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TRICARE Inpatient Satisfaction Survey

Overall Survey Results of Hospital Inpatients: July – September 2008

Draft Final Report

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Contents

Executive Summary	1
Highlights of Results.....	2
How to Read the DoD TRISS Report.....	13
Introduction.....	15
Purpose of the TRICARE Inpatient Satisfaction Survey	15
Survey Methods	15
Presentation of Results and Statistical Testing	19
Appendix A: Survey Methodology and Data Collection Results.....	251
Appendix B: DRG Codes Used to Construct the Sample Frame on the 2008 TRICARE Inpatient Satisfaction Survey	259

List of Tables

1a. Direct Care (DC) Results (% Most Positive Results)	3
1b. Direct Care (DC) Results (% Most Positive Results)	4
1c. Direct Care (DC) Outside Continental United States (OCONUS) Results (% Most Positive Results).....	5
2a. Purchased Care (PC) Results (% Most Positive Results)	6
2b. Purchased Care (PC) results (% Most Positive Results).....	7
3a. Direct Care (DC) Results (% Most Positive Results)	8
3b. Direct Care (DC) Results (% Most Positive Results)	9
3c. Direct Care (DC) Outside Continental United States (OCONUS) Results (% Most Positive Results).....	10
4a. Purchased Care (PC) Results (% Most Positive Results)	11
4b. Purchased Care (PC) Results (% Most Positive Results)	12
5. Composite Measures and Questions	17

Survey Results: 2008 TRICARE Inpatient Satisfaction Survey

Survey Results: Overall Satisfaction Questions.....	21
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?.....	22
Overall Satisfaction: Willingness to Recommend—Would you recommend this hospital to your friends and family?	25

Survey Results: HCAHPS Composites and Questions	28
Composite: Communication with Nurses	29
Composite: Communication with Nurses—How often did nurses treat you with courtesy and respect?	32
Composite: Communication with Nurses—How often did nurses listen carefully to you?	35
Composite: Communication with Nurses—How often did nurses explain things in a way you could understand?	38
Composite: Communication with Doctors	41
Composite: Communication with Doctors—How often did doctors treat you with courtesy and respect?	44
Composite: Communication with Doctors—How often did doctors listen carefully to you?	47
Composite: Communication with Doctors—How often did doctors explain things in a way you could understand?	50
Composite: Communication about Medications	53
Composite: Communication about Medications—Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?	56
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?	59
Composite: Responsiveness of Hospital Staff	62
Composite: Responsiveness of Hospital Staff—After you pressed the call button, how often did you get help as soon as you wanted it?	65
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?	68
Composite: Pain Control	71
Composite: Pain Control—How often was your pain well controlled?	74
Composite: Pain Control—How often did the hospital staff do everything they could to help you with your pain?	77
Composite: Discharge Information	80
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?	83
Composite: Discharge Information—Did you get information in writing about what symptoms or health problems to look out for after you left the hospital?	86
Hospital Environment—How often were your room and bathroom kept clean?	89
Hospital Environment—How often was the area around your room quiet at night?	92
Survey Results: DoD Composites and Questions	95
Composite: Your Family and Friends	96
Composite: Your Family and Friends—How often did doctors treat your family or close friend with courtesy and respect?	99
Composite: Your Family and Friends—How often did nurses treat your family or close friend with courtesy and respect?	102
Composite: Interaction with Other Hospital Staff	105

Composite: Interaction with Other Hospital Staff—How often did the staff who took blood from you treat you with courtesy and respect?	108
Composite: Interaction with Other Hospital Staff—How often did the staff who took blood from you do this without causing you too much pain?	111
Composite: Interaction with Other Hospital Staff—How often did staff check your identification band before taking your blood?	114
Composite: Interaction with Other Hospital Staff—How often did the staff starting your IVs treat you with courtesy and respect?	117
Composite: Interaction with Other Hospital Staff—How often did the staff starting your IVs do this without causing you too much pain?	120
Composite: Interaction with Other Hospital Staff—How often did staff check your identification band before starting your IV?	123
Composite: Interaction with Other Hospital Staff—How often did the radiology staff treat you with courtesy and respect?	126
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?	129
Composite: Patient Safety	132
Composite: Patient Safety—How often did you see staff wash their hands or use gloves before treating or checking you?	135
Composite: Patient Safety—When doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves?	138
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?	141
Survey Results: Additional DoD Questions	144
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?	145
Your Care from Nurses—How often did you feel comfortable asking the nurses all the questions you wanted about your condition?	147
Your Care from Doctors—How often did you feel comfortable asking the doctors all the questions you wanted about your condition?	150
Your Care from Doctors—Did you feel that the doctors checked on you as much as you needed?	153
Your Care from Doctors—How often did doctors involve you as much as you wanted in decisions about your treatment?	156
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?	159
Coordination of Care—How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving?	162
Maternity Care (Maternity Questionnaire Only)—Was your primary provider during labor and delivery a doctor, midwife or both?	165

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?	167
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?	169
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?	171
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?	173
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?	175
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?	177
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?	179
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?	181
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?	183
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?	185
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?	187
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?	189
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?	191
Experiences in this Hospital—Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect?	193
Experiences in this Hospital—How often did you get the help you needed with bathing and keeping clean?	196
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?	199
Interactions with Other Hospital Staff—How often did the radiology staff explain your treatment or tests in a way that was easy to understand?	202

Interactions with Other Hospital Staff—During this hospital stay, how often was the staff delivering your food courteous and helpful?	205
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?.....	208
The Hospital Environment—How often was the temperature in your room comfortable?	211
The Hospital Environment—How often did the equipment in your room work properly?	214
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?.....	217
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?	220
When you Left the Hospital—Before you left the hospital, did you receive information in writing about how to take this medicine at home?	223
Survey Results: Trust Questions	226
Trust Question—Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs.....	227
Trust Question—Your health care provider was always thoughtful and thorough	230
Trust Question—You completely trusted your health care providers decisions about which medical treatments were best for you	233
Trust Question—Your health care provider was completely honest in telling you about all of the different treatment options available for your condition	236
Trust Question—All in all, you had complete trust in your health care provider	239
Trust Question—Your health care provider did not refer you to a specialist when needed	242
Trust Question—You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.....	245
Trust Question—You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.....	248

Executive Summary

The TRICARE Inpatient Satisfaction Survey (TRISS) reports on experiences of adults who receive medical, surgical, and obstetrics hospital inpatient services from the Military Health System’s 59 direct care (DC) military treatment facilities (MTFs) and through its civilian network of providers, which is also known as purchased care (PC). This report summarizes survey results from a sample of hospital inpatients discharged between July 1, 2008 and September 30, 2008. The survey sample consisted of 41,254 TRICARE inpatients of whom 27,167 received care from an MTF and 14,087 received care from a civilian facility that is part of the Military Health System (MHS) network of providers. Of the 41, 254 inpatients surveyed 14,889 responded to the survey, for an overall response rate of 36.2%.

The TRISS includes two questions that are generally accepted as 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 2008 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 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 2008 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.

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 HCAHPS respondents, of whom 65% rated their overall experience with a 9 or 10. Sixty percent (60%) of MHS beneficiaries indicated that they would definitely recommend the hospital to family and friends, compared with 70% of HCAHPS respondents who indicated that they would definitely recommend their hospital to family and friends. MHS satisfaction was significantly higher than civilian benchmark for both the Communication about Medications and Discharge Information HCAHPS 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. The proportion that rated their hospital a 9 or 10 was significantly lower among DC beneficiaries (53%) when compared with the HCAHPS civilian benchmark (65%). Similarly, a lower percentage of DC beneficiaries indicated that they would recommend the hospital to family and friends, compared with the HCAHPS civilian benchmark (57% vs. 70%). However, DC satisfaction was significantly higher than civilian benchmark for both Communication about Medications and Discharge Information composites. Across the Services, respondents who received obstetrics care were the least satisfied with their care (Table 1c).

Purchased Care Results: Tables 2a–b present results from the two overall satisfaction questions, the HCAHPS composites, and the DoD composites for PC beneficiaries. Similar to results for DC, beneficiaries who received care from the civilian network of providers were less likely than the HCAHPS civilian benchmark to rate their hospital a 9 or 10 (61% vs. 65%) and less likely to recommend the hospital to family and friends (65% vs. 70%). 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.

