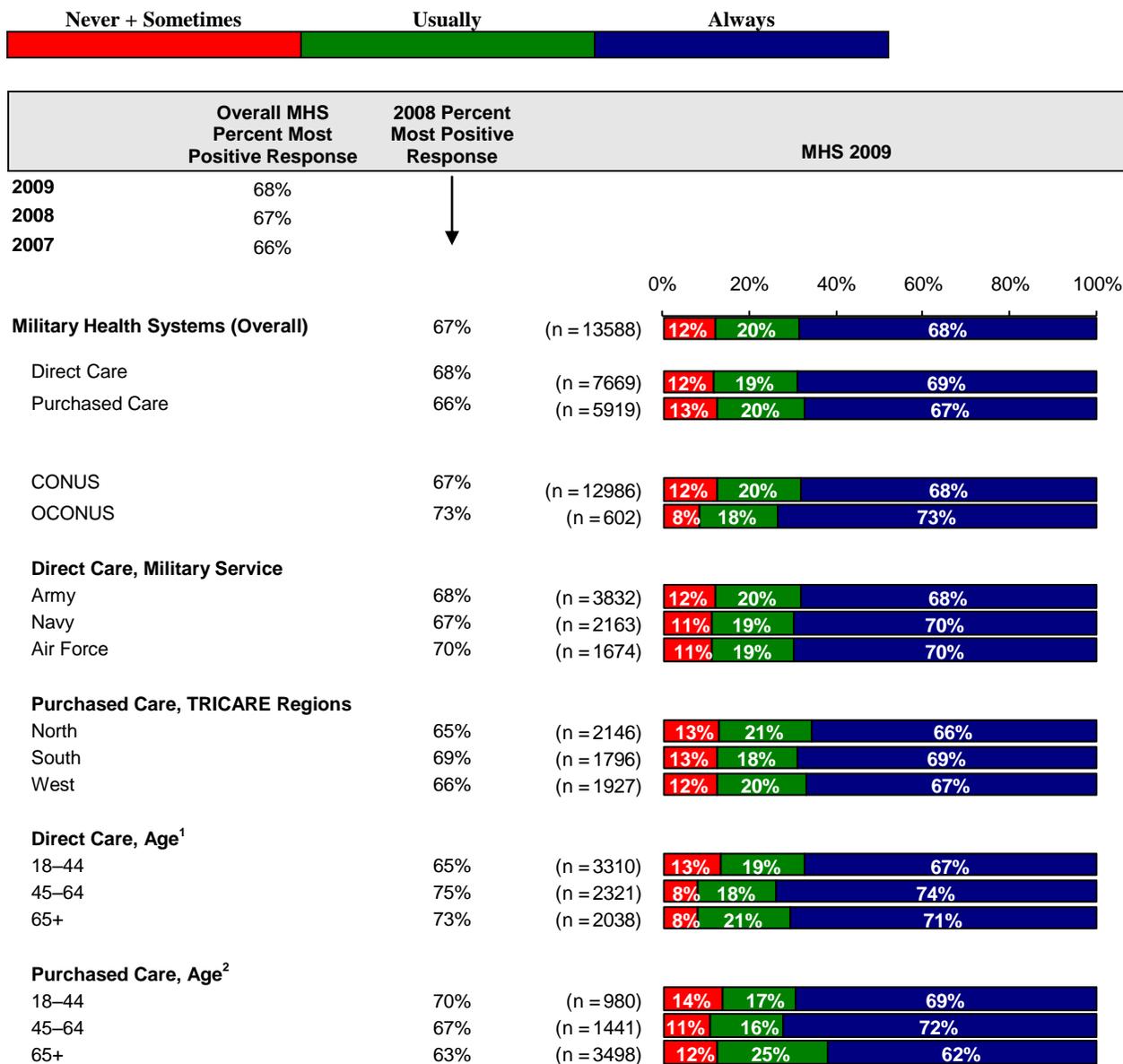
Did you feel that the doctors checked on you as much as you needed? (continued)



6. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors checked on them as much as they needed ($p < .05$).
7. Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical services to feel that the doctors checked on them as much as they needed ($p < .05$).
8. Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors checked on them as much as they needed ($p < .05$).

Your Care from Doctors

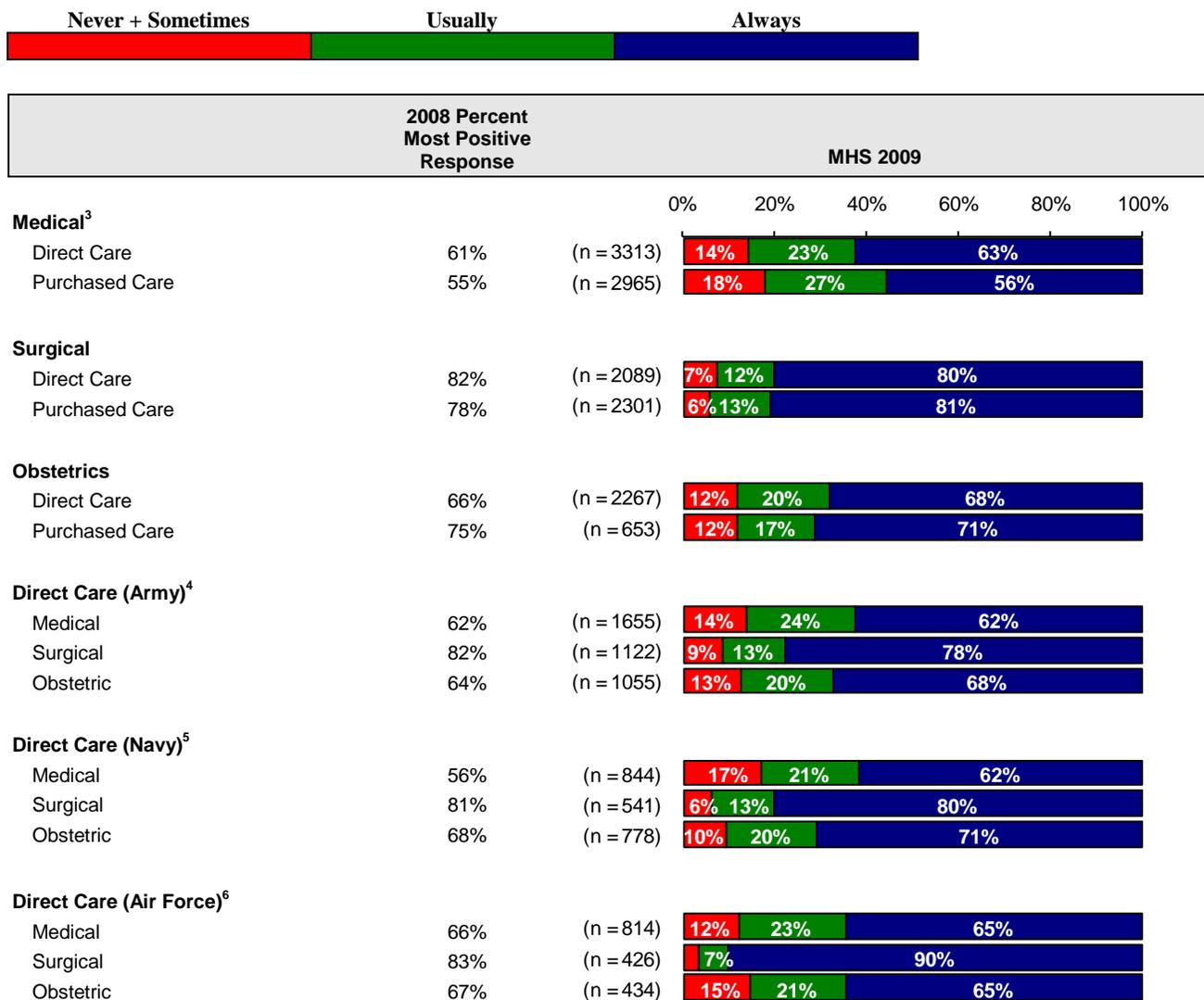
How often did doctors involve you as much as you wanted in decisions about your treatment?



1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
2. Among Purchased Care, those aged 65+ were significantly less likely than those in other age groups to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).

Your Care from Doctors

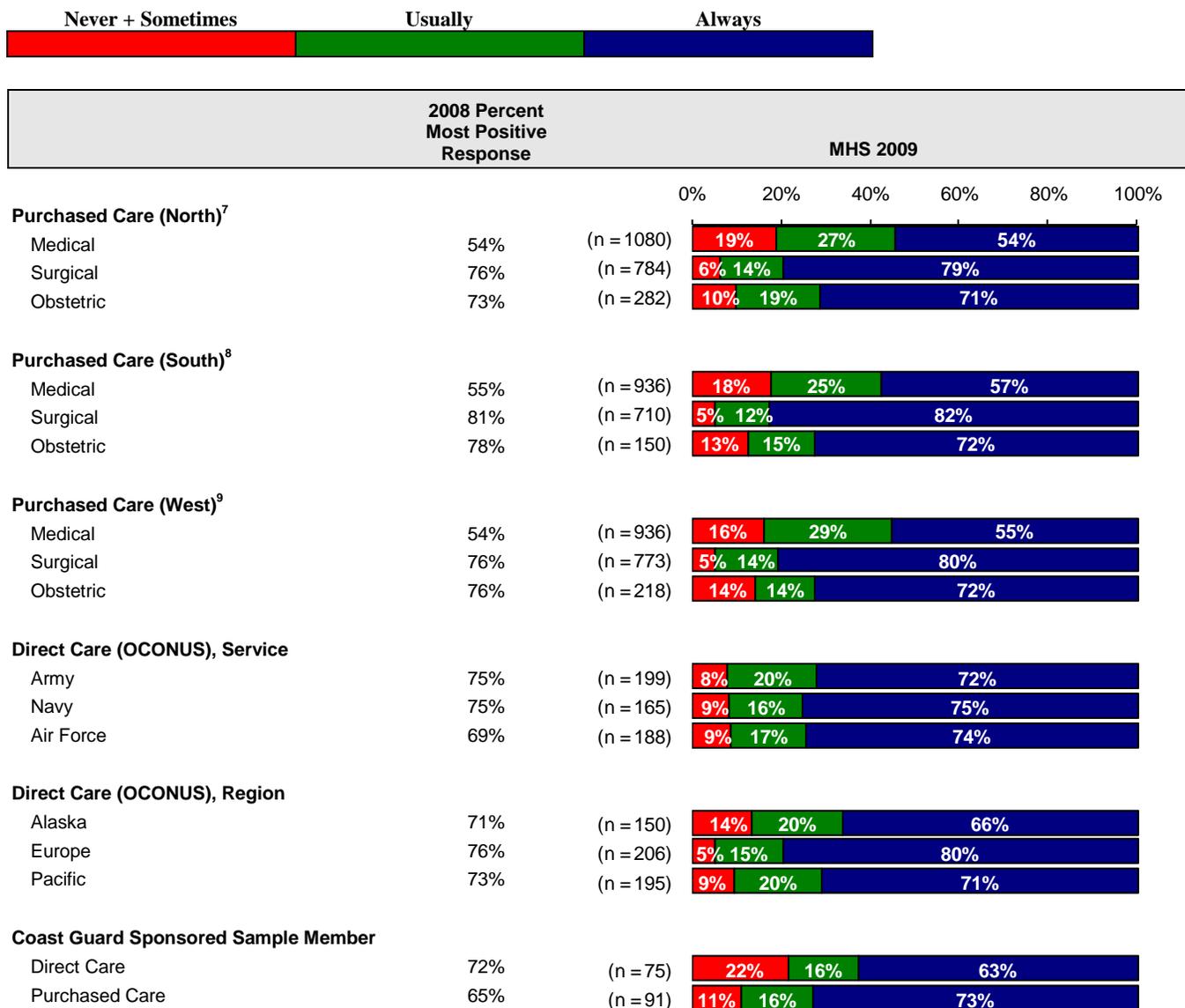
How often did doctors involve you as much as you wanted in decisions about your treatment? (continued)



- Among those receiving Medical services, beneficiaries in Purchased Care were significantly less likely than Direct Care beneficiaries to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Medical services were significantly less likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Medical services were significantly less likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).

Your Care from Doctors

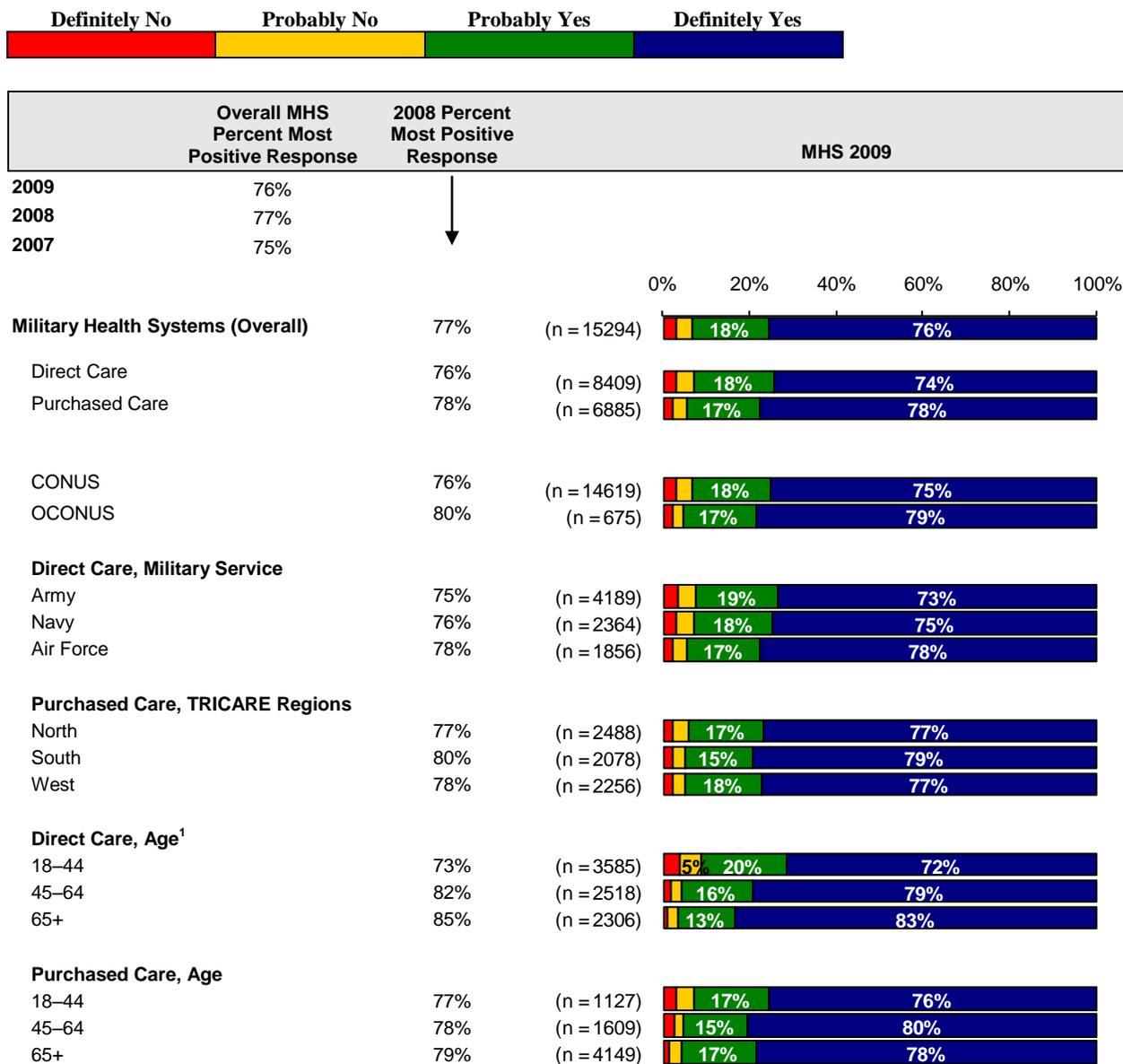
How often did doctors involve you as much as you wanted in decisions about your treatment? (continued)



- Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to feel that the doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).

Coordination of Care

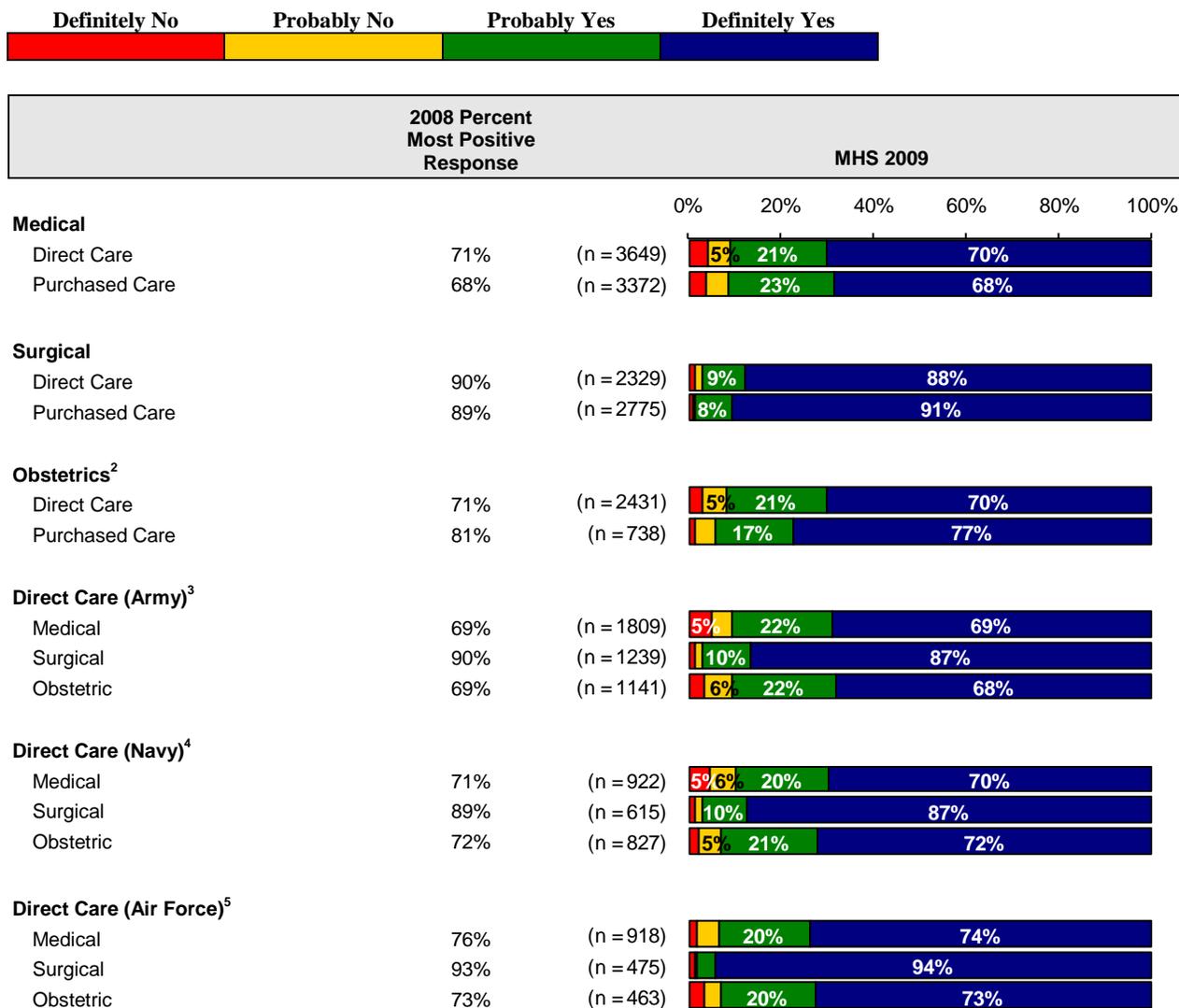
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your condition and treatment?



1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).

Coordination of Care

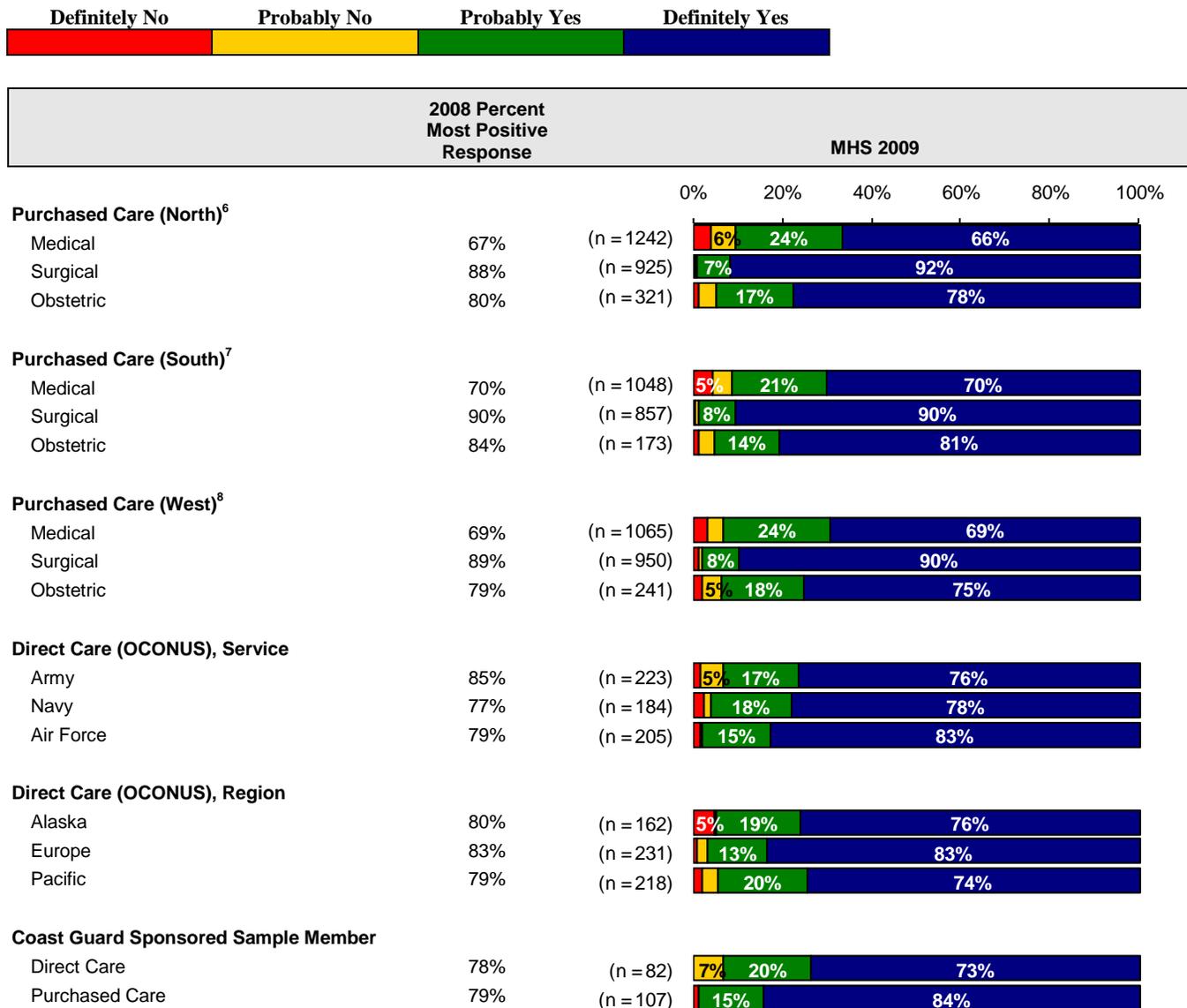
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your condition and treatment? (continued)



- Among those receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly more likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Surgical services were significantly more likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).

Coordination of Care

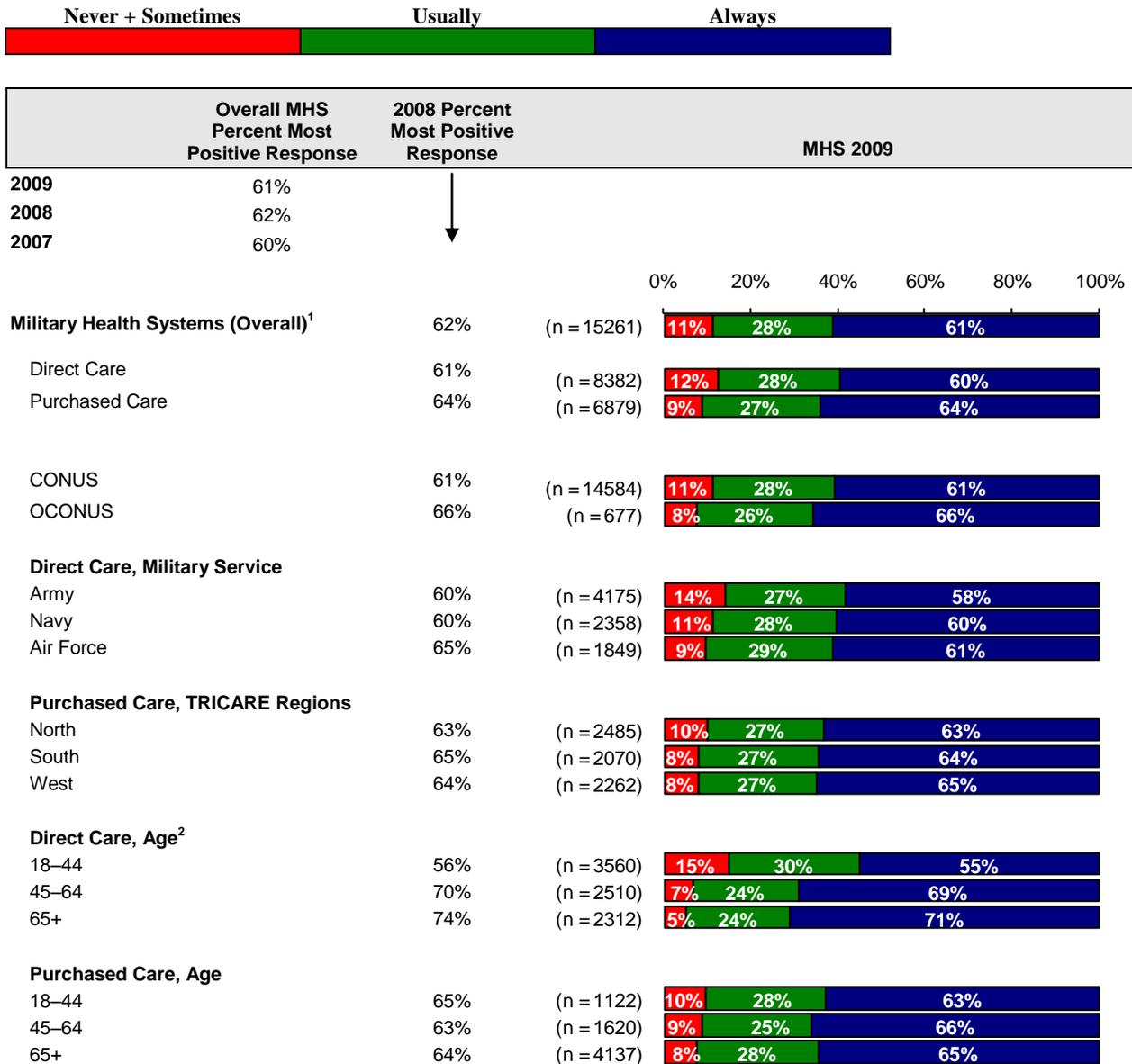
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your condition and treatment? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).
- Among Purchased Care beneficiaries in the South those receiving Surgical services were significantly more likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to say that they definitely feel that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).

Coordination of Care

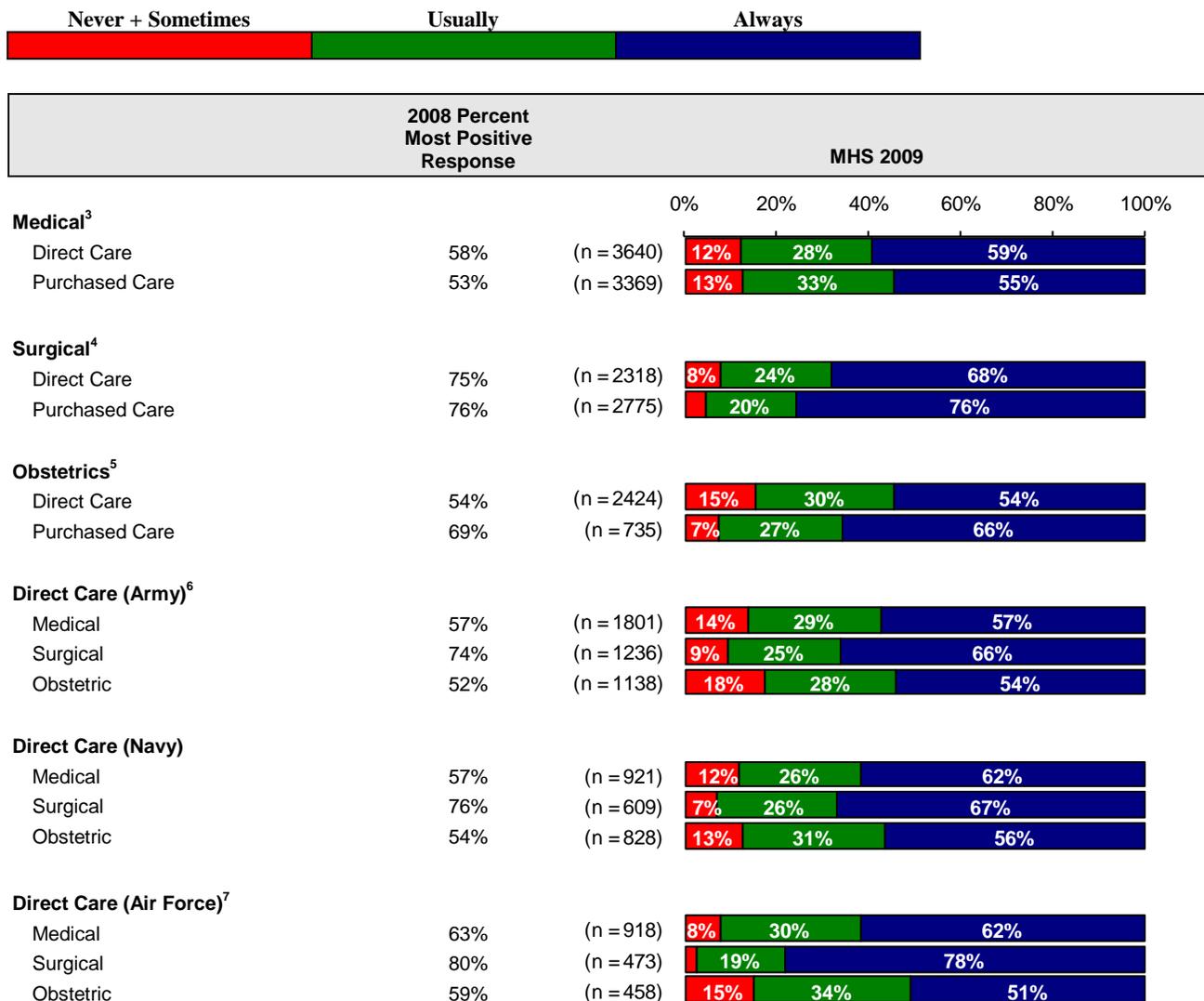
How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving?



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).

Coordination of Care

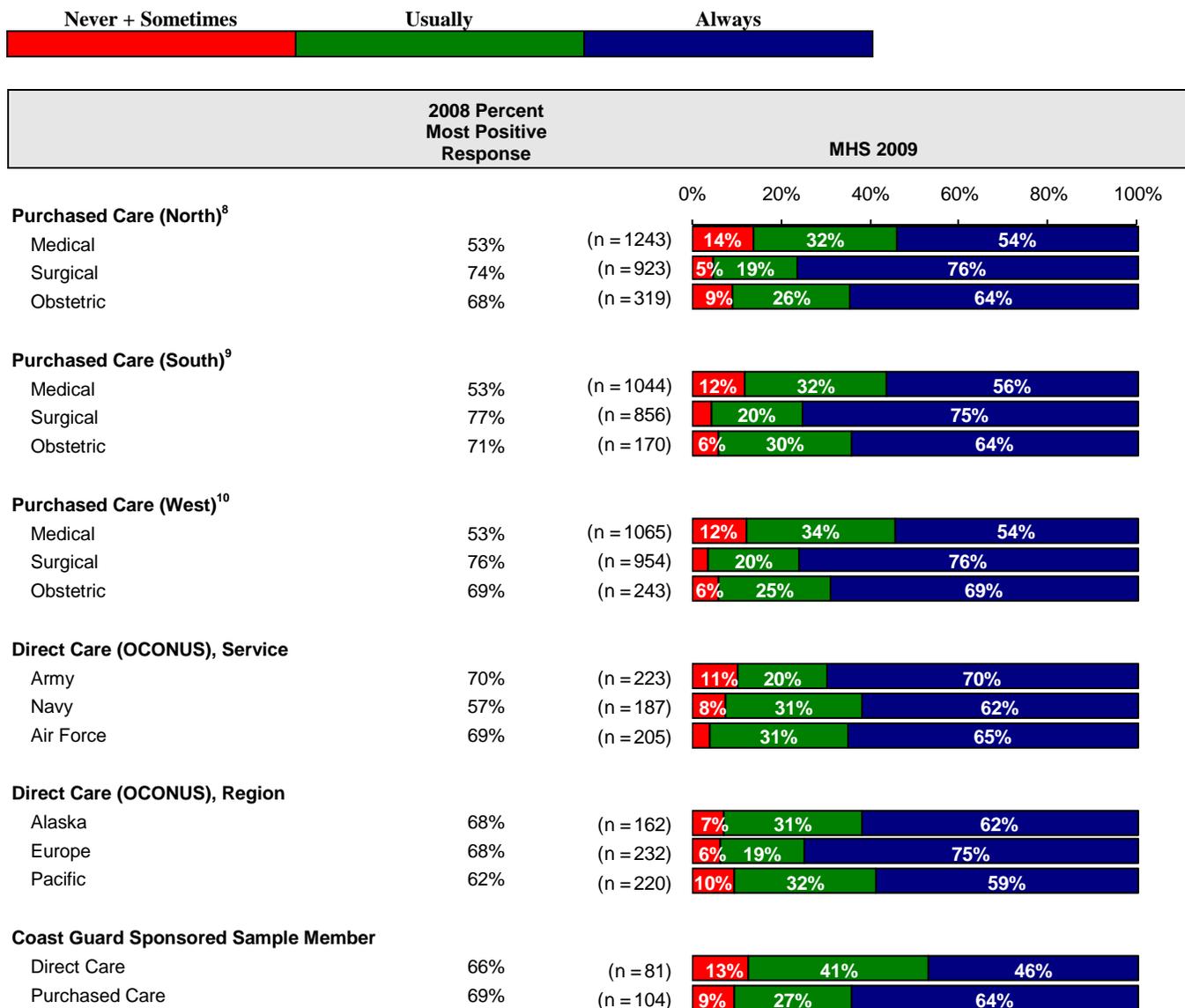
How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving? (continued)



- Among those receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
- Among those receiving Surgical services, those in Direct Care were significantly less likely than those in Purchased Care to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
- Among those receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$). Furthermore, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).

Coordination of Care

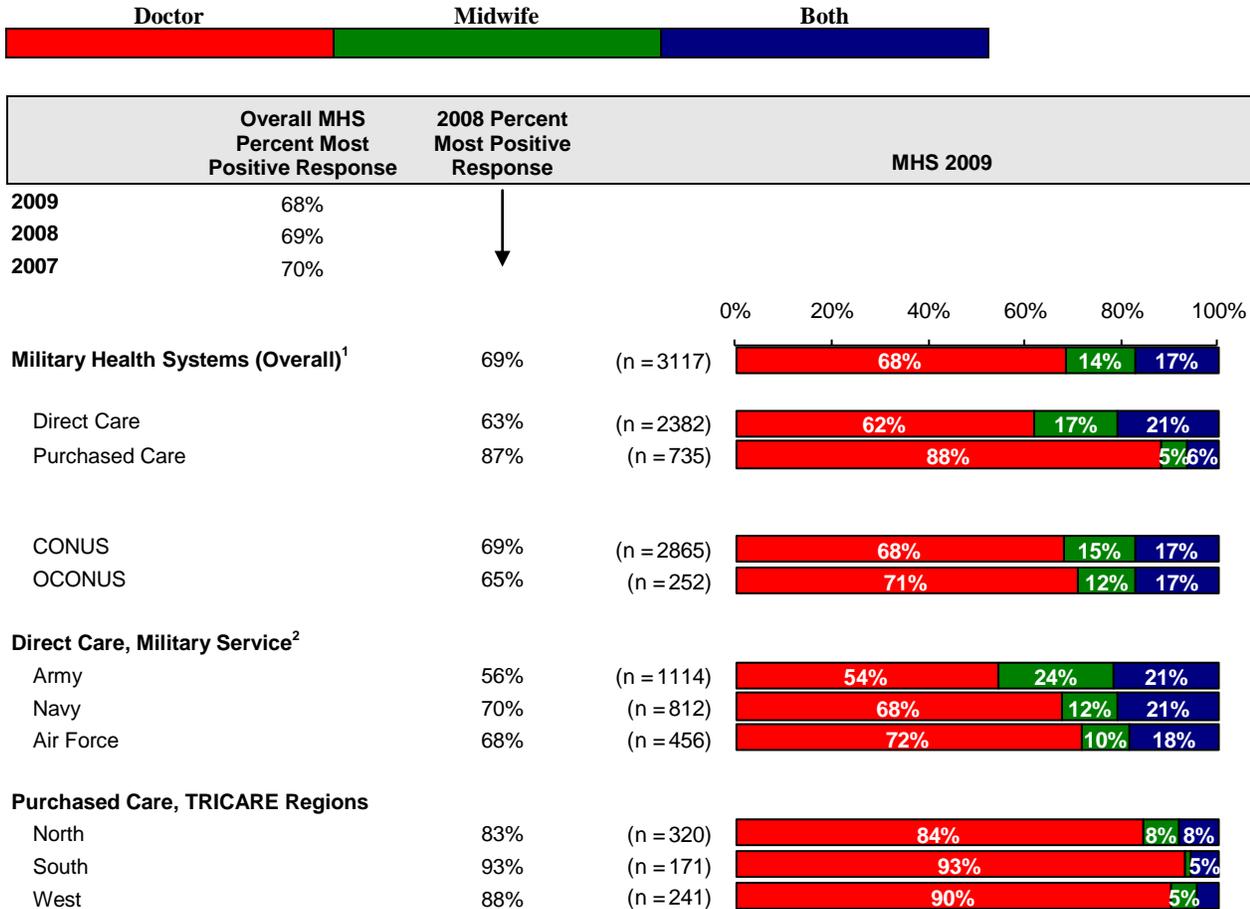
How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving? (continued)



8. Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
9. Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).
10. Among Purchased Care beneficiaries in the West region, those receiving Surgical services were significantly more likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to report that the staff always seemed informed and up-to-date about all the care they were receiving ($p < .05$).

Maternity Care (Maternity Questionnaire Only)

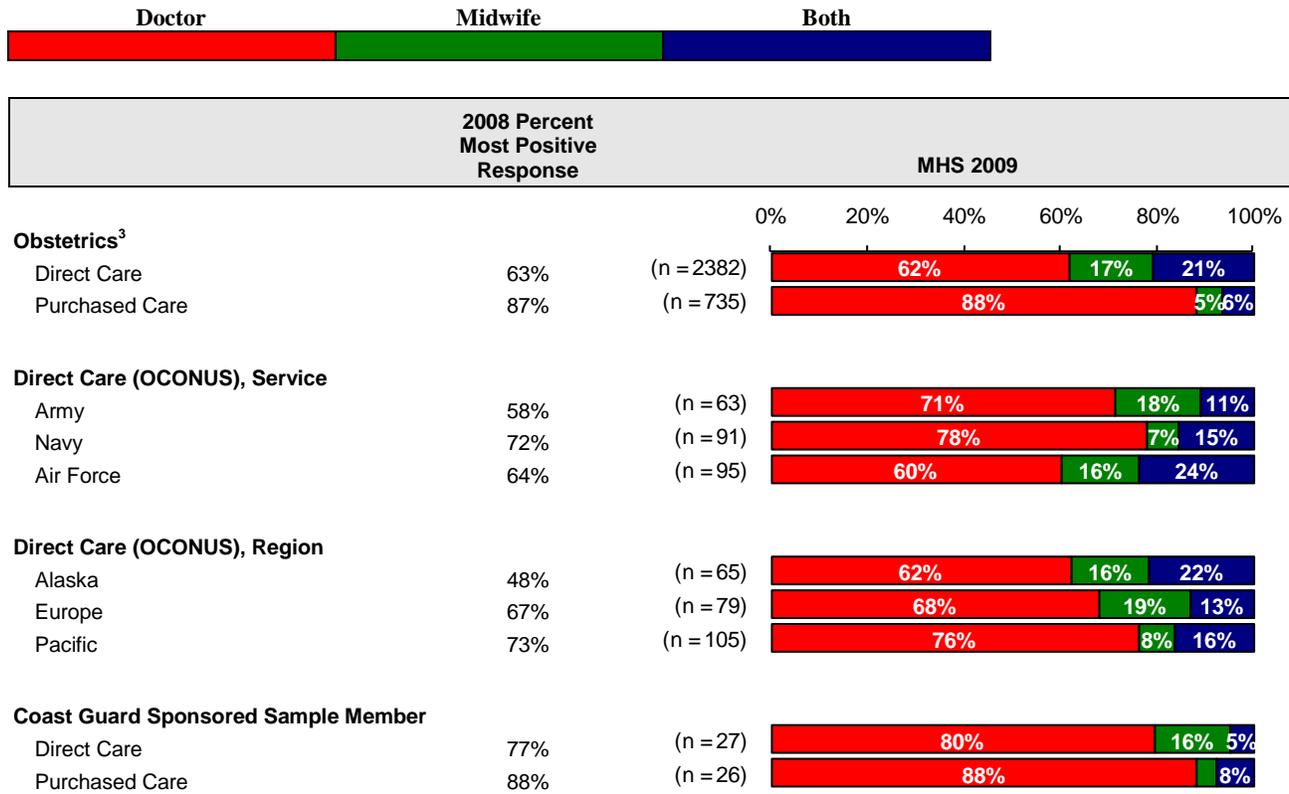
Was your primary provider during labor and delivery a doctor, midwife or both?



1. Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that their primary provider during labor and delivery was only a doctor ($p < .05$).
2. Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Air Force or Navy MTFs to report that their primary provider during labor and delivery was only a doctor ($p < .05$).

Maternity Care (Maternity Questionnaire Only)

Was your primary provider during labor and delivery a doctor, midwife or both?
(continued)



3. Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that their primary provider during labor and delivery was only a doctor ($p < .05$).

Maternity Care (Maternity Questionnaire Only)

Before you left the hospital, did someone on the hospital staff talk with you about the signs and symptoms of post-partum depression?

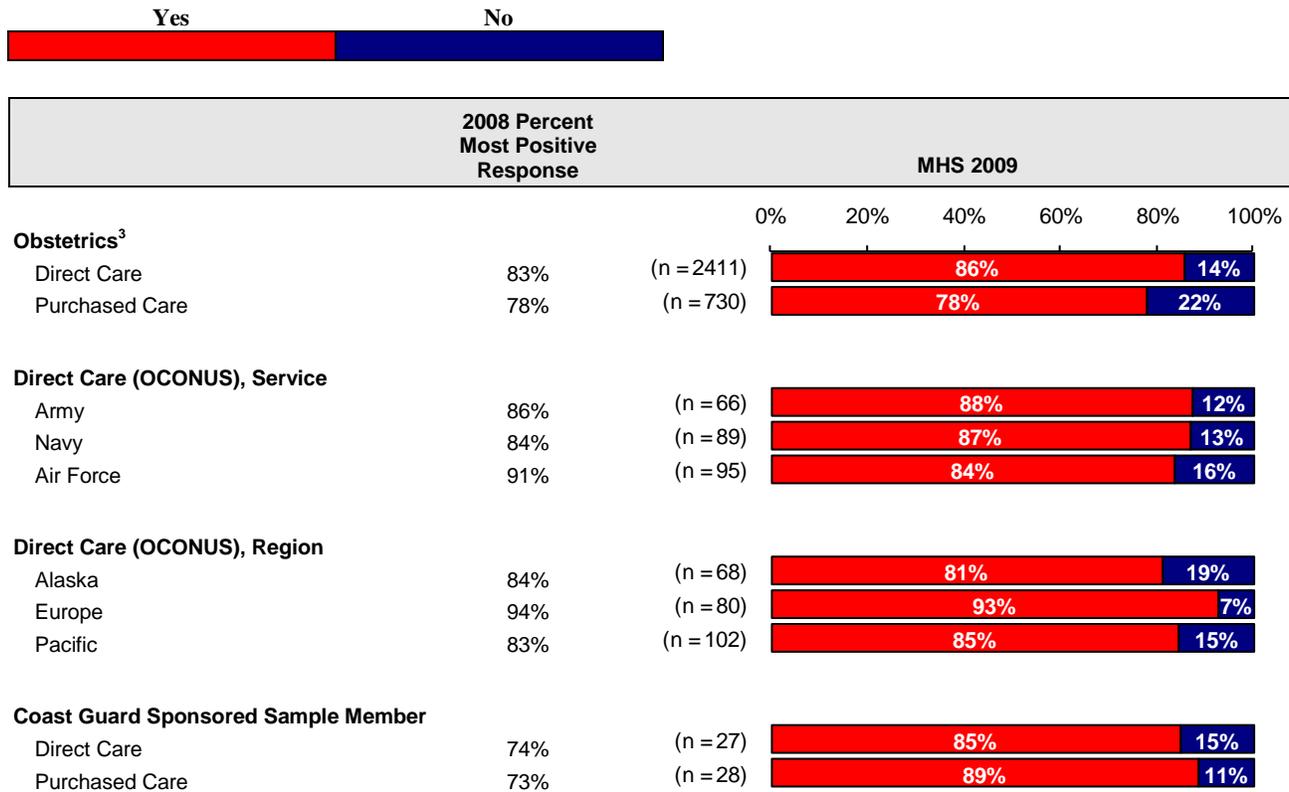


	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009
2009	84%	↓	
2008	82%		
2007	80%		
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)¹	82%	(n = 3141)	84% 16%
Direct Care	83%	(n = 2411)	86% 14%
Purchased Care	78%	(n = 730)	78% 22%
CONUS	81%	(n = 2888)	83% 17%
OCONUS	87%	(n = 253)	86% 14%
Direct Care, Military Service			
Army	83%	(n = 1136)	85% 15%
Navy	81%	(n = 819)	87% 13%
Air Force	86%	(n = 456)	85% 15%
Purchased Care, TRICARE Regions²			
North	82%	(n = 314)	83% 17%
South	74%	(n = 173)	70% 30%
West	77%	(n = 240)	77% 23%

- Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that someone on the hospital staff talked with them about the signs and symptoms of post-partum depression ($p < .05$).
- Among Purchased Care, those in the North region were significantly more likely than those in the South region to report that someone on the hospital staff talked with them about the signs and symptoms of post-partum depression ($p < .05$).

Maternity Care (Maternity Questionnaire Only)

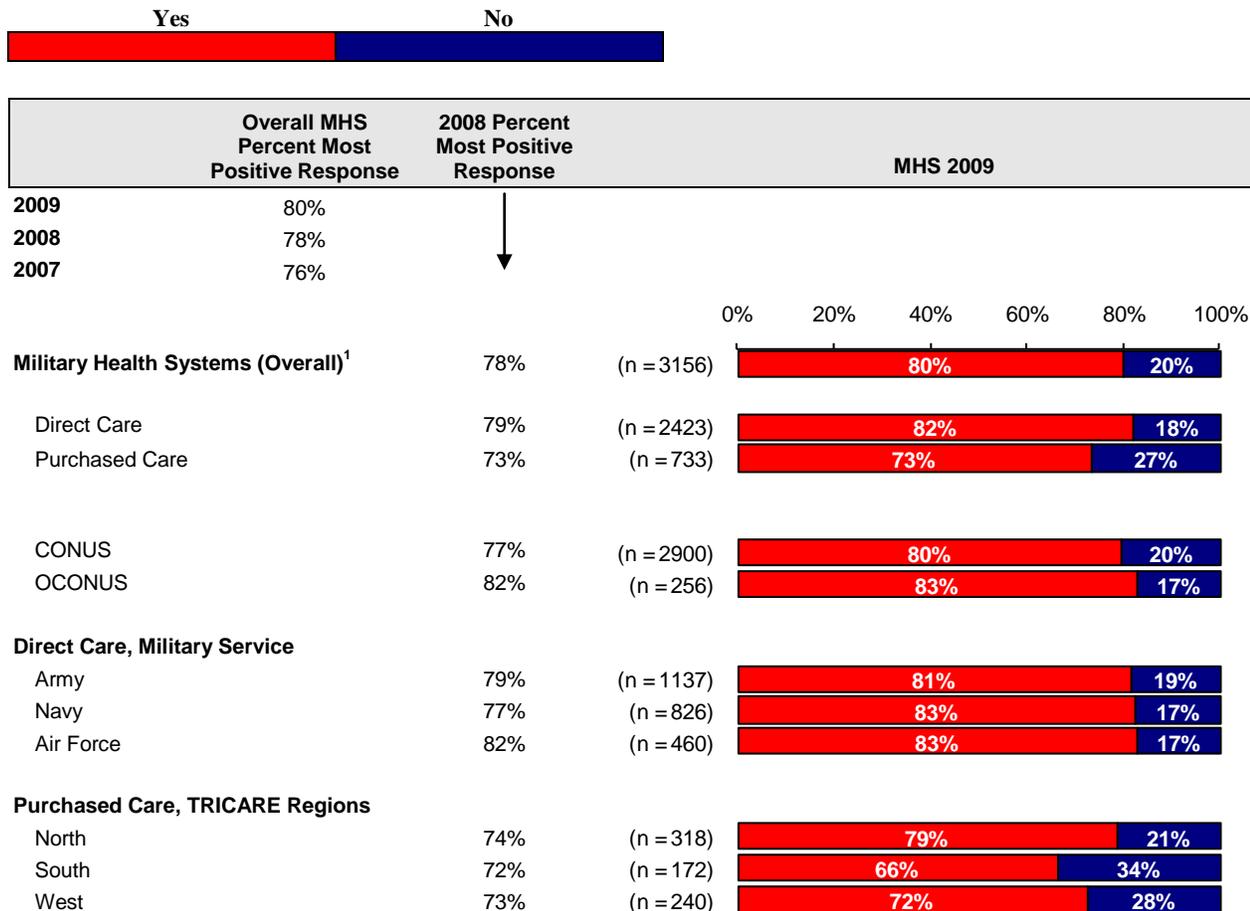
Before you left the hospital, did someone on the hospital staff talk with you about the signs and symptoms of post-partum depression? (continued)



3. Among Obstetrics beneficiaries, those in Direct Care were significantly more likely than those in Purchased Care to report that someone on the hospital staff talked with them about the signs and symptoms of post-partum depression ($p < .05$).

Maternity Care (Maternity Questionnaire Only)

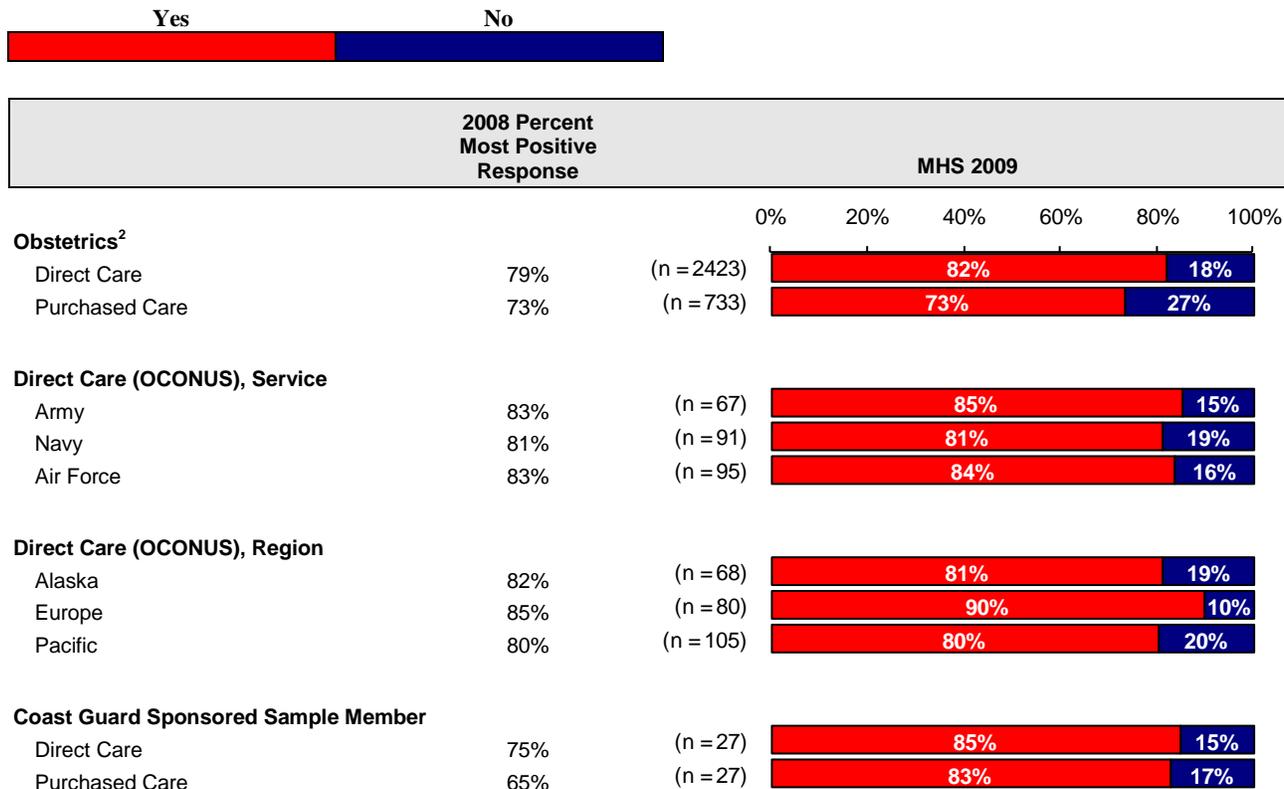
Before you left the hospital, did someone on the hospital staff talk with you about what to do or who to contact if you felt that you were having signs or symptoms of post-partum depression?



1. Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that staff talked with them about what to do or who to contact if they were having signs or symptoms of post-partum depression ($p < .05$).

Maternity Care (Maternity Questionnaire Only)

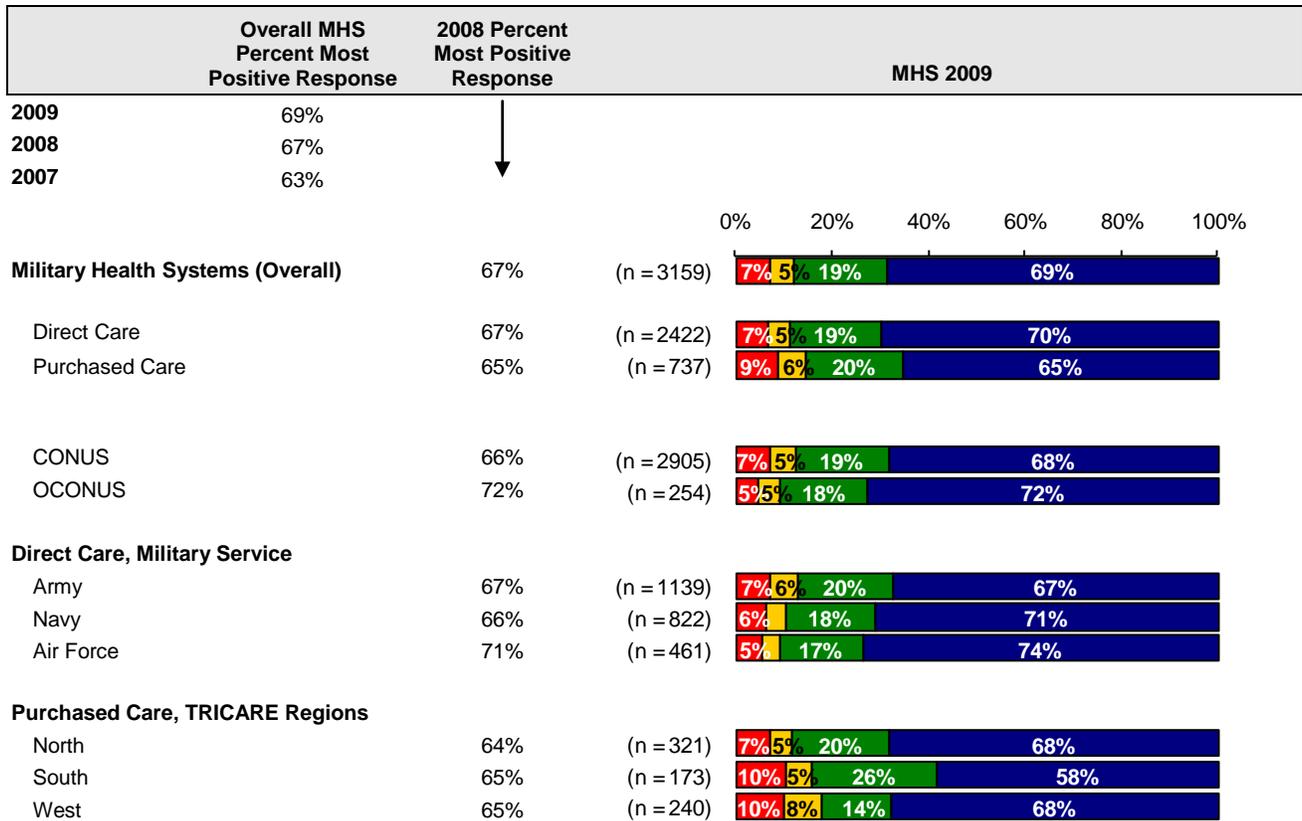
Before you left the hospital, did someone on the hospital staff talk with you about what to do or who to contact if you felt that you were having signs or symptoms of post-partum depression? (continued)



2. Among those receiving Obstetrics services, those in Direct Care were significantly more likely than those in Purchased Care to report that staff talked with them about what to do or who to contact if they were having signs or symptoms of post-partum depression ($p < .05$).

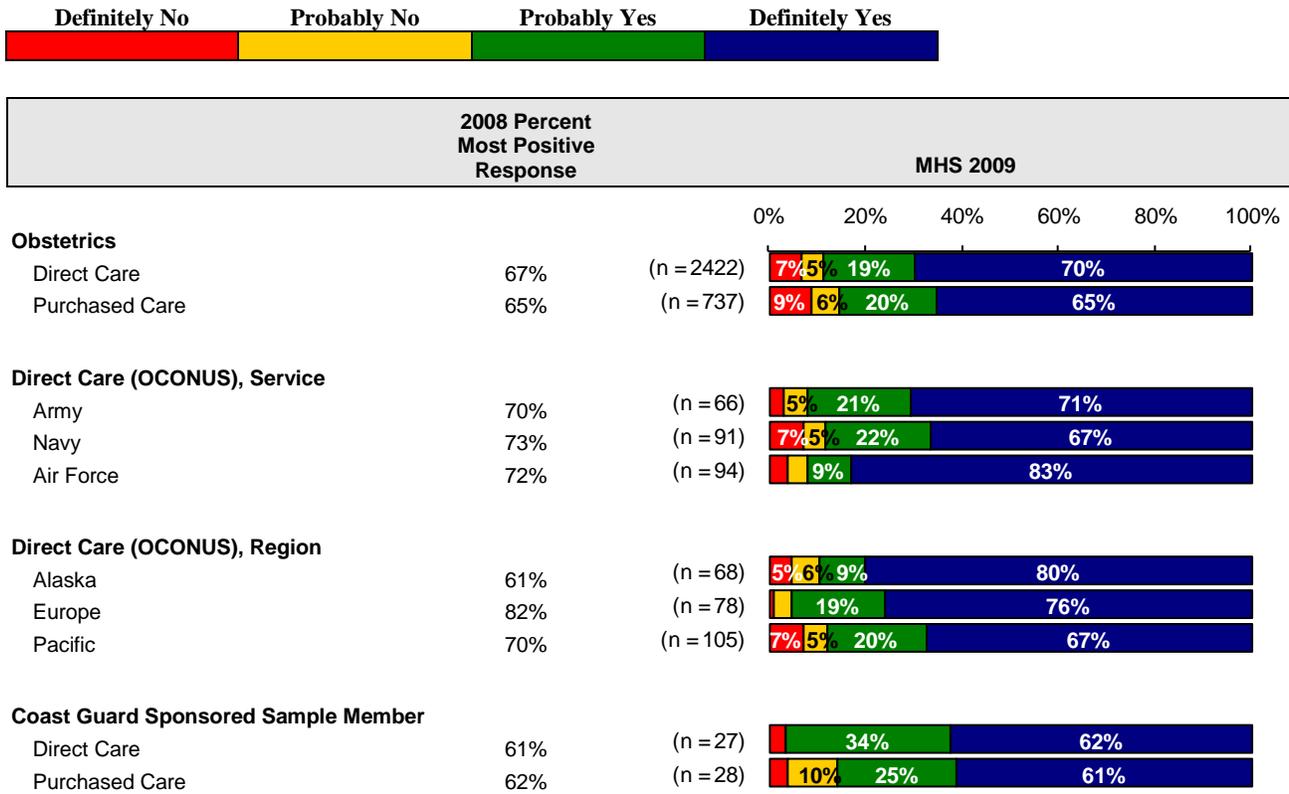
Maternity Care (Maternity Questionnaire Only)

Before you left the hospital, did you feel confident that you knew what to do or who to contact if you were having signs or symptoms of postpartum depression?



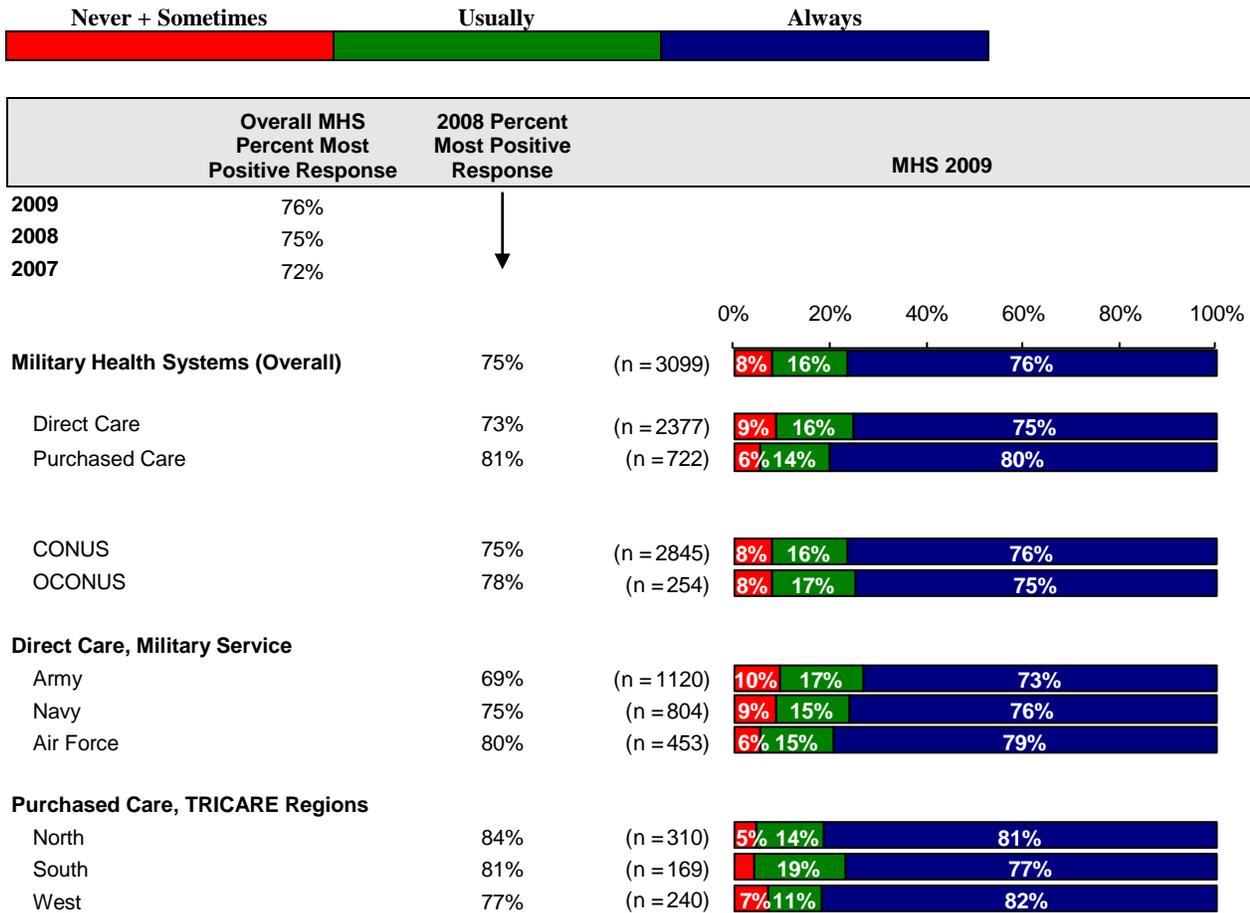
Maternity Care (Maternity Questionnaire Only)

Before you left the hospital, did you feel confident that you knew what to do or who to contact if you were having signs or symptoms of postpartum depression? (continued)



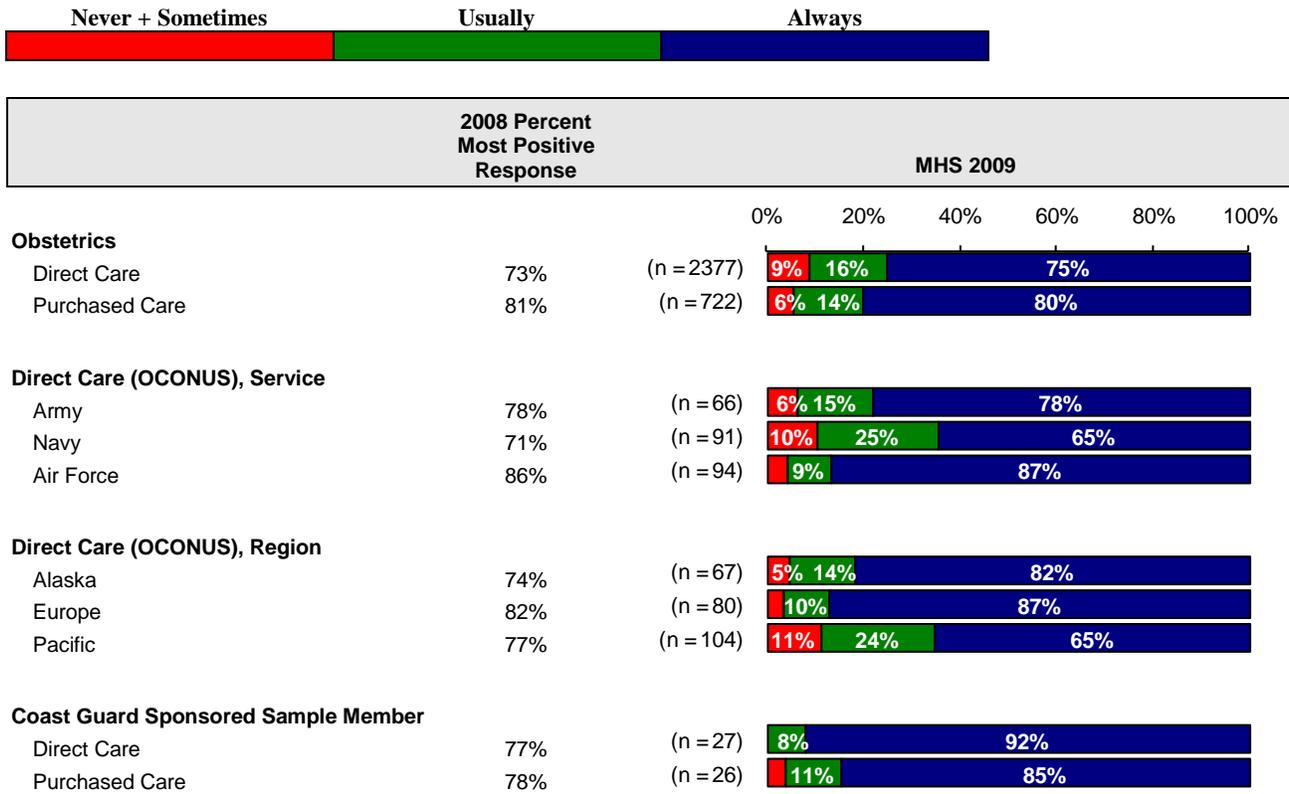
After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did you feel comfortable asking the nurses all the questions you wanted about your baby’s care?



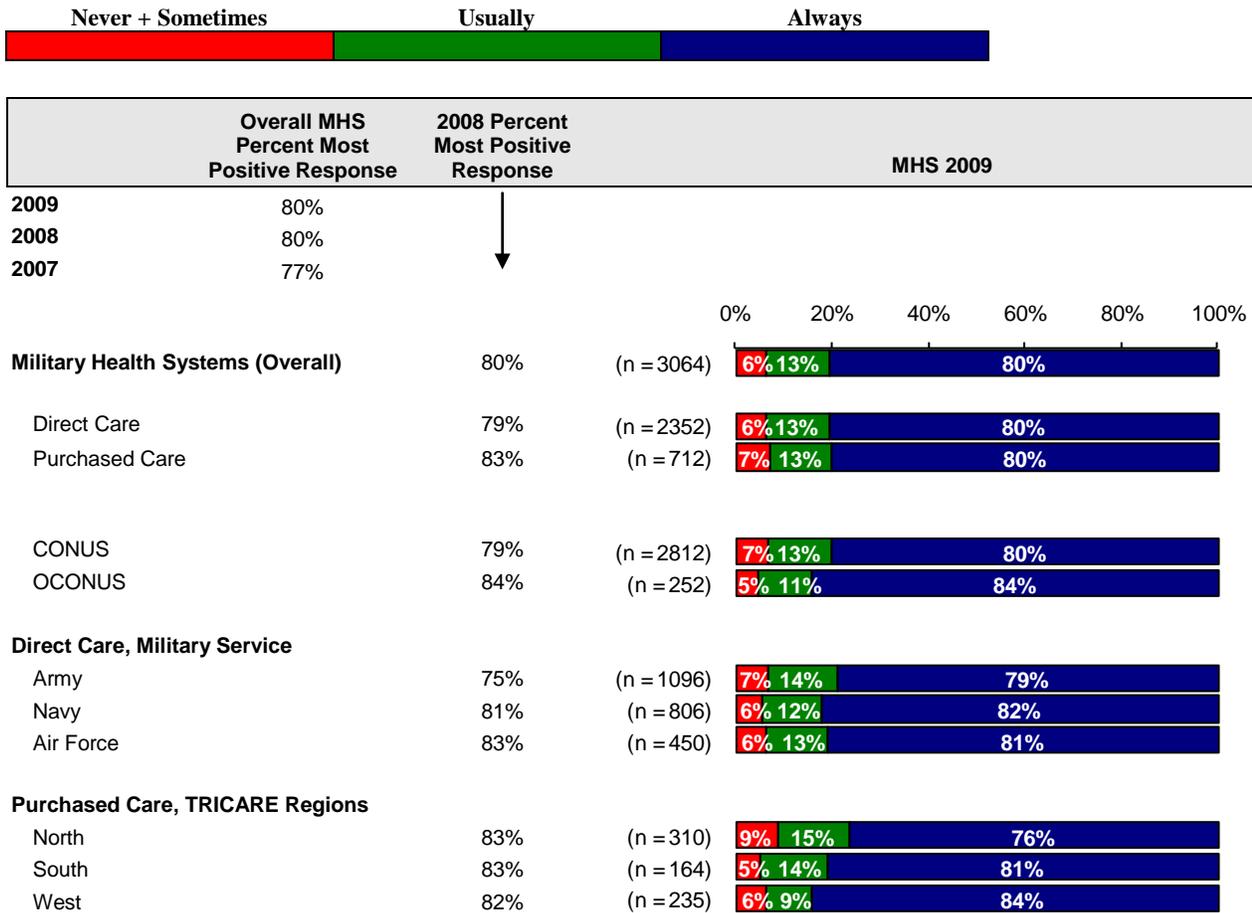
After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did you feel comfortable asking the nurses all the questions you wanted about your baby’s care? (continued)



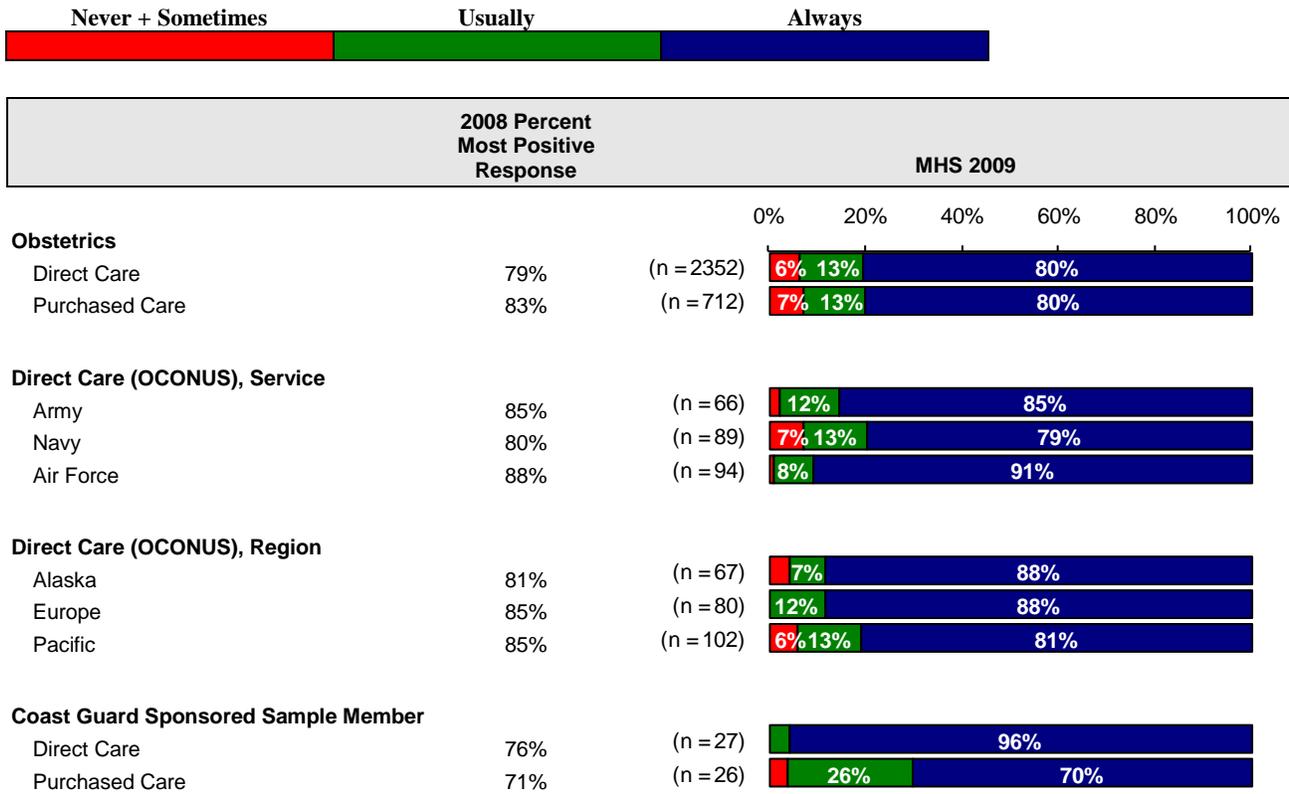
After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did you feel comfortable asking the doctors all the questions you wanted about your baby’s care?



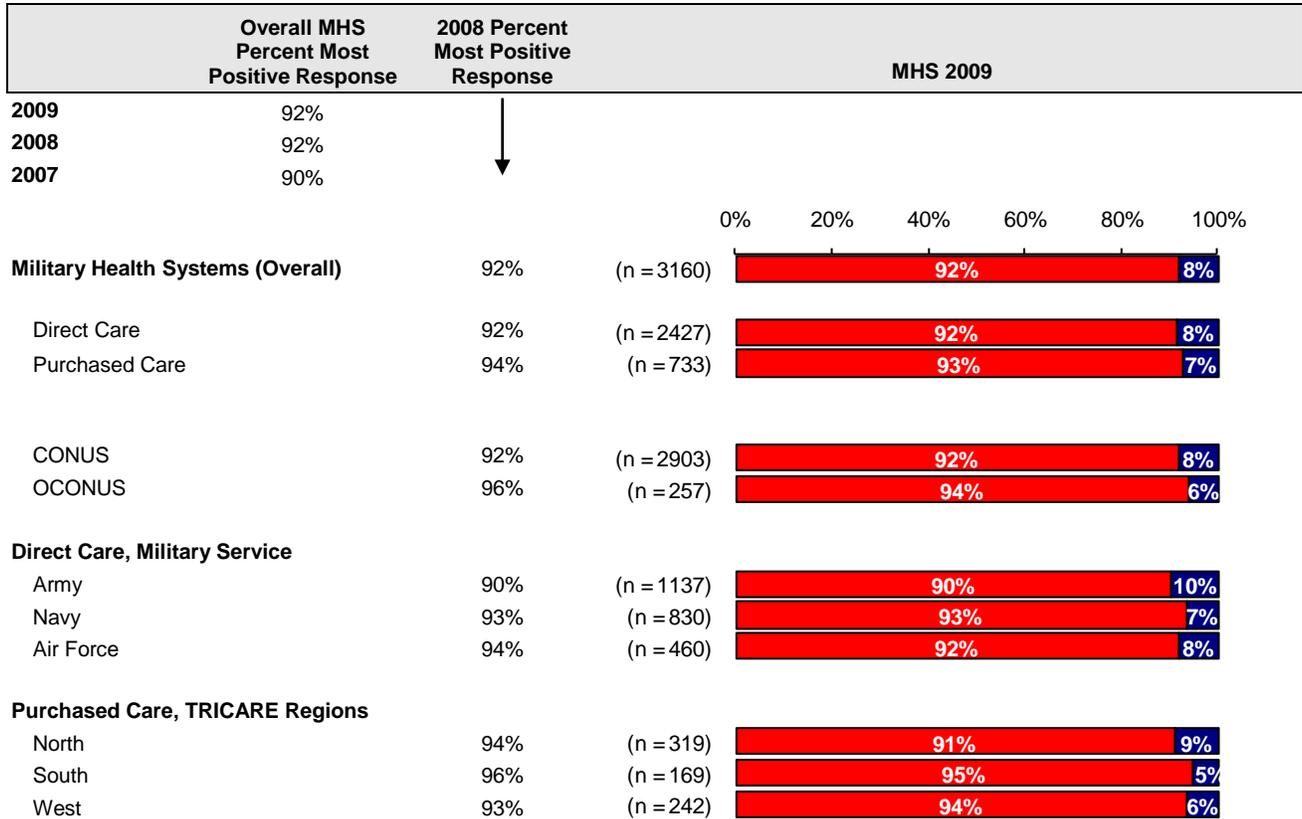
After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did you feel comfortable asking the doctors all the questions you wanted about your baby’s care? (continued)



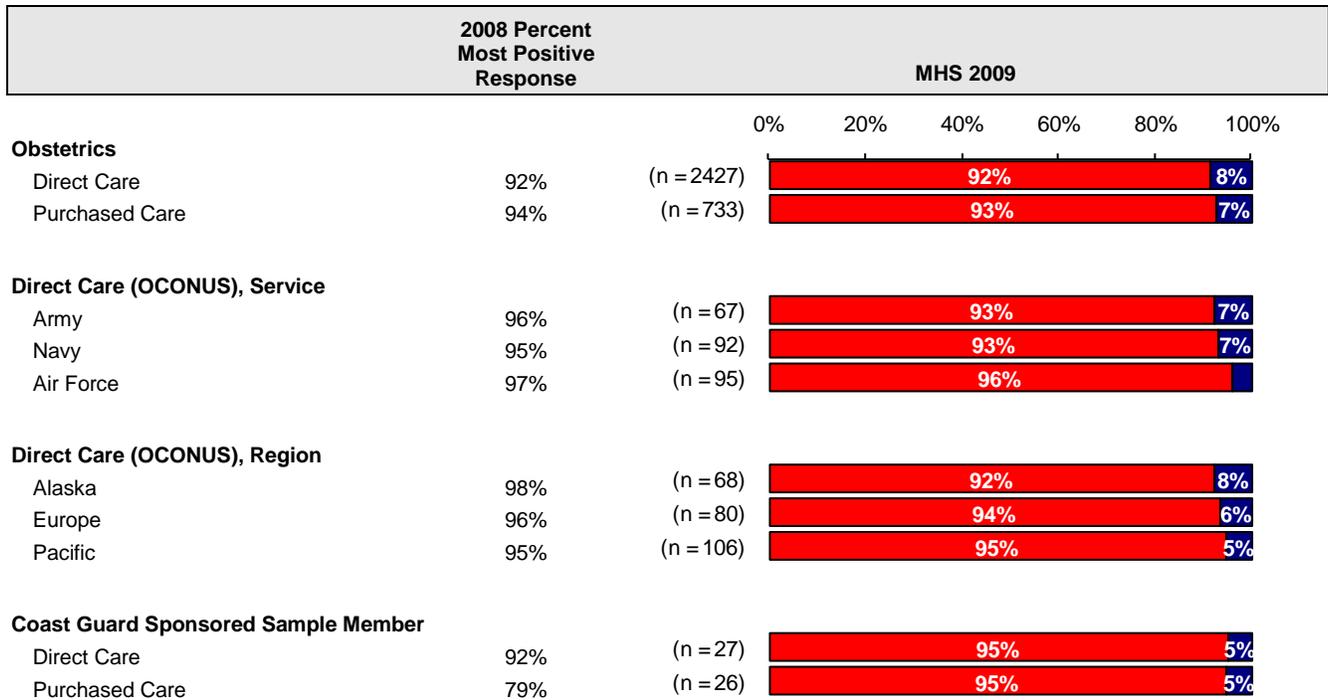
After Your Baby Was Born (Maternity Only)

During this hospital stay, did you feel that the doctors checked on your baby as much as needed?



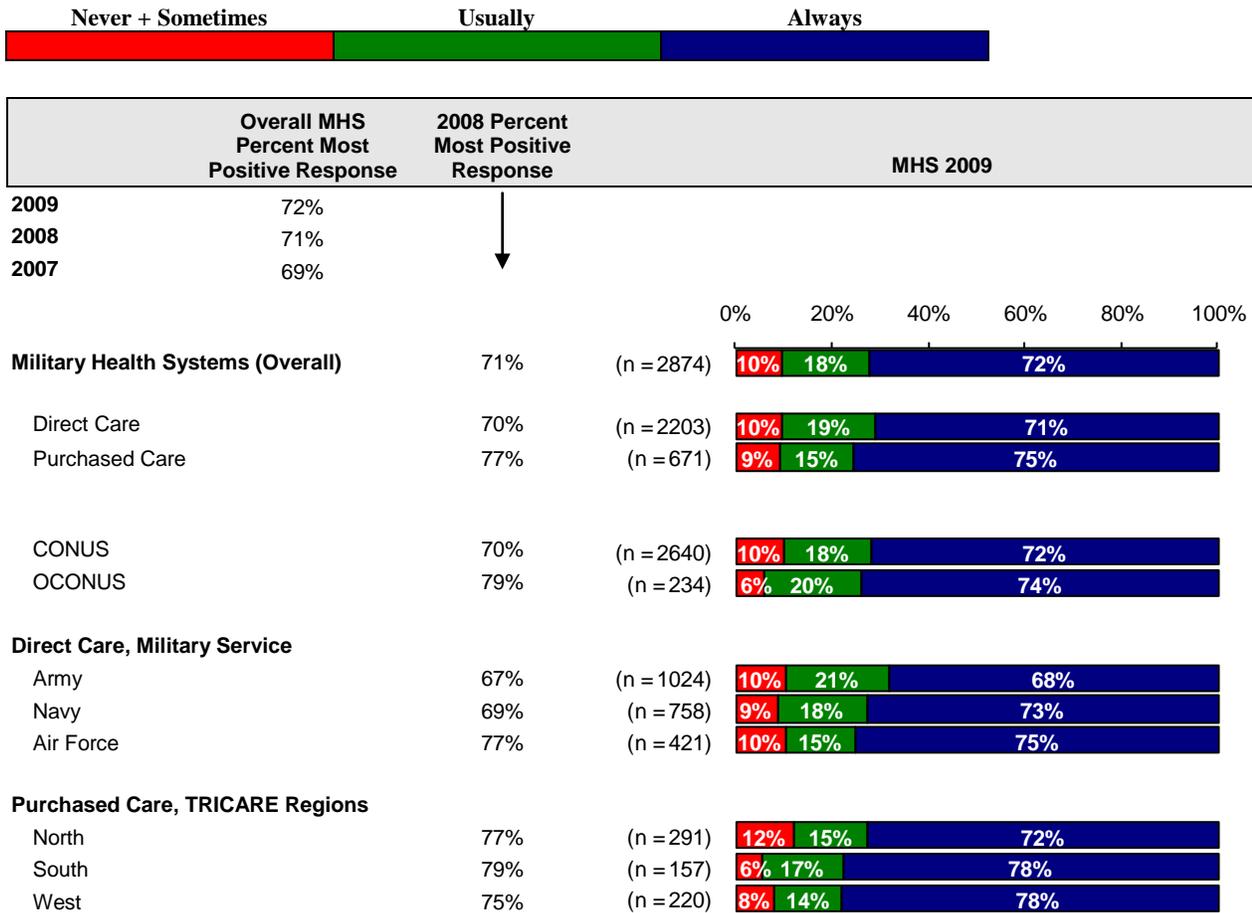
After Your Baby Was Born (Maternity Only)

During this hospital stay, did you feel that the doctors checked on your baby as much as needed? (continued)



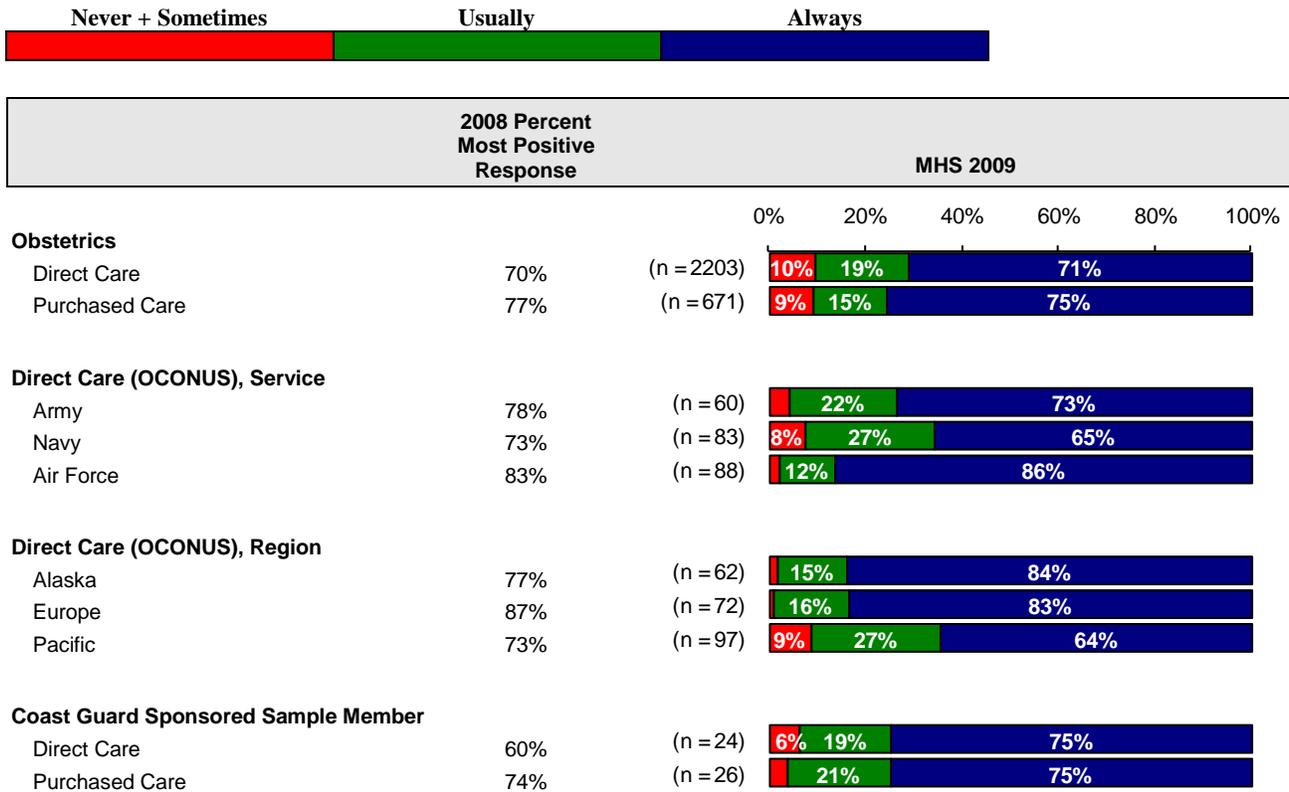
After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did doctors show care and sensitivity to worries and concerns you had about your baby?



After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did doctors show care and sensitivity to worries and concerns you had about your baby? (continued)



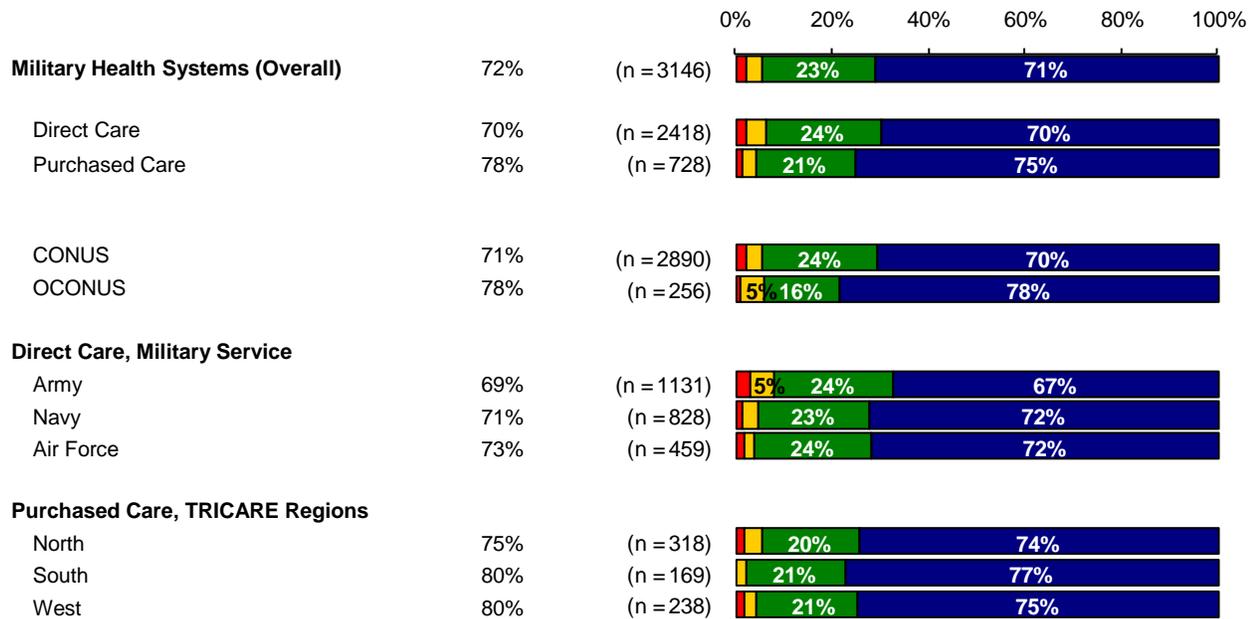
After Your Baby Was Born (Maternity Only)

During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your baby’s condition and treatment?