Trust Results: Results from the trust questions, shown in Tables 3a–c (DC) and 4a–b (PC), were similar for Direct Care and Purchased Care beneficiaries. In general, the proportion of beneficiaries with most positive responses was high for the trust questions. More than 80% of MHS beneficiaries agreed with the statements, “All in all, you had complete trust in your health care provider,” “You thought your health care provider was thoughtful and thorough,” and “You completely trusted your health care provider’s decisions about which medical treatments were best for you.” A much smaller proportion of MHS beneficiaries *disagreed* with the statement, “You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care” (32% for DC; 38% for PC). For Direct Care beneficiaries, trust levels were consistent across product types and services. For Purchased Care beneficiaries, trust levels were consistent across product types and regions.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

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

	DC Overall 2008 ¹	2008 Civilian HCAHPS Benchmark	DC Medical	DC Surgical	DC Obstetric	Army ¹	Navy ¹	Air Force ¹	DC Overall 2007
Overall Satisfaction									
Overall Hospital Rating	53.3	64.9	61.0	61.9	41.1	51.2	54.0	58.8	51%
Recommend Hospital	56.8	69.9	64.0	66.2	44.6	54.4	59.9	59.1	54%
HCAHPS Composites									
Nurse Communication	68.9	74.1	73.3	75.2	60.8	67.9	68.8	72.1	66%
Doctor Communication	76.3	79.0	75.7	84.0	71.9	75.7	75.9	78.5	73%
Communication about Medications	67.3	58.1	66.7	71.1	65.4	66.7	69.2	65.8	65%
Responsiveness of Hospital Staff	62.2	61.7	62.6	65.6	59.5	60.0	64.5	64.4	59%
Pain Management	61.6	69.0	60.1	69.7	57.6	60.5	62.0	64.2	60%
Discharge Information	83.9	80.9	80.4	88.9	84.0	83.8	83.8	84.5	83%
DoD Composites²									
Your Family and Friends	81.5	N/A	85.1	87.4	75.3	81.0	80.5	84.6	79%
Interaction with Other Hospital Staff	70.5	N/A	71.0	75.3	66.0	71.9	68.3	70.3	67%
Patient Safety	65.9	N/A	69.7	70.9	59.3	66.9	64.3	65.6	63%

¹Numbers in **bold** text are significantly different from the 2008 civilian HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the 2008 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 2008 Inpatients

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

	DC Overall 2008 ¹	2008 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	53.3	64.9	60.3	60.1	34.8	58.0	62.5	47.0	68.1	68.2	45.8
Recommend Hospital	56.8	69.9	63.2	64.5	37.3	62.7	68.3	53.8	68.9	69.1	45.3
HCAHPS Composites											
Nurse Communication	68.9	74.1	71.5	74.6	58.8	72.9	77.3	61.8	79.9	73.7	64.3
Doctor Communication	76.3	79.0	75.8	83.5	69.7	74.0	84.9	72.9	78.4	84.2	75.6
Communication about Medications	67.3	58.1	67.2	69.6	63.6	66.1	74.3	68.6	66.0	69.9	63.5
Responsiveness of Hospital Staff	62.2	61.7	60.6	62.8	57.0	62.6	70.7	62.5	68.9	67.0	60.1
Pain Management	61.6	69.0	59.7	70.2	54.2	58.0	70.3	59.8	65.4	66.6	62.5
Discharge Information	83.9	80.9	80.4	88.2	84.0	79.4	89.6	84.1	82.1	89.9	83.9
DoD Composites²											
Your Family and Friends	81.5	N/A	85.1	86.5	73.6	82.3	89.9	75.3	89.8	86.1	79.9
Interaction with Other Hospital Staff	70.5	N/A	72.5	75.5	67.4	66.7	75.9	65.0	72.7	73.8	65.1
Patient Safety	65.9	N/A	70.1	71.4	60.1	66.6	69.3	60.2	73.2	72.1	55.5

¹Numbers in **bold** text are significantly different from the 2008 civilian HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the 2008 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 2008 Inpatients

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

	OCONUS ² Overall ³	2008 Civilian HCAHPS Benchmark	OCONUS Army ³	OCONUS Navy ³	OCONUS Air Force ³	OCONUS Alaska ³	OCONUS Europe ³	OCONUS Pacific ³
Overall Satisfaction								
Overall Hospital Rating	55.8	64.9	59.1	44.1	60.1	62.0	57.6	47.3
Recommend Hospital	62.5	69.9	66.6	53.2	64.2	68.0	66.4	53.5
HCAHPS Composites								
Nurse Communication	74.7	74.1	76.9	72.4	74.0	71.4	80.1	71.2
Doctor Communication	81.8	79.0	81.2	82.6	83.6	82.4	82.8	81.7
Communication about Medications	71.2	58.1	76.5	70.0	66.0	65.8	74.2	72.7
Responsiveness of Hospital Staff	68.5	61.7	64.5	72.3	70.6	63.7	66.9	73.0
Pain Management	67.2	69.0	64.1	67.5	71.4	62.9	65.2	71.2
Discharge Information	86.4	80.9	87.9	83.7	87.0	89.1	86.9	84.1
DoD Composites⁴								
Your Family and Friends	86.4	N/A	86.3	85.5	87.3	87.2	86.2	85.8
Interaction with Other Hospital Staff	72.7	N/A	75.2	69.2	72.0	68.4	76.7	69.9
Patient Safety	66.7	N/A	71.0	61.5	64.7	63.9	71.6	62.3

¹Survey responses were not obtained from MHS beneficiaries in Latin America; therefore, this 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 **bold text** are significantly different from the 2008 civilian HCAHPS benchmark.

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 2008 Inpatients

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

	PC Overall 2008 ¹	2008 Civilian HCAHPS Benchmark	PC Medical	PC Surgical	PC Obstetric		North ¹	South ¹	West ¹		PC Overall 2007
Overall Satisfaction											
Overall Hospital Rating	60.9	64.9	58.5	66.9	56.5		58.2	63.0	61.3		60%
Recommend Hospital	64.8	69.9	59.9	70.4	66.1		63.3	65.2	65.6		64%
HCAHPS Composites											
Nurse Communication	69.1	74.1	65.6	72.6	71.0		68.7	70.3	68.2		68%
Doctor Communication	75.0	79.0	68.7	80.6	79.4		74.8	75.1	75.2		75%
Communication about Medications	61.6	58.1	55.2	65.1	68.8		63.3	59.8	61.2		61%
Responsiveness of Hospital Staff	56.5	61.7	48.1	57.7	68.5		55.4	56.3	57.4		57%
Pain Management	66.0	69.0	59.4	70.1	68.7		64.1	67.1	67.0		65%
Discharge Information	82.1	80.9	75.5	88.8	84.7		80.8	81.7	83.7		82%
DoD Composites²											
Your Family and Friends	83.5	N/A	80.6	87.0	83.8		83.3	84.6	82.4		83%
Interaction with Other Hospital Staff	76.7	N/A	73.5	80.0	79.8		77.8	76.9	75.3		75%
Patient Safety	70.6	N/A	68.0	73.5	71.6		70.0	71.8	70.0		68%

¹Numbers in **bold text** are significantly different from the 2008 civilian HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the 2008 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 2008 Inpatients

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

	PC Overall 2008¹	2008 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	60.9	64.9	57.5	67.5	47.8	60.4	67.6	59.8	57.4	65.2	63.1
Recommend Hospital	64.8	69.9	60.1	70.3	61.1	59.9	70.6	67.0	59.4	70.9	69.6
HCAHPS Composites											
Nurse Communication	69.1	74.1	65.5	72.5	70.2	66.6	73.9	71.8	64.8	71.0	70.8
Doctor Communication	75.0	79.0	69.0	82.1	77.3	67.9	81.1	80.1	69.2	79.1	81.2
Communication about Medications	61.6	58.1	57.3	65.9	72.6	53.5	65.5	62.9	54.2	62.9	71.3
Responsiveness of Hospital Staff	56.5	61.7	46.9	54.9	69.6	47.0	59.8	66.7	50.3	57.6	68.6
Pain Management	66.0	69.0	59.7	67.6	65.4	57.6	73.4	70.2	60.9	69.2	71.6
Discharge Information	82.1	80.9	74.2	87.0	85.6	74.6	88.9	83.7	78.0	90.5	83.7
DoD Composites²											
Your Family and Friends	83.5	N/A	82.2	87.7	80.0	80.7	88.0	87.0	78.4	85.5	85.4
Interaction with Other Hospital Staff	76.7	N/A	75.3	80.8	79.5	73.1	80.5	80.3	71.6	78.6	80.6
Patient Safety	70.6	N/A	67.7	74.0	69.5	69.5	74.5	72.1	66.7	71.7	74.0

¹Numbers in bold text are significantly different from the 2008 civilian (HCAHPS benchmark. Statistical tests to examine differences between Product Line (Medical, Surgical, and Obstetrics) and the 2008 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 2008 Inpatients

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	76.8	76.9	83.1	72.9	76.5	76.4	78.6
Your health care provider was always thoughtful and thorough.	86.1	85.6	92.1	83.0	85.5	86.4	87.7
You completely trusted your health care provider's decisions about which medical treatments were best for you.	85.4	84.0	92.3	82.4	84.9	84.8	88.2
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	85.8	83.1	92.6	84.2	84.8	86.1	88.4
All in all, you had complete trust in your health care provider.	86.0	84.3	93.2	83.0	85.5	85.8	87.7
Your health care provider did not refer you to a specialist when needed.¹	57.1	61.8	64.1	48.7	56.2	58.5	57.8
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	84.8	84.5	91.0	81.3	84.1	85.0	86.7
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.¹	32.2	33.9	40.9	25.3	30.9	33.7	33.6

¹Numbers in these rows represent the percentage of respondents who either "strongly disagreed" or "somewhat 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 2008 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	76.9	82.8	71.2	76.8	82.0	73.4	77.0	86.2	76.2
Your health care provider was always thoughtful and thorough.	85.1	92.2	80.8	86.9	91.0	83.9	84.9	93.9	87.1
You completely trusted your health care provider's decisions about which medical treatments were best for you.	83.8	92.7	80.1	82.5	91.3	83.2	87.1	93.1	86.7
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	81.9	92.3	82.3	84.1	91.3	85.0	85.1	95.9	87.5
All in all, you had complete trust in your health care provider.	84.1	92.8	81.4	84.7	93.3	83.1	84.6	94.3	87.1
Your health care provider did not refer you to a specialist when needed. ¹	60.2	63.6	46.2	62.3	64.5	52.9	66.2	65.1	46.7
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	83.7	90.0	80.2	85.0	91.9	81.6	86.0	93.6	83.8
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care. ¹	32.0	37.9	24.3	36.5	47.4	25.2	35.9	40.5	28.0

¹Numbers in these rows represent the percentage of respondents who either "strongly disagreed" or "somewhat 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 2008 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	80.3	82.6	77.6	82.0	81.1	82.2	79.3
Your health care provider was always thoughtful and thorough.	92.8	92.8	93.3	94.4	91.2	94.4	93.6
You completely trusted your health care provider's decisions about which medical treatments were best for you.	90.5	88.2	89.2	95.9	89.5	92.2	89.7
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	88.7	87.6	88.0	91.4	87.9	90.3	87.8
All in all, you had complete trust in your health care provider.	88.8	87.4	87.1	93.1	89.0	88.0	89.4
Your health care provider did not refer you to a specialist when needed. ³	51.7	53.4	55.0	46.6	42.9	56.4	52.9
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	87.5	85.7	84.2	93.6	91.6	86.9	85.3
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care. ³	33.0	33.5	31.9	30.9	32.9	32.5	31.6

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 either "strongly disagreed" or "somewhat 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 2008 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	74.9	69.2	80.1	78.6	75.7	74.7	74.1
Your health care provider was always thoughtful and thorough.	86.4	82.9	89.9	88.2	87.1	86.3	85.8
You completely trusted your health care provider's decisions about which medical treatments were best for you.	86.9	82.8	92.3	86.8	86.9	86.7	86.9
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	85.3	80.5	90.4	87.0	85.6	85.9	84.2
All in all, you had complete trust in your health care provider.	88.4	84.4	93.4	88.9	88.7	88.1	88.3
Your health care provider did not refer you to a specialist when needed. ¹	59.4	59.9	64.9	49.1	59.9	57.6	61.2
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	87.1	84.5	91.4	85.9	87.3	87.2	86.7
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care. ¹	38.2	34.8	42.4	38.5	38.0	36.5	39.8

¹Numbers in these rows represent the percentage of respondents who either "strongly disagreed" or "somewhat 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 2008 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	70.6	83.0	76.6	67.6	79.7	81.7	68.6	77.9	78.8
Your health care provider was always thoughtful and thorough.	84.3	91.7	86.5	82.4	88.9	90.3	81.5	89.7	88.1
You completely trusted your health care provider's decisions about which medical treatments were best for you.	83.5	93.4	85.5	81.8	92.2	87.4	82.7	91.8	87.5
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition.	81.8	90.8	86.5	80.5	91.1	88.1	78.7	89.7	86.2
All in all, you had complete trust in your health care provider.	85.3	94.8	87.9	83.5	93.5	88.3	84.0	92.3	90.6
Your health care provider did not refer you to a specialist when needed.¹	60.0	69.4	47.5	59.2	62.1	44.8	60.3	64.8	56.7
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems.	85.0	92.8	84.8	83.6	91.0	88.5	84.5	90.4	84.9
You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.¹	35.8	43.8	35.2	31.4	41.0	40.0	36.9	42.7	40.7

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

How to Read the DoD TRISS Report

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Composite: Communication with Nurses

How often did nurses treat you with courtesy and respect?

Survey composites and questions

Current reporting period

2008 Sample size

Never + Sometimes Usually Always

Answer choices

Overall results

	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	75%			78%
2007	75%			
2006	75%			

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.

	2008	2007	2006	2008	HCAHPS Civilian Benchmark 2008
Military Health Systems (Overall)	50%	50%	50%	(n = 788) 25% 25% 50%	↓
Direct Care	50%	50%	50%	(n = 358) 25% 25% 50%	↓
Purchased Care	50%	50%	50%	(n = 430) 25% 25% 50%	↓
CONUS	50%	50%	50%	(n = 230) 25% 25% 50%	↓
OCONUS	50%	50%	50%	(n = 130) 25% 25% 50%	↓
Direct Care, Military Service					
Army	50%	50%	50%	(n = 230) 25% 25% 50%	↓
Navy	50%	50%	50%	(n = 130) 25% 25% 50%	↓
Air Force	50%	50%	50%	(n = 70) 25% 25% 50%	↓
Purchased Care, TRICARE Regions					
North	50%	50%	50%	(n = 158) 25% 25% 50%	↓
South	50%	50%	50%	(n = 79) 25% 25% 50%	↓
West	50%	50%	50%	(n = 121) 25% 25% 50%	↓
Direct Care, Age					
18–44	50%	50%	50%	(n = 264) 25% 25% 50%	↑
45–64	50%	50%	50%	(n = 98) 25% 25% 50%	↑
65+	50%	50%	50%	(n = 430) 25% 25% 50%	↑
Purchased Care, Age					
18–44	50%	50%	50%	(n = 149) 25% 25% 50%	↓
45–64	50%	50%	50%	(n = 91) 25% 25% 50%	↓
65+	50%	50%	50%	(n = 118) 25% 25% 50%	↓

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 2006 HCAHPS civilian score.

The percentage of most positive responses is provided for each HCAHPS question and composite included in the TRISS in 2008, 2007 and 2006 for visual analysis of trends. Because 2008 was the first time the 8 Trust questions were administered on the TRISS, no trend data are available for the Trust questions in this report.

The percentage of most positive responses is provided for each HCAHPS question and composite in the 2008 HCAHPS civilian survey. Arrows in the column represent MHS scores that are higher or lower than the HCAHPS civilian score. Civilian benchmark data are not available for DoD questions or Composites, or for the Trust questions; therefore, this column is not shown 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 2008 Inpatients

Composite: Communication with Nurses (continued)

How often did nurses treat you with courtesy and respect?



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			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 2006 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, 2008, through September 30, 2008. The 2008 TRISS sample included 27,099 beneficiaries who had an inpatient hospital stay at a military treatment facility and 13,980 beneficiaries who received care at a civilian facility that is part of the MHS network of providers. 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 2008 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 2008 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 2008 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 2008 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 this 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 2008 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.

HCAHPS is the civilian benchmark to which DoD was compared. Statistical tests were conducted to evaluate differences between the HCAHPS 2008 results and the 2008 TRISS results. Results from the 2006 and 2007 TRISS Surveys are provided to allow for visual analysis of trends. Below each set of tables, narrative text describes statistically significant findings.

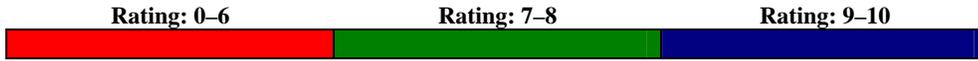
TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

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 2008 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	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	56%			65%
2007	54%			
2006	51%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	54%	(n = 14428)	13% 31% 56%	↓
Direct Care	51%	(n = 7870)	14% 32% 53%	↓
Purchased Care	60%	(n = 6558)	12% 27% 61%	↓
CONUS	54%	(n = 13771)	14% 30% 56%	↓
OCONUS	55%	(n = 657)	10% 34% 56%	↓
Direct Care, Military Service²				
Army	48%	(n = 3880)	16% 33% 51%	↓
Navy	51%	(n = 2370)	13% 33% 54%	↓
Air Force	59%	(n = 1620)	12% 29% 59%	↓
Purchased Care, TRICARE Regions				
North	59%	(n = 2279)	13% 28% 58%	↓
South	60%	(n = 2103)	11% 26% 63%	↓
West	60%	(n = 2094)	11% 27% 61%	↓
Direct Care, Age³				
18–44	42%	(n = 3582)	18% 38% 45%	↓
45–64	66%	(n = 2281)	7% 24% 69%	↑
65+	79%	(n = 2007)	5% 13% 82%	↑
Purchased Care, Age⁴				
18–44	55%	(n = 974)	14% 31% 55%	↓
45–64	60%	(n = 1615)	12% 26% 63%	↓
65+	64%	(n = 3969)	10% 25% 65%	↓

- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries, those in Air Force facilities were significantly more likely than those in Army or Navy facilities to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries, those aged 65+ were significantly more likely than those in other age groups to rate their hospital a 9 or 10 ($p < .05$). Also, those aged 18–44 were significantly less likely than those 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 those 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 2008 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)



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical									
Direct Care	59%	(n = 3281)	10%	29%	61%				↓
Purchased Care	56%	(n = 3233)	14%	27%	58%				↓
Surgical									
Direct Care	58%	(n = 2197)	10%	28%	62%				↓
Purchased Care	68%	(n = 2717)	9%	24%	67%				
Obstetrics⁵									
Direct Care	39%	(n = 2392)	21%	38%	41%				↓
Purchased Care	56%	(n = 608)	11%	32%	56%				↓
Direct Care (Army)⁶									
Medical	58%	(n = 1688)	10%	29%	60%				↓
Surgical	55%	(n = 1141)	11%	29%	60%				↓
Obstetric	33%	(n = 1051)	26%	40%	35%				↓
Direct Care (Navy)⁷									
Medical	58%	(n = 869)	11%	31%	58%				↓
Surgical	57%	(n = 638)	10%	28%	62%				
Obstetric	43%	(n = 863)	15%	38%	47%				↓
Direct Care (Air Force)⁸									
Medical	66%	(n = 724)	7%	25%	68%				
Surgical	68%	(n = 418)	7%	25%	68%				
Obstetric	46%	(n = 478)	19%	35%	46%				↓

- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to rate their hospital a 9 or 10 ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical 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 2008 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)



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁹				
Medical	55%	(n = 1198)	14% 28% 57%	↓
Surgical	68%	(n = 839)	9% 23% 68%	
Obstetric	56%	(n = 242)	17% 35% 48%	↓
Purchased Care (South)				
Medical	58%	(n = 1030)	14% 26% 60%	↓
Surgical	69%	(n = 912)	8% 24% 68%	
Obstetric	49%	(n = 161)	9% 32% 60%	
Purchased Care (West)				
Medical	54%	(n = 981)	15% 28% 57%	↓
Surgical	67%	(n = 922)	10% 25% 65%	
Obstetric	61%	(n = 191)	7% 30% 63%	
Direct Care (OCONUS), Service				
Army	58%	(n = 168)	6% 35% 59%	
Navy	48%	(n = 208)	16% 40% 44%	↓
Air Force	57%	(n = 199)	10% 30% 60%	
Direct Care (OCONUS), Region				
Alaska	58%	(n = 168)	7% 31% 62%	
Europe	59%	(n = 177)	7% 36% 58%	
Pacific	49%	(n = 229)	16% 37% 47%	↓
Coast Guard Sponsored Sample Member				
Direct Care	38%	(n = 90)	9% 34% 58%	
Purchased Care	59%	(n = 111)	9% 28% 63%	

9. Among Purchased Care beneficiaries in the North, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to rate their hospital a 9 or 10 ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 2008 HCAHPS civilian score.

Overall Satisfaction: Willingness to Recommend

Would you recommend this hospital to your friends and family?



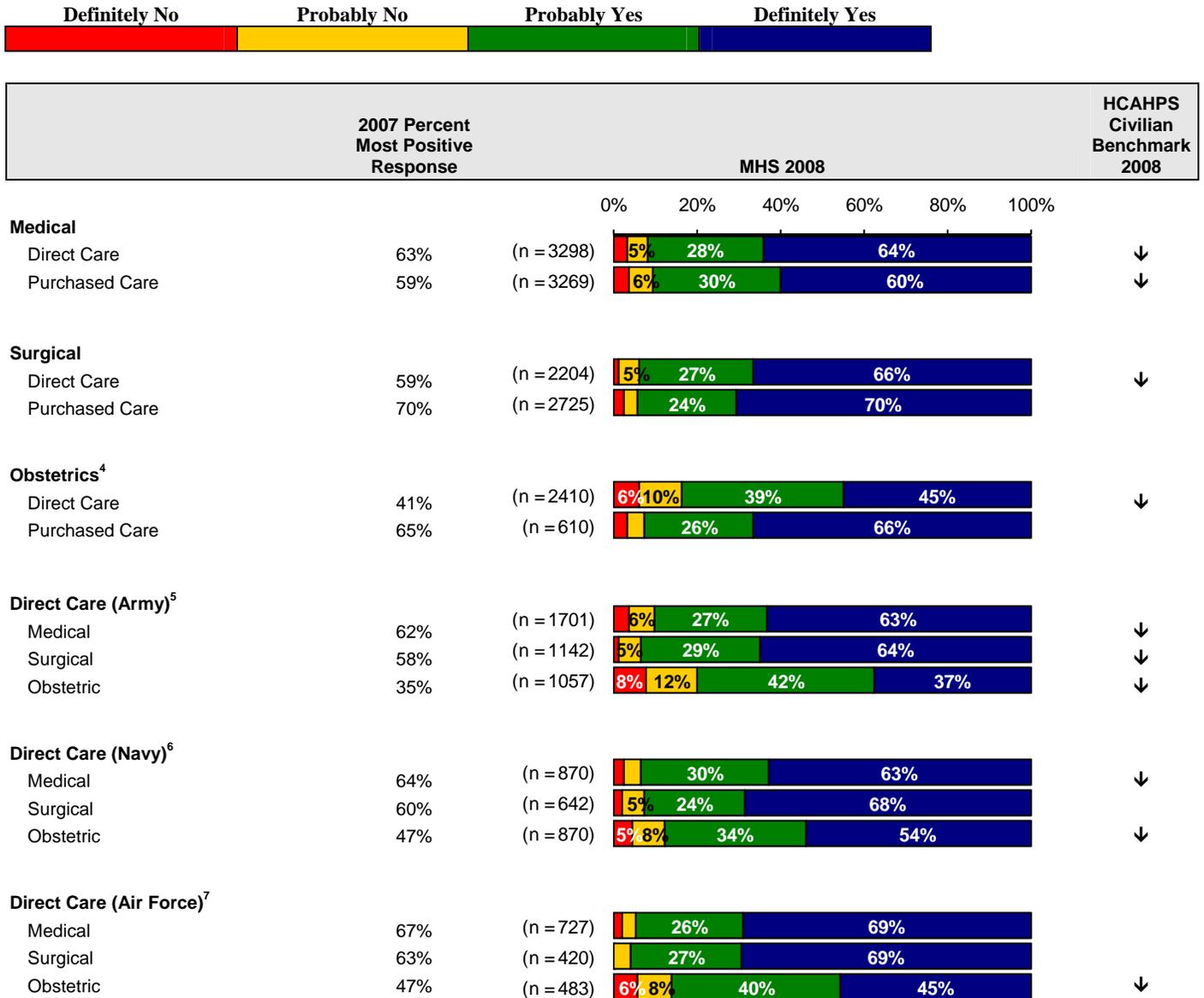
	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	60%							70%	
2007	57%								
2006	57%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	57%	(n = 14516)	5%	30%		60%		↓	
Direct Care	54%	(n = 7912)	7%	32%		57%		↓	
Purchased Care	64%	(n = 6604)	5%	27%		65%		↓	
CONUS	57%	(n = 13857)	6%	30%		59%		↓	
OCONUS	60%	(n = 659)	5%	30%		63%		↓	
Direct Care, Military Service²									
Army	51%	(n = 3900)	5%	8%	33%	54%		↓	
Navy	55%	(n = 2382)	6%	31%		60%		↓	
Air Force	58%	(n = 1630)	6%	32%		59%		↓	
Purchased Care, TRICARE Regions									
North	64%	(n = 2297)	5%	28%		63%		↓	
South	64%	(n = 2116)	4%	27%		65%		↓	
West	65%	(n = 2108)	5%	26%		66%		↓	
Direct Care, Age³									
18–44	45%	(n = 3601)	5%	9%	37%	49%		↓	
45–64	71%	(n = 2295)		23%		73%		↑	
65+	81%	(n = 2016)		15%		82%		↑	
Purchased Care, Age									
18–44	63%	(n = 979)	5%	5%	27%	63%		↓	
45–64	64%	(n = 1616)	4%	27%		65%		↓	
65+	65%	(n = 4009)		27%		66%		↓	

- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that they would definitely recommend this hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries, those in Army facilities were significantly less likely than those in Navy or Air Force facilities to report that they would definitely recommend this hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries, those aged 65+ were significantly more likely than those in other age groups to report that they would definitely recommend this hospital to friends and family ($p < .05$). Also, those aged 18–44 were significantly less likely than those in other age groups to report that they would definitely recommend this 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 2008 HCAHPS civilian score.