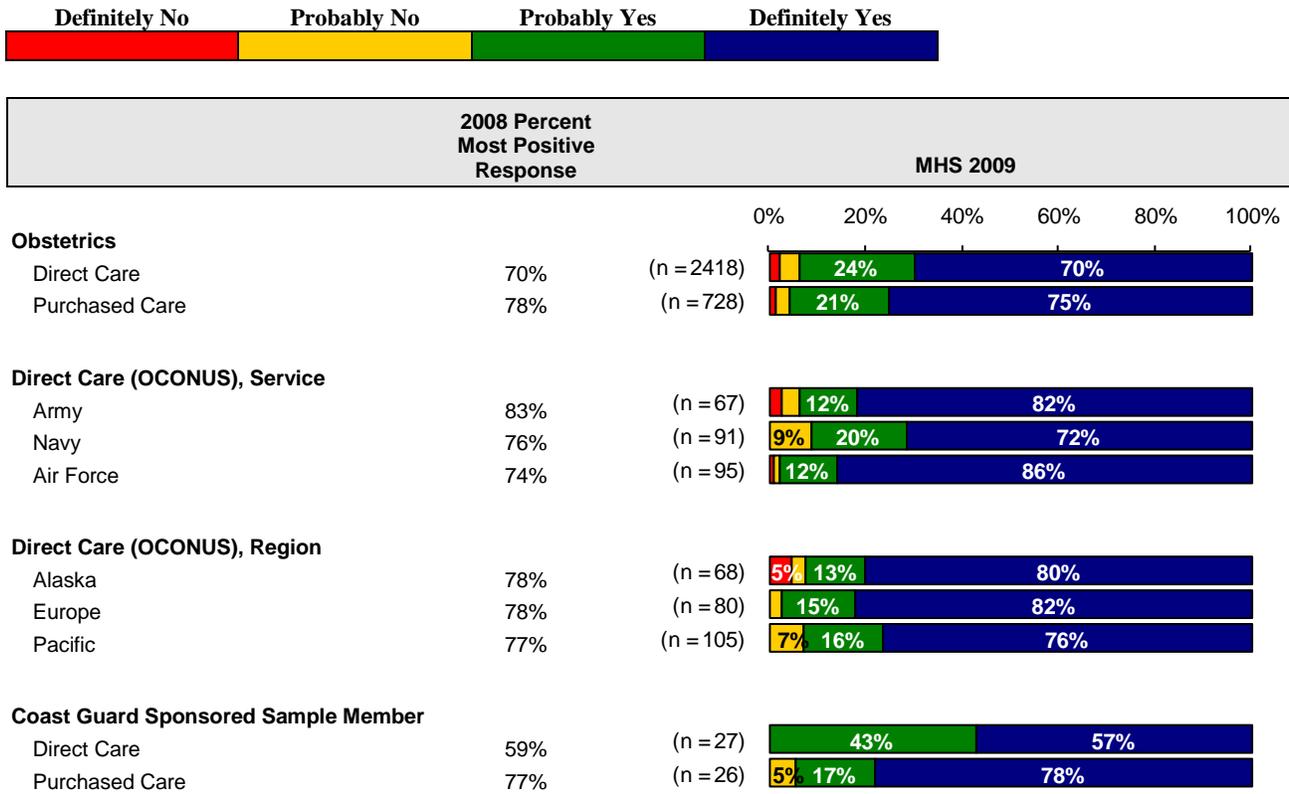
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009
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2009 72%
 2008 72%
 2007 68%



After Your Baby Was Born (Maternity Only)

During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your baby’s condition and treatment? (continued)



After Your Baby Was Born (Maternity Only)

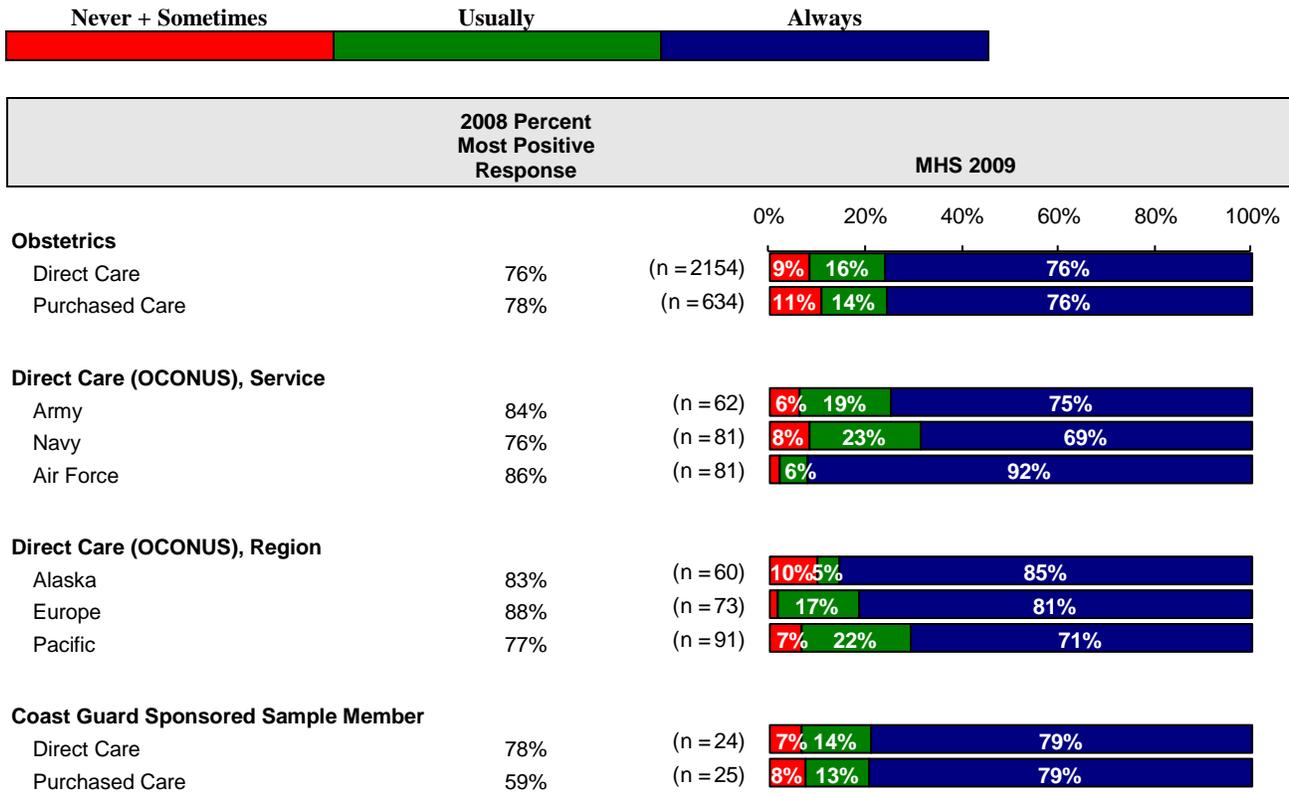
During this hospital stay, how often did the doctors involve you as much as you wanted in the decisions about your baby’s treatment?



	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009
2009	76%		
2008	76%		
2007	73%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)	76%	(n = 2788)	9% 15% 76%
Direct Care	76%	(n = 2154)	9% 16% 76%
Purchased Care	78%	(n = 634)	11% 14% 76%
CONUS	76%	(n = 2561)	9% 15% 76%
OCONUS	82%	(n = 227)	6% 17% 77%
Direct Care, Military Service			
Army	75%	(n = 1008)	9% 16% 74%
Navy	75%	(n = 740)	7% 15% 78%
Air Force	81%	(n = 406)	9% 14% 77%
Purchased Care, TRICARE Regions			
North	77%	(n = 284)	11% 14% 75%
South	79%	(n = 139)	12% 12% 75%
West	77%	(n = 208)	9% 14% 77%

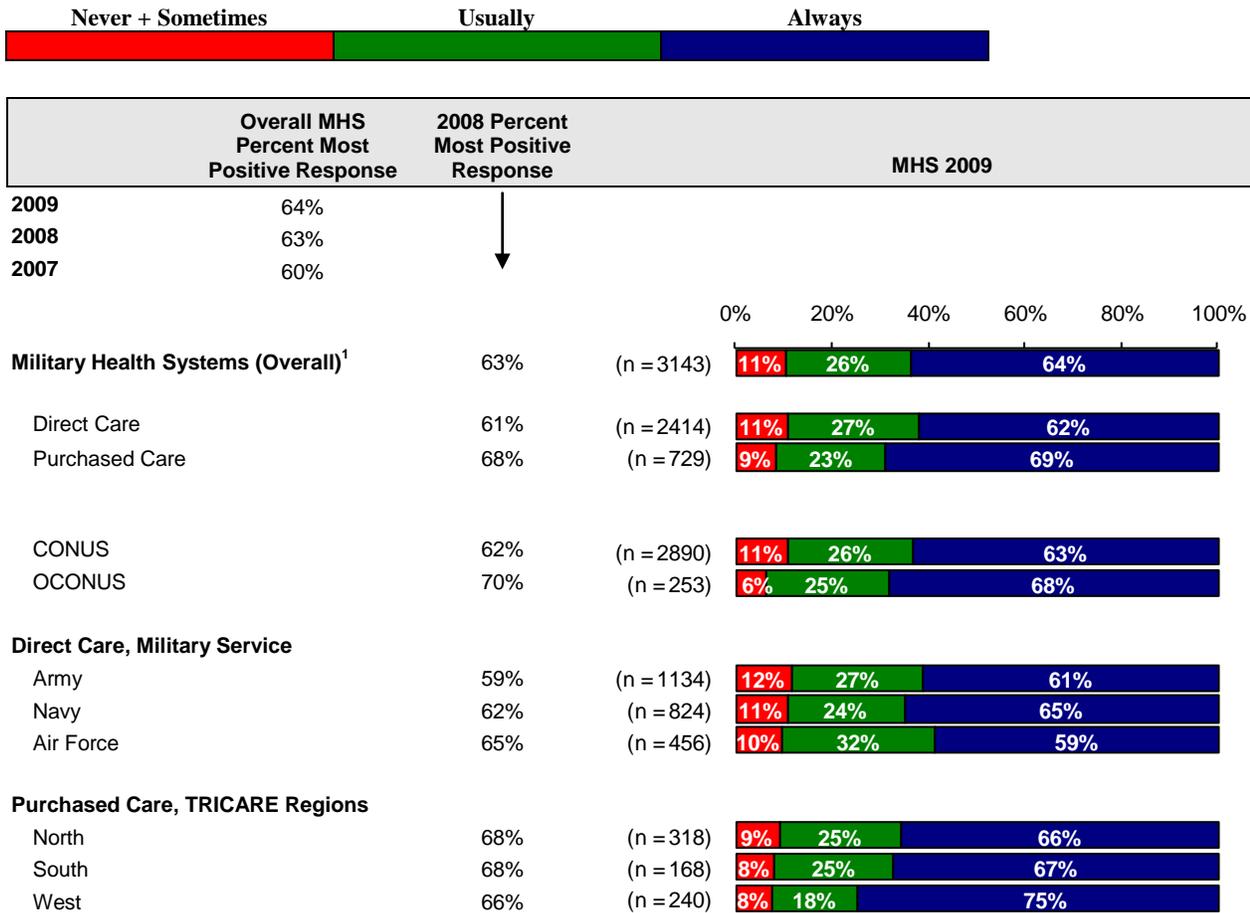
After Your Baby Was Born (Maternity Only)

During this hospital stay, how often did the doctors involve you as much as you wanted in the decisions about your baby’s treatment? (continued)



After Your Baby Was Born (Maternity Only)

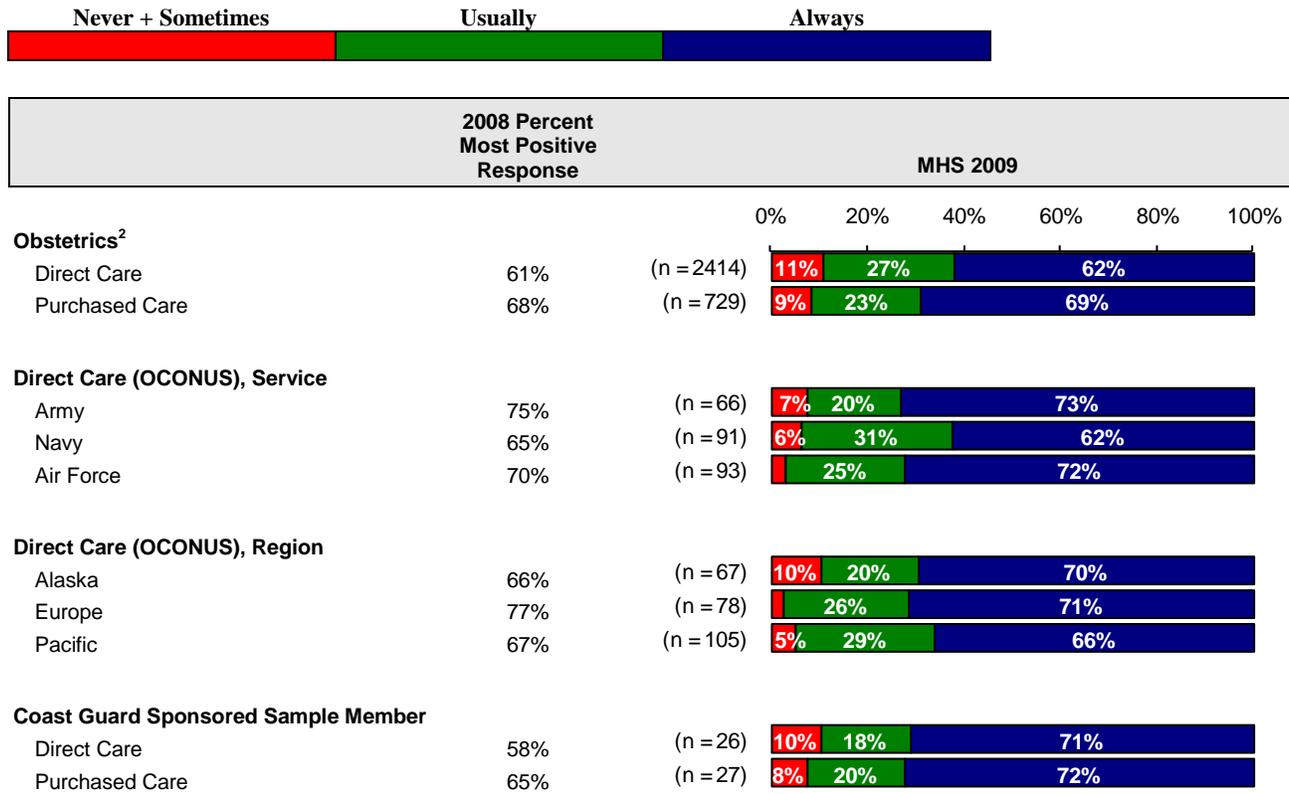
During this hospital stay, how often did the doctors and nurses seem informed and up-to-date about all the care your baby received?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the doctors and nurses always seemed informed and up to date about all the care their baby received ($p < .05$).

After Your Baby Was Born (Maternity Only)

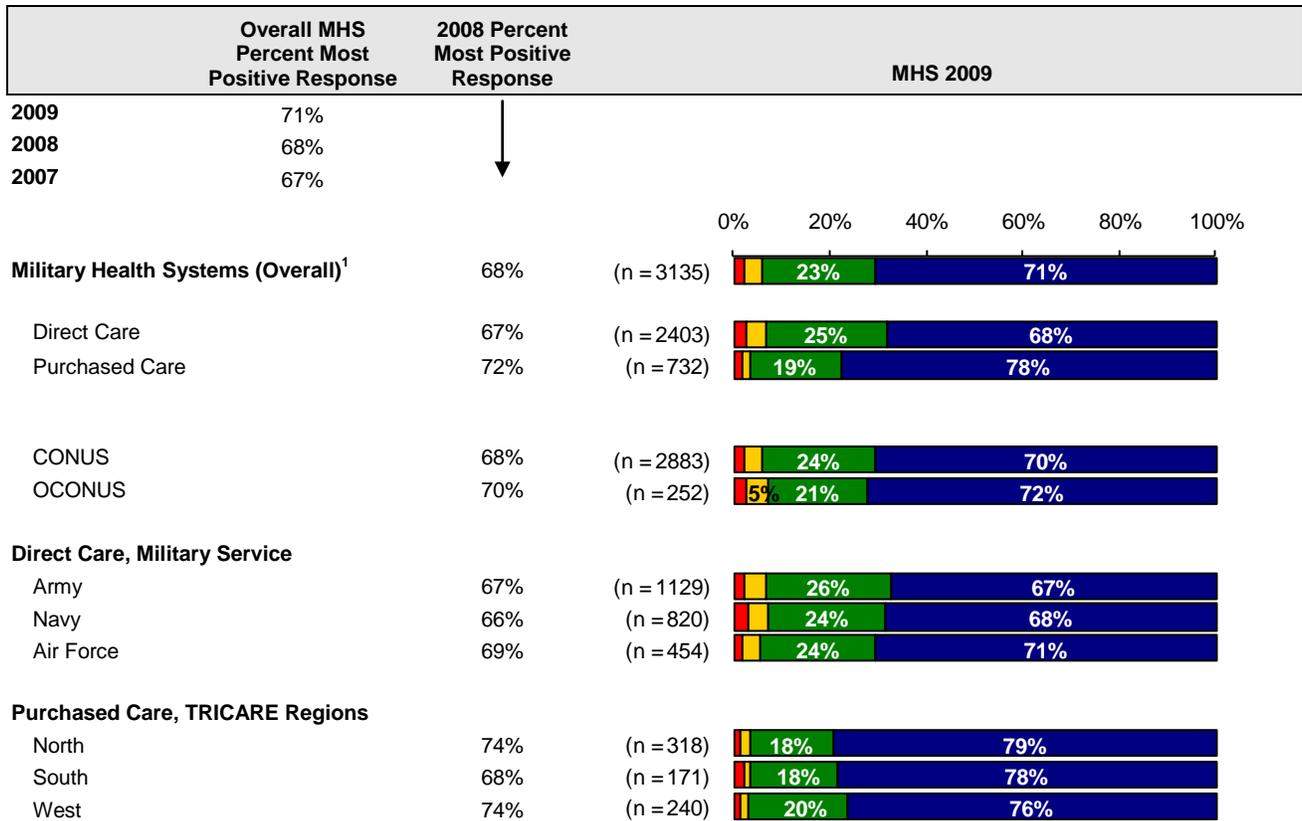
During this hospital stay, how often did the doctors and nurses seem informed and up-to-date about all the care your baby received? (continued)



2. Among beneficiaries receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the doctors and nurses always seemed informed and up to date about all the care their baby received ($p < .05$).

After Your Baby Was Born (Maternity Only)

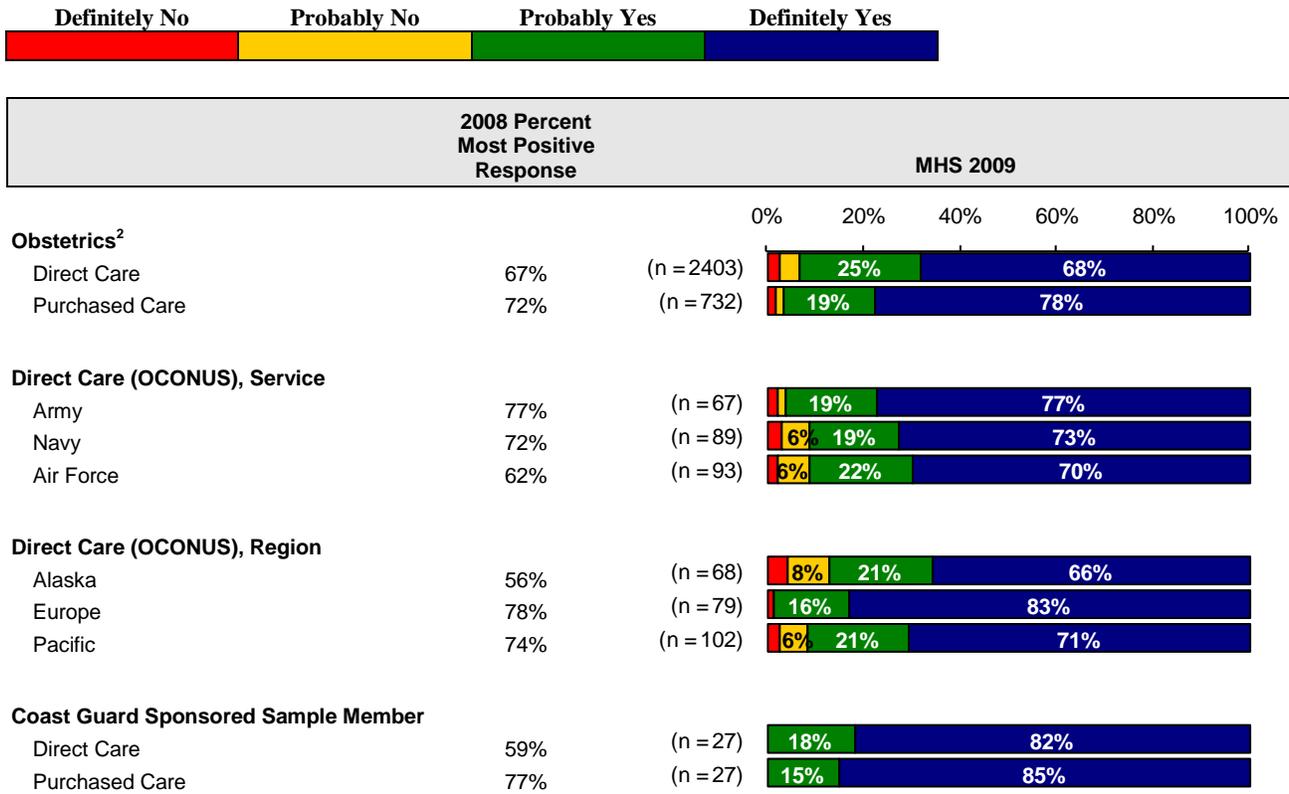
Did hospital staff teach you what you needed to know to take care of yourself after you left the hospital?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the hospital staff taught them all they needed to know to take care of themselves after they left the hospital (p<.05).

After Your Baby Was Born (Maternity Only)

Did hospital staff teach you what you needed to know to take care of yourself after you left the hospital? (continued)



2. Among those receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the hospital staff taught them all they needed to know to take care of themselves after they left the hospital (p<.05).

About Your Care and Surgery (Surgical Questionnaire Only)

Did your surgeon or other doctors explain the risks and benefits of the surgery in a way you could understand?

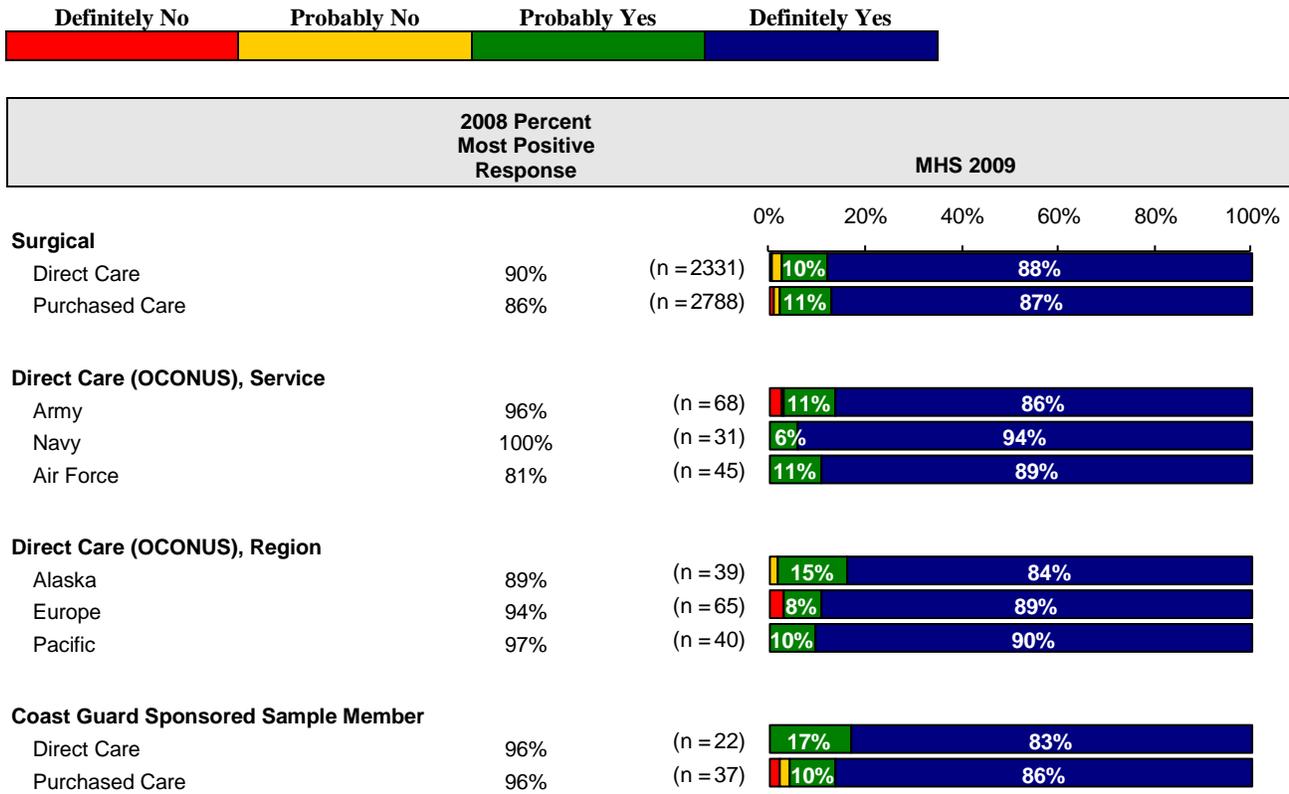


	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009
2009	87%		
2008	88%		
2007	87%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)	88%	(n = 5119)	10% 87%
Direct Care	90%	(n = 2331)	10% 88%
Purchased Care	86%	(n = 2788)	11% 87%
CONUS	88%	(n = 4933)	10% 87%
OCONUS	93%	(n = 186)	9% 89%
Direct Care, Military Service¹			
Army	90%	(n = 1240)	12% 85%
Navy	89%	(n = 612)	7% 91%
Air Force	93%	(n = 479)	7% 93%
Purchased Care, TRICARE Regions			
North	87%	(n = 921)	11% 87%
South	86%	(n = 864)	11% 87%
West	86%	(n = 961)	11% 86%
Direct Care, Age²			
18–44	88%	(n = 629)	11% 85%
45–64	92%	(n = 1082)	6% 93%
65+	92%	(n = 620)	9% 89%
Purchased Care, Age³			
18–44	85%	(n = 226)	15% 84%
45–64	88%	(n = 847)	8% 90%
65+	86%	(n = 1715)	11% 86%

1. Among Direct Care beneficiaries, those in Army MTFs were significantly less likely than those in Air Force or Navy MTFs to report that their surgeon or other doctors explained the risks and benefits of surgery in a way they could understand ($p < .05$).
2. Among Direct Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report that their surgeon or other doctors explained the risks and benefits of surgery in a way they could understand ($p < .05$).
3. Among Purchased Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report that their surgeon or other doctors explained the risks and benefits of surgery in a way they could understand ($p < .05$).

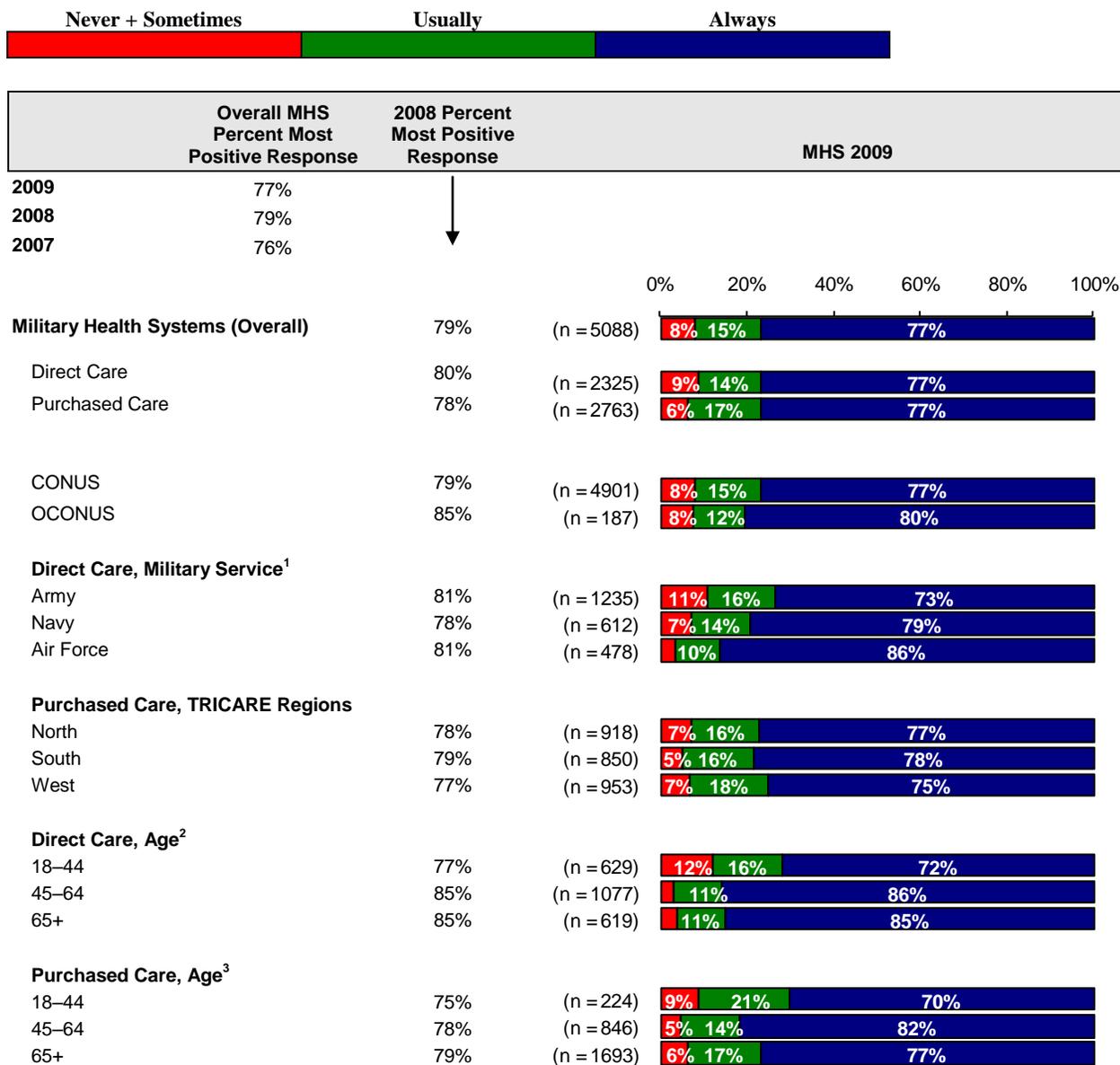
About Your Care and Surgery (Surgical Questionnaire Only)

Did your surgeon or other doctors explain the risks and benefits of the surgery in a way you could understand? (continued)



About Your Care and Surgery (Surgical Questionnaire Only)

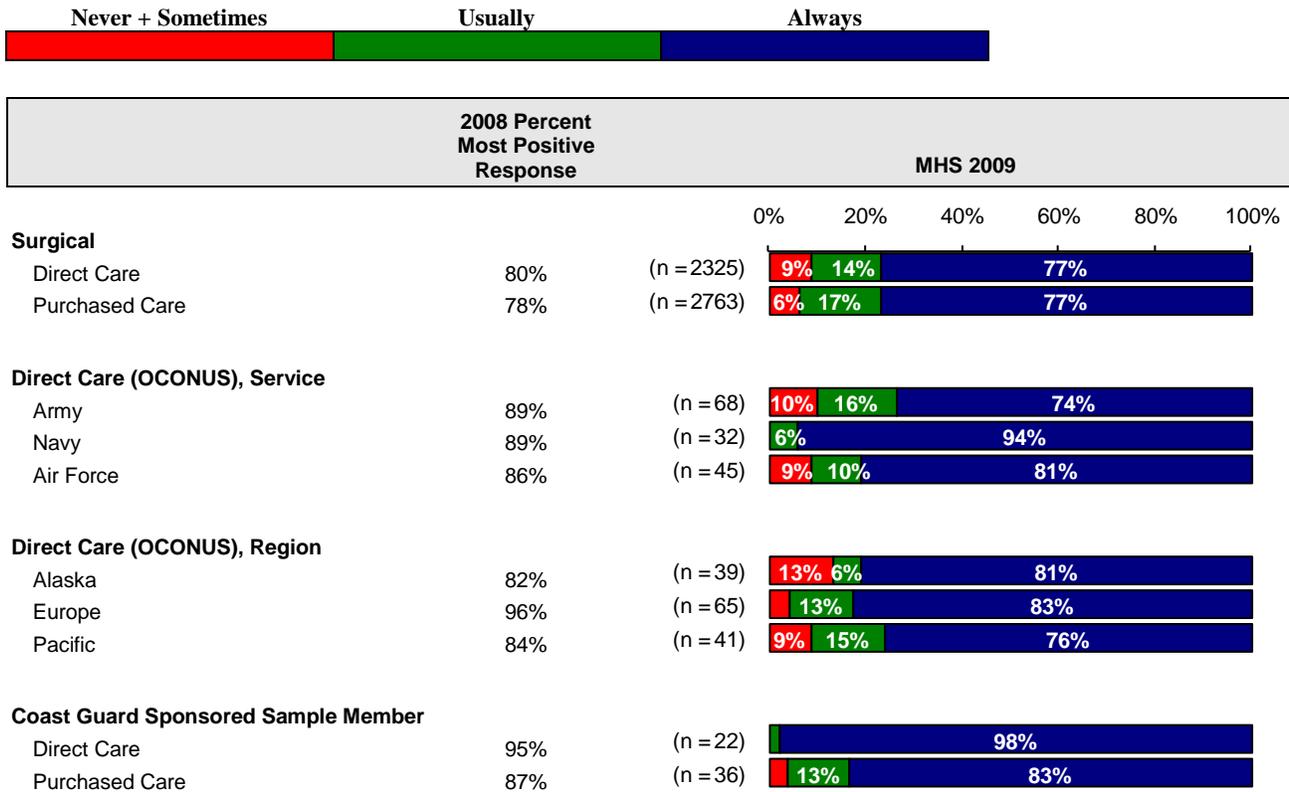
During this hospital stay, how often did doctors or surgeons show care and sensitivity to worries and concerns you had about your surgery?



1. Among Direct Care beneficiaries, those in Air Force MTFs were significantly more likely than those in Army or Navy MTFs to report that their surgeon or other doctors always showed care and sensitivity to worries and concerns they had about their surgery ($p < .05$).
2. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that their surgeon or other doctors always showed care and sensitivity to worries and concerns they had about their surgery ($p < .05$).
3. Among Purchased Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report that their surgeon or other doctors always showed care and sensitivity to worries and concerns they had about their surgery ($p < .05$).

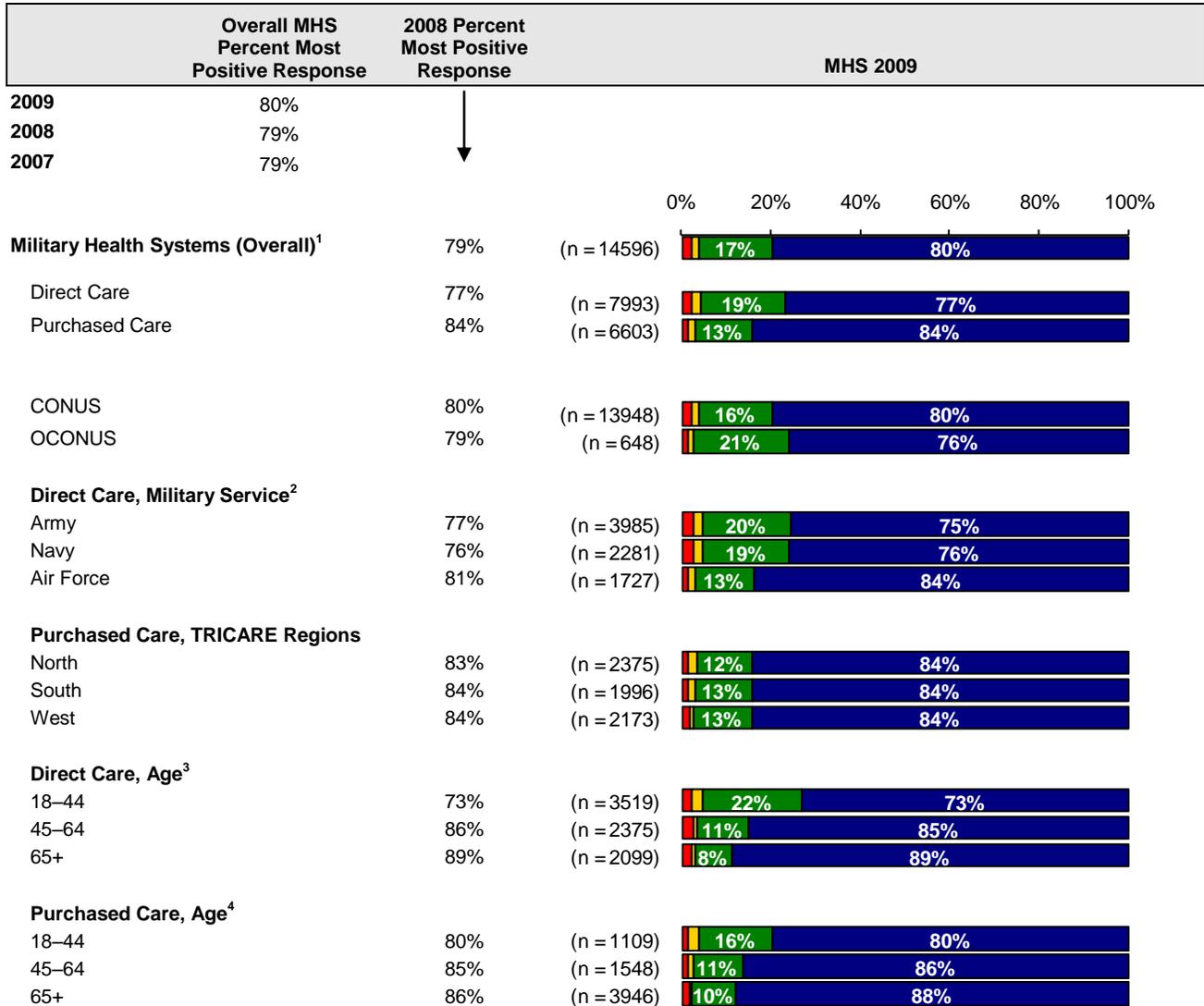
About Your Care and Surgery (Surgical Questionnaire Only)

During this hospital stay, how often did doctors or surgeons show care and sensitivity to worries and concerns you had about your surgery? (continued)



Experiences in this Hospital

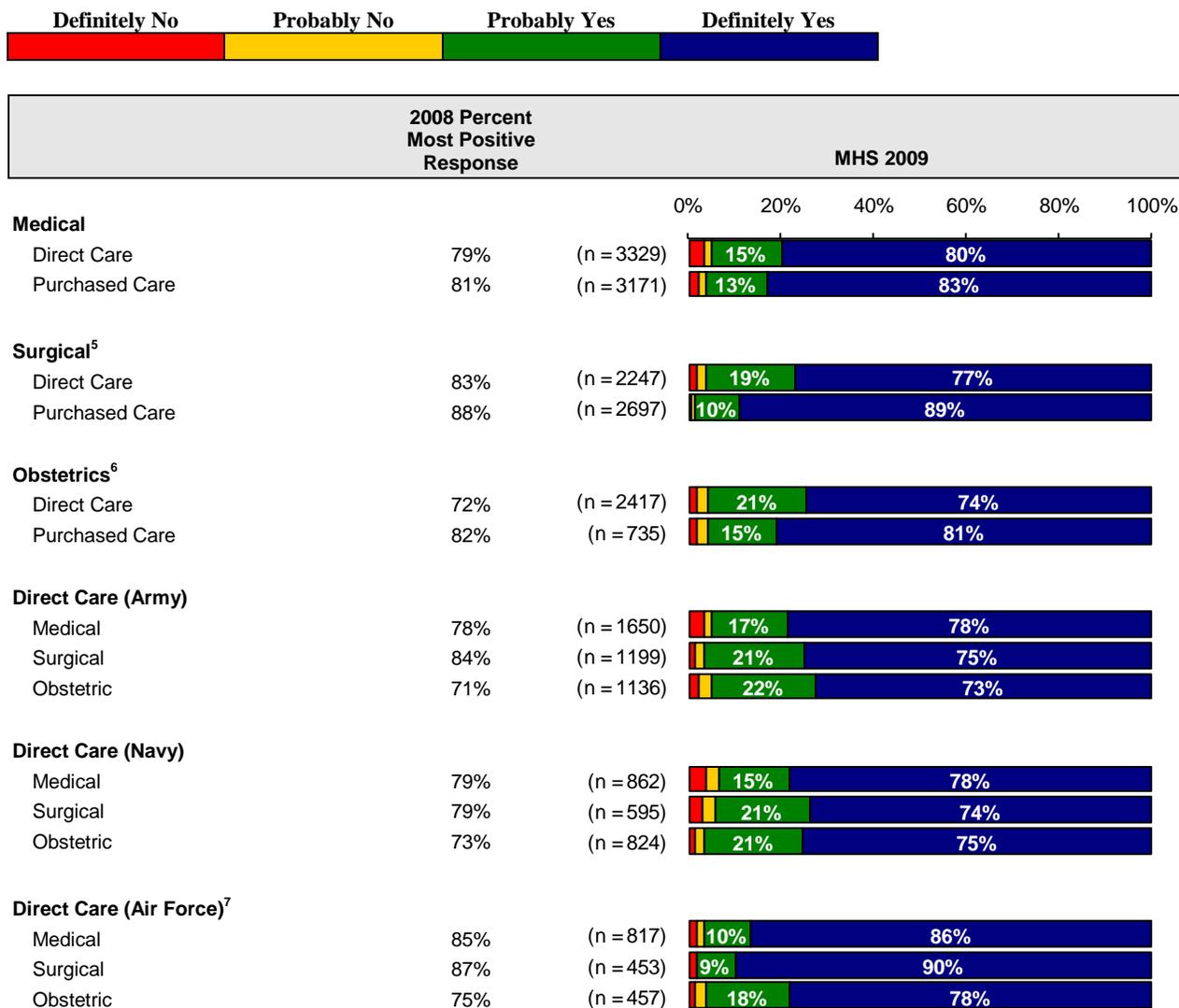
Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect?



- Overall, Purchased Care was significantly more likely than Direct Care to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).
- Among Direct Care, those in Air Force MTFs were significantly more likely than those in Navy or Army MTFs to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).
- Among Direct Care, those aged 18-44 were significantly less likely than those in other age groups to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).
- Among Purchased Care, those aged 18-44 were significantly less likely than those in other age groups to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).

Experiences in this Hospital (continued)

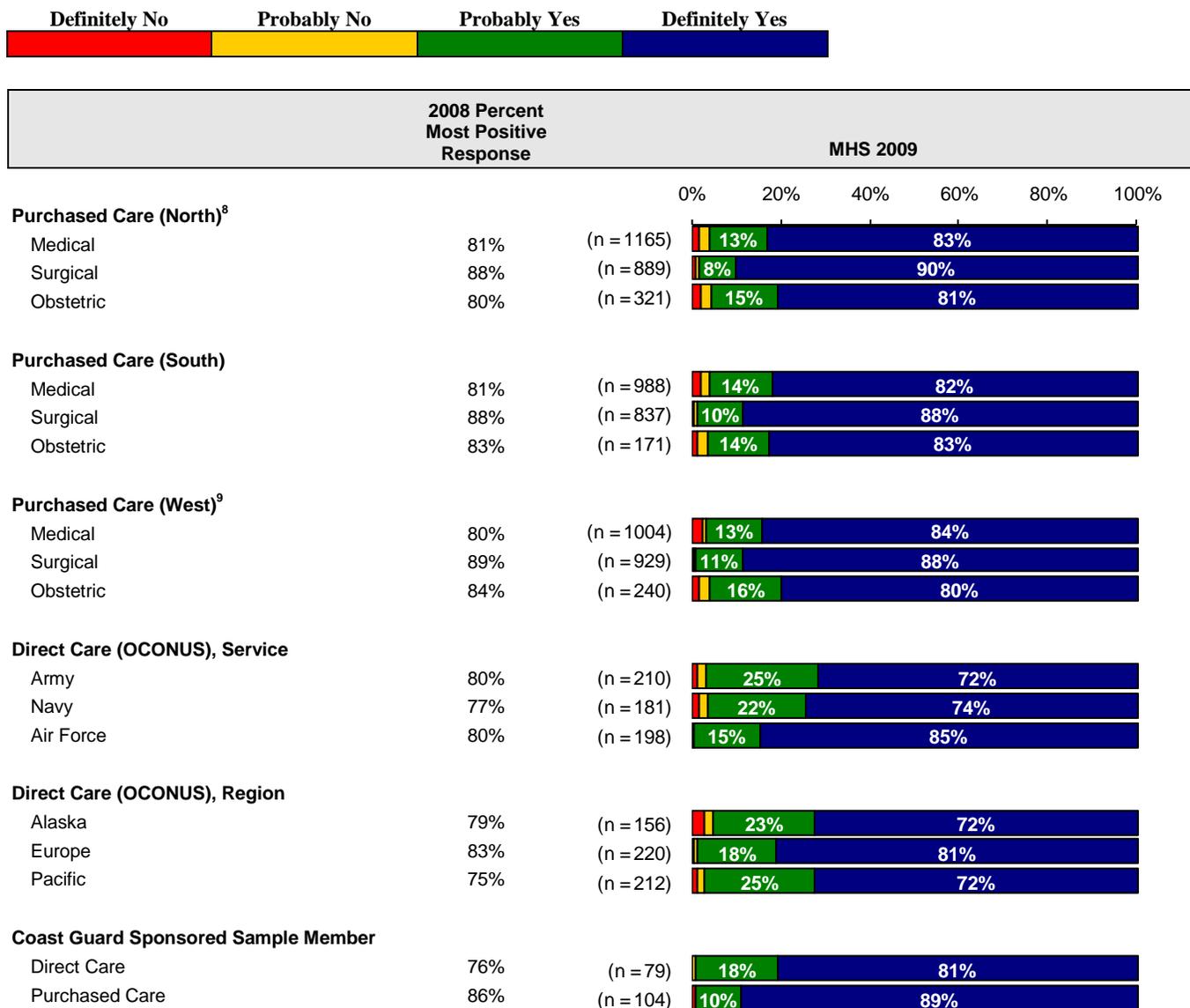
Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect? (continued)



- Among those receiving Surgical services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).
- Among those receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).

Experiences in this Hospital (continued)

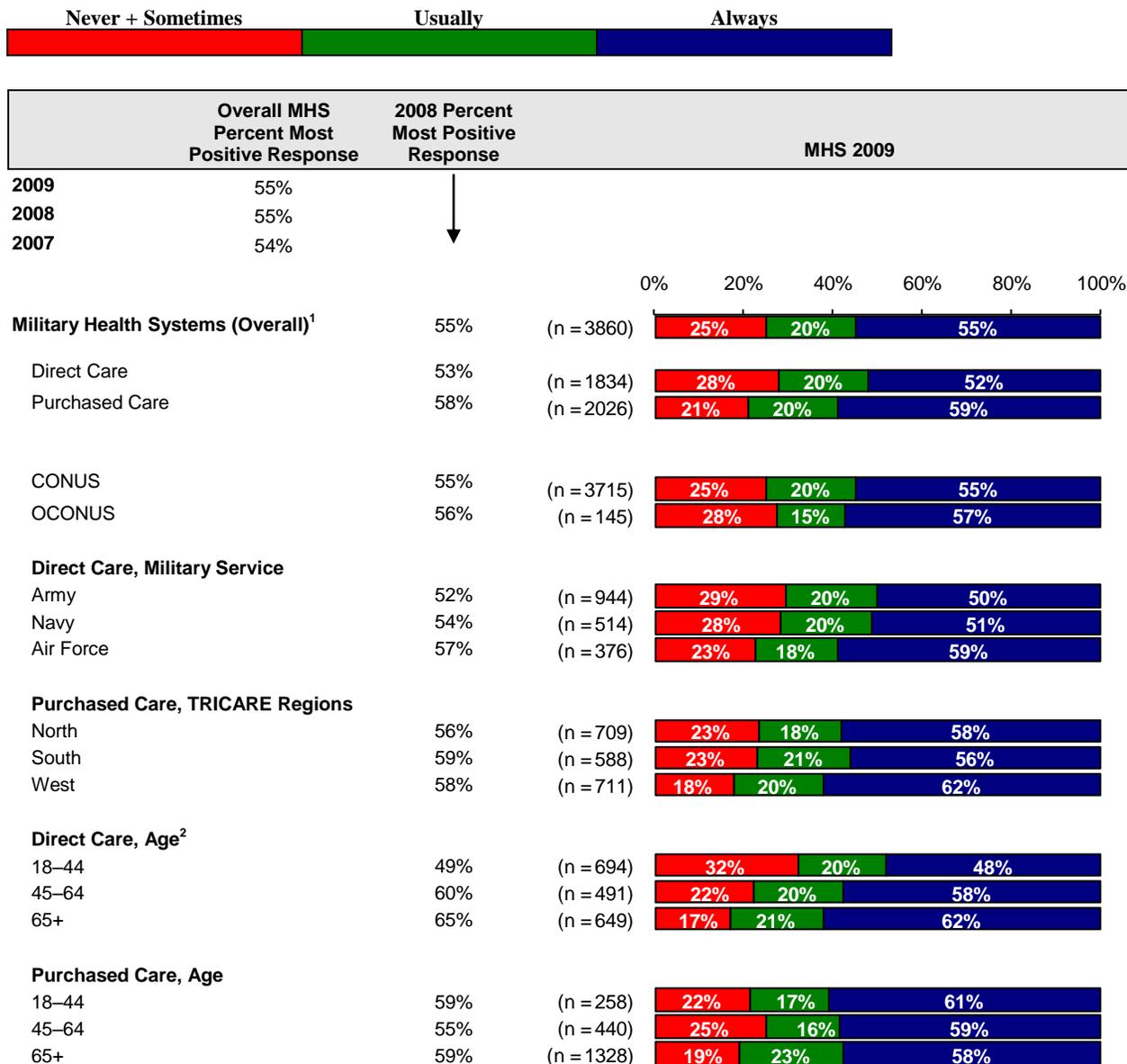
Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to report that the hospital staff that helped them fill out paperwork treated them with courtesy and respect ($p < .05$).

Experiences in this Hospital

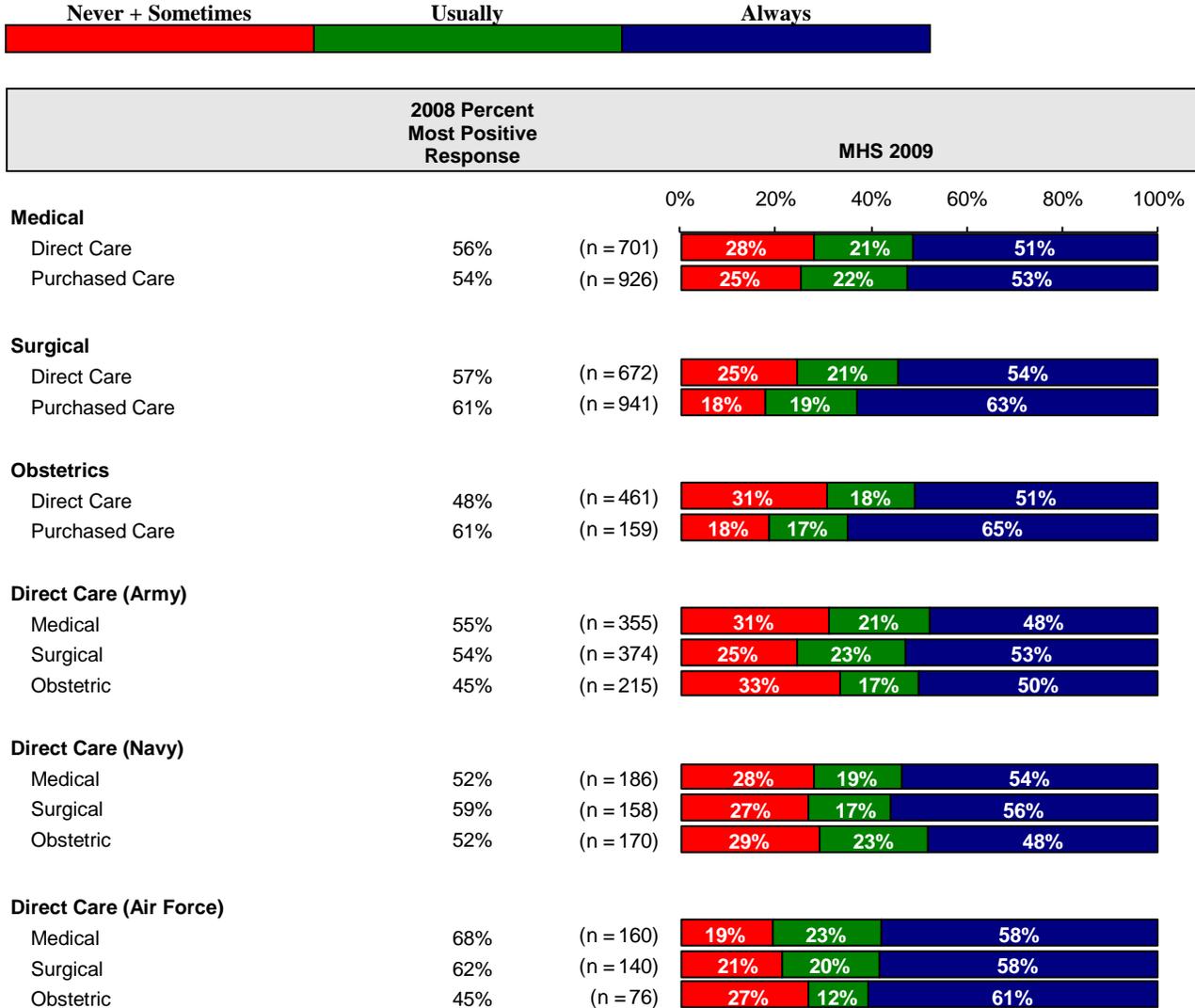
How often did you get the help you needed with bathing and keeping clean?



- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that they always got the help they needed with bathing and keeping clean ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that they always got the help they needed with bathing and keeping clean ($p < .05$).

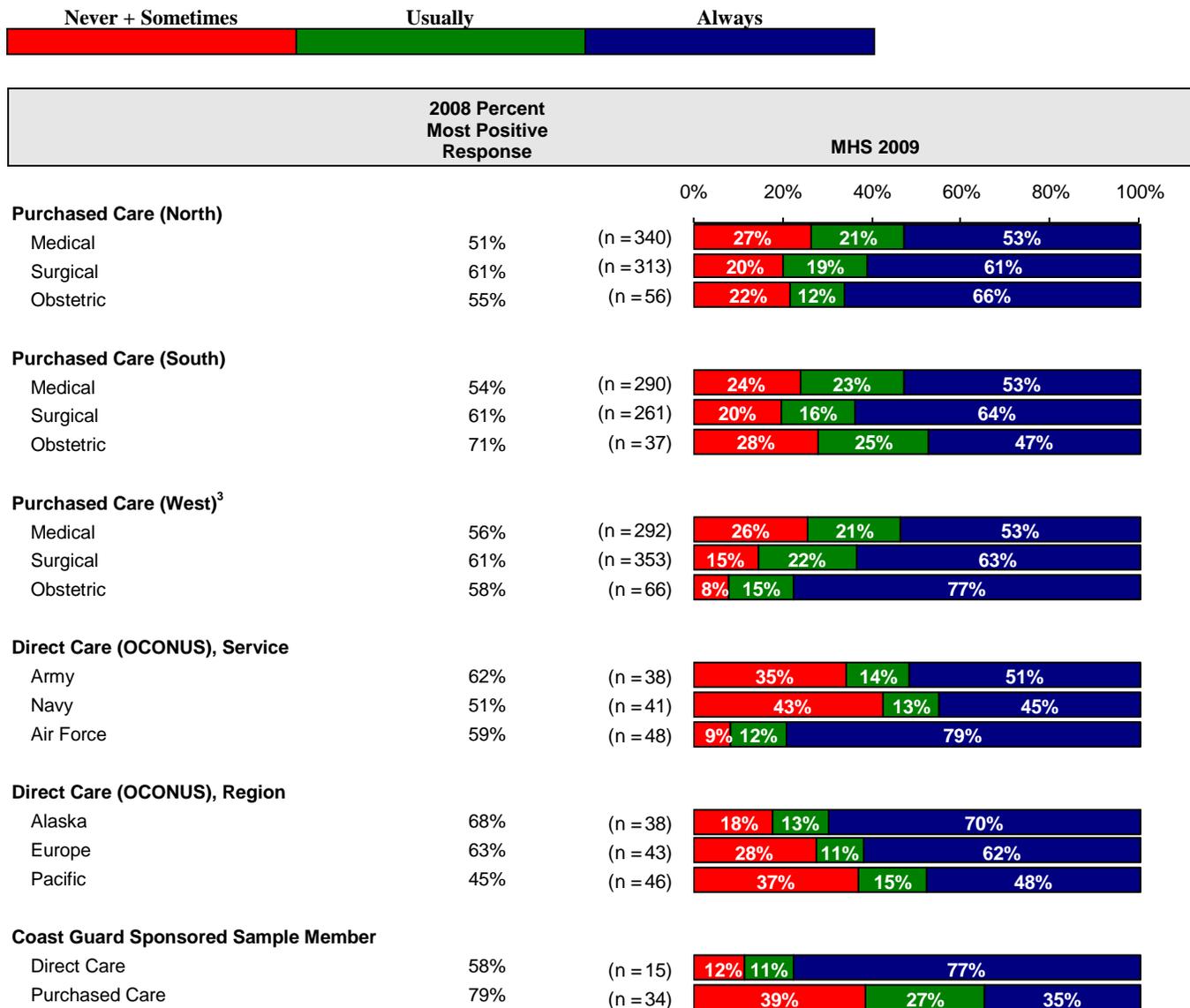
Experiences in this Hospital

How often did you get the help you needed with bathing and keeping clean? (continued)



Experiences in this Hospital

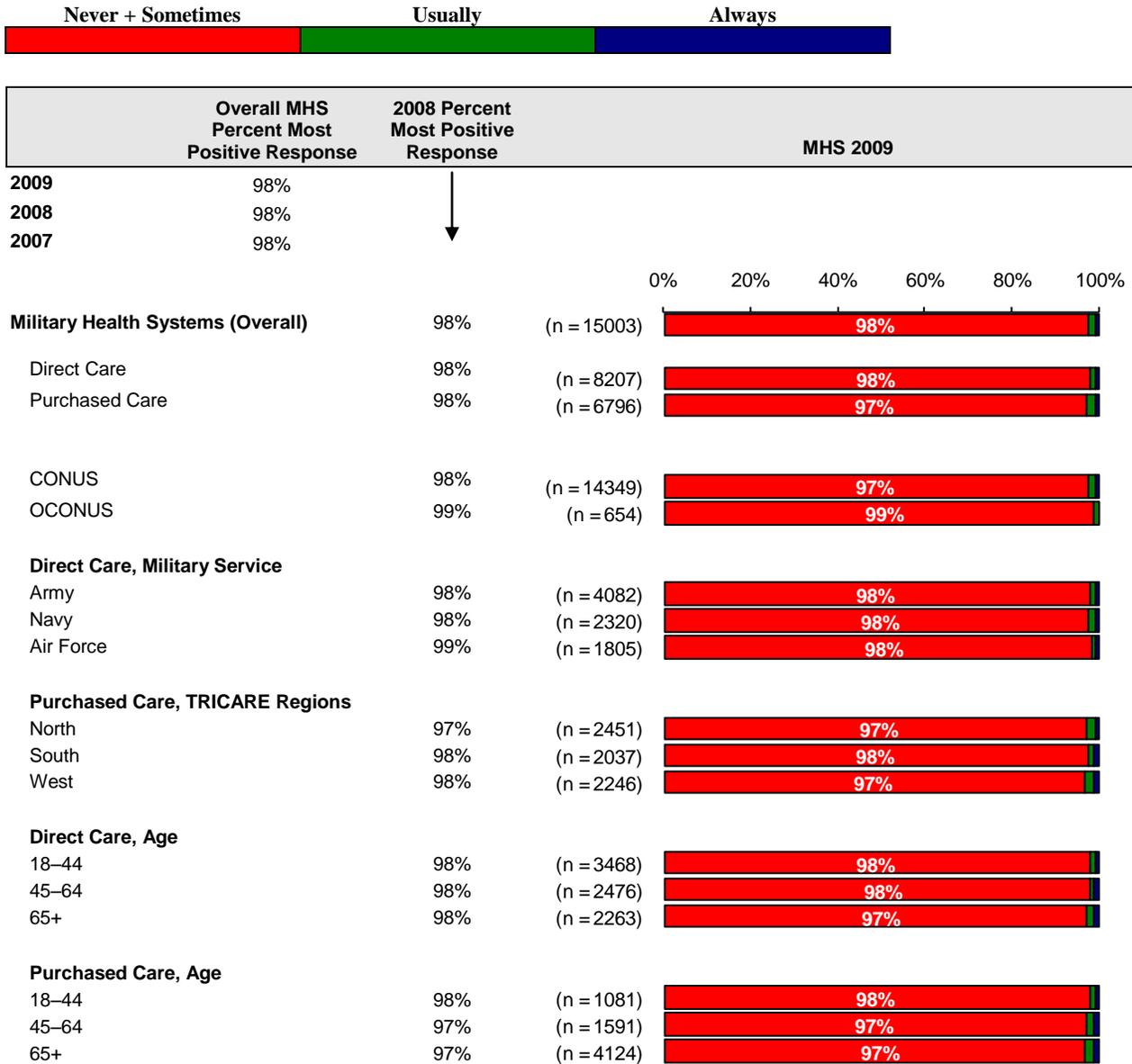
How often did you get the help you needed with bathing and keeping clean? (continued)



3. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to report that they always got the help they needed with bathing and keeping clean ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they always got the help they needed with bathing and keeping clean ($p < .05$).

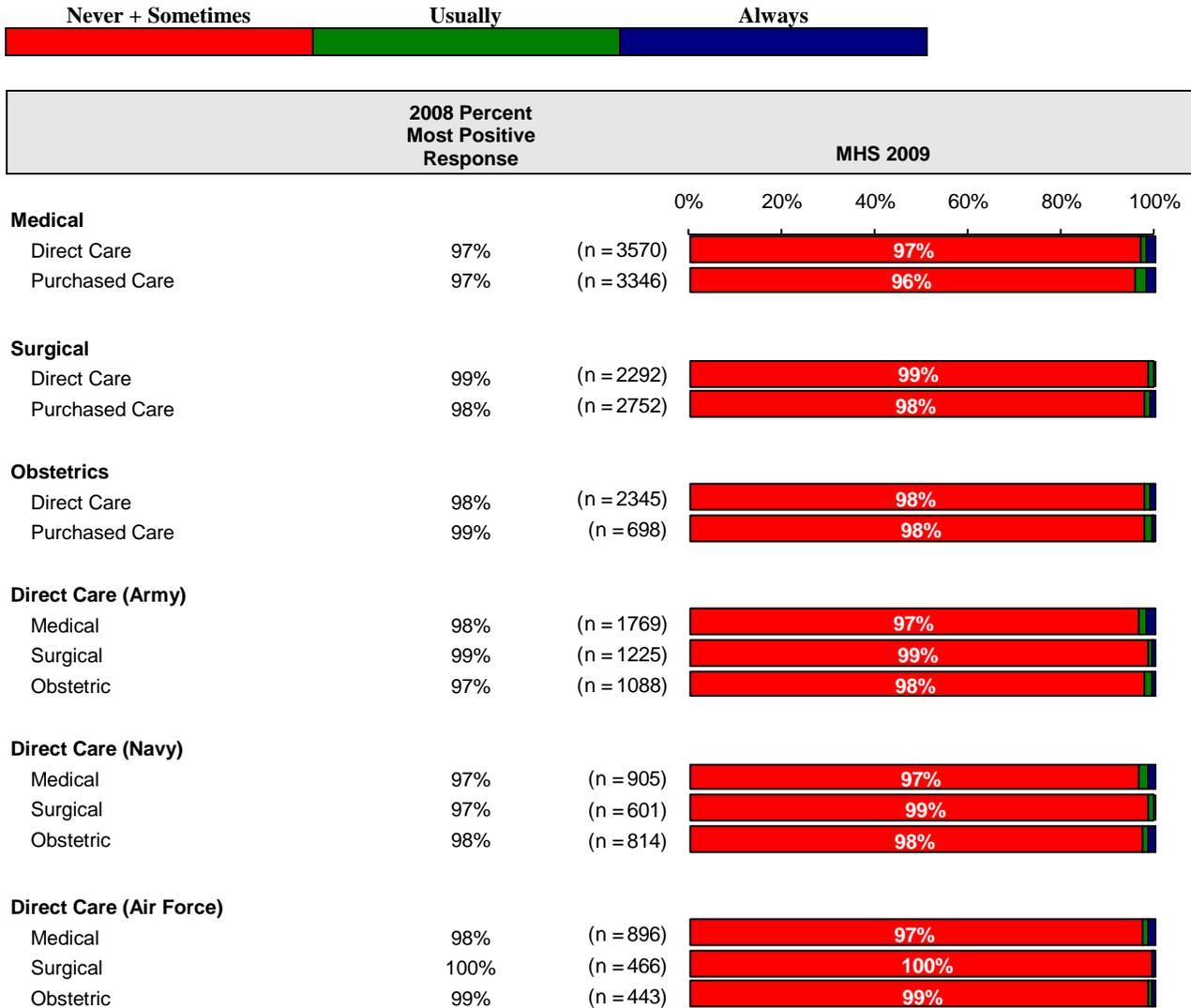
Experiences in this Hospital

During this hospital stay, how often did you have a hard time speaking with or understanding a doctor, nurse, or other hospital staff because you spoke different languages?



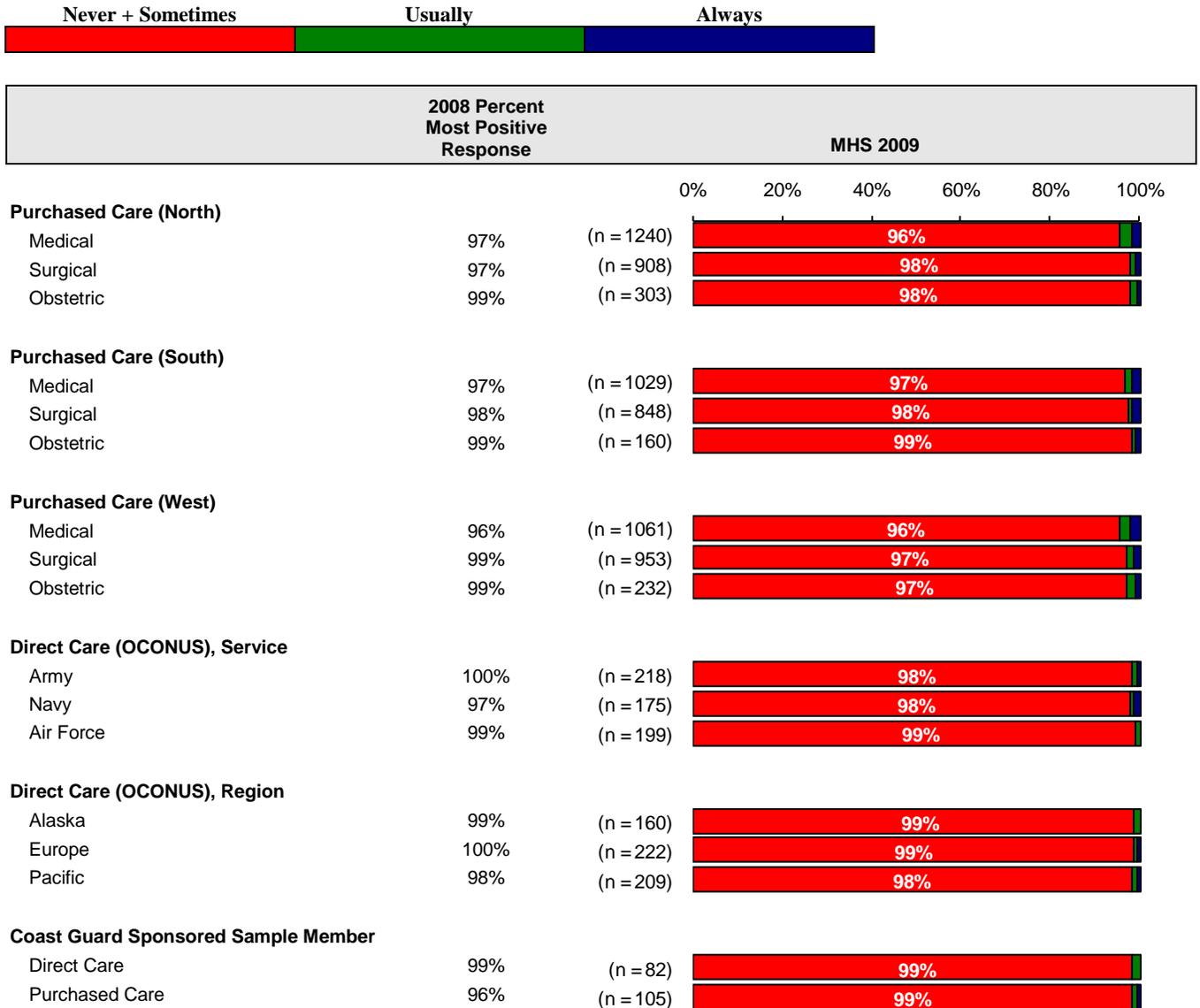
Experiences in this Hospital

During this hospital stay, how often did you have a hard time speaking with or understanding a doctor, nurse, or other hospital staff because you spoke different languages? (continued)



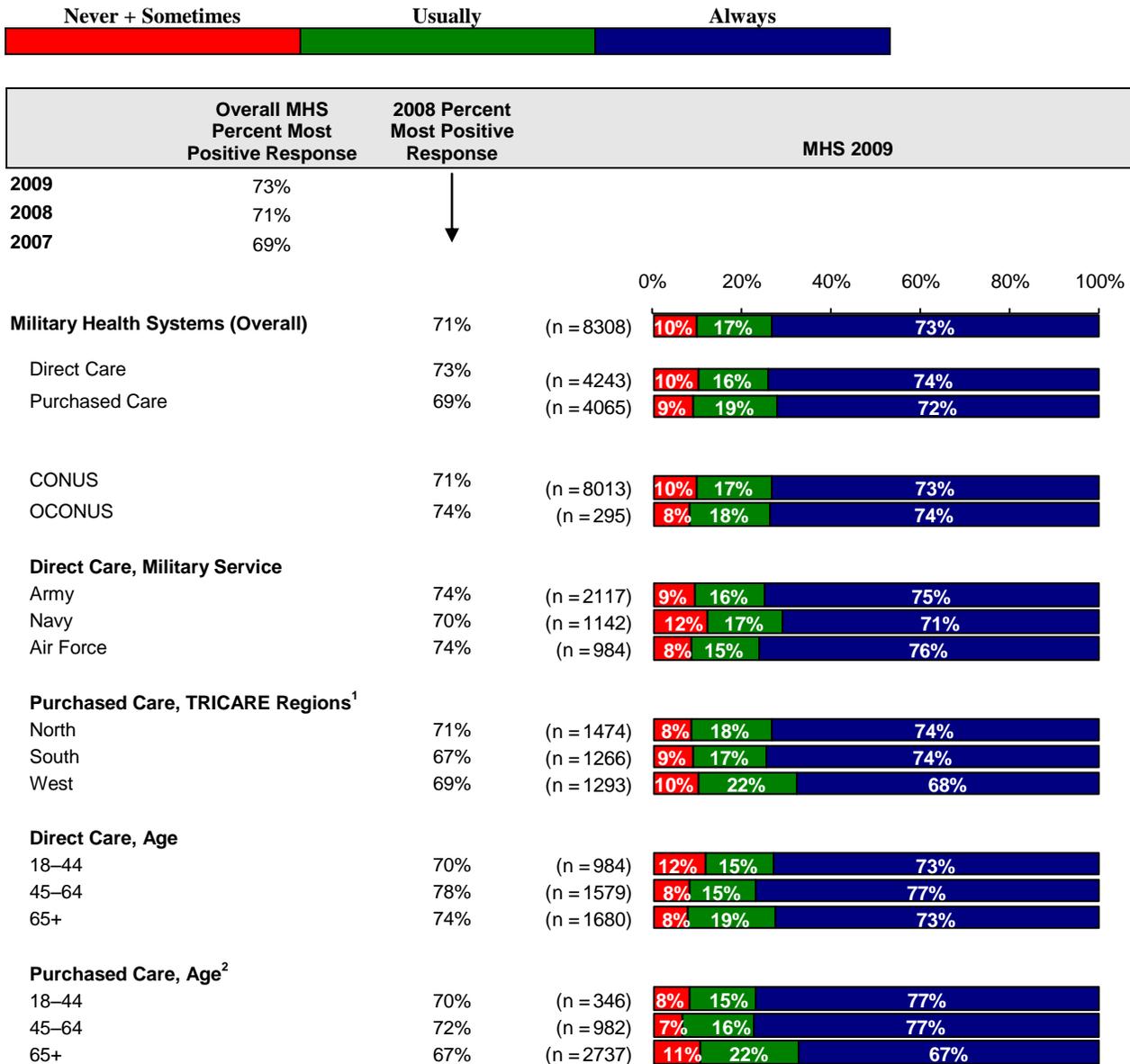
Experiences in this Hospital

During this hospital stay, how often did you have a hard time speaking with or understanding a doctor, nurse, or other hospital staff because you spoke different languages? (continued)



Interactions with Other Hospital Staff

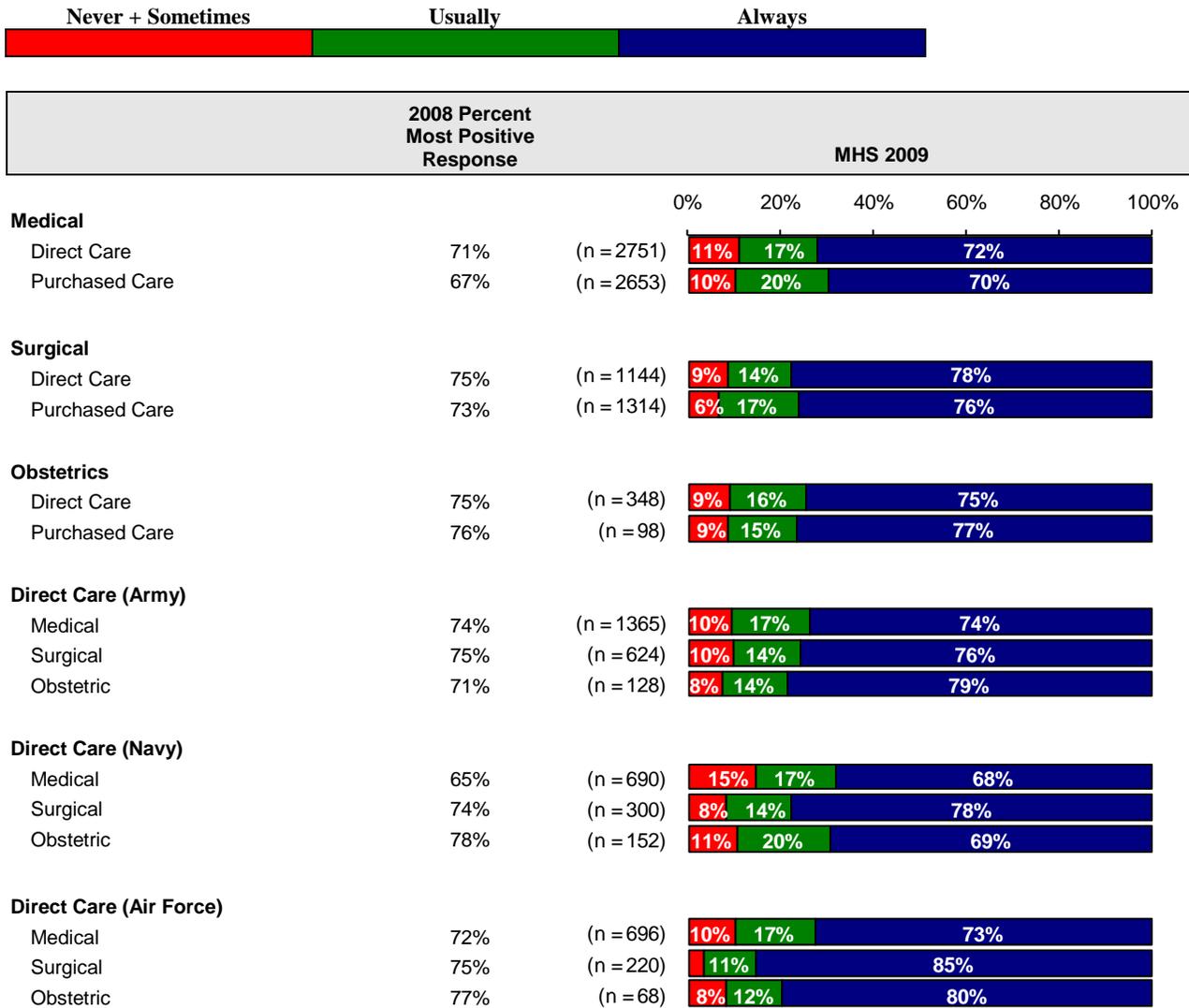
How often did the radiology staff explain your treatment or tests in a way that was easy to understand?



1. Among Purchased Care beneficiaries, those in the West region were significantly less likely than those in the North or South region to report that the radiology staff always explained treatments or tests in a way that was easy to understand ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that the radiology staff always explained treatments or tests in a way that was easy to understand ($p < .05$).

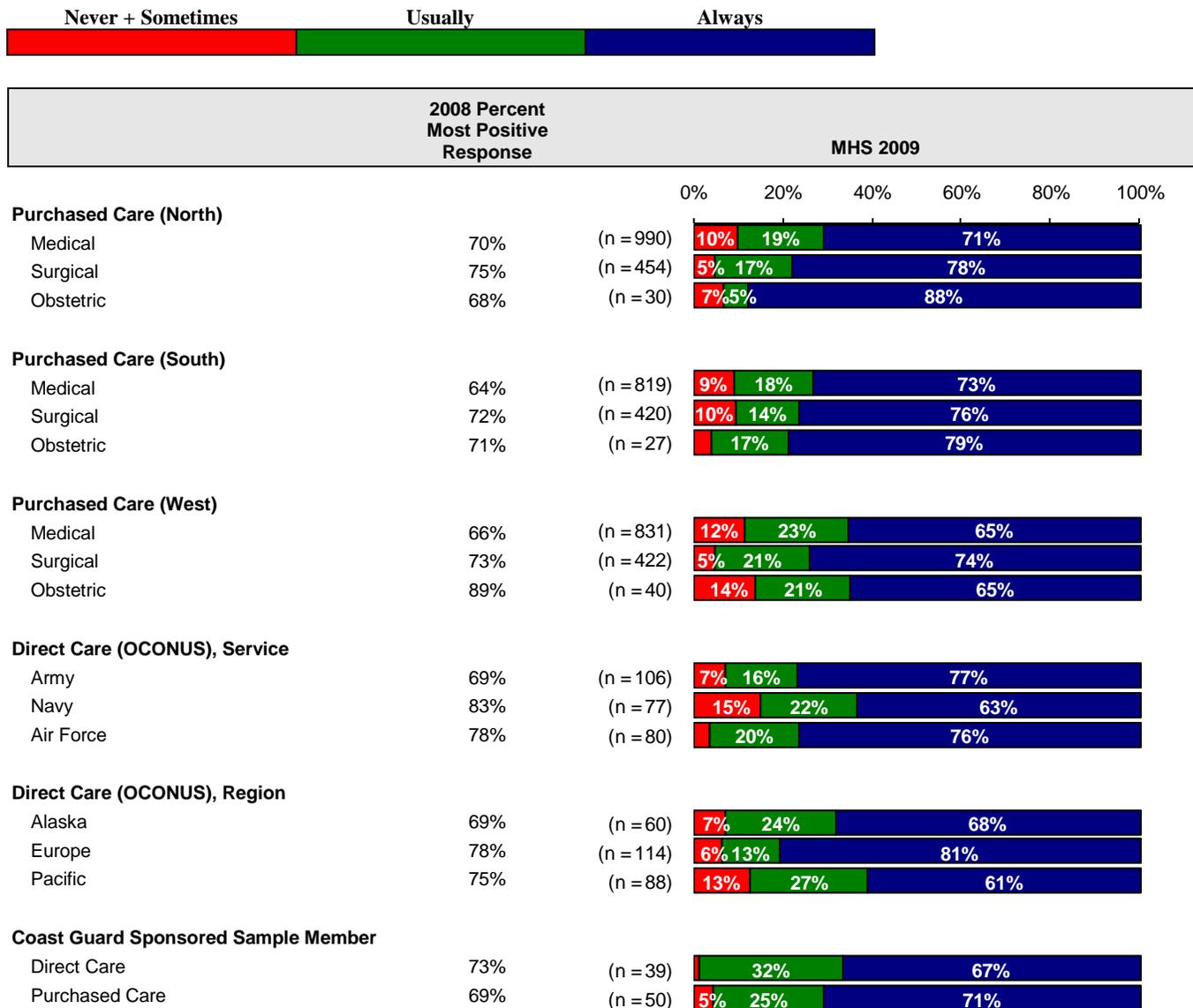
Interactions with Other Hospital Staff

How often did the radiology staff explain your treatment or tests in a way that was easy to understand? (continued)



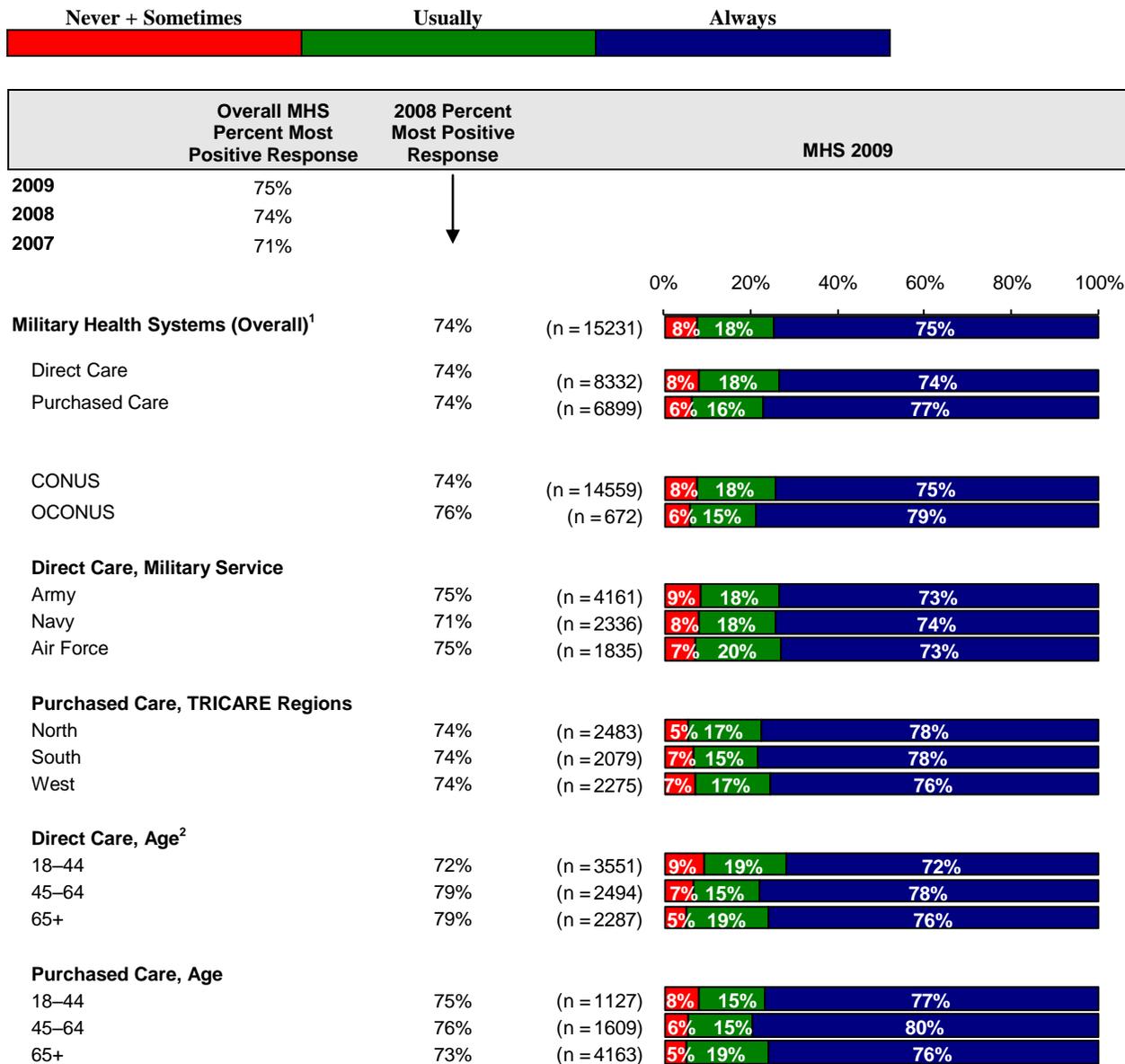
Interactions with Other Hospital Staff

How often did the radiology staff explain your treatment or tests in a way that was easy to understand? (continued)



Interactions with Other Hospital Staff

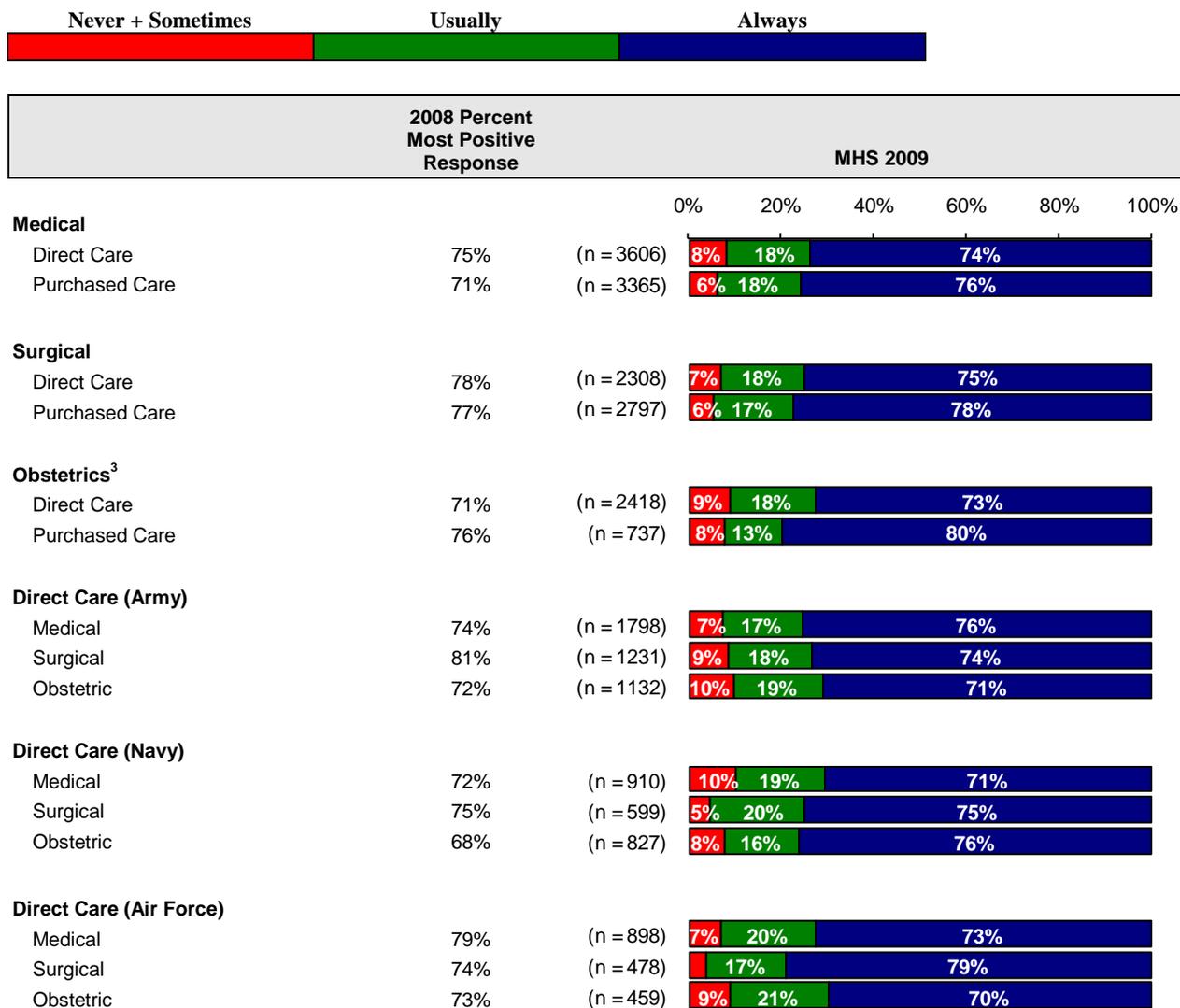
During this hospital stay, how often was the staff delivering your food courteous and helpful?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that the staff delivering their food was always courteous and helpful ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the staff delivering their food was always courteous and helpful ($p < .05$).