Overall Satisfaction: Willingness to Recommend (continued)

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

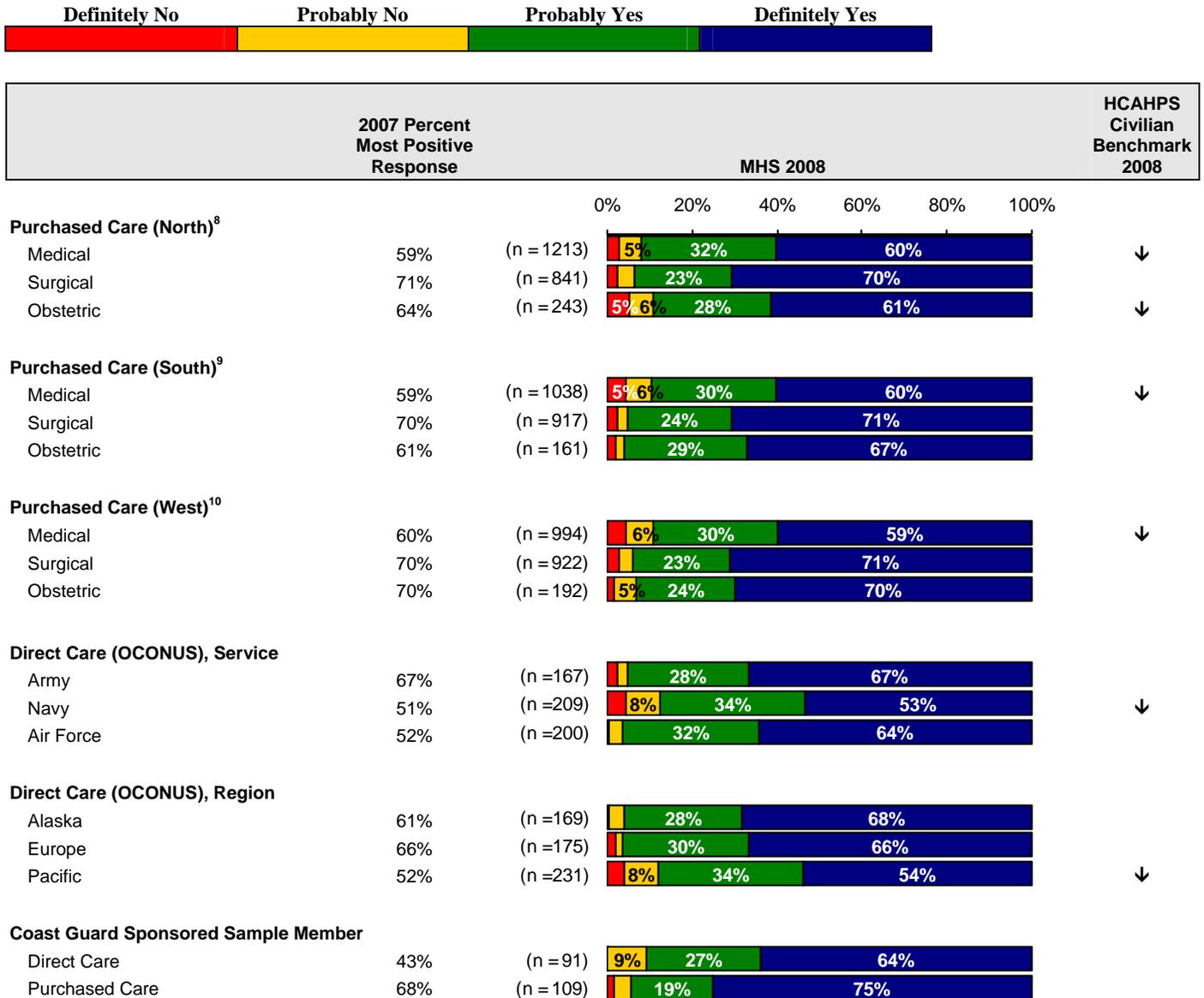


- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that they would definitely recommend this hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they would definitely recommend this hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they would definitely recommend this hospital to friends and family ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they would definitely recommend this 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 2008 HCAHPS civilian score.

Overall Satisfaction: Willingness to Recommend (continued)

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



8. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that they would definitely recommend this hospital to friends and family ($p < .05$).
9. Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical services to report that they would definitely recommend this hospital to friends and family ($p < .05$).
10. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they would definitely recommend this 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 2008 HCAHPS civilian score.

Survey Results:
HCAHPS Composites and Questions

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	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	69%							74%	
2007	66%								
2006	66%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	66%	(n=14767)	7%	24%		69%		↓	
Direct Care	66%	(n=8042)	8%	23%		69%		↓	
Purchased Care	68%	(n=6725)	7%	24%		69%		↓	
CONUS	66%	(n=14101)	8%	24%		69%		↓	
OCONUS ¹	73%	(n=666)	5%	21%		75%		↑	
Direct Care, Military Service²									
Army	64%	(n=3956)	8%	24%		68%		↓	
Navy	66%	(n=2428)	7%	24%		69%		↓	
Air Force	72%	(n=1658)	6%	22%		72%		↑	
Purchased Care, TRICARE Regions									
North	68%	(n=2340)	7%	24%		69%		↓	
South	68%	(n=2159)	6%	23%		70%		↓	
West	66%	(n=2143)	7%	24%		68%		↓	
Direct Care, Age³									
18–44	61%	(n=3642)	9%	26%		65%		↓	
45–64	76%	(n=2316)	18%			78%		↑	
65+	78%	(n=2084)	18%			78%		↑	
Purchased Care, Age									
18–44	67%	(n=987)	9%	23%		69%		↓	
45–64	70%	(n=1632)	7%	23%		71%		↓	
65+	67%	(n=4106)	6%	26%		69%		↓	

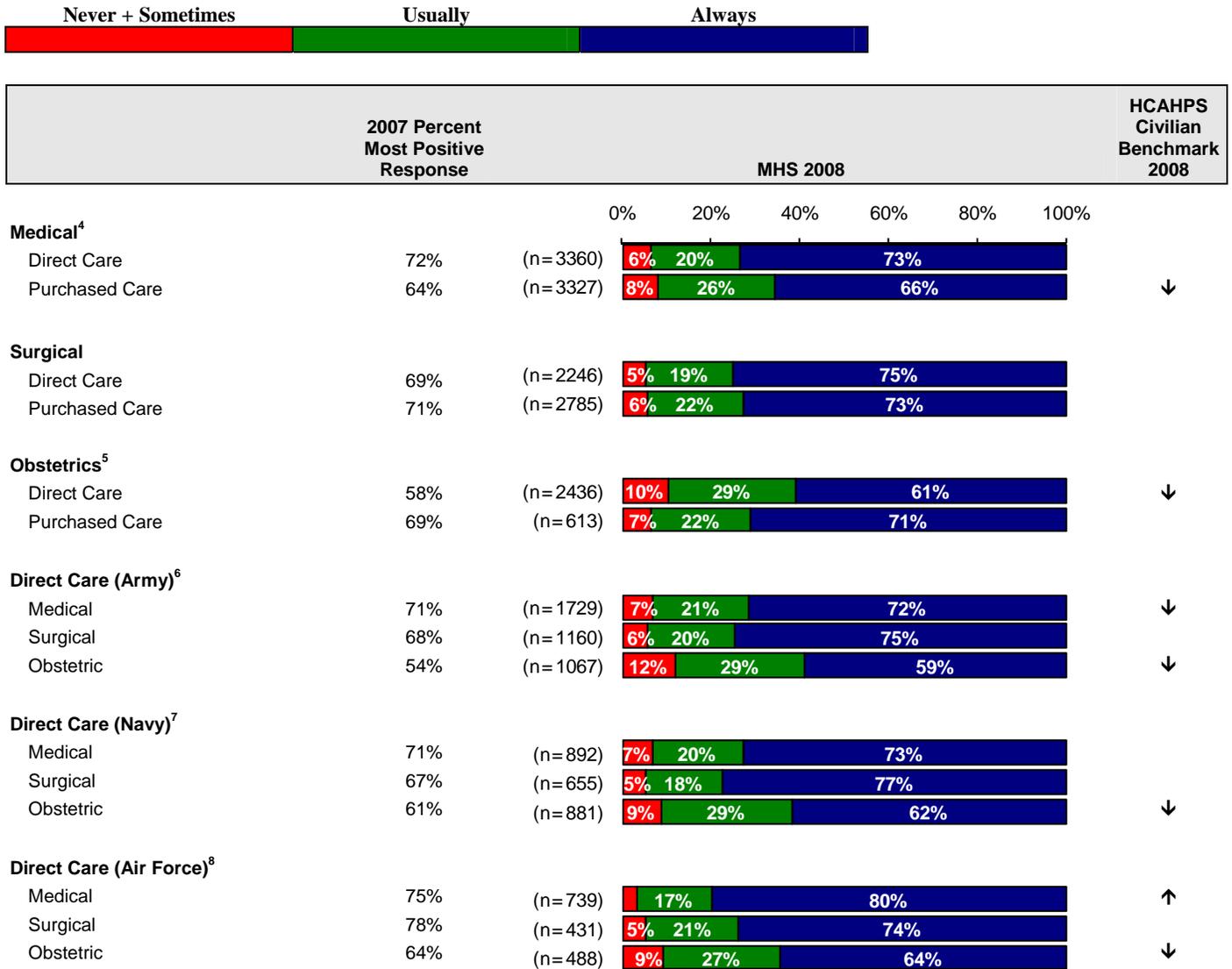
- Overall, beneficiaries receiving care OCONUS were significantly more likely than those receiving care in CONUS to report most positive responses to the Communication with Nurses composite ($p < .05$).
- Among Direct Care beneficiaries, those in the Air Force were significantly more likely than those in the Navy or Army to report most positive responses to the Communication with Nurses 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 Communication with Nurses 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 2008 HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

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 responses to the Communication with Nurses composite ($p < .05$).
- 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 Communication with Nurses composite ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Communication with Nurses composite ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Communication with Nurses composite ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Communication with Nurses 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 2008 HCAHPS civilian score.