Interactions with Other Hospital Staff

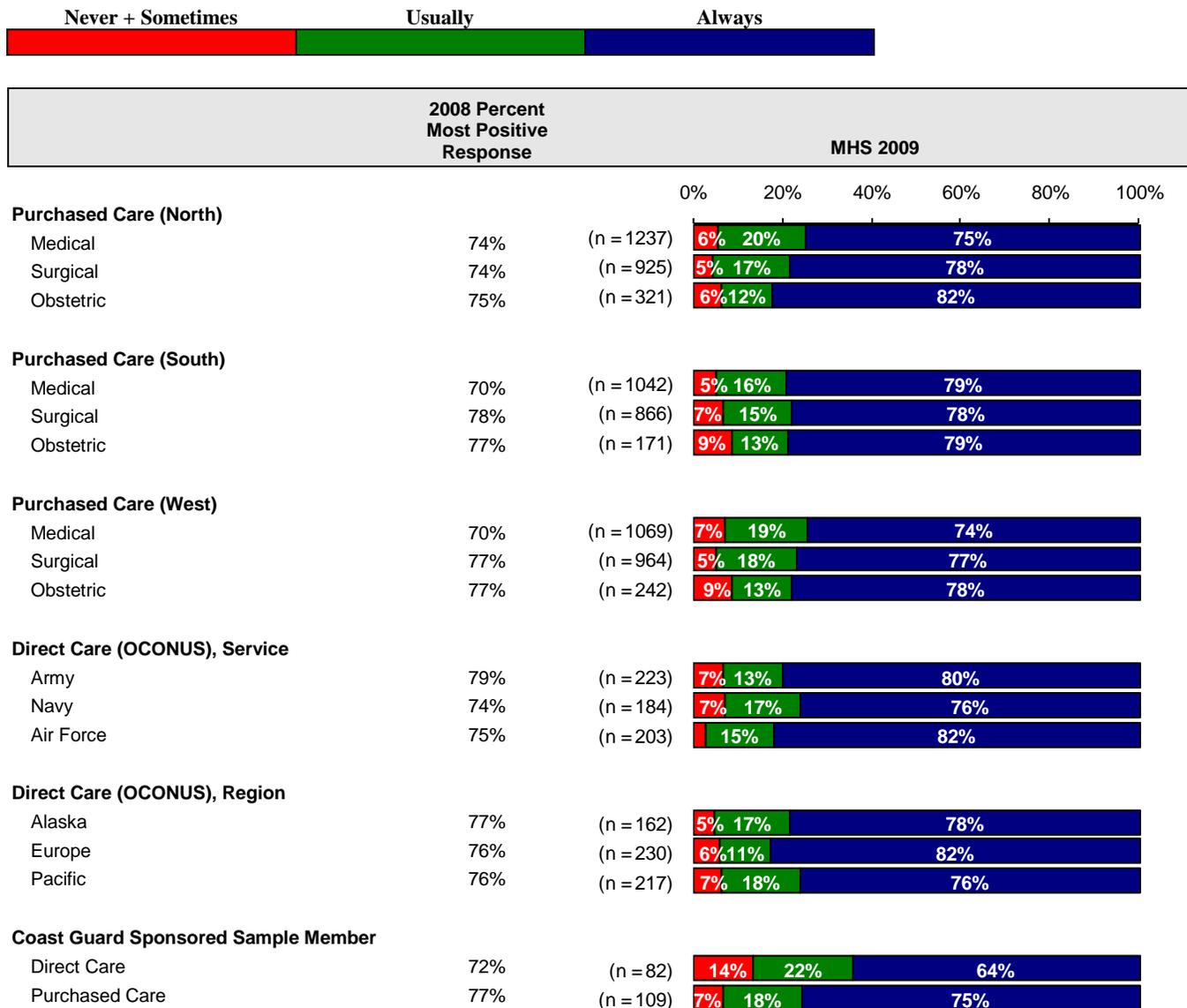
During this hospital stay, how often was the staff delivering your food courteous and helpful? (continued)



3. Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that the staff delivering their food was always courteous and helpful ($p < .05$).

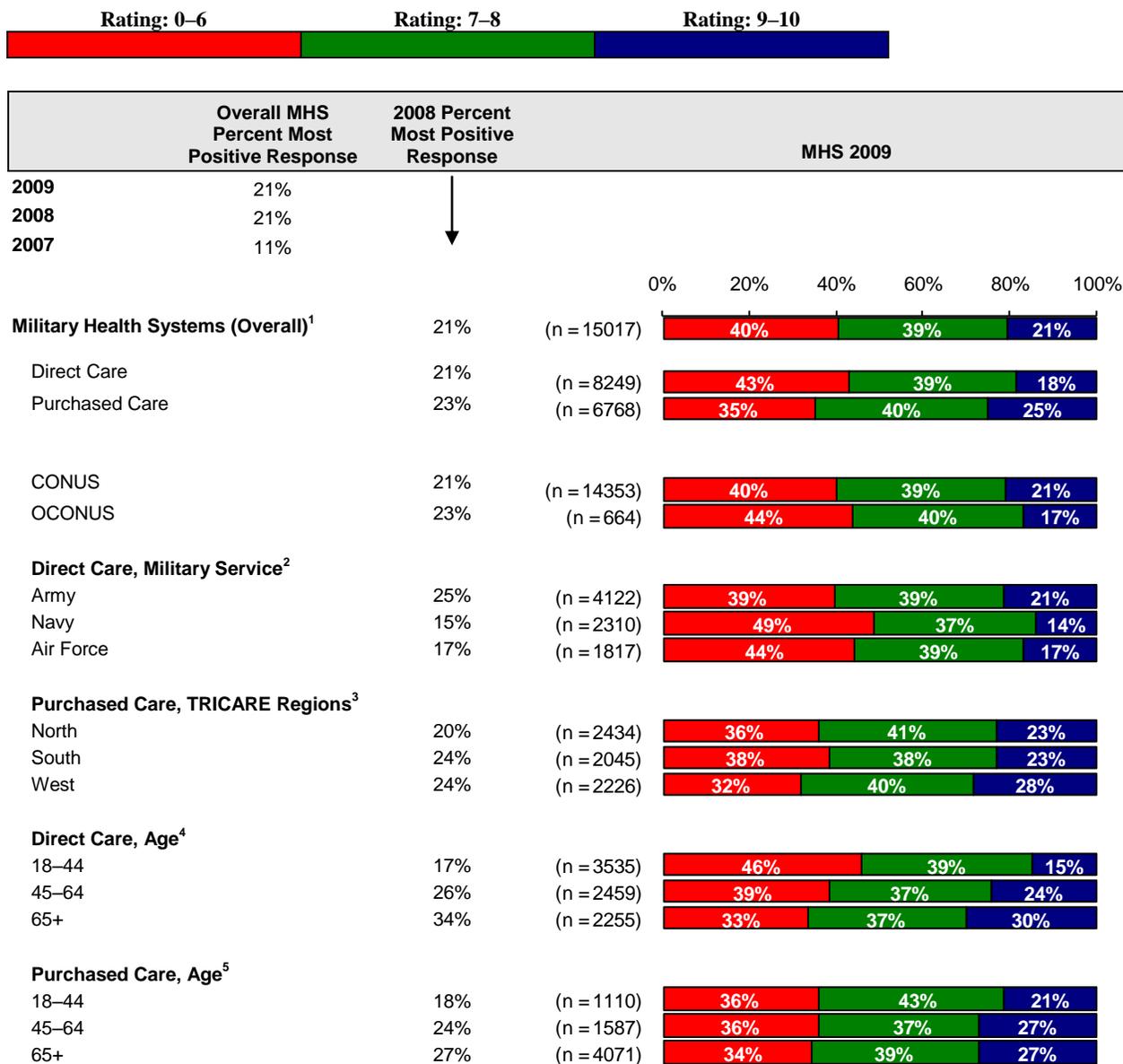
Interactions with Other Hospital Staff

During this hospital stay, how often was the staff delivering your food courteous and helpful? (continued)



Interactions with Other Hospital Staff

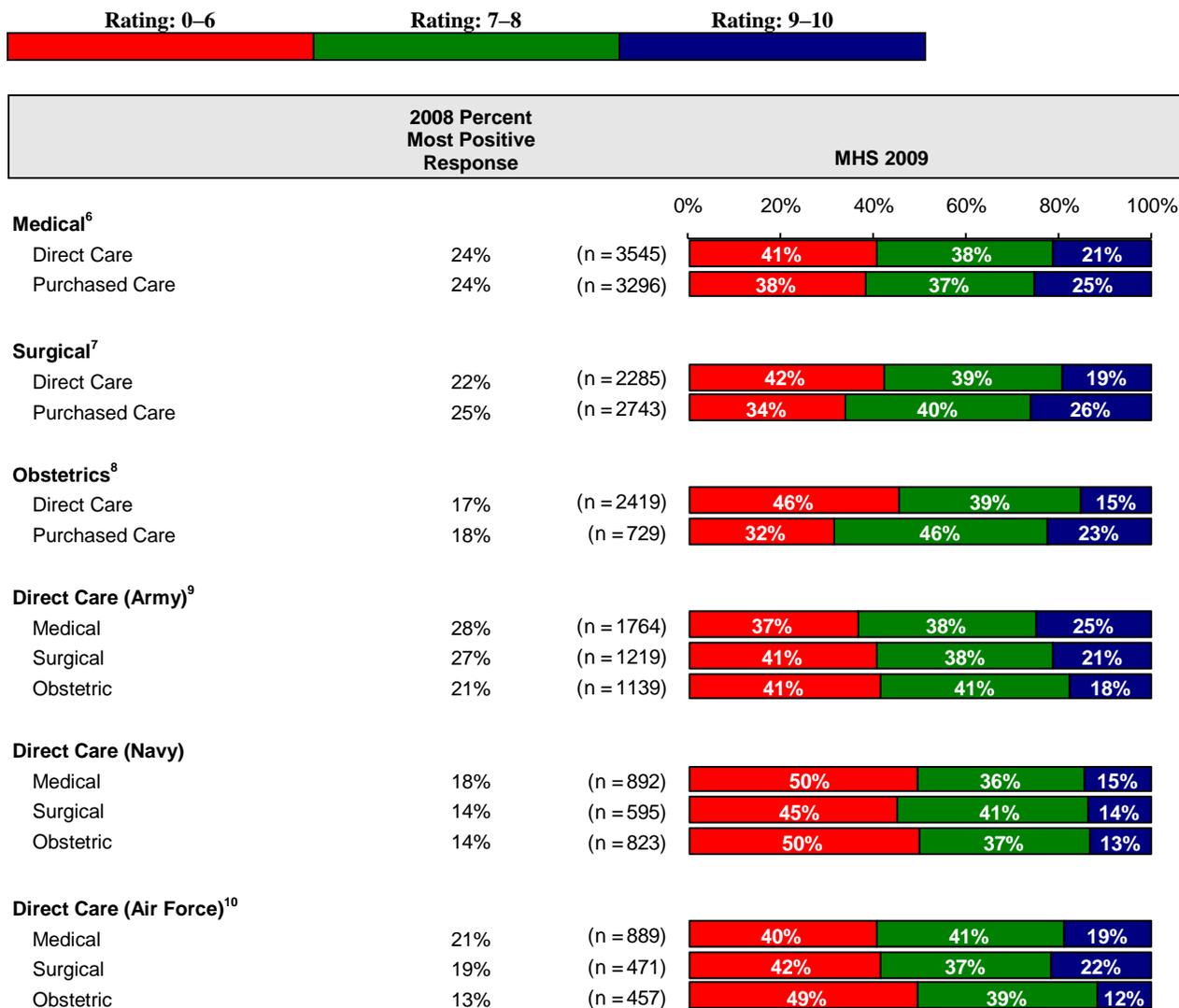
On a scale of 0 to 10 where 0 is the worst tasting food and 10 is the best tasting food, how would you rate the food you received during this hospital stay?



- Overall, those in Direct Care were significantly less likely than those in Purchased Care to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among Direct Care beneficiaries, those in Army MTFs were significantly more likely than those in Navy or Air Force MTFs to rate the hospital food a 9 or 10 during their stay ($p < .05$). Furthermore, those in Navy MTFs were significantly less likely than those in Army or Air Force MTFs to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among Purchased Care beneficiaries, those in the West region were significantly more likely than those in North or South region to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to rate the hospital food a 9 or 10 during their stay ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to rate the hospital food a 9 or 10 during their stay ($p < .05$).

Interactions with Other Hospital Staff

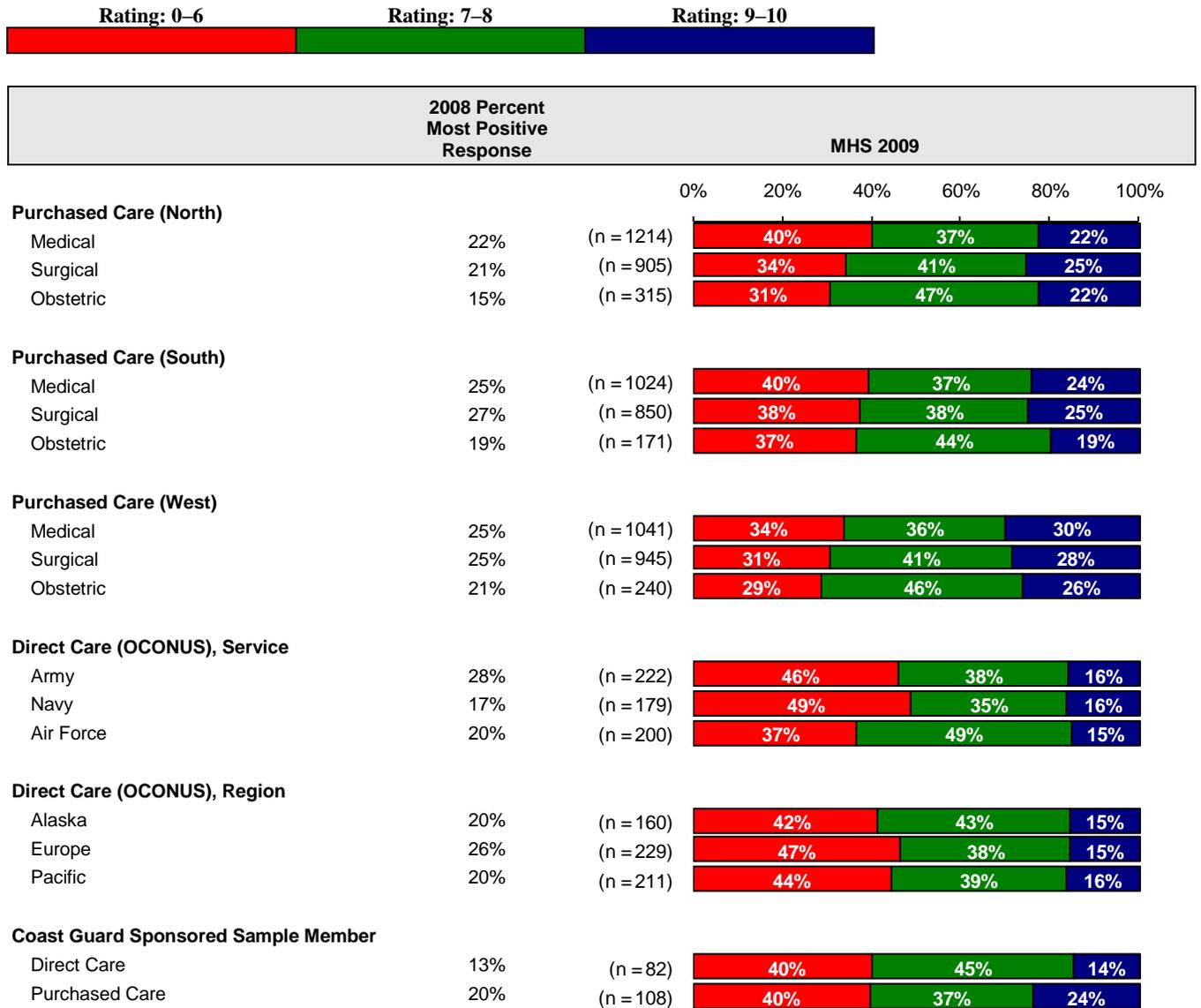
On a scale of 0 to 10 where 0 is the worst tasting food and 10 is the best tasting food, how would you rate the food you received during this hospital stay? (continued)



- Among beneficiaries receiving Medical services, those in Purchased Care were significantly more likely than those in Direct Care to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Medical services were significantly more likely than those receiving Obstetrics services to rate the hospital food a 9 or 10 during their stay ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to rate the hospital food a 9 or 10 during their stay ($p < .05$).

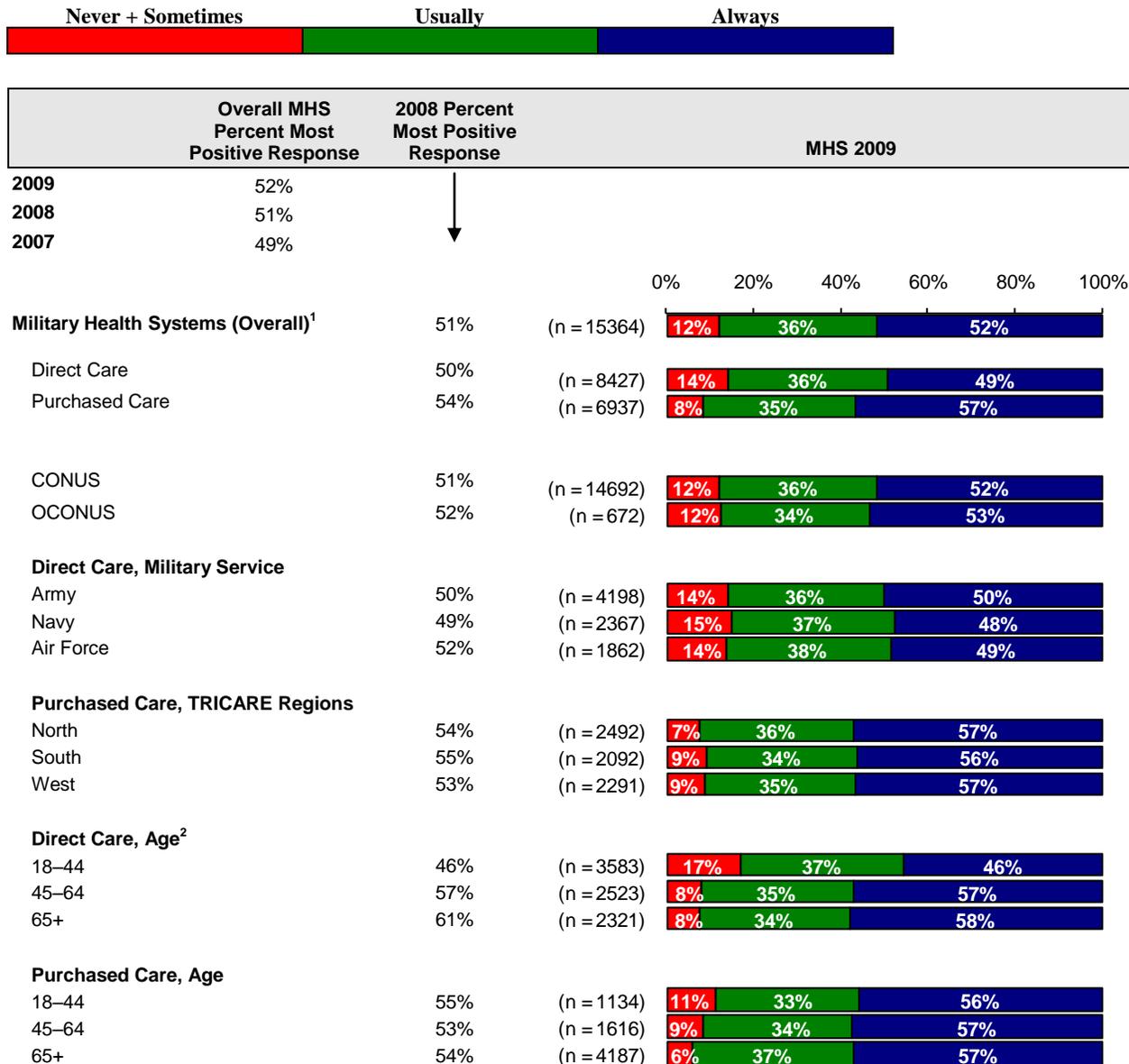
Interactions with Other Hospital Staff

On a scale of 0 to 10 where 0 is the worst tasting food and 10 is the best tasting food, how would you rate the food you received during this hospital stay? (continued)



The Hospital Environment

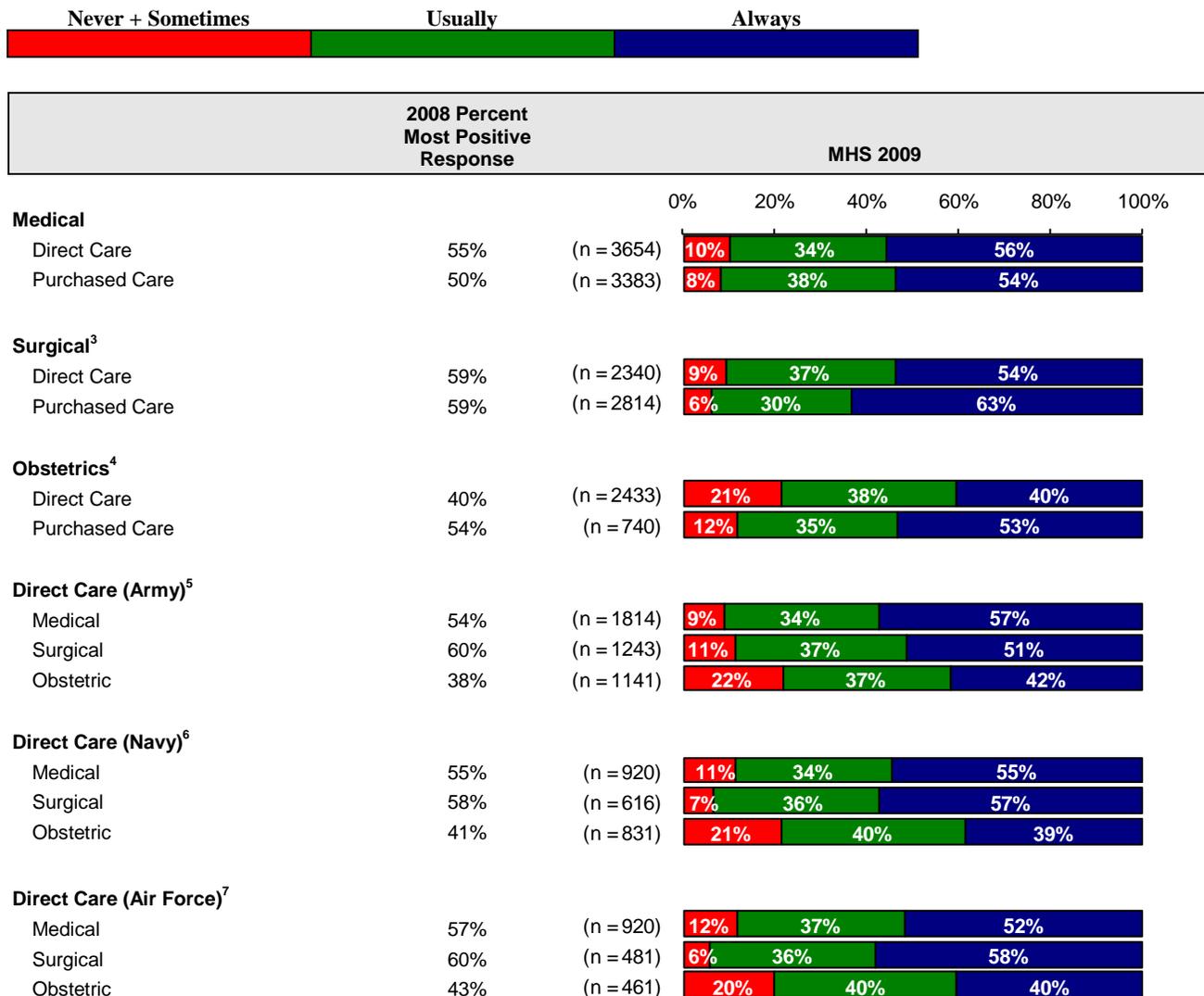
How often was the temperature in your room comfortable?



- Overall, those in Direct Care were significantly less likely than those in Purchased Care to report that the temperature in their room was always comfortable ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the temperature in their room was always comfortable ($p < .05$).

The Hospital Environment

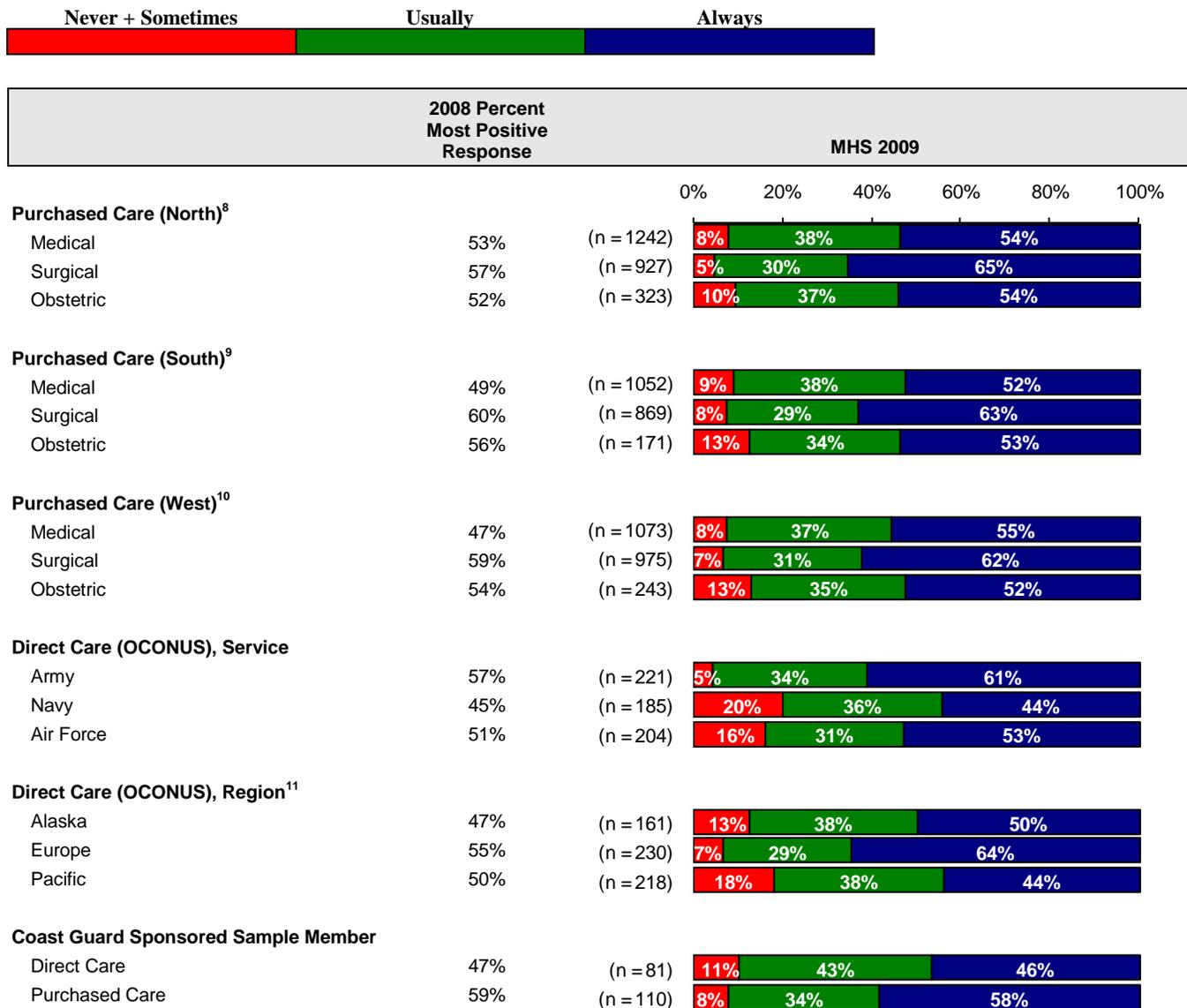
How often was the temperature in your room comfortable? (continued)



- Among those receiving Surgical services, Direct Care beneficiaries were significantly less likely than those in Purchased Care to report that the temperature in their room was always comfortable ($p < .05$).
- Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than those in Purchased Care to report that the temperature in their room was always comfortable ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$). Furthermore, those receiving Medical services were significantly more likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$).

The Hospital Environment

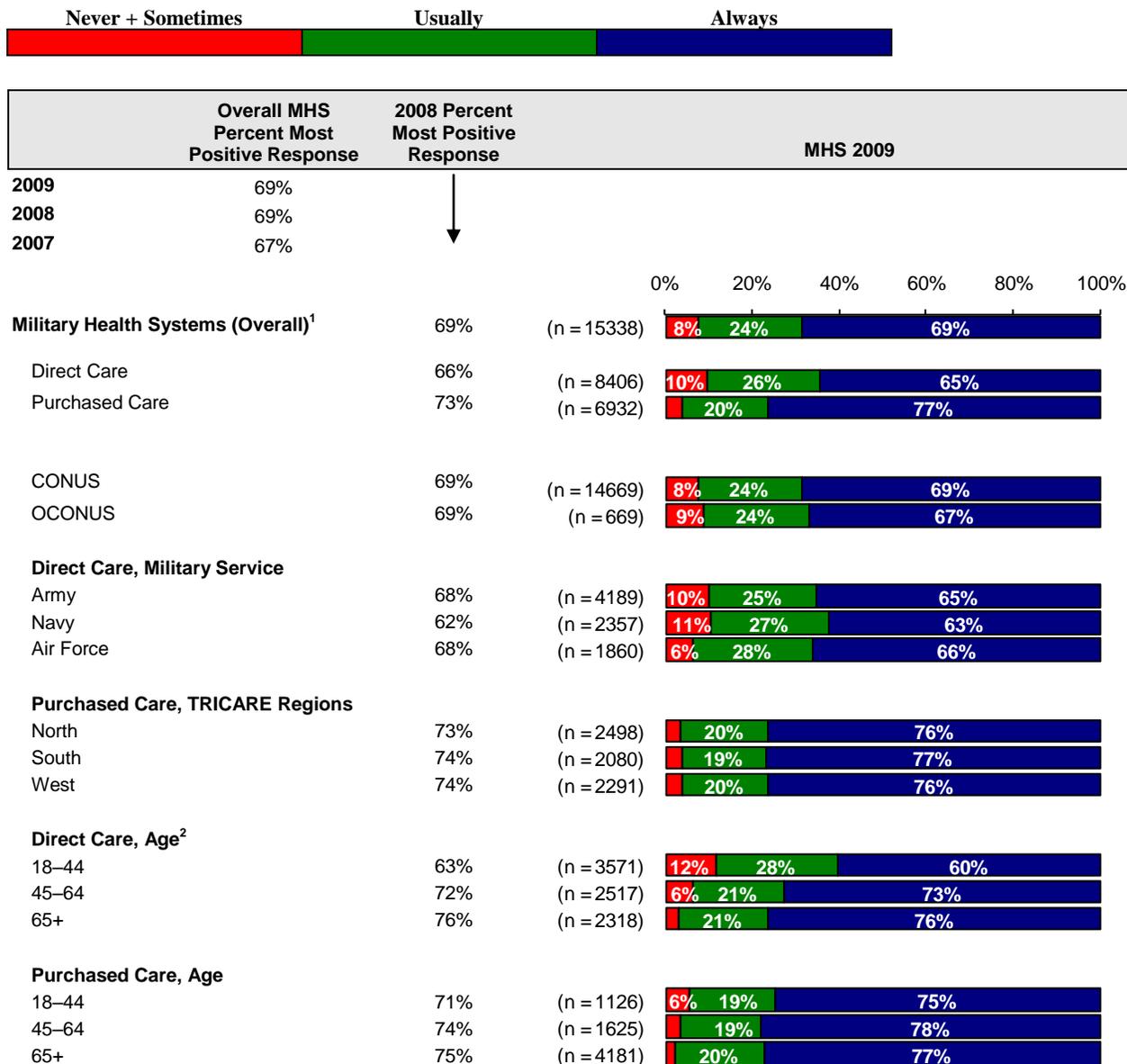
How often was the temperature in your room comfortable? (continued)



8. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$).
9. Among Purchased Care beneficiaries in the South those receiving Surgical services were significantly more likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$).
10. Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to report that the temperature in their room was always comfortable ($p < .05$).
11. Among Direct Care OCONUS beneficiaries, those receiving care in European MTFs were significantly more likely than those receiving care in Pacific or Alaskan MTFs to report that the temperature in their room was always comfortable ($p < .05$).

The Hospital Environment

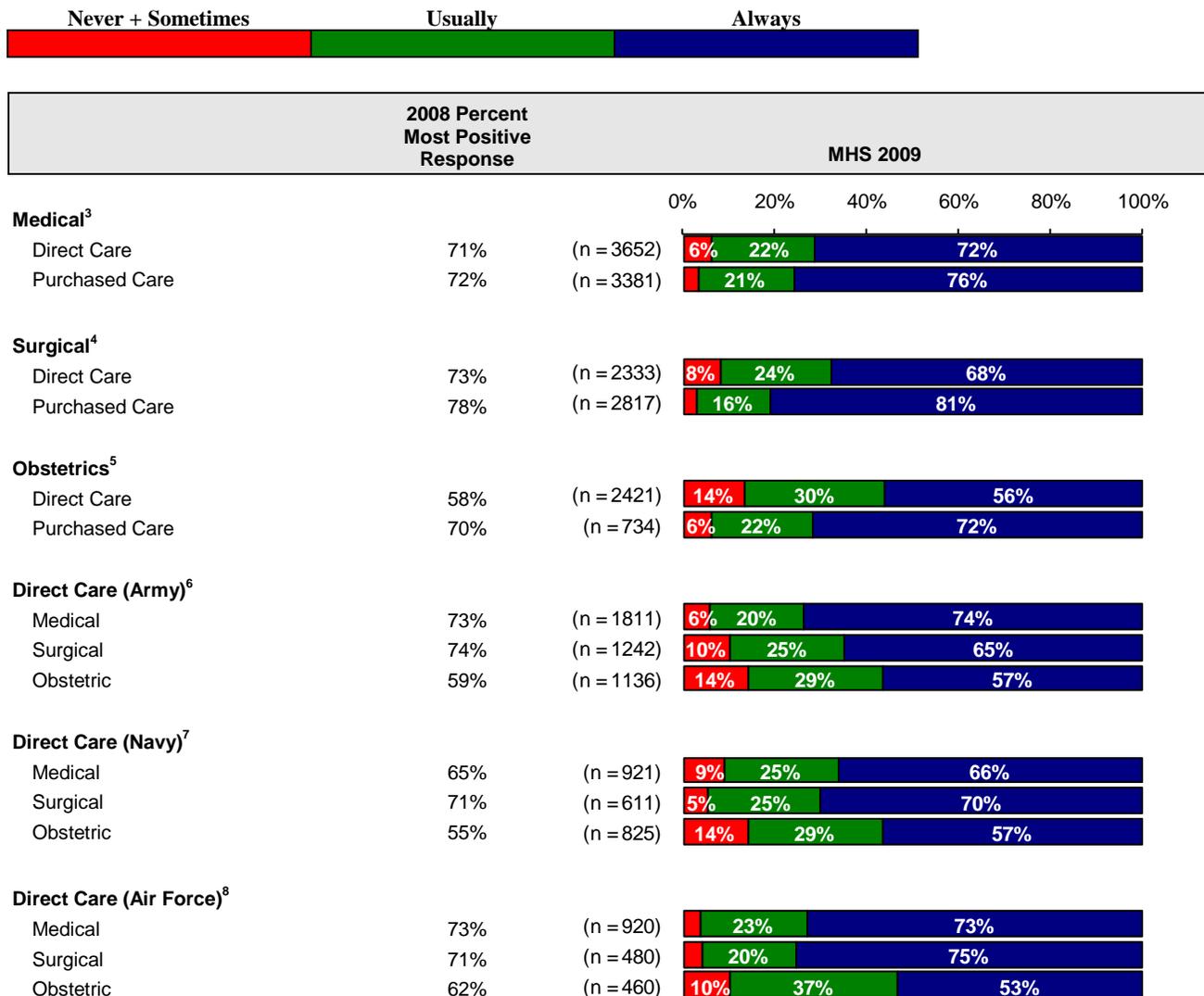
How often did the equipment in your room work properly?



- Overall, those in Direct Care were significantly less likely than those in Purchased Care to report that the equipment in their room always worked properly ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the equipment in their room always worked properly ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that the equipment in their room always worked properly ($p < .05$).

The Hospital Environment

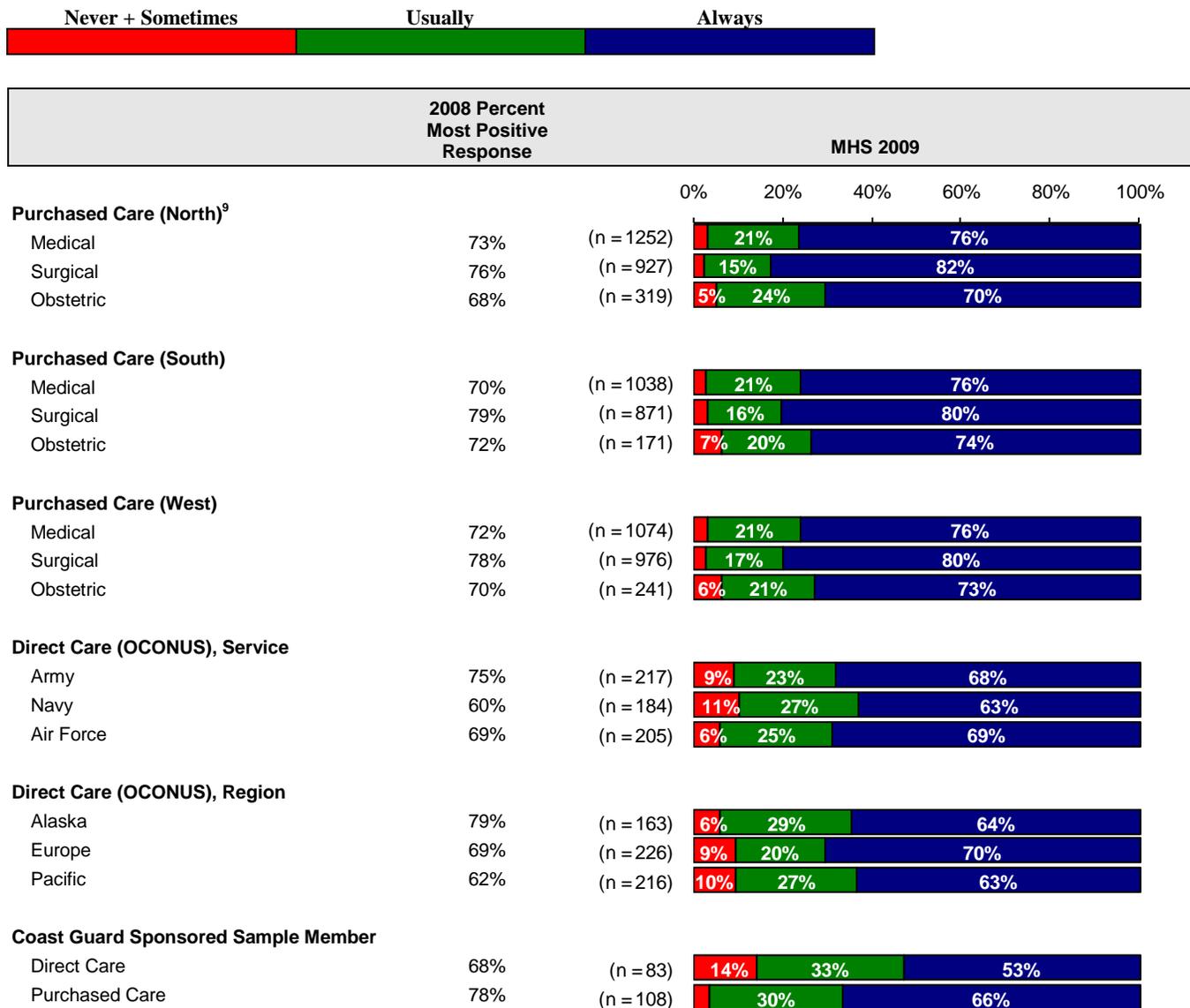
How often did the equipment in your room work properly? (continued)



- Among those receiving Medical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that the equipment in their room always worked properly ($p < .05$).
- Among those receiving Surgical services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that the equipment in their room always worked properly ($p < .05$).
- Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that the equipment in their room always worked properly ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the equipment in their room always worked properly ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that the equipment in their room always worked properly ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the equipment in their room always worked properly ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the equipment in their room always worked properly ($p < .05$).

The Hospital Environment

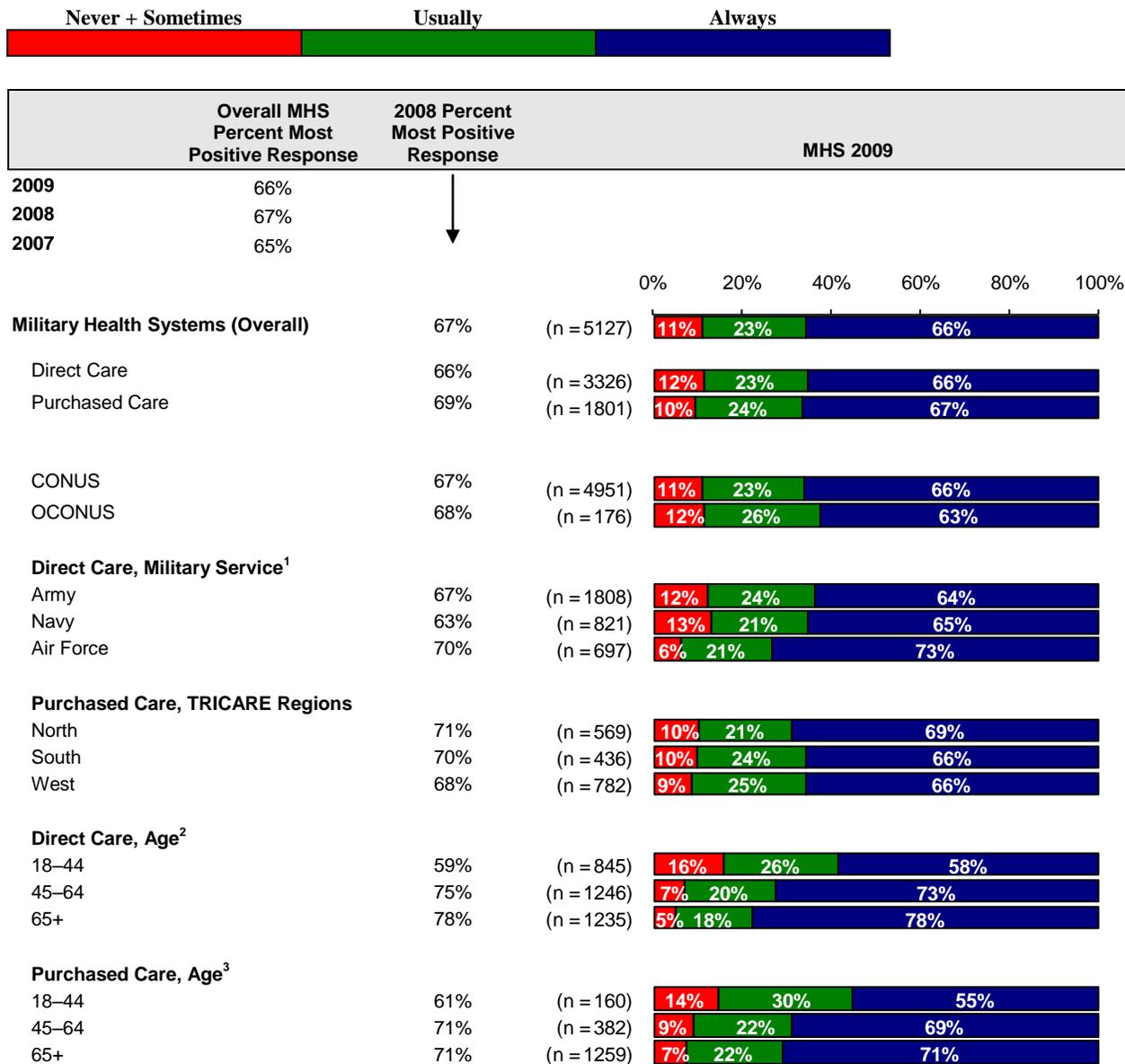
How often did the equipment in your room work properly? (continued)



9. Among Purchased Care beneficiaries in the North, those receiving Obstetrics services were significantly less likely than those receiving other services to report that the equipment in their room always worked properly ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that the equipment in their room always worked properly ($p < .05$).