Composite: Communication with Nurses (continued)

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



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁹				
Medical	64%	(n=1228)	9% 26% 66%	↓
Surgical	72%	(n=866)	5% 23% 72%	
Obstetric	72%	(n=246)	7% 23% 70%	
Purchased Care (South)¹⁰				
Medical	66%	(n=1061)	7% 26% 67%	↓
Surgical	72%	(n=937)	5% 21% 74%	
Obstetric	66%	(n=161)	6% 22% 72%	
Purchased Care (West)¹¹				
Medical	63%	(n=1014)	9% 27% 65%	↓
Surgical	70%	(n=937)	7% 22% 71%	↓
Obstetric	66%	(n=192)	6% 23% 71%	
Direct Care (OCONUS), Service				
Army	73%	(n=169)	19% 77%	
Navy	76%	(n=212)	5% 23% 72%	
Air Force	72%	(n=202)	5% 21% 74%	
Direct Care (OCONUS), Region¹²				
Alaska	69%	(n=170)	24% 71%	
Europe	75%	(n=179)	16% 80%	↑
Pacific	74%	(n=233)	5% 23% 71%	
Coast Guard Sponsored Sample Member				
Direct Care	51%	(n=91)	7% 21% 72%	
Purchased Care	74%	(n=113)	8% 22% 70%	

- 9. 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 Communication with Nurses composite ($p < .05$).
- 10. 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 Communication with Nurses 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 Communication with Nurses composite ($p < .05$).
- 12. Among Direct Care OCONUS beneficiaries, those receiving care in Europe were significantly more likely than those receiving care in Alaska or the Pacific to report most positive responses to the Communication with Nurses 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 2008 HCAHPS civilian score.

Composite: Communication with Nurses

How often did nurses treat you with courtesy and respect?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008
2008	76%						82%	
2007	73%							
2006	73%							
			0%	20%	40%	60%	80%	100%
Military Health Systems (Overall)	73%	(n = 14681)	5%	19%		76%		↓
Direct Care	72%	(n = 8000)	5%	20%		75%		↓
Purchased Care	76%	(n = 6681)		19%		77%		↓
CONUS	73%	(n = 14017)	5%	20%		75%		↓
OCONUS	79%	(n = 664)		16%		81%		
Direct Care, Military Service								
Army	70%	(n = 3936)	6%	20%		74%		↓
Navy	72%	(n = 2413)	5%	20%		75%		↓
Air Force	77%	(n = 1651)		19%		77%		↓
Purchased Care, TRICARE Regions								
North	77%	(n = 2320)	5%	19%		76%		↓
South	75%	(n = 2147)		18%		78%		↓
West	75%	(n = 2132)		19%		76%		↓
Direct Care, Age¹								
18–44	67%	(n = 3616)	6%	23%		70%		↓
45–64	82%	(n = 2307)		12%		85%		↑
65+	88%	(n = 2077)		11%		87%		↑
Purchased Care, Age								
18–44	73%	(n = 983)	5%	21%		74%		↓
45–64	78%	(n = 1624)	5%	17%		78%		↓
65+	77%	(n = 4074)		18%		79%		↓

1. Among Direct Care, 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 2008 HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses treat you with courtesy and respect?



	2007 Percent Most Positive Response	MHS 2008	MHS 2008					HCAHPS Civilian Benchmark 2008
			0%	20%	40%	60%	80%	
Medical²								
Direct Care	79%	(n = 3348)						
Purchased Care	74%	(n = 3305)						↓
Surgical								
Direct Care	76%	(n = 2236)						
Purchased Care	79%	(n = 2765)						
Obstetrics³								
Direct Care	63%	(n = 2416)						↓
Purchased Care	74%	(n = 611)						↓
Direct Care (Army)⁴								
Medical	79%	(n = 1722)						
Surgical	75%	(n = 1155)						
Obstetric	58%	(n = 1059)						↓
Direct Care (Navy)⁵								
Medical	78%	(n = 888)						
Surgical	73%	(n = 652)						
Obstetric	66%	(n = 873)						↓
Direct Care (Air Force)⁶								
Medical	82%	(n = 738)						↑
Surgical	83%	(n = 429)						
Obstetric	69%	(n = 484)						↓

- 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 facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always treated them with courtesy and respect ($p < .05$). Also, those receiving Medical services were significantly more likely than those receiving Obstetrics or Surgical 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 2008 HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses treat you with courtesy and respect?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)									
Medical	74%	(n = 1216)	6%	20%		74%			↓
Surgical	80%	(n = 859)	17%			81%			
Obstetric	78%	(n = 245)	5%	22%		74%			↓
Purchased Care (South)									
Medical	73%	(n = 1056)	5%	18%		77%			↓
Surgical	79%	(n = 930)	16%			81%			
Obstetric	70%	(n = 161)	21%			76%			
Purchased Care (West)									
Medical	74%	(n = 1010)	5%	21%		74%			↓
Surgical	78%	(n = 931)	5%	17%		78%			
Obstetric	72%	(n = 191)	20%			78%			
Direct Care (OCONUS), Service									
Army	78%	(n = 169)	14%			84%			
Navy	81%	(n = 212)	17%			79%			
Air Force	79%	(n = 201)	5%	17%		79%			
Direct Care (OCONUS), Region									
Alaska	72%	(n = 170)	18%			80%			
Europe	81%	(n = 178)	11%			86%			
Pacific	80%	(n = 233)	19%			77%			
Coast Guard Sponsored Sample Member									
Direct Care	58%	(n = 91)	6%	19%		74%			
Purchased Care	80%	(n = 112)	21%			75%			

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2008 HCAHPS civilian score.

Composite: Communication with Nurses

How often did nurses listen carefully to you?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	63%							71%	
2007	61%								
2006	60%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	61%	(n = 14689)	9%	28%		63%		↓	
Direct Care	60%	(n = 7993)	10%	27%		63%		↓	
Purchased Care	61%	(n = 6696)	8%	28%		64%		↓	
CONUS	60%	(n = 14025)	10%	28%		63%		↓	
OCONUS	68%	(n = 664)	6%	26%		68%			
Direct Care, Military Service									
Army	58%	(n = 3937)	11%	27%		62%		↓	
Navy	60%	(n = 2410)	9%	29%		62%		↓	
Air Force	67%	(n = 1646)	9%	25%		67%		↓	
Purchased Care, TRICARE Regions									
North	61%	(n = 2324)	9%	27%		64%		↓	
South	63%	(n = 2151)	8%	28%		64%		↓	
West	60%	(n = 2138)	8%	29%		63%		↓	
Direct Care, Age¹									
18–44	55%	(n = 3622)	12%	30%		58%		↓	
45–64	71%	(n = 2304)	6%	22%		72%			
65+	74%	(n = 2067)		22%		74%		↑	
Purchased Care, Age									
18–44	60%	(n = 983)	11%	25%		64%		↓	
45–64	64%	(n = 1624)	8%	27%		65%		↓	
65+	61%	(n = 4089)	6%	30%		63%		↓	

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

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2008 HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses listen carefully to you?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008
			0%	20%	40%	60%	80%	
Medical²								
Direct Care	68%	(n = 3337)	7%	25%		68%		↓
Purchased Care	59%	(n = 3307)	9%	30%		61%		↓
Surgical								
Direct Care	64%	(n = 2237)	6%	23%		71%		↓
Purchased Care	65%	(n = 2779)	7%	26%		67%		↓
Obstetrics³								
Direct Care	51%	(n = 2419)	14%	32%		53%		↓
Purchased Care	61%	(n = 610)	9%	27%		65%		↓
Direct Care (Army)⁴								
Medical	67%	(n = 1719)	8%	26%		66%		↓
Surgical	63%	(n = 1156)	6%	23%		70%		↓
Obstetric	46%	(n = 1062)	16%	32%		51%		↓
Direct Care (Navy)⁵								
Medical	66%	(n = 885)	8%	26%		67%		↓
Surgical	61%	(n = 652)	6%	23%		71%		↓
Obstetric	54%	(n = 873)	11%	35%		54%		↓
Direct Care (Air Force)⁶								
Medical	72%	(n = 733)		22%		74%		↓
Surgical	74%	(n = 429)	7%	22%		71%		↓
Obstetric	57%	(n = 484)	13%	29%		58%		↓

- 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 facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical 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 2008 HCAHPS civilian score.

Composite: Communication with Nurses (continued)

How often did nurses listen carefully to you?

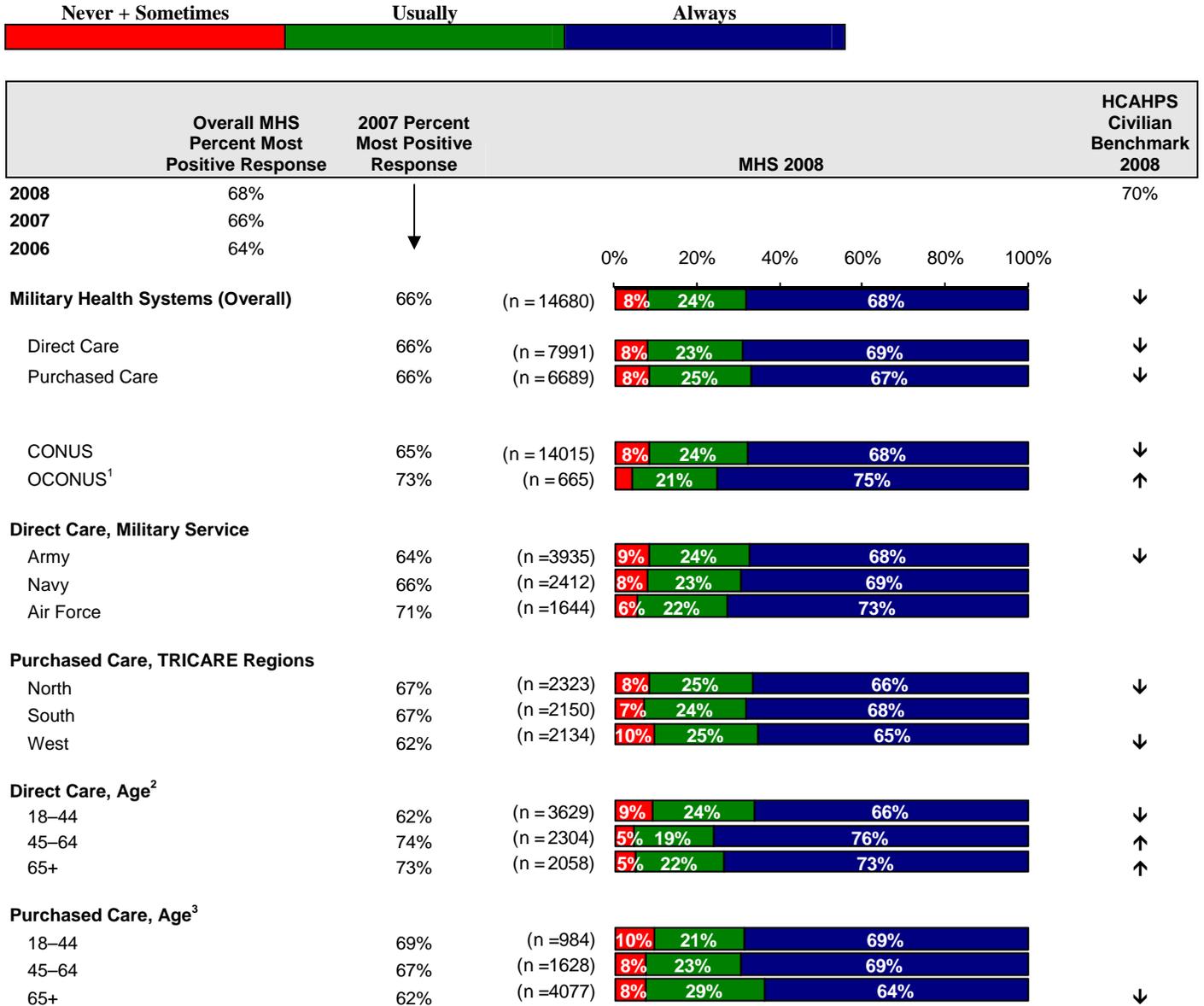


	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)									
Medical	58%	(n = 1216)	10%	29%		62%			↓
Surgical	65%	(n = 864)	7%	26%		67%			
Obstetric	63%	(n = 244)	10%	26%		64%			↓
Purchased Care (South)									
Medical	61%	(n = 1056)	9%	31%		61%			↓
Surgical	67%	(n = 935)	7%	25%		68%			
Obstetric	59%	(n = 160)	7%	27%		65%			
Purchased Care (West)									
Medical	57%	(n = 1011)	10%	31%		60%			↓
Surgical	65%	(n = 935)	7%	26%		67%			↓
Obstetric	59%	(n = 192)	8%	28%		64%			
Direct Care (OCONUS), Service									
Army	68%	(n = 169)	6%	26%		68%			
Navy	70%	(n = 212)	5%	29%		66%			
Air Force	66%	(n = 200)	8%	21%		71%			
Direct Care (OCONUS), Region									
Alaska	65%	(n = 169)	8%	26%		66%			
Europe	69%	(n = 178)		22%		74%			
Pacific	70%	(n = 233)	7%	29%		64%			
Coast Guard Sponsored Sample Member									
Direct Care	45%	(n = 91)	11%	20%		69%			
Purchased Care	67%	(n = 112)	12%	28%		61%			

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2008 HCAHPS civilian score.

Composite: Communication with Nurses

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

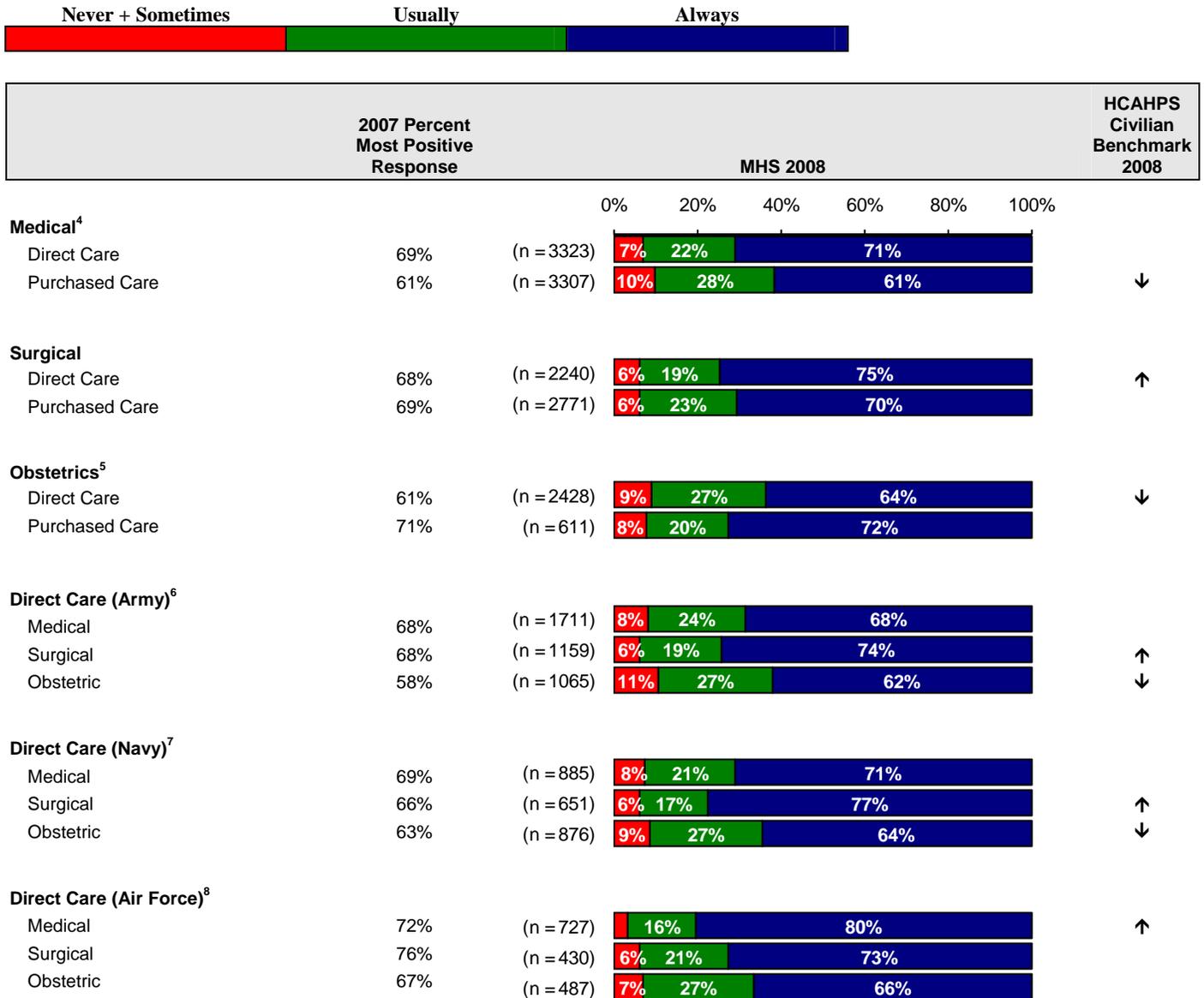


- Overall, beneficiaries receiving care OCONUS were significantly more likely than beneficiaries receiving care in CONUS to report that nurses always explained things in a way they could understand ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that nurses always explained things in a way they could understand ($p < .05$).
- Among Purchased Care, 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 2008 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 Purchased Care were significantly more likely than those in Direct Care to report that nurses always explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always explained things in a way they could understand ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that nurses always explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that nurses always explained things in a way they could understand ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that nurses always explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Medical services were significantly more likely than those receiving Surgical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Communication with Nurses (continued)