The Hospital Environment

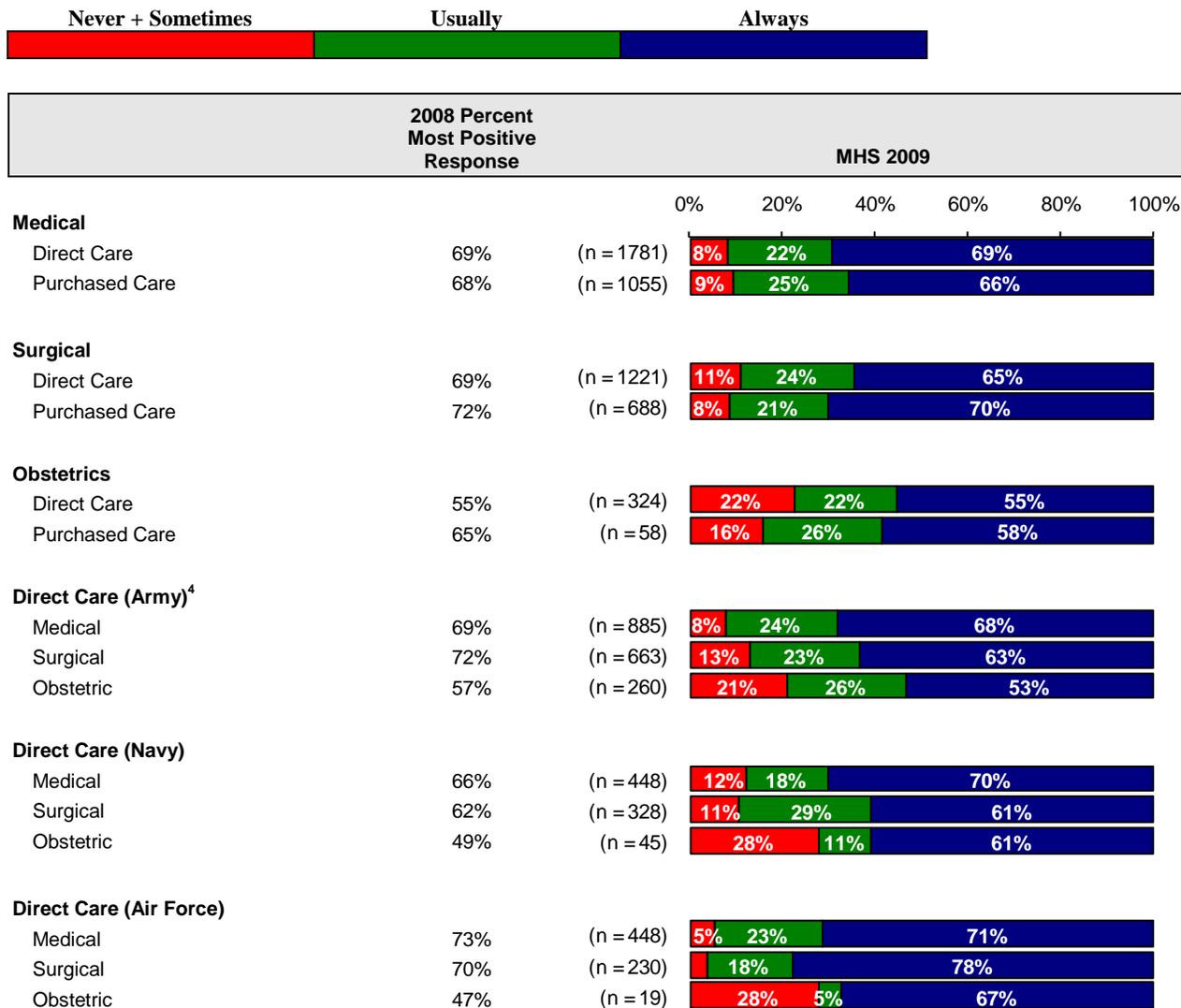
How often did doctors, nurses and other hospital staff make sure that you had privacy when they took care of you or talked to you?



1. Among Direct Care beneficiaries, those in Air Force MTFs were significantly more likely than those in Army or Navy MTFs to report that staff always made sure they had their privacy when they took care of them ($p < .05$).
2. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that staff always made sure they had their privacy when they took care of them ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that staff always made sure they had their privacy when they took care of them ($p < .05$).
3. Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that staff always made sure they had their privacy when they took care of them ($p < .05$).

The Hospital Environment

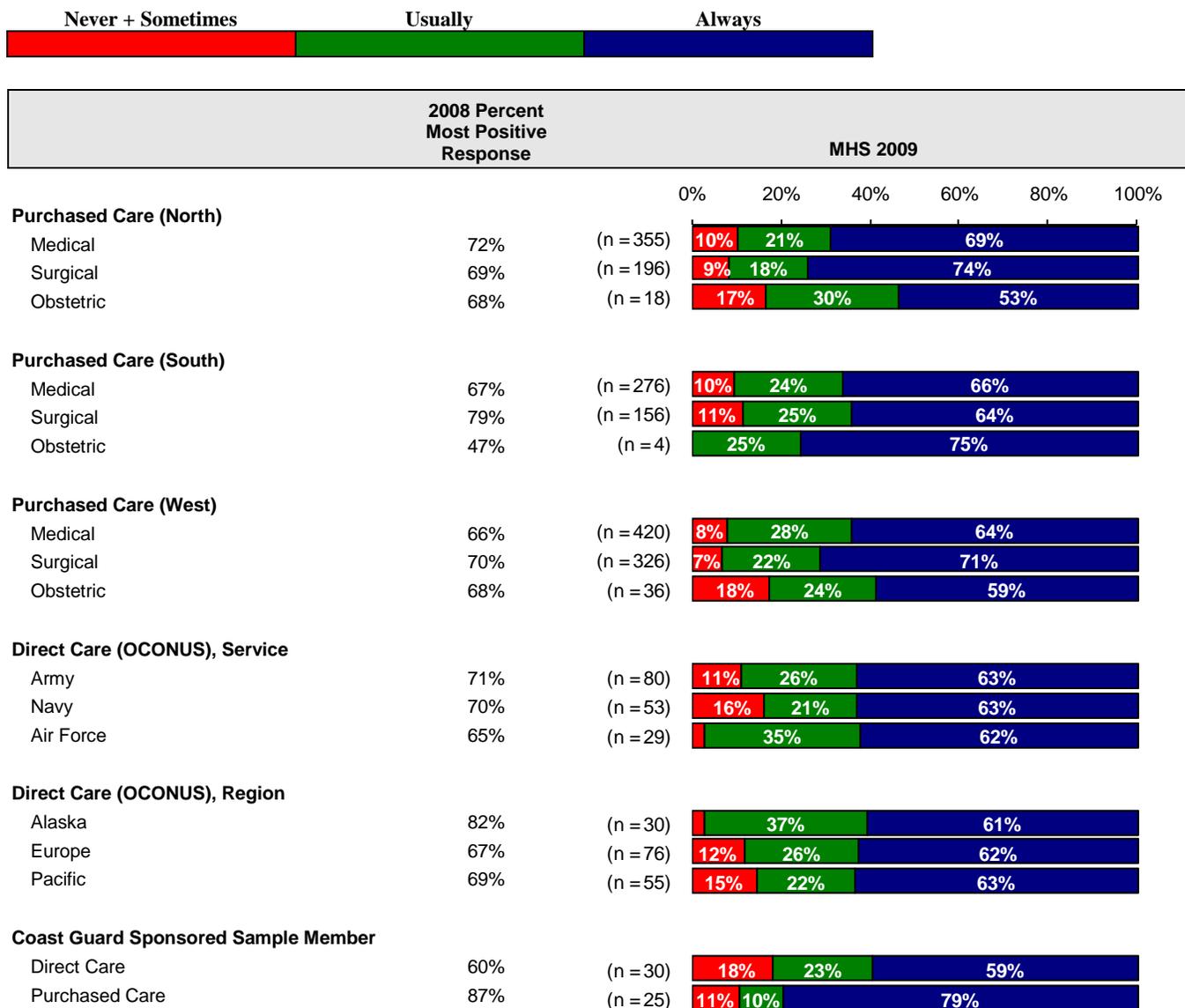
How often did doctors, nurses and other hospital staff make sure that you had privacy when they took care of you or talked to you? (continued)



4. Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that staff always made sure they had their privacy when they took care of them ($p < .05$).

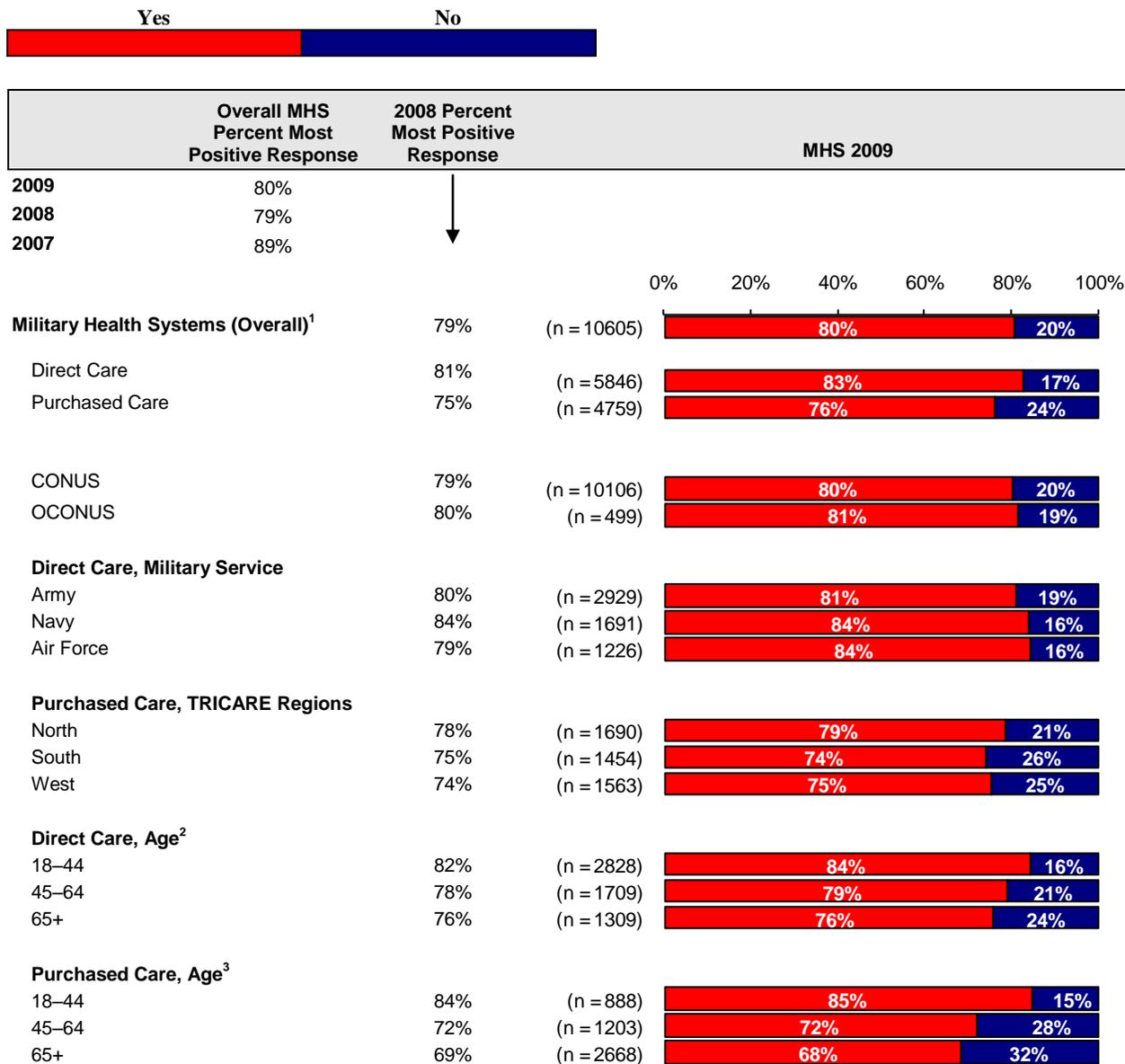
The Hospital Environment

How often did doctors, nurses and other hospital staff make sure that you had privacy when they took care of you or talked to you? (continued)



When you Left the Hospital

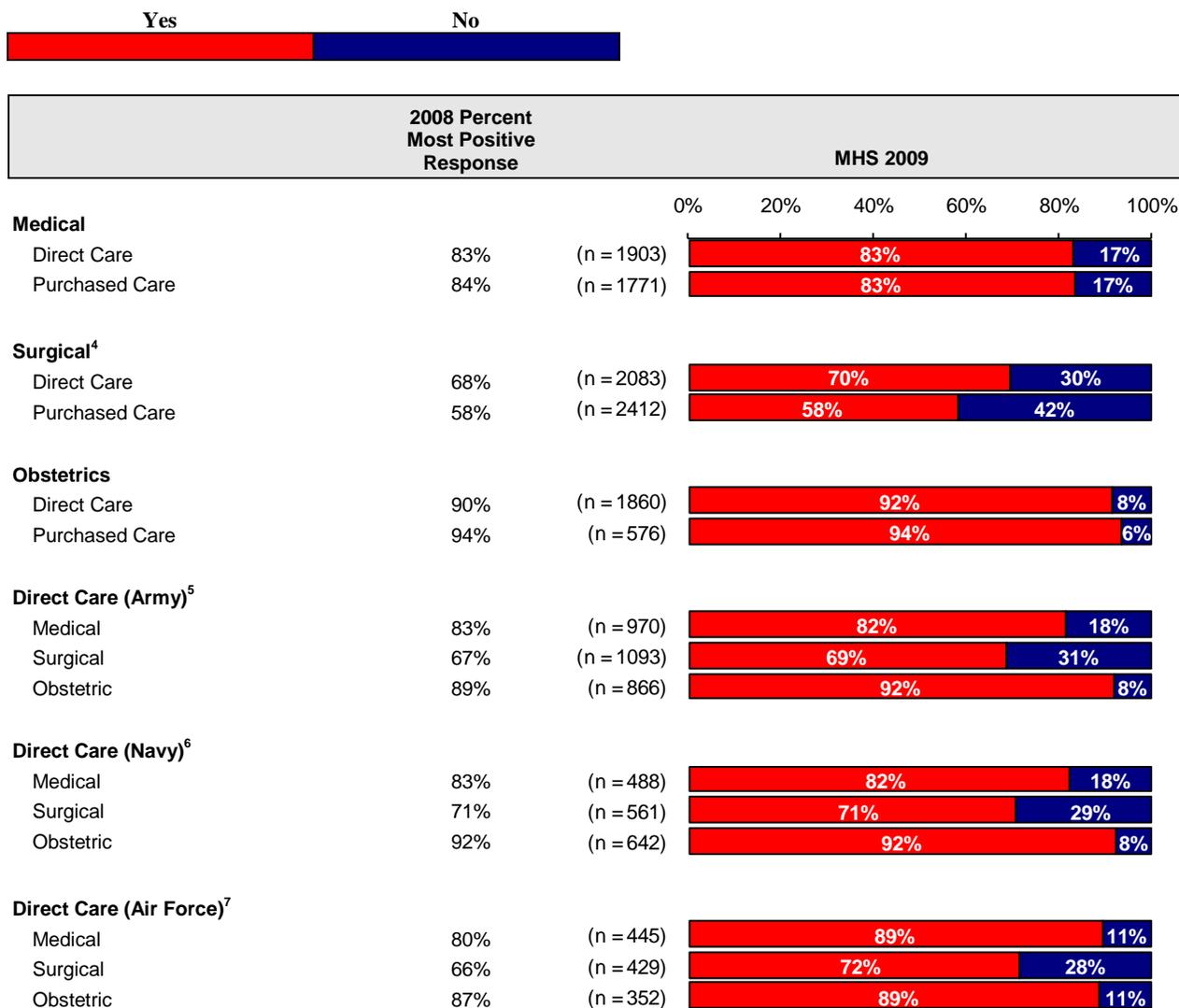
Before you left the hospital, did you receive information in writing about what activities you could and could not do?



- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that they received information in writing about what activities they could and could not do ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those aged 65+ were significantly less likely than those in other age groups to report that they received information in writing about what activities they could and could not do ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those aged 65+ were significantly less likely than those in other age groups to report that they received information in writing about what activities they could and could not do ($p < .05$).

When you Left the Hospital

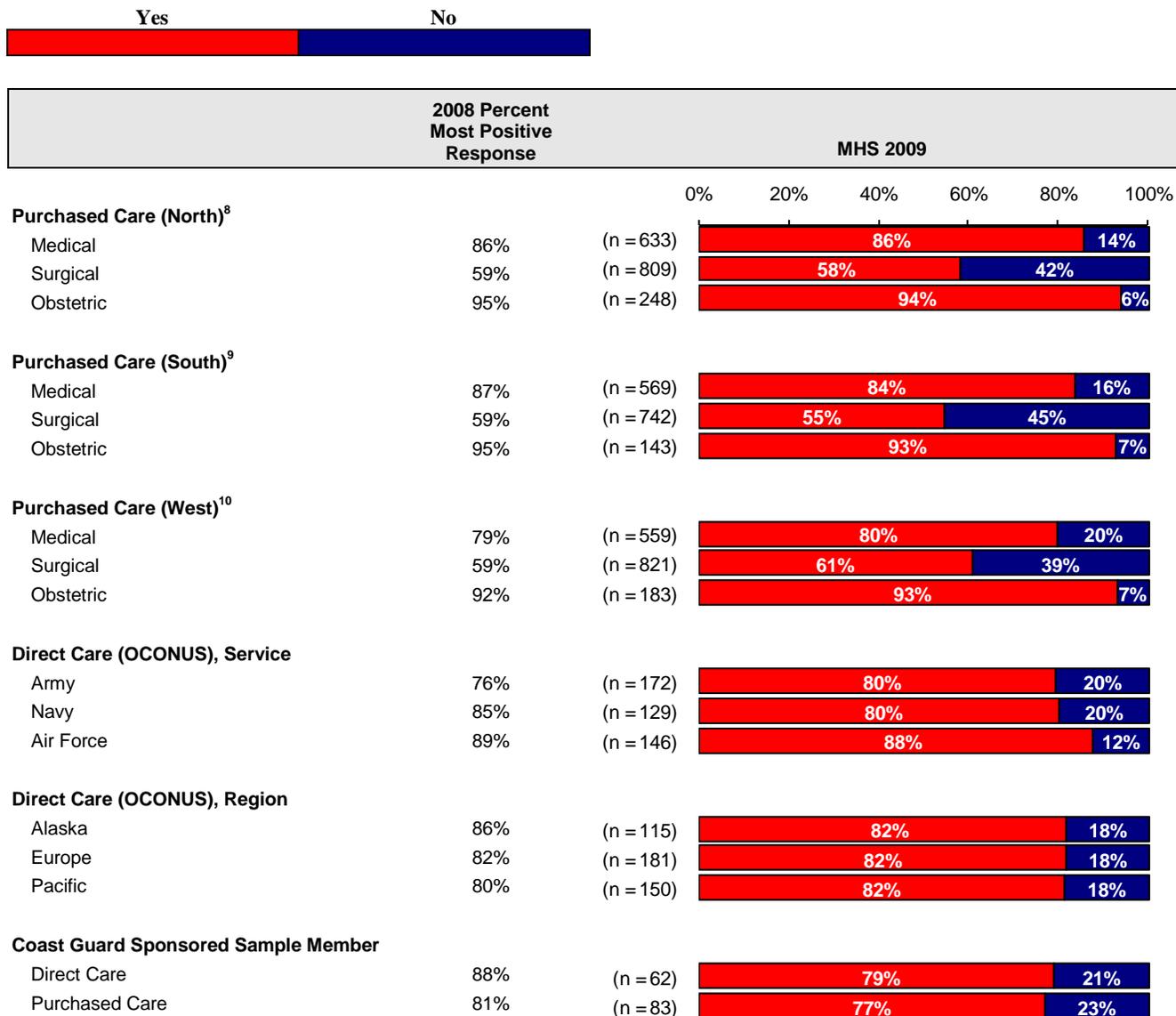
Before you left the hospital, did you receive information in writing about what activities you could and could not do? (continued)



- Among those receiving Surgical services, Purchased Care beneficiaries were significantly less likely than Direct Care beneficiaries to report that they received information in writing about what activities they could and could not do ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly less likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Surgical services were significantly less likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly less likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$).

When you Left the Hospital

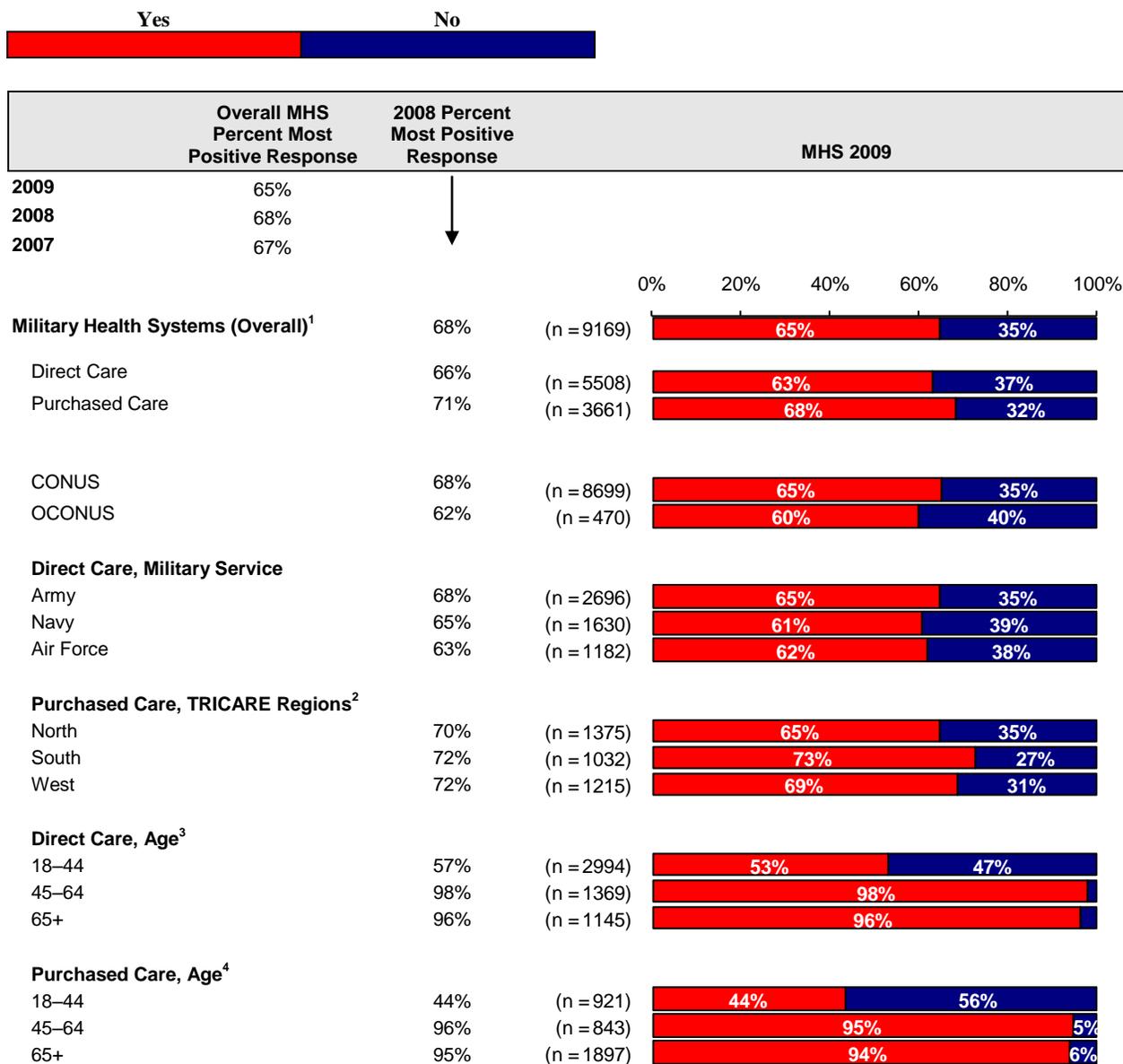
Before you left the hospital, did you receive information in writing about what activities you could and could not do? (continued)



8. Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly less likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$).
9. Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly less likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$).
10. Among Purchased Care beneficiaries in the West region, those receiving Surgical services were significantly less likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$). Furthermore, those receiving Obstetrics services were significantly more likely than those receiving other services to report that they received information in writing about what activities they could and could not do ($p < .05$).

When you Left the Hospital

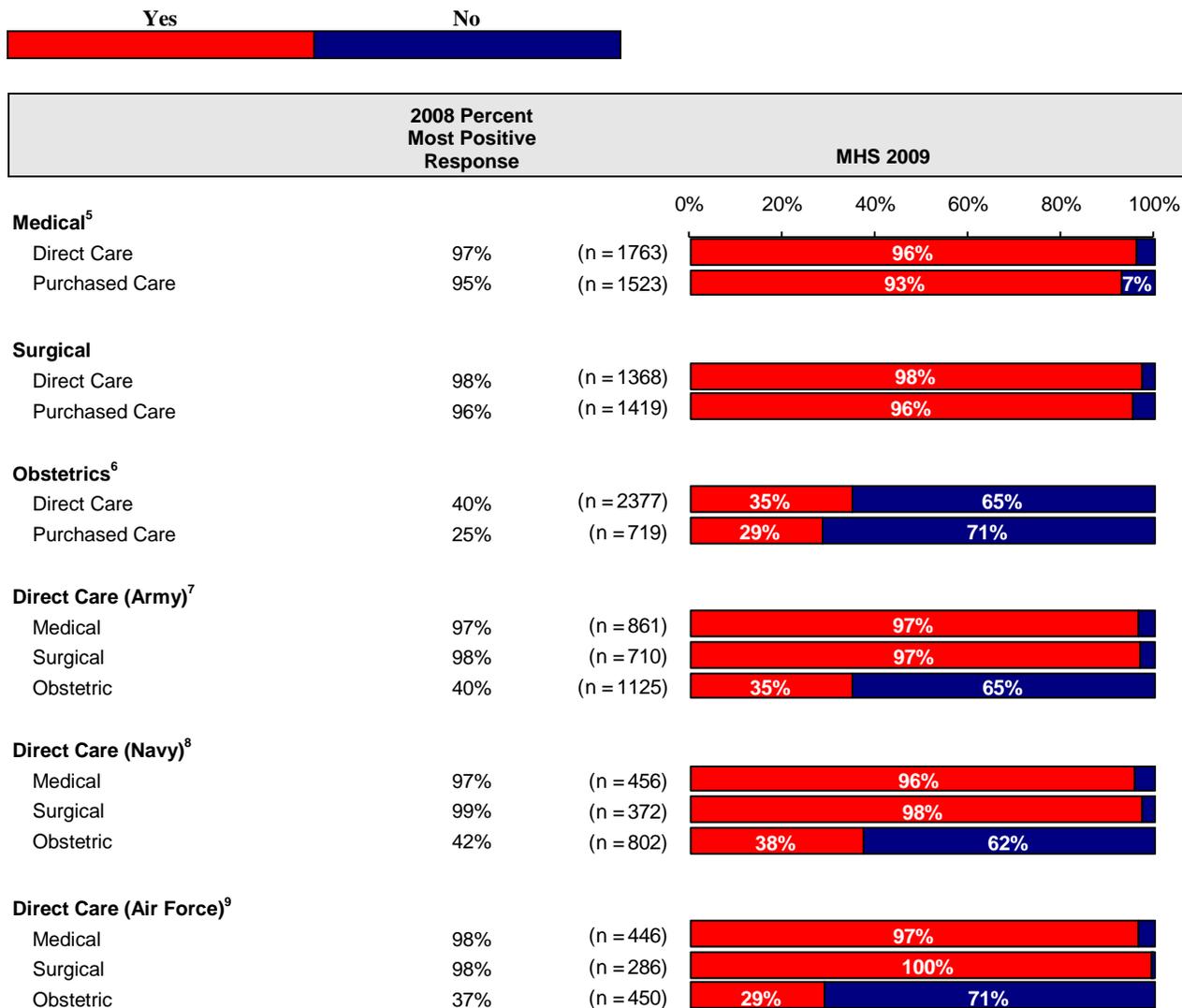
Before you left the hospital, did you receive information in writing about how to take this medicine at home?



- Overall, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among Purchased Care beneficiaries, those in the North region were significantly less likely than those in the South region to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups region to report that they received information in writing about how to take their medicine at home ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups region to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups region to report that they received information in writing about how to take their medicine at home ($p < .05$).

When you Left the Hospital

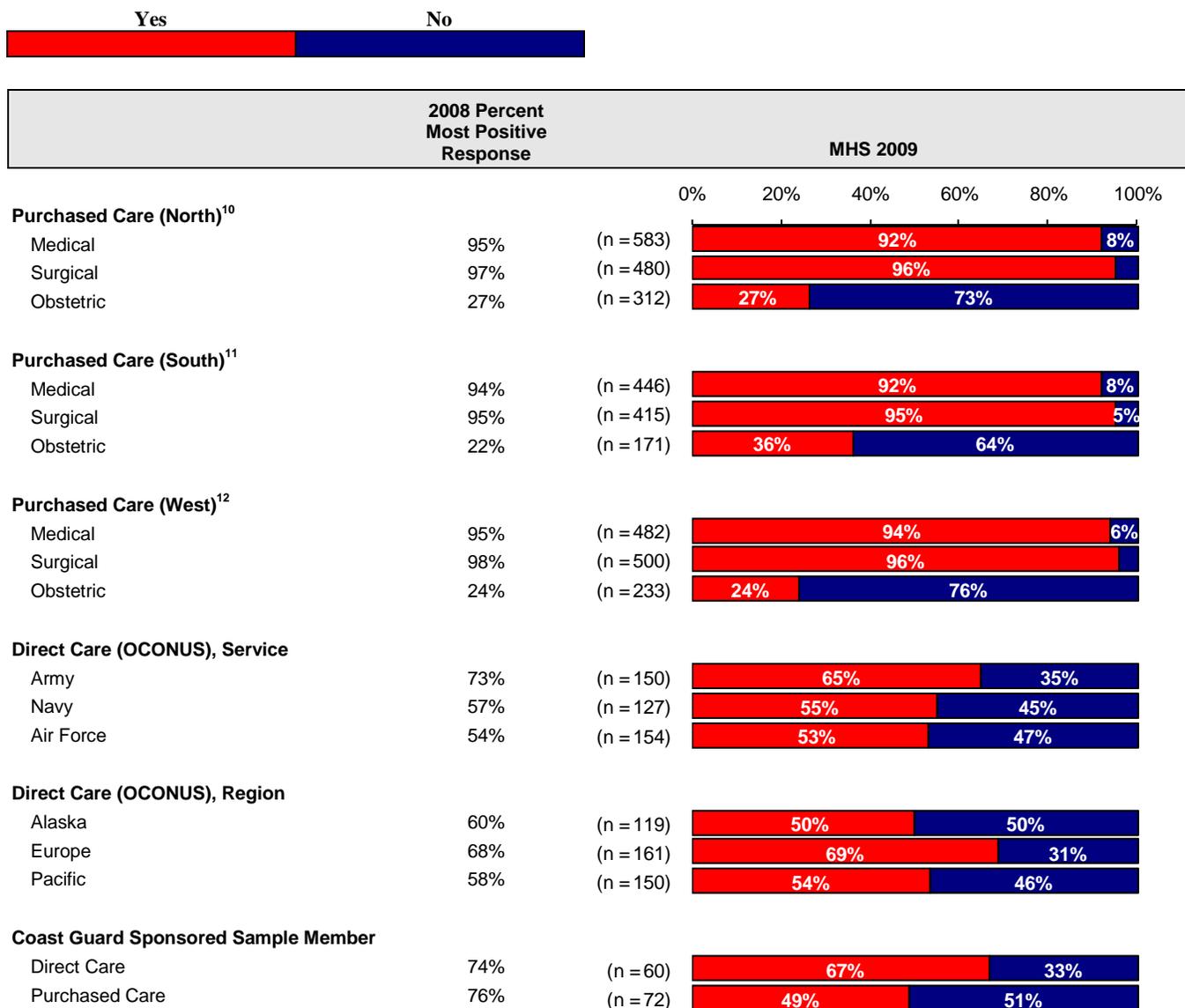
Before you left the hospital, did you receive information in writing about how to take this medicine at home?(continued)



- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly more likely than those in Purchased Care to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$).

When you Left the Hospital

Before you left the hospital, did you receive information in writing about how to take this medicine at home?(continued)



10. Among Purchased Care beneficiaries in the North region, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$).

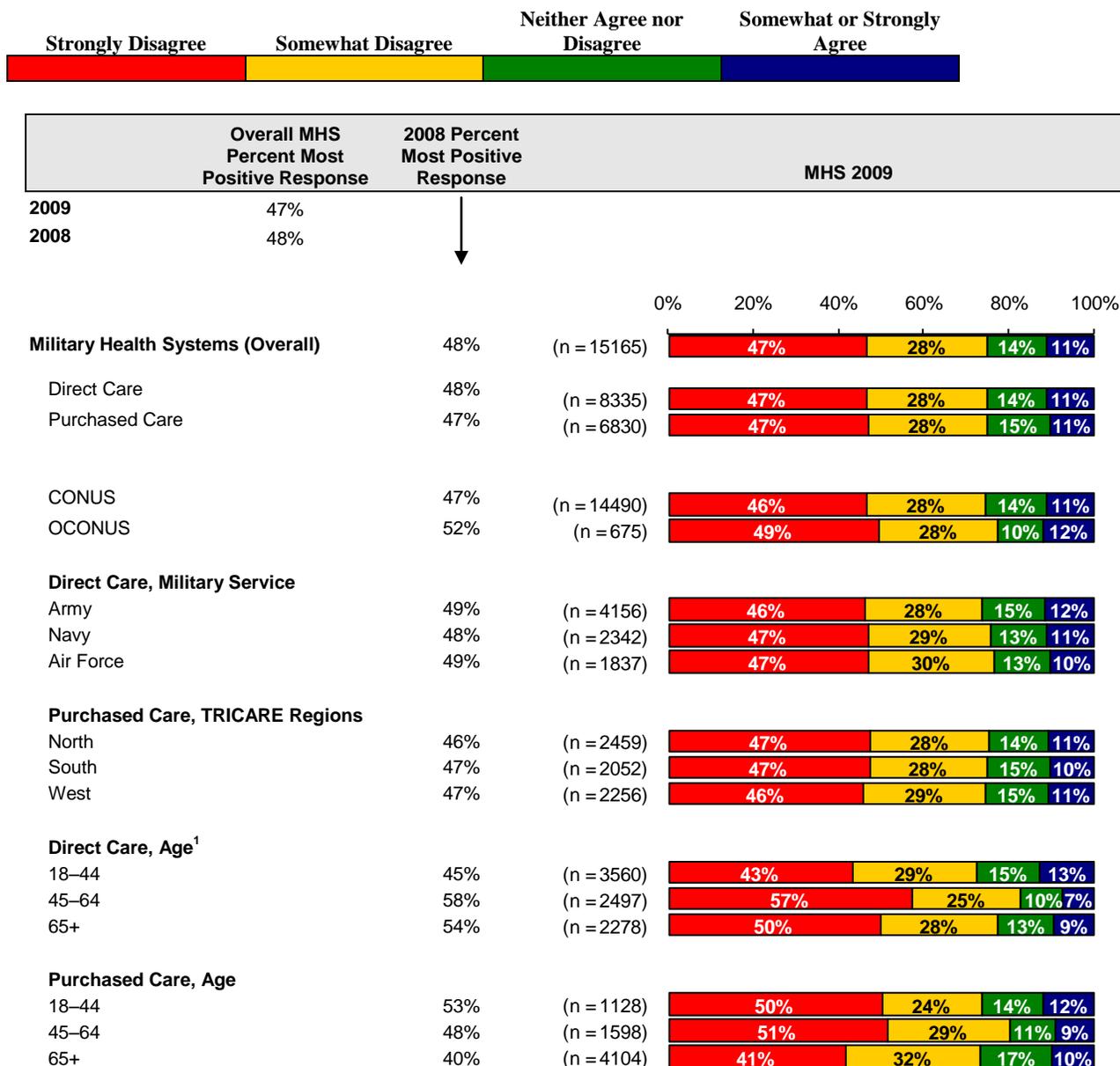
11. Among Purchased Care beneficiaries in the South region, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$).

12. Among Purchased Care beneficiaries in the West region, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they received information in writing about how to take their medicine at home ($p < .05$).

Survey Results:
Trust Questions

Trust Question

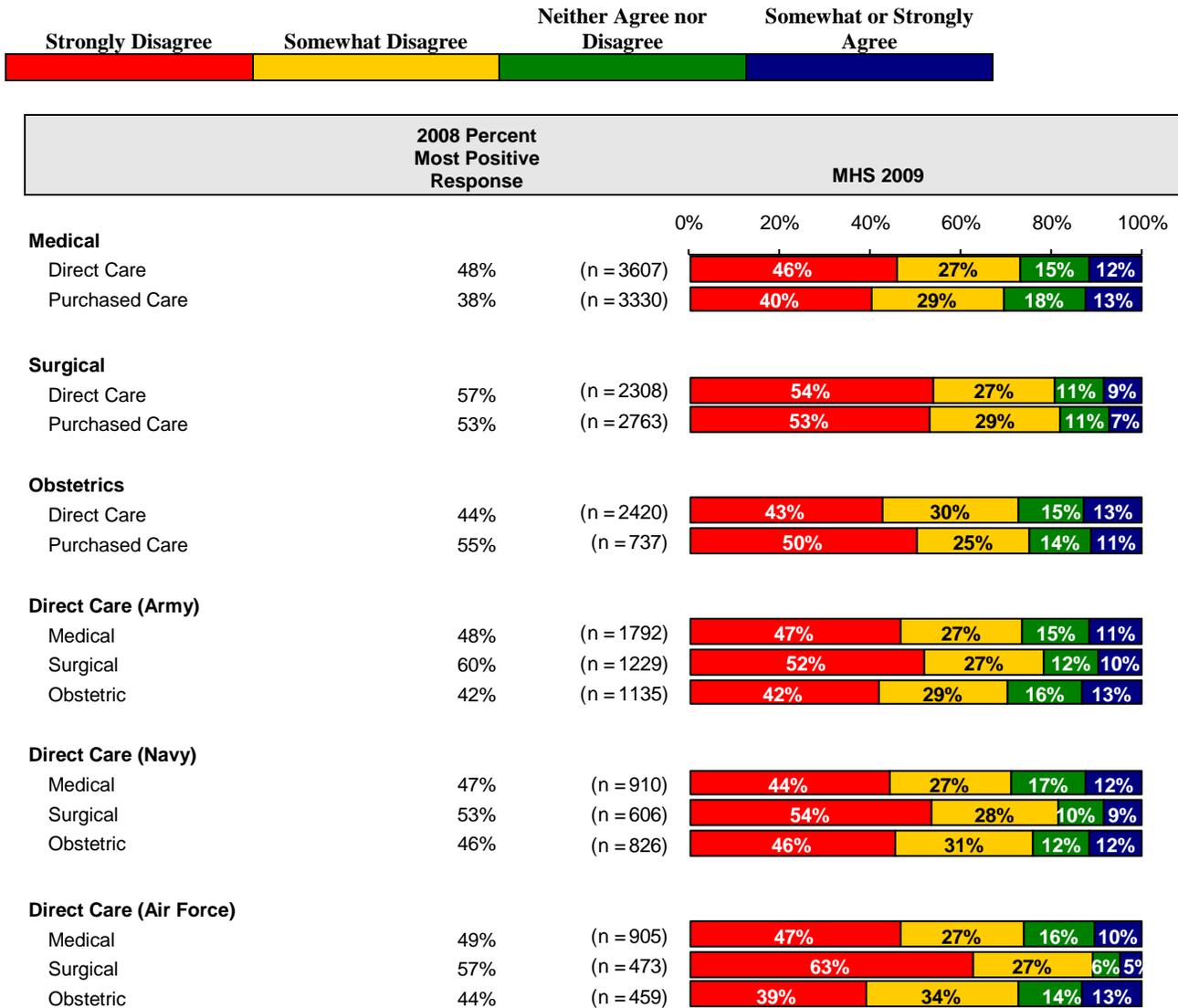
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs.



1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to “strongly disagree” that their health care provider cared more about what was convenient for him or her than about their medical needs. Furthermore, those aged 45–64 were significantly more likely than those in other age groups to “strongly disagree” that their health care provider cared more about what was convenient for him or her than about their medical needs.

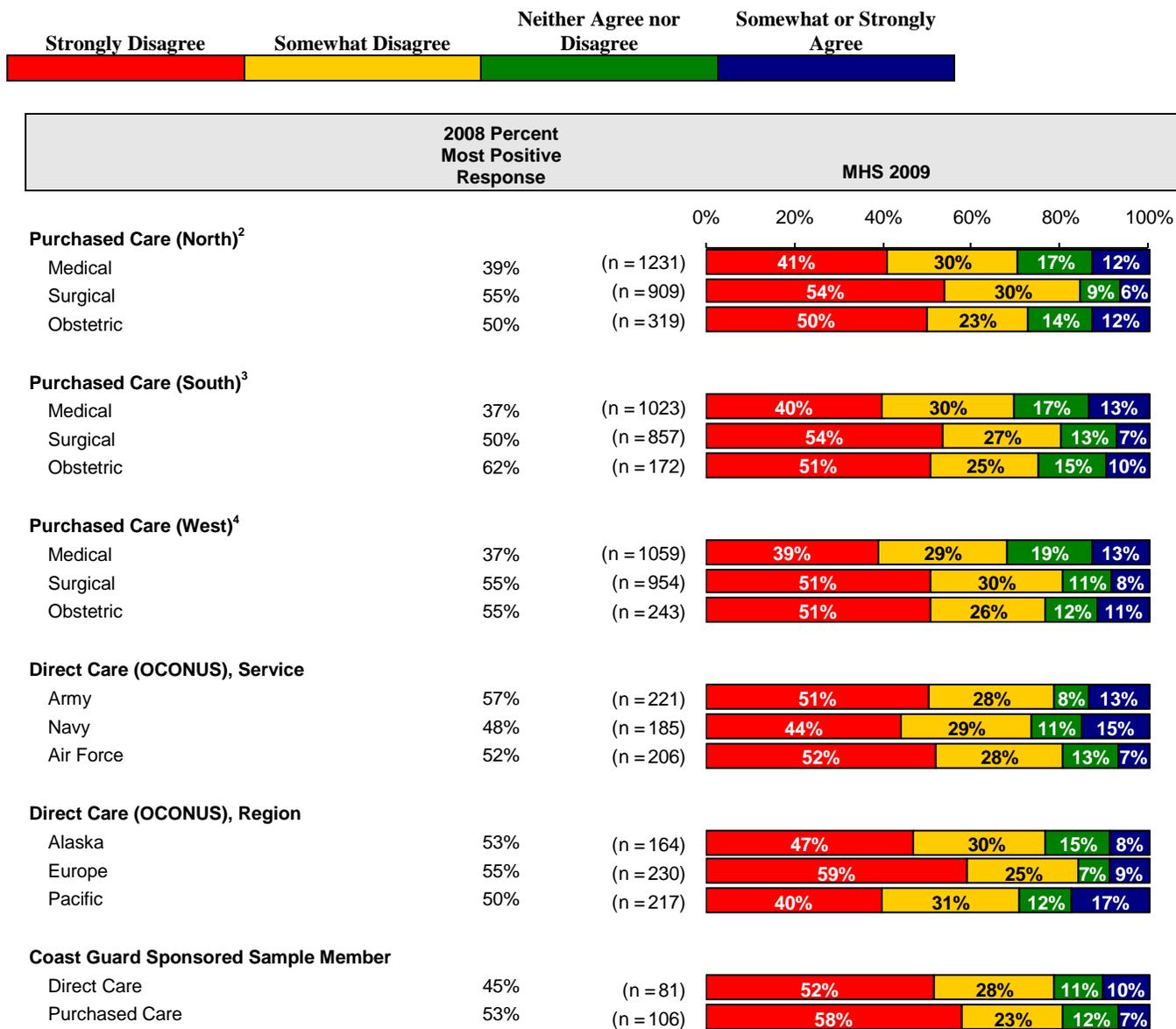
Trust Question

Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs (continued)



Trust Question

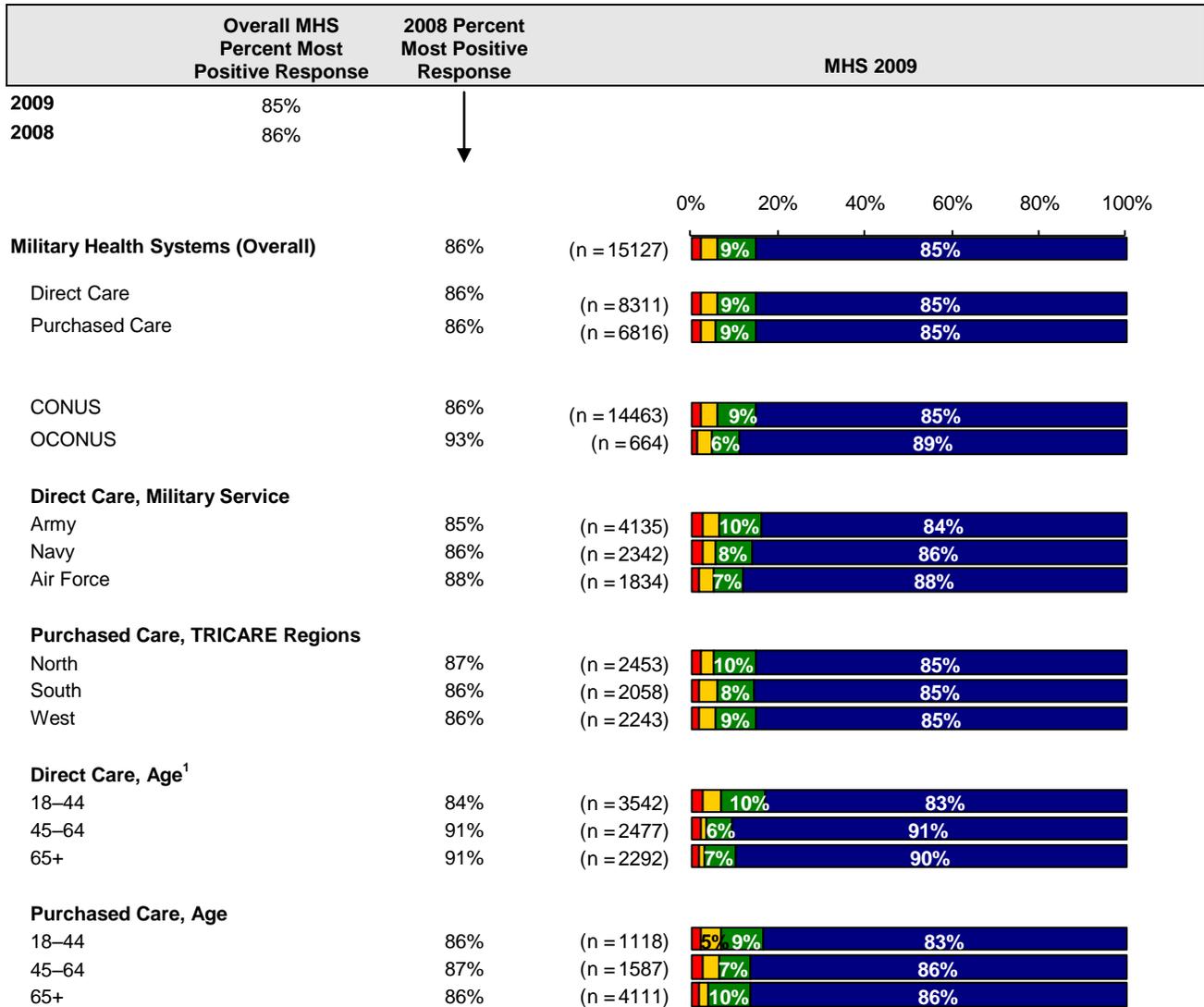
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs (continued)



- Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to “strongly disagree” that their health care provider cared more about what was convenient for him or her than about their medical needs.
- Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving other services to “strongly disagree” that their health care provider cared more about what was convenient for him or her than about their medical needs.
- Among Purchased Care beneficiaries in the West region, those receiving Surgical services were significantly more likely than those receiving other services to “strongly disagree” that their health care provider cared more about what was convenient for him or her than about their medical needs.