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



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁹									
Medical	60%	(n = 1220)	11%	28%		61%			↓
Surgical	70%	(n = 857)	5%	25%		70%			
Obstetric	74%	(n = 246)	7%	19%		73%			
Purchased Care (South)¹⁰									
Medical	64%	(n = 1055)	8%	29%		63%			↓
Surgical	70%	(n = 935)	6%	22%		72%			
Obstetric	70%	(n = 160)	8%	18%		74%			
Purchased Care (West)									
Medical	57%	(n = 1009)	11%	28%		61%			↓
Surgical	67%	(n = 934)	8%	24%		68%			
Obstetric	68%	(n = 191)	9%	22%		70%			
Direct Care (OCONUS), Service									
Army	72%	(n = 169)		17%		79%			↑
Navy	76%	(n = 212)	5%	23%		72%			
Air Force	71%	(n = 202)		25%		72%			
Direct Care (OCONUS), Region									
Alaska	69%	(n = 170)		28%		69%			
Europe	74%	(n = 179)	5%	16%		81%			↑
Pacific	73%	(n = 233)	5%	22%		72%			
Coast Guard Sponsored Sample Member									
Direct Care	51%	(n = 91)		23%		73%			
Purchased Care	75%	(n = 112)	8%	19%		73%			

9. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that nurses always explained things in a way they could understand ($p < .05$).
 10. Among Purchased Care beneficiaries in the South those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 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	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008
2008	76%							79%
2007	74%	↓						
2006	74%	↓						
			0%	20%	40%	60%	80%	100%
Military Health Systems (Overall)	74%	(n=14750)	6%	18%		76%		↓
Direct Care	73%	(n=8030)	6%	18%		76%		↓
Purchased Care	75%	(n=6720)	6%	19%		75%		↓
CONUS	73%	(n=14084)	6%	18%		75%		↓
OCONUS ¹	79%	(n=666)	15%			82%		↑
Direct Care, Military Service²								
Army	72%	(n=3951)	7%	17%		76%		↓
Navy	73%	(n=2429)	5%	19%		76%		↓
Air Force	75%	(n=1650)	5%	16%		78%		↑
Purchased Care, TRICARE Regions								
North	75%	(n=2341)	7%	18%		75%		↓
South	76%	(n=2157)	6%	19%		75%		↓
West	75%	(n=2139)	6%	19%		75%		↓
Direct Care, Age³								
18–44	69%	(n=3635)	7%	19%		73%		↓
45–64	82%	(n=2316)	14%			82%		↑
65+	83%	(n=2079)	13%			84%		↑
Purchased Care, Age⁴								
18–44	76%	(n=987)	8%	15%		77%		↓
45–64	75%	(n=1632)	7%	20%		72%		↓
65+	74%	(n=4101)	5%	20%		74%		↓

- Overall, beneficiaries receiving care OCONUS were significantly more likely than those receiving care in CONUS to report most positive responses to the Communication with Doctors composite ($p < .05$).
- Among Direct Care beneficiaries, those in Air Force facilities were significantly more likely than those in Army facilities to report most positive responses to the Communication with Doctors 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 Communication with Doctors 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 responses to the Communication with Doctors 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 2008 HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Composite: Communication with Doctors (continued)

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



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical⁵									
Direct Care	74%	(n=3352)	7%	18%				76%	↓
Purchased Care	69%	(n=3323)	8%	23%				69%	↓
Surgical⁶									
Direct Care	81%	(n=2248)		13%				84%	↑
Purchased Care	82%	(n=2784)		15%				81%	↑
Obstetrics⁷									
Direct Care	68%	(n=2430)	7%	21%				72%	↓
Purchased Care	77%	(n=613)	6%	15%				79%	
Direct Care (Army)⁸									
Medical	72%	(n=1726)	7%	17%				76%	↓
Surgical	80%	(n=1161)		12%				83%	↑
Obstetric	66%	(n=1064)	9%	22%				70%	↓
Direct Care (Navy)⁹									
Medical	75%	(n=892)	6%	20%				74%	↓
Surgical	79%	(n=656)		13%				85%	↑
Obstetric	69%	(n=881)	6%	21%				73%	↓
Direct Care (Air Force)¹⁰									
Medical	75%	(n=734)	6%	16%				78%	
Surgical	86%	(n=431)		13%				84%	↑
Obstetric	69%	(n=485)	6%	19%				76%	

- 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 Communication with Doctors composite ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Communication with Doctors composite ($p < .05$).
- 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 Communication with Doctors composite ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Communication with Doctors composite ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Surgical services to report most positive responses to the Communication with Doctors composite ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Surgical services to report most positive responses to the Communication with Doctors composite ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report most positive responses to the Communication with Doctors 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors (continued)

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



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)¹¹				
Medical	68%	(n= 1229)	8% 23% 69%	↓
Surgical	82%	(n= 866)	14% 82%	↑
Obstetric	76%	(n= 246)	7% 16% 77%	
Purchased Care (South)¹²				
Medical	70%	(n= 1059)	9% 23% 68%	↓
Surgical	82%	(n= 937)	15% 81%	
Obstetric	79%	(n= 161)	15% 80%	
Purchased Care (West)¹³				
Medical	68%	(n= 1011)	8% 23% 69%	↓
Surgical	81%	(n= 936)	5% 16% 79%	
Obstetric	76%	(n= 192)	6% 13% 81%	
Direct Care (OCONUS), Service				
Army	79%	(n= 169)	16% 81%	
Navy	82%	(n= 212)	15% 83%	
Air Force	77%	(n= 202)	13% 84%	
Direct Care (OCONUS), Region				
Alaska	74%	(n= 170)	5% 13% 82%	
Europe	80%	(n= 179)	16% 83%	
Pacific	81%	(n= 233)	15% 82%	
Coast Guard Sponsored Sample Member				
Direct Care	59%	(n= 92)	6% 16% 78%	
Purchased Care	84%	(n= 113)	5% 19% 76%	

11. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Medical services to report most positive responses to the Communication with Doctors composite (p<.05).
12. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Medical services to report most positive responses to the Communication with Doctors composite (p<.05).
13. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Medical services to report most positive responses to the Communication with Doctors 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors

How often did doctors treat you with courtesy and respect?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008		HCAHPS Civilian Benchmark 2008				
2008	81%				86%				
2007	79%								
2006	80%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	79%	(n = 14674)	15%	81%	↓				
Direct Care	78%	(n = 7982)	15%	81%	↓				
Purchased Care	81%	(n = 6692)	14%	82%	↓				
CONUS	79%	(n = 14012)	15%	81%	↓				
OCONUS	83%	(n = 662)	13%	85%					
Direct Care, Military Service									
Army	77%	(n = 3926)	5%	15%	80%	↓			
Navy	78%	(n = 2414)	16%	81%	↓				
Air Force	80%	(n = 1642)	12%	83%					
Purchased Care, TRICARE Regions									
North	81%	(n = 2330)	15%	81%	↓				
South	82%	(n = 2147)	13%	83%	↓				
West	82%	(n = 2132)	15%	81%	↓				
Direct Care, Age¹									
18–44	73%	(n = 3607)	5%	17%	78%	↓			
45–64	88%	(n = 2305)	11%	87%					
65+	91%	(n = 2070)	8%	91%	↑				
Purchased Care, Age²									
18–44	78%	(n = 981)	5%	14%	81%	↓			
45–64	82%	(n = 1631)	16%	79%	↓				
65+	83%	(n = 4080)	13%	84%	↓				

1. Among Direct Care, 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 ($p < .05$). Also, 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, those aged 65+ were significantly more likely than those in other age groups to report that doctors always treated them with courtesy and respect ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2008 HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors treat you with courtesy and respect?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008
			0%	20%	40%	60%	80%	
Medical³								
Direct Care	79%	(n = 3332)	14%				82%	↓
Purchased Care	77%	(n = 3306)	5%	17%			78%	↓
Surgical								
Direct Care	85%	(n = 2240)	10%				88%	↑
Purchased Care	88%	(n = 2776)	11%				86%	
Obstetrics⁴								
Direct Care	71%	(n = 2410)	6%	19%			75%	↓
Purchased Care