Trust Question

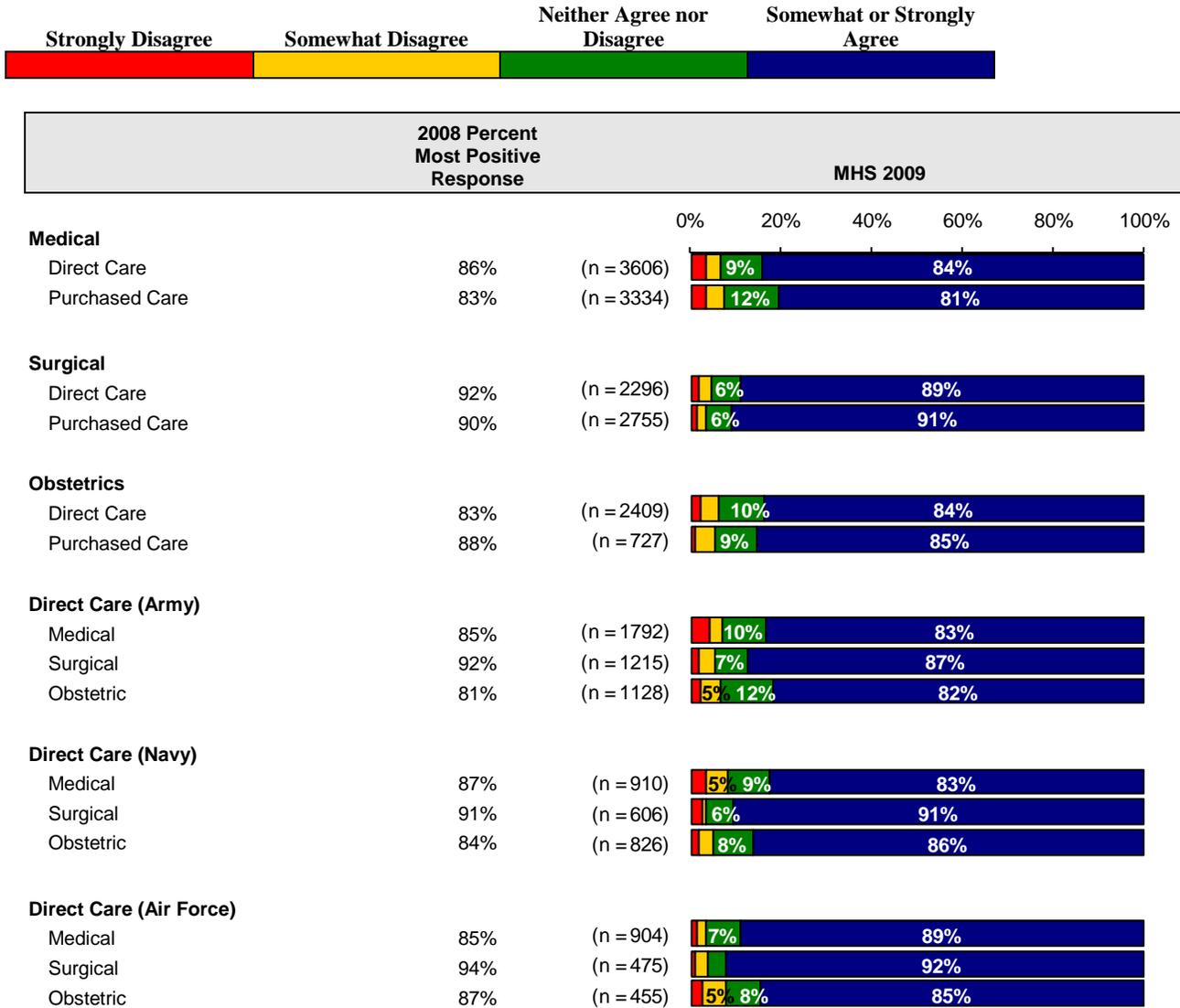
Your health care provider was always thoughtful and thorough



1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to agree that their health care provider was always thoughtful and thorough ($p < .05$).

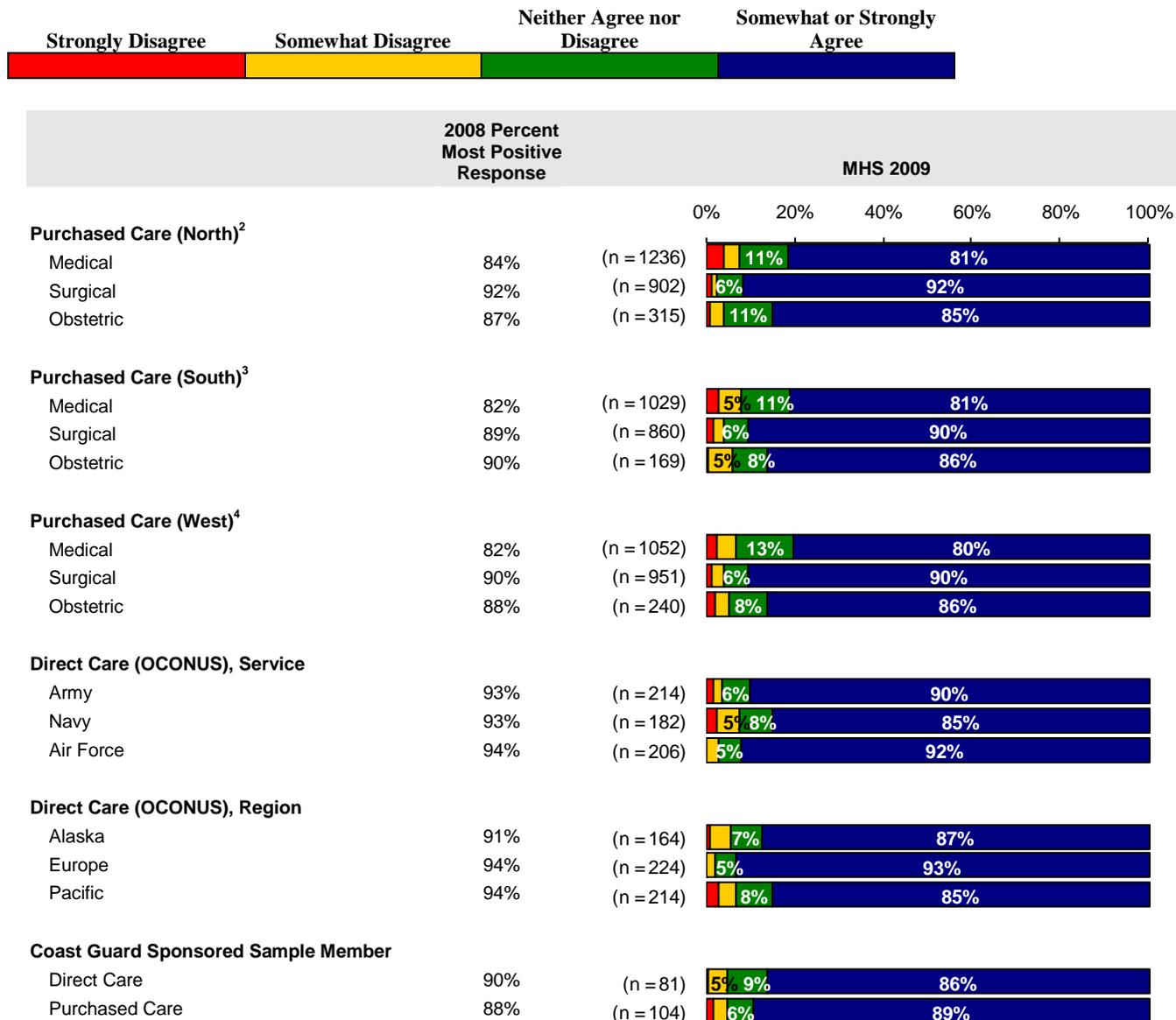
Trust Question

Your health care provider was always thoughtful and thorough (continued)



Trust Question

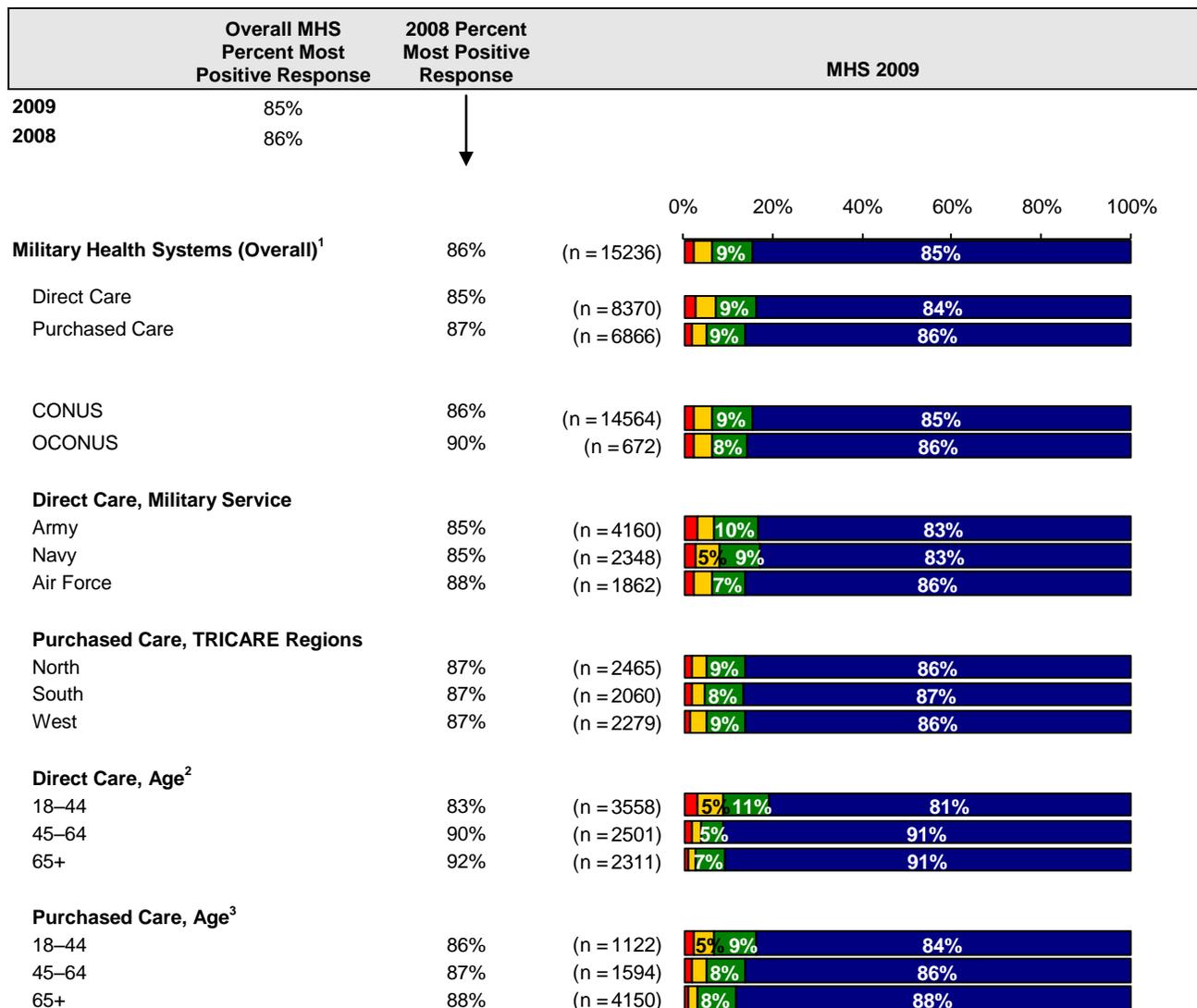
Your health care provider was always thoughtful and thorough (continued)



- Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to agree that their health care provider was always thoughtful and thorough ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving Medical services to agree that their health care provider was always thoughtful and thorough ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving other services to agree that their health care provider was always thoughtful and thorough ($p < .05$).

Trust Question

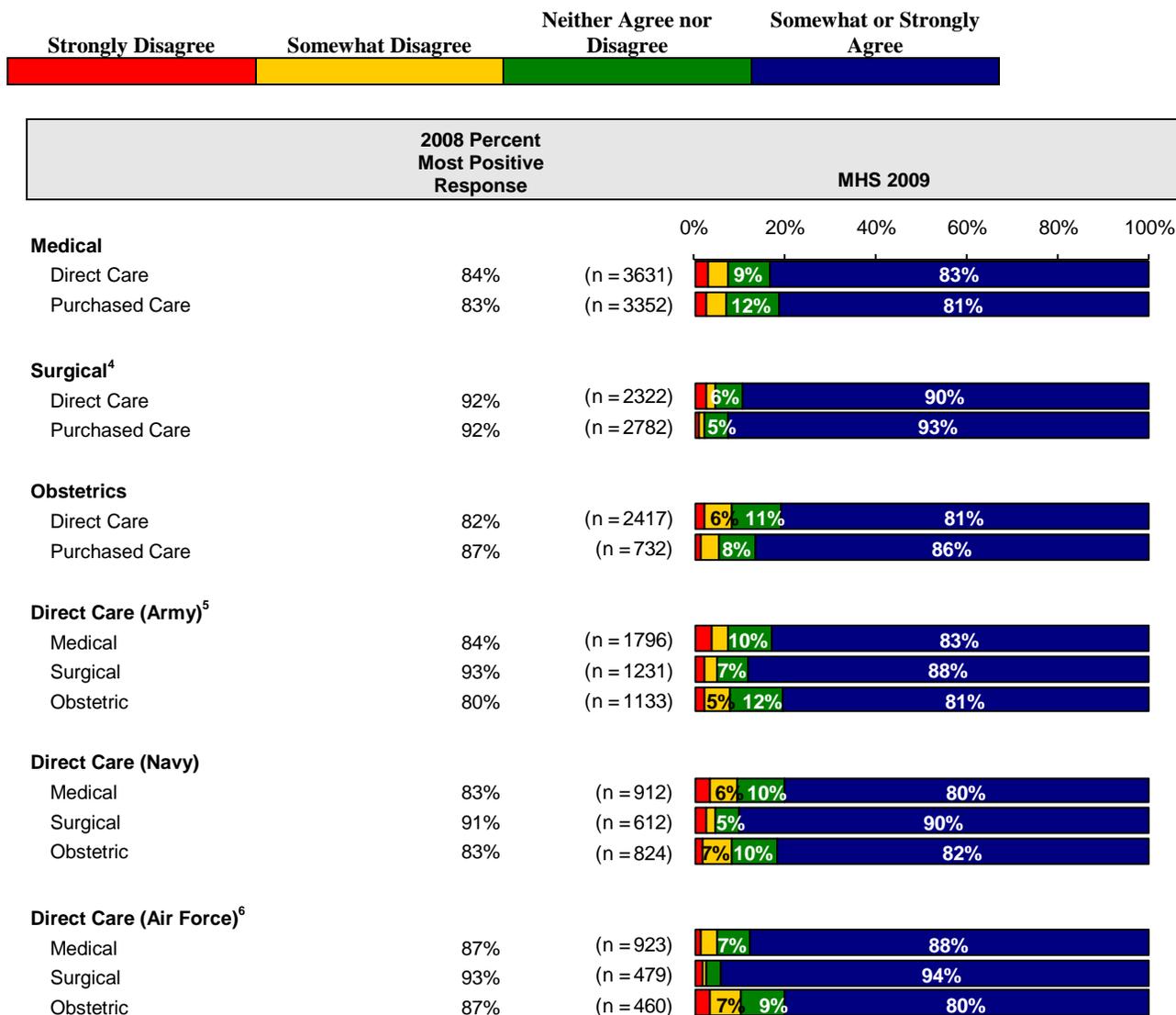
You completely trusted your health care providers decisions about which medical treatments were best for you



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to agree that they completely trusted their healthcare provider's decisions about which medical treatments were best ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).
- Among Purchased Care, those aged 65+ were significantly more likely than those in other age groups to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).

Trust Question

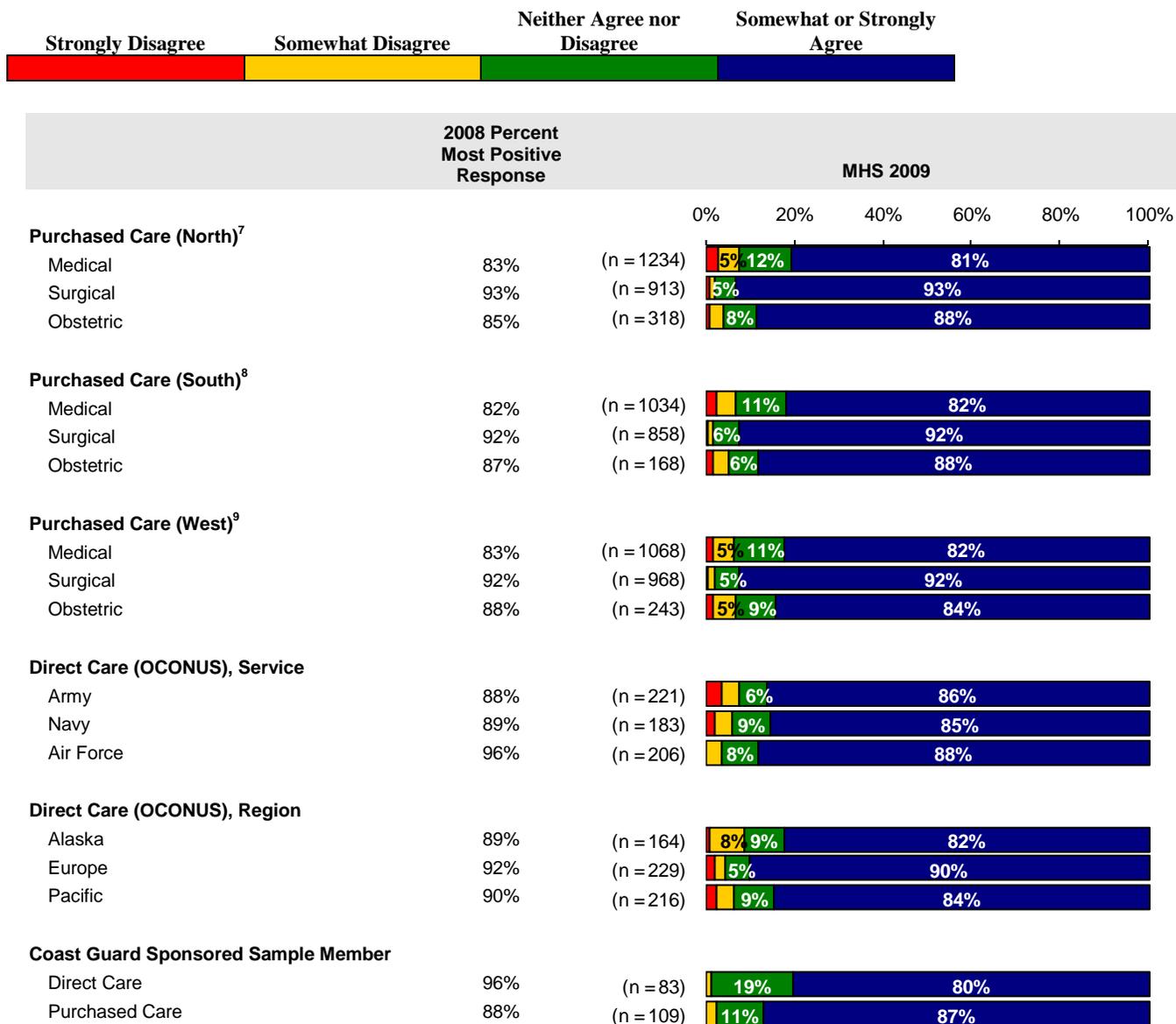
You completely trusted your health care providers decisions about which medical treatments were best for you (continued)



- Among those receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly more likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$). Furthermore, those receiving Obstetrics services were significantly less likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).

Trust Question

You completely trusted your health care providers decisions about which medical treatments were best for you (continued)



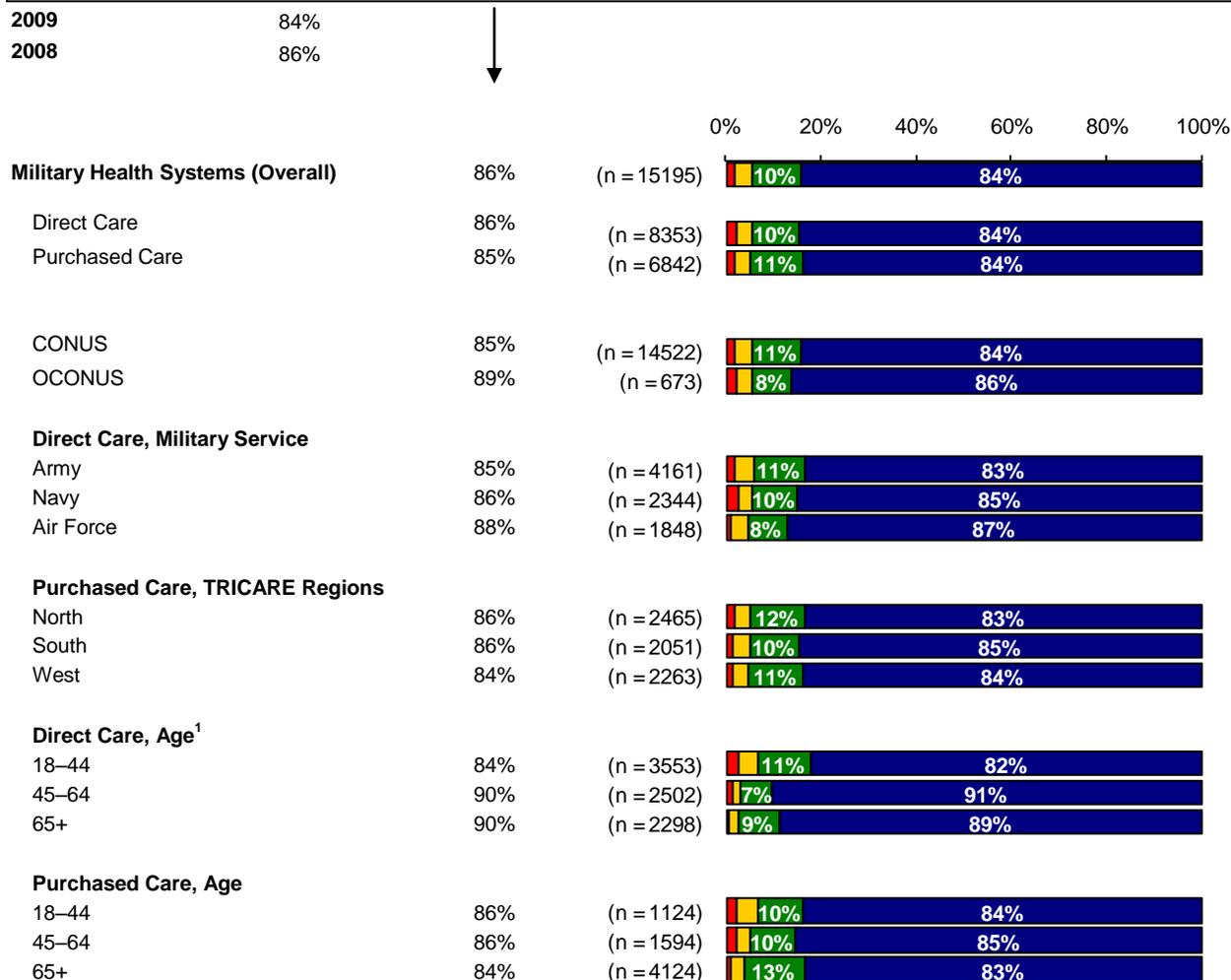
- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$). Furthermore, those receiving Medical services were significantly less likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to agree that they completely trusted their health care provider's decisions about which medical treatments were best ($p < .05$).

Trust Question

Your health care provider was completely honest in telling you about all of the different treatment options available for your condition



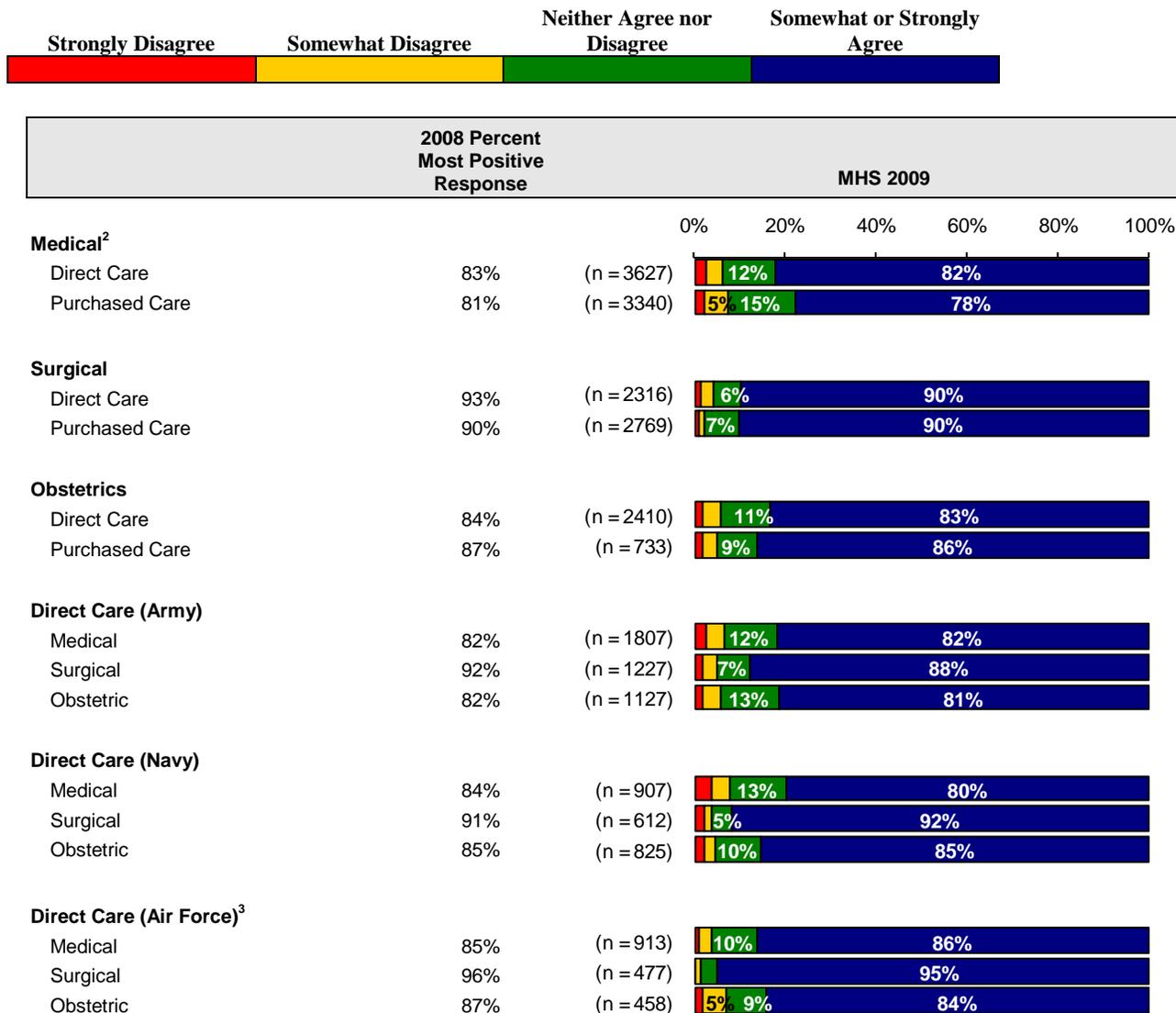
	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009
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1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that their health care provider was completely honest in telling them about all the different treatment options available ($p < .05$).

Trust Question

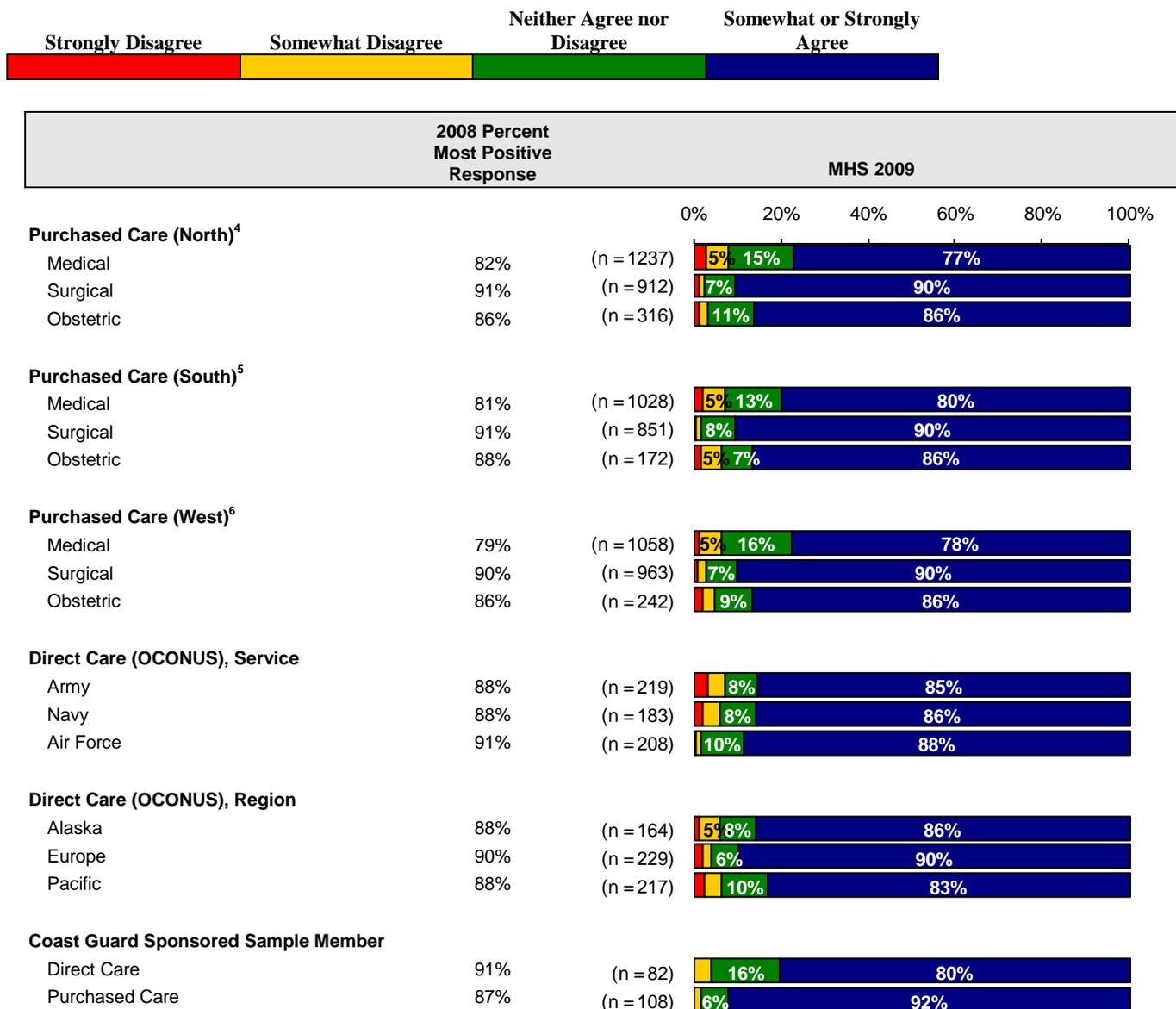
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition (continued)



- Among those receiving Medical services, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that their health care provider was completely honest in telling them about all the different treatment options available ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that their health care provider was completely honest in telling them about all the different treatment options available ($p < .05$).

Trust Question

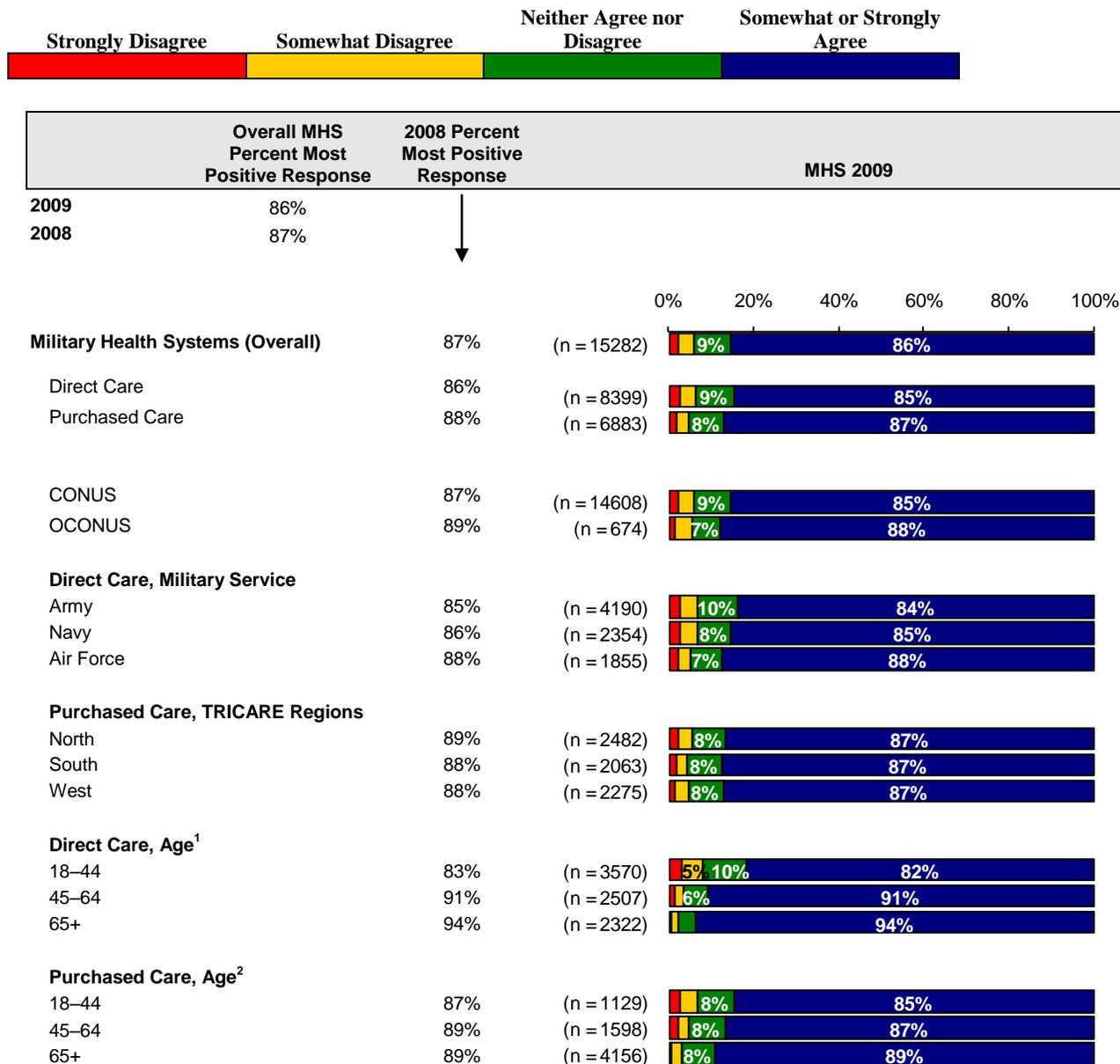
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition (continued)



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving other services to report that their health care provider was completely honest in telling them about all the different treatment options available ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving other services to report that their health care provider was completely honest in telling them about all the different treatment options available ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving other services to report that their health care provider was completely honest in telling them about all the different treatment options available ($p < .05$).

Trust Question

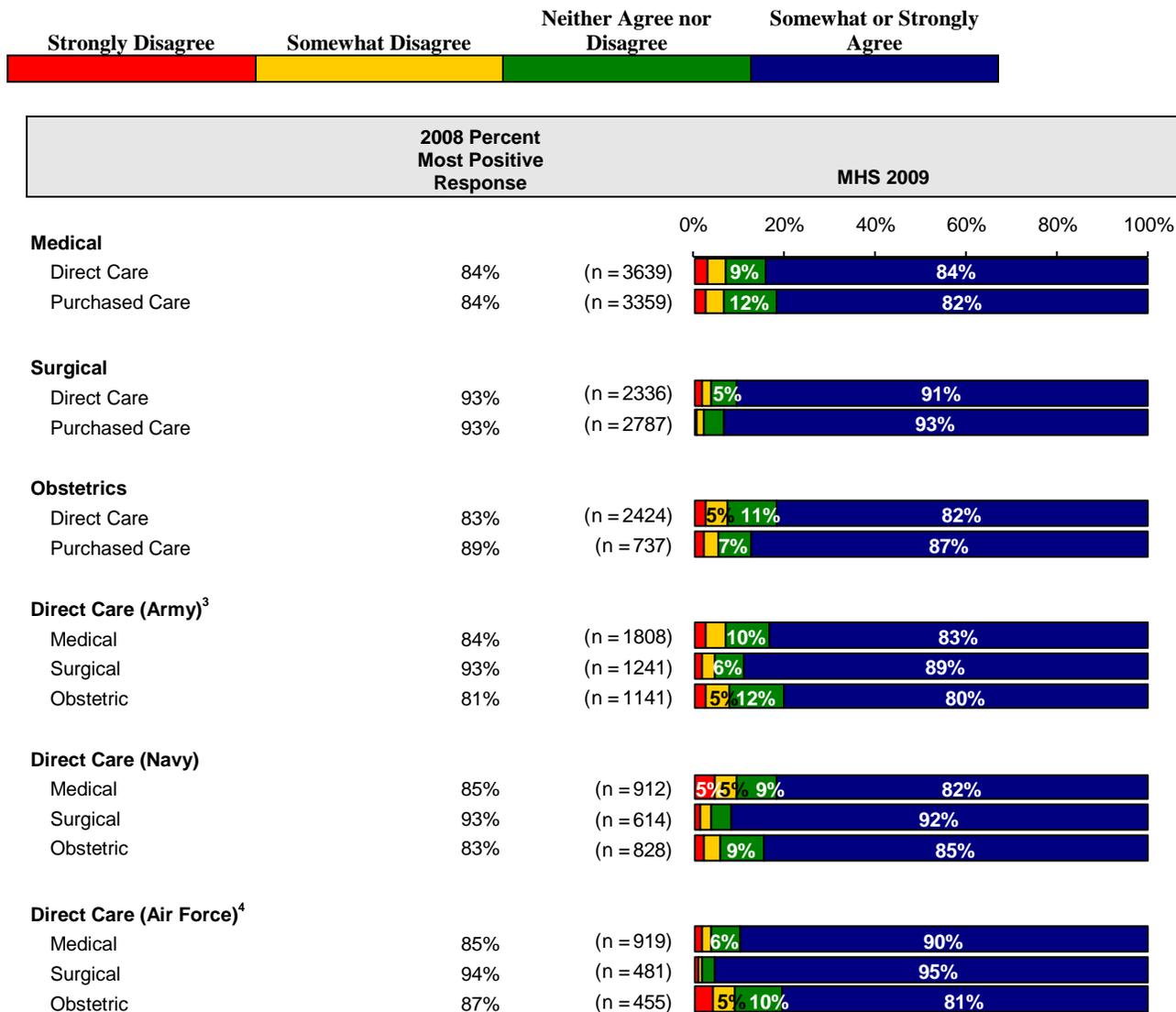
All in all, you had complete trust in your health care provider



1. Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that they had complete trust in their provider ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report that they had complete trust in their provider ($p < .05$).
2. Among Purchased Care, those aged 65+ were significantly more likely than those in other age groups to report that they had complete trust in their provider ($p < .05$).

Trust Question

All in all, you had complete trust in your health care provider (continued)

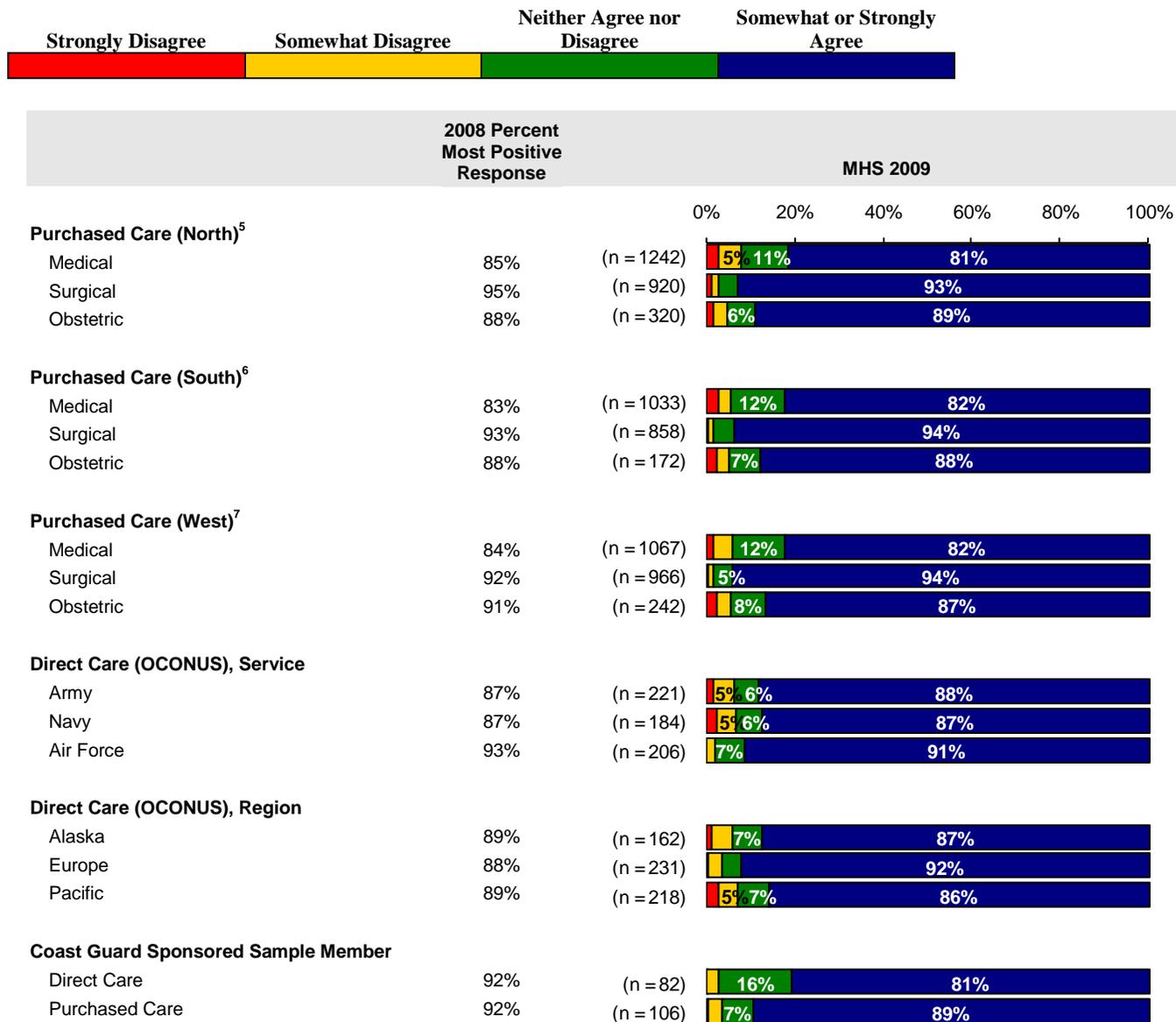


3. Among Direct Care beneficiaries in Army MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that they had complete trust in their provider ($p < .05$).

4. Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical services were significantly more likely than those receiving other services to report that they had complete trust in their provider ($p < .05$). Furthermore, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they had complete trust in their provider ($p < .05$).

Trust Question

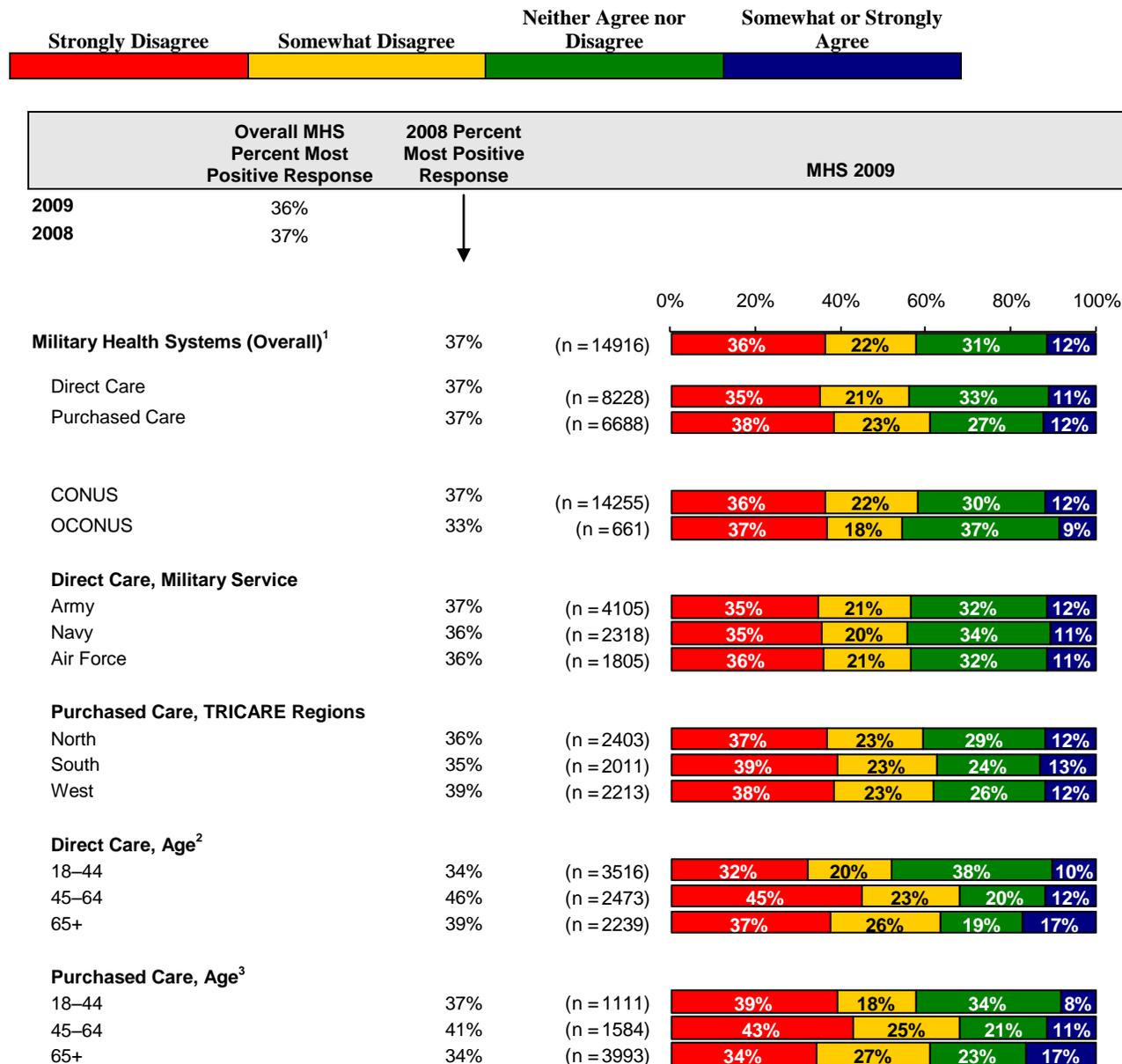
All in all, you had complete trust in your health care provider (continued)



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving other services to report that they had complete trust in their provider ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving other services to report that they had complete trust in their provider ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving other services to report that they had complete trust in their provider ($p < .05$).

Trust Question

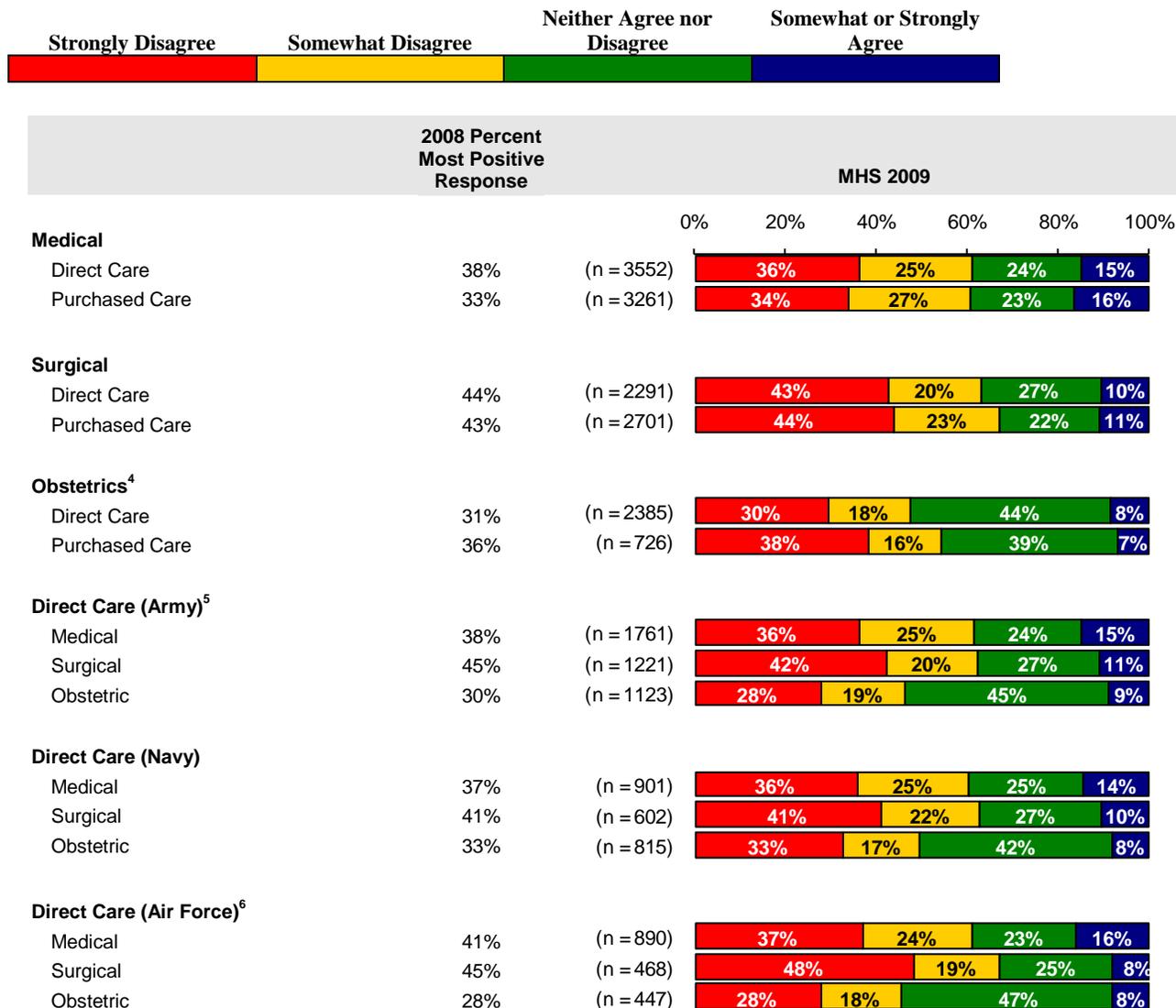
Your health care provider did not refer you to a specialist when needed



- Overall, those in Direct Care were significantly less likely than those in Purchased Care to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).
- Among Purchased Care, those aged 65+ were significantly less likely than those in other age groups to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).

Trust Question

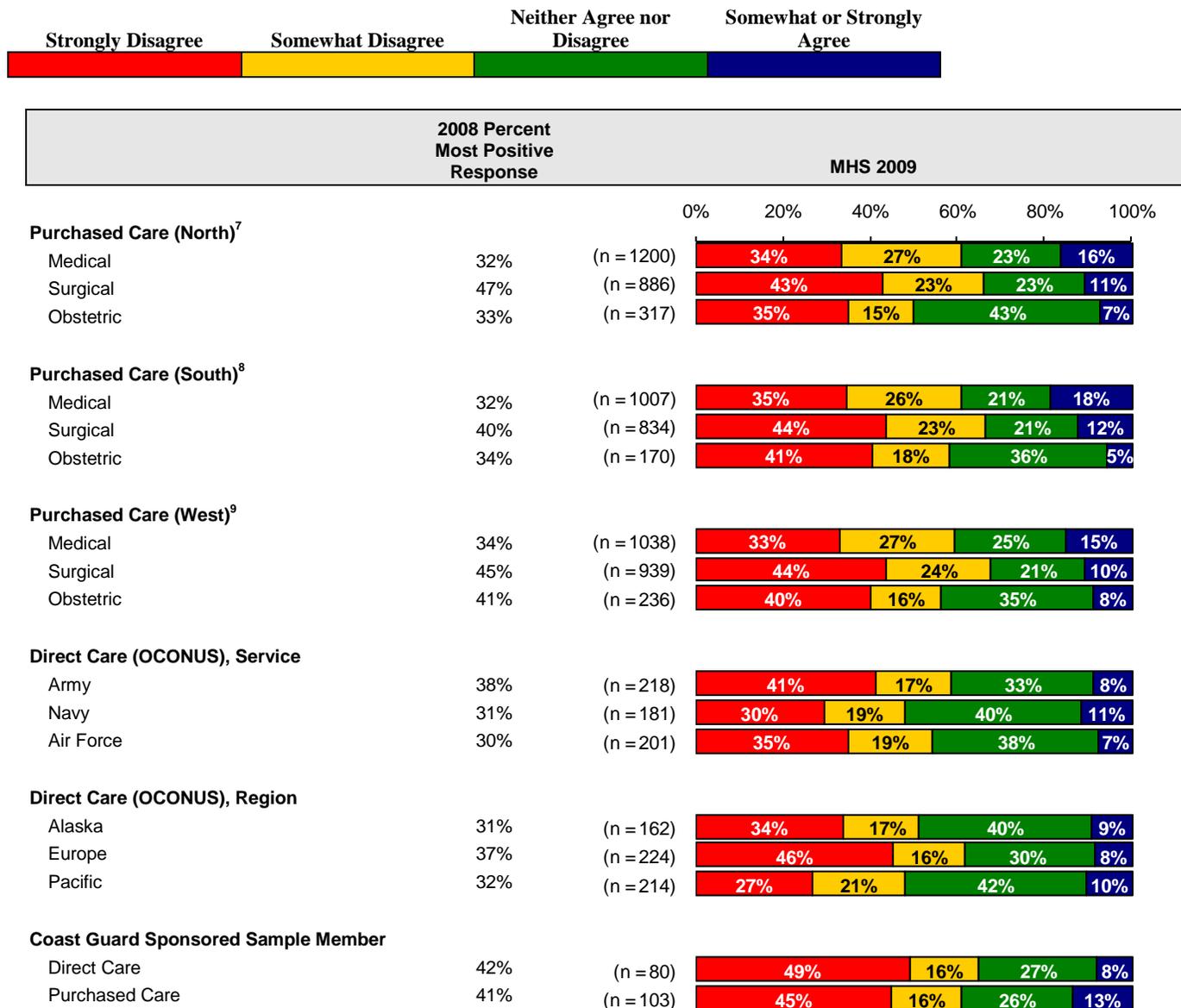
Your health care provider did not refer you to a specialist when needed (continued)



- Among those receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).

Trust Question

Your health care provider did not refer you to a specialist when needed (continued)



- Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving other services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).
- Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving Medical services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).
- Among Purchased Care beneficiaries in the West region, those receiving Surgical services were significantly more likely than those receiving Medical services to report that they "strongly disagreed" with the statement that their health care provider did not refer them to a specialist when needed ($p < .05$).

Trust Question

You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems

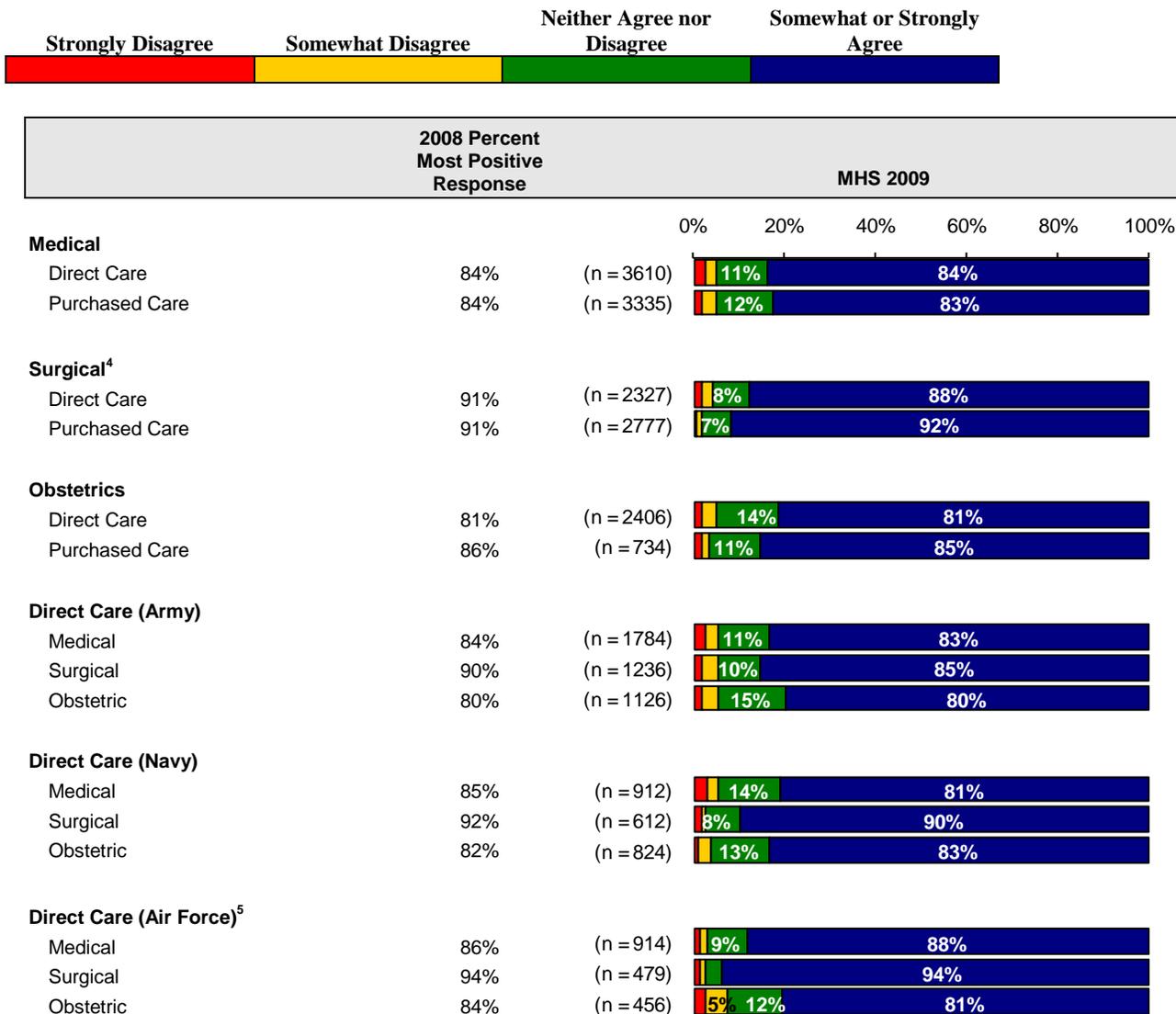


	Overall MHS Percent Most Positive Response	2008 Percent Most Positive Response	MHS 2009
2009	85%		
2008	86%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)¹	86%	(n = 15189)	
Direct Care	85%	(n = 8343)	
Purchased Care	87%	(n = 6846)	
CONUS	86%	(n = 14522)	
OCONUS	87%	(n = 667)	
Direct Care, Military Service			
Army	84%	(n = 4146)	
Navy	85%	(n = 2348)	
Air Force	87%	(n = 1849)	
Purchased Care, TRICARE Regions			
North	87%	(n = 2466)	
South	87%	(n = 2059)	
West	87%	(n = 2259)	
Direct Care, Age²			
18–44	82%	(n = 3553)	
45–64	91%	(n = 2496)	
65+	92%	(n = 2294)	
Purchased Care, Age³			
18–44	85%	(n = 1120)	
45–64	87%	(n = 1602)	
65+	89%	(n = 4124)	

- Overall, those in Direct Care were significantly less likely than those in Purchased Care to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).
- Among Purchased Care, those aged 18–44 were significantly less likely than those in other age groups to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).

Trust Question

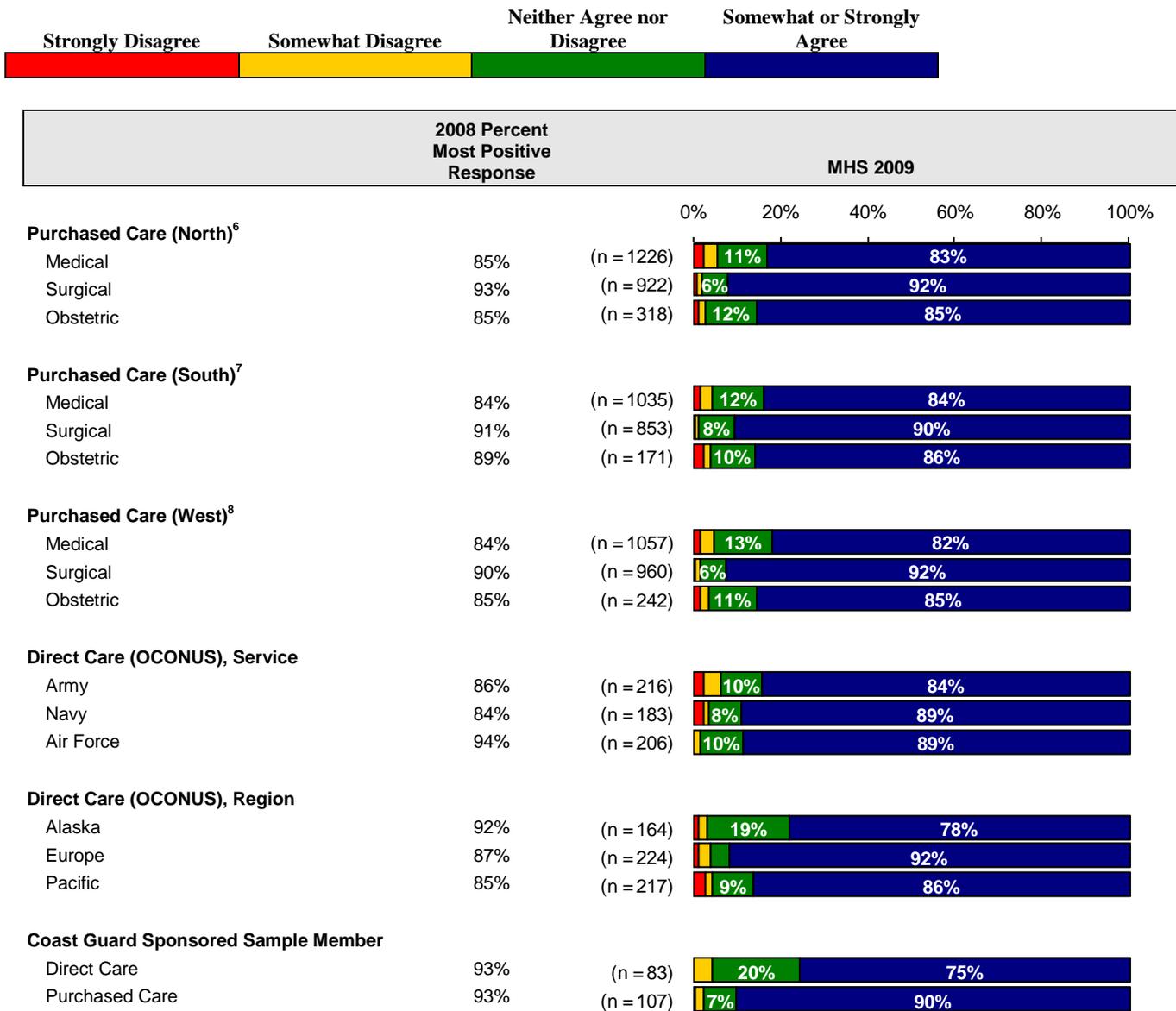
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems (continued)



- Among those receiving Surgical Services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Surgical Services were significantly more likely than those receiving other services to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$). Furthermore, those receiving Obstetrics Services were significantly less likely than those receiving other services to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).

Trust Question

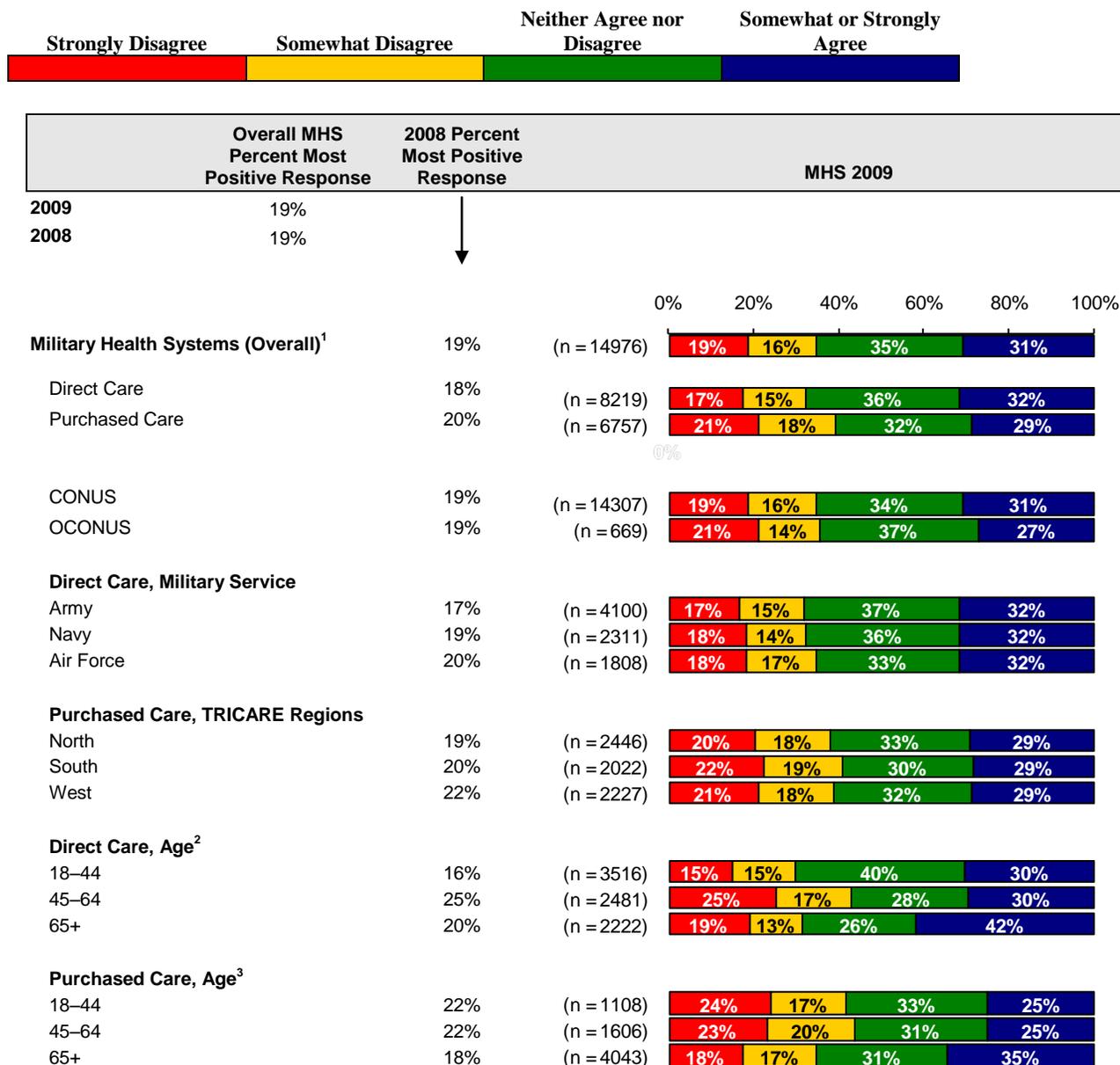
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems (continued)



- Among Purchased Care beneficiaries in the North, those receiving Surgical Services were significantly more likely than those receiving other services to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Surgical Services were significantly more likely than those receiving Medical services to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Surgical Services were significantly more likely than those receiving other services to agree that they trusted their health care provider to put their medical needs above all other considerations ($p < .05$).

Trust Question

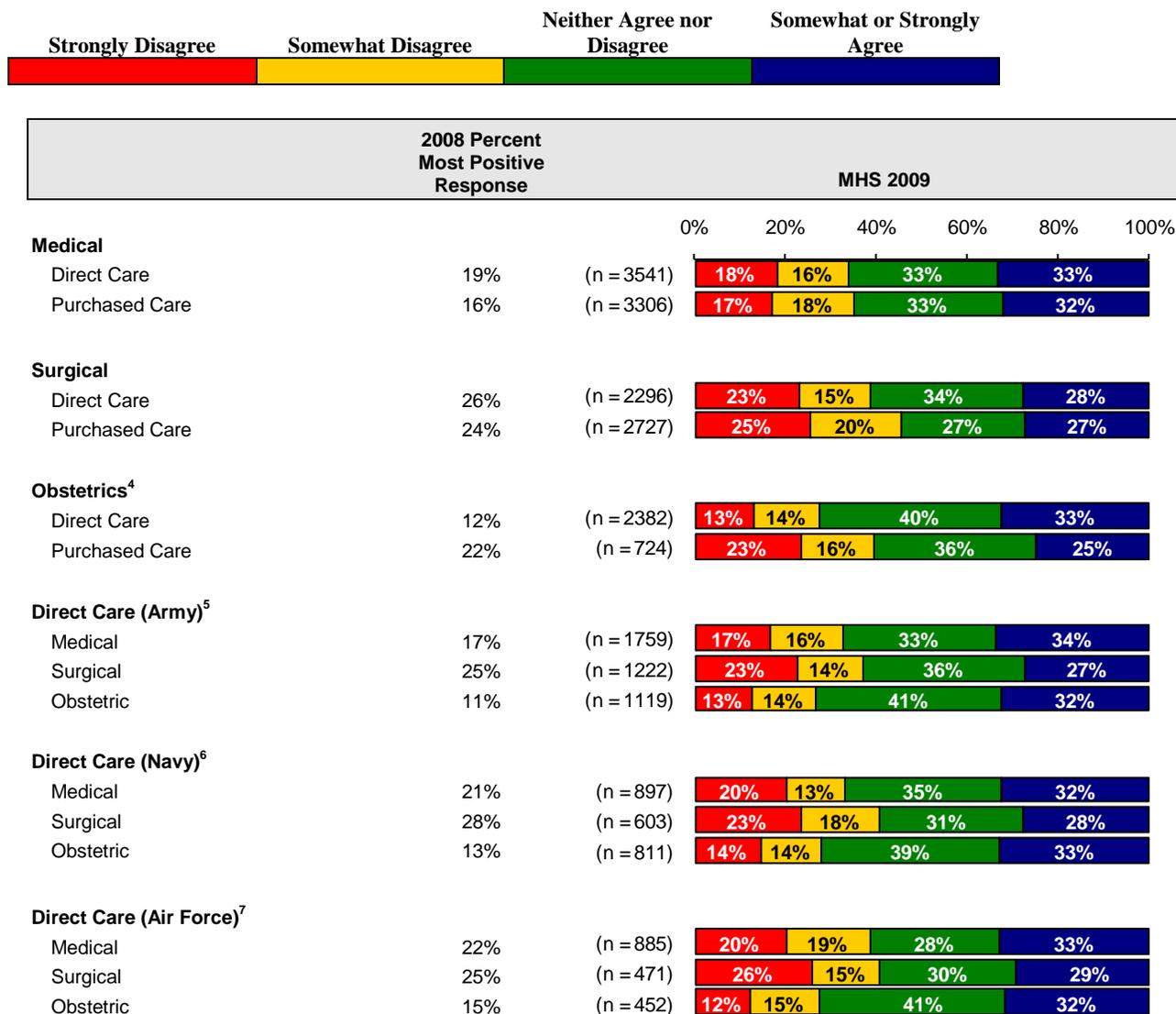
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$). Furthermore, those aged 45–64 were significantly more likely than those in other age groups to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).

Trust Question

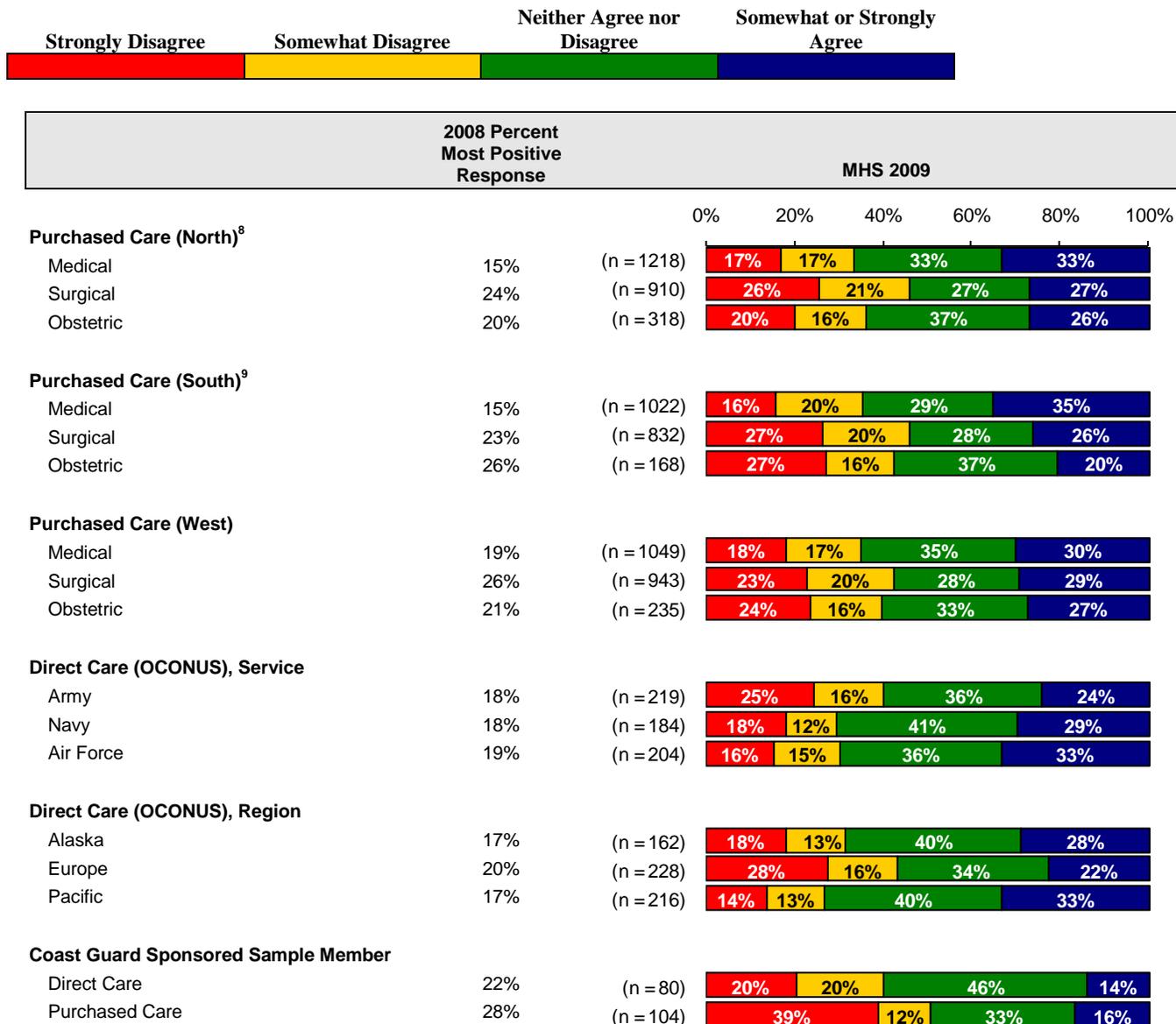
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care (continued)



- Among those receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).
- Among Direct Care beneficiaries in Army MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving other services to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).
- Among Direct Care beneficiaries in Navy MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).
- Among Direct Care beneficiaries in Air Force MTFs, those receiving Obstetrics services were significantly less likely than those receiving other services to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).

Trust Question

You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care (continued)



8. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving Surgical services to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).

9. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving other services to “strongly disagree” that their health care provider was strongly influenced by health plan rules when making care decisions ($p < .05$).

**Appendix A:
Survey Methodology and Data Collection Results**

Survey Methodology and Results for the 2009 TRISS Mail Survey

TRISS Mail Survey Sample

The survey population for the 2009 TRICARE Inpatient Satisfaction Survey (TRISS) consisted of TRICARE beneficiaries who received inpatient hospital care from July 1, 2009, through September 30, 2009, for medical, surgical, or obstetrics care for selected diagnostic-related group (DRG) codes (see Appendix B). Altarum Institute, under contract to the Department of Defense TRICARE Management Activity (DoD-TMA), constructed and provided the sample frame to RTI project staff. Altarum used a number of selection criteria to exclude certain categories of inpatients from the sample frame. Those excluded from the survey included those who

- were under 18 years of age,
- did not have a normal discharge,
- had a psychiatric or substance abuse diagnosis, and
- had a diagnosis of abortion, false labor, antepartum, or stillbirth.

The sampling frame that Altarum Institute provided to RTI project staff contained sampling and contact information for TRICARE beneficiaries who received a Standard Inpatient Data Record data file for direct care (DC) and a Health Care Service Record [Institutional] file for purchased care (PC) for July through September 2009. Included in the mail survey were TRICARE beneficiaries who received care from direct and network civilian facilities located both within the continental United States (CONUS) and outside the continental United States (OCONUS).

DoD-TMA conducts a telephone survey quarterly in addition to the mail survey. To conduct both a mail and telephone survey of July–September inpatients, project statisticians constructed the sample frame so that the sample for the telephone survey was selected first. The remaining DC and PC inpatients received the mail survey.

There were 46,859 beneficiaries included in the Mail Survey sample, of whom 31,003 (66.2%) were DC beneficiaries and 15,856 (33.8%) were PC beneficiaries. The distribution of cases in the sample by a number of subpopulations of interest, including military service/branch, age, discharge month, etc., for the DC and PC samples is shown in **Tables A1** and **A2**.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

Table A1. Sample Distribution for July–September 2009 Direct Care Mail Survey

	July	August	Sept	Total
Age Group				
18–44	6,899	7,280	7,399	21,578
45–64	1,922	1,990	1,789	5,701
65+	1,223	1,266	1,235	3,724
Total	10,044	10,536	10,423	31,003
Product Type				
Medical	3,852	3,950	3,694	11,496
Surgical	2,347	2,501	2,494	7,342
Childbirth	3,845	4,085	4,235	12,165
Total	10,044	10,536	10,423	31,003
Military Service				
Army	5,430	5,484	5,558	16,472
Navy	2,859	3,229	3,099	9,187
Air Force	1,755	1,823	1,766	5,344
Total	10,044	10,536	10,423	31,003
TRICARE Region				
North	2,851	3,243	3,124	9,218
South	2,819	2,871	2,781	8,471
West	3,339	3,356	3,415	10,110
OCONUS	1,035	1,066	1,103	3,204
Total	10,044	10,536	10,423	31,003

Table A2. Sample Distribution for July–September 2009 Purchased Care Mail Survey

	July	August	Sept	Total
Age Group				
18–44	2,010	2,032	1,939	5,981
45–64	1,242	1,172	970	3,384
65+	2,399	2,225	1,867	6,491
Total	5,651	5,429	4,776	15,856
Product Type				
Medical	2,582	2,371	2,003	6,956
Surgical	1,869	1,768	1,488	5,125
Childbirth	1,200	1,290	1,285	3,775
Total	5,651	5,429	4,776	15,856
TRICARE Region				
North	2,103	2,010	1,710	5,823
South	1,669	1,658	1,470	4,797
West	1,821	1,709	1,550	5,080
OCONUS	58	52	46	156
Total	5,651	5,429	4,776	15,856

Mail Survey Data Collection

Data collection for the 2009 TRISS Mail Survey consisted of mailing a questionnaire package that included a cover letter, a survey questionnaire based on the inpatient’s product type (medical, surgical, or obstetrics) and a return envelope. The cover letter explained the purpose and objectives of the survey and provided informed consent information. Sample members were given the option of responding by mail or completing an online web survey. The personalized cover letter included a unique username and password for each sample member and instructions for accessing the web survey if the sample member chose to respond that way. A second questionnaire package was mailed to all sample members who did not respond within approximately 4 weeks of the first questionnaire mailing. The schedule of mailings for the DC and PC samples is shown in **Table A3**.

Table A3. Schedule of Mailings for the 2009 TRISS Mail Survey

Discharge Month	First Questionnaire	Second Questionnaire
Direct Care Sample		
July 2009	November 3, 2009	December 7, 2009
August 2009	December 2, 2009	January 6, 2010
September 2009	December 21, 2009	January 29, 2010
Purchased Care Sample		
July–September 2009	December 21, 2009	January 29, 2010

Data Collection Results

Data collection resulted in obtaining a response rate of 27.7% with the DC sample, 44.9% with the PC sample, and an overall response rate of 33.5%. The response rates were calculated using the American Association for Policy Opinion Research response rate Rule Number 1, which is defined as follows:

$$\frac{\text{Number of Completed Interviews}}{\text{Total Number Selected – Ineligible}}$$

Ineligible sample members are those who were deceased and those who reported that they did not receive inpatient care from the sample facility.

Response rates varied by demographic characteristics, product type, military service (for DC), TRICARE region (for PC) and by discharge month as shown in **Tables A4** (for DC), **A5** (for PC), and **A6** (combined). The following is a summary of the response rates obtained:

- **Response Rates, by Age.** The response rate was lowest for both direct care and purchased care respondents between the ages of 18 and 34 and highest for those 65 years old or older.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2009 Inpatients

- **Response Rates, by Gender.** For direct care, the response rate was about the same for both males and females. However, for purchased care, the response rate for male sample members (57.0%) was significantly higher than the response rate for females (38.4%).
- **Response Rates, by Product Type.** For direct care, the response rate was identical for sample members who received medical services and surgical care (32.7% and 32.3 respectively) and lowest for obstetrics patients (20.3%). For purchased care, the response rate was highest for sample members who received surgical care (55.9%), followed by those who received medical (50.3%) and obstetrics (19.9%) services.
- **Response Rates, by Military Service.** For direct care, the response rate was highest for Air Force (35.6%), followed by the Navy (26.3%) and Army (26.0%).
- **Response Rates, by TRICARE Region.** The response rates in the CONUS regions were similar for both direct care respondents and purchased care respondents. However, the response rate for OCONUS direct care beneficiaries was significantly lower than that for other direct care beneficiaries.
- **Response Rates, by Beneficiary Category.** For both direct care and purchased care, the response rate was highest among retired military personnel and dependents of survivor at 53.7% and 64.2%, 56.4% and 53.3% respectively.
- **Response Rates, by Discharge Month.** For both direct care and purchased care, the response rates were very similar for the three sample months.

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Table A4. Response Rates for the Direct Care Sample

Category	Number Eligible	Number Responded	Response Rate (%)
Total	30,957	8,581	27.72
Age Group			
18–34	17,481	2,662	15.23*
35–44	4,096	972	23.73*
45–64	5,691	2,556	44.91*
65+	3,689	2,391	64.81*
Gender			
Male	10,534	3,020	28.67*
Female	20,423	5,561	27.23
Tricare Region			
North	9,202	2,663	28.94*
South	8,458	2,474	29.25*
West	10,093	2,822	27.96
OCONUS	3,204	622	19.41*
Product Line			
Medical	11,457	3,742	32.66*
Surgical	7,335	2,371	32.32*
Obstetrics	12,165	2,468	20.29*
Military Service Type			
Army	16,444	4,268	25.95*
Navy	9,177	2,413	26.29*
Air Force	5,336	1,900	35.61*
Beneficiary Category			
Active Duty	9,646	1,087	11.27*
Retired	4,564	2,450	53.68*
Dependent of Active Duty	11,541	2,558	22.16*
Dependent of Retired	4,024	1,939	48.19*
Dependent of Survivor	876	494	56.39*
Others	306	53	17.32*
Month			
July	10,026	2,739	27.32
August	10,524	2,998	28.49
September	10,407	2,844	27.33

*The response rate for this subgroup is statistically different from the overall response rate.

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Table A5. Response Rates for the Purchased Care Sample

Category	Number Eligible Sampled	Number Responded	Response Rate
Total	15,795	7,084	44.85
Age Group			
18–34	4,564	781	17.11*
35–44	1,416	370	26.13*
45–64	3,381	1,641	48.54*
65+	6,434	4,292	66.71*
Gender			
Male	5,467	3,114	56.96*
Female	10,328	3,970	38.44*
Tricare Region			
North	5,804	2,552	43.97
South	4,779	2,126	44.49
West	5,056	2,343	46.34*
OCONUS	156	63	40.38
Product Type			
Medical	6,905	3,475	50.33*
Surgical	5,115	2,857	55.86*
Obstetrics	3,775	752	19.92*
Beneficiary Category			
Active Duty	1,079	160	14.83*
Retired	4,743	3,045	64.20*
Dependent of Active Duty	4,110	848	20.63*
Dependent of Retired	3,899	2,064	52.94*
Dependent of Survivor	1,718	915	53.26*
Others	246	52	21.14*
Discharge Month			
July	5,625	2,541	45.17
August	5,410	2,403	44.42
September	4,760	2,140	44.96

* The response rate for this subgroup is statistically different from the overall response rate.

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Table A6. Overall Response Rates (Combined direct care and purchased care)

Category	Number Eligible	Number Responded	Response Rate (%)
Total	46,752	15,665	33.51
Age Group			
18–34	22,045	3,443	15.62*
35–44	5,512	1,342	24.35*
45–64	9,072	4,197	46.26*
65+	10,123	6,683	66.02*
Gender			
Male	16,001	6,134	38.34*
Female	30,751	9,531	30.99*
Tricare Region			
North	15,006	5,215	34.75*
South	13,237	4,600	34.75*
West	15,149	5,165	34.09
OCONUS	3,360	685	20.39*
Product Line			
Medical	18,362	7,217	39.30*
Surgical	12,450	5,228	41.99*
Obstetrics	15,940	3,220	20.20*
Military Service Type			
Army	16,444	4,268	25.95*
Navy	9,177	2,413	26.29*
Air Force	5,336	1,900	35.61*
Beneficiary Category			
Active Duty	10,725	1,247	11.63*
Retired	9,307	5,495	59.04*
Dependent of Active Duty	15,651	3,406	21.76*
Dependent of Retired	7,923	4,003	50.52*
Dependent of Survivor	2,594	1,409	54.32*
Others	552	105	19.02*
Month			
July	15,651	5,280	33.74
August	15,934	5,401	33.90
September	15,167	4,984	32.86

* The response rate for this subgroup is statistically different from the overall response rate.

**Appendix B:
DRG Codes Used to Construct the Sample Frame on the 2009
TRICARE Inpatient Satisfaction Survey**

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Table B1. DRG Codes Used to Construct the Sample Frame on the 2008 TRICARE Inpatient Satisfaction Survey¹

Service Line/ Product Type	DRG
Maternity Care	370–375 (<i>Please note: While the Federal Register Notice classifies these codes as Medical or Surgical, for HCAHPS they are to be coded as Maternity Care.</i>)
Medical	9–25, 27–29, 31, 32, 34, 35, 43–47, 64–69, 71–73, 78–80, 82–90, 92–97, 99–102, 121, 122, 124–136, 138–145, 172–183, 185, 187–189, 202–208, 235–251, 253, 254, 256, 271–278, 280, 281, 283, 284, 294–297, 299–301, 316–321, 323–326, 328, 329, 331, 332, 346–352, 366–369, 376, 378–380, 382–384, 395, 397–399, 403, 404, 409–414, 416, 418–421, 423, 434–438, 444, 447, 449, 450, 452–457, 460, 463–467, 473, 478, 487, 489, 490, 492, 505, 508–511, 524, 559–566
Surgical	1, 2, 4–8, 36–40, 42, 49–53, 55–57, 59, 61, 63, 75–77, 103–120, 146–155, 157–162, 164–171, 191–201, 209–211, 213–219, 221–234, 257–270, 285–293, 302–313, 315, 334–339, 341, 342, 344, 345, 353–365, 377, 381, 392, 394, 400–402, 406–408, 415, 439–443, 458, 459, 461, 468, 471, 472, 474, 476–486, 488, 491, 493–504, 506, 507, 512–520, 525–558, 567–570, 573, 577–579
Ineligible	3, 26, 30, 33, 41, 48, 54, 58, 60, 62, 70, 74, 81, 91, 98, 123, 137, 156, 163, 184, 186, 190, 212, 220, 252, 255, 279, 282, 298, 314, 322, 327, 330, 333, 340, 343, 385–391, 393, 396, 405, 417, 422, 424–433, 446, 448, 451, 462, 469, 470, 521–523

Note: DRGs in the ineligible category include patients with pediatric, psychiatric, rehabilitation, or deceased DRGs, and DRGs with no assigned type.

¹ From the CAHPS Hospital Survey Quality Assurance Guidelines, Version 2.0, January 2007, Centers for Medicare and Medicaid Services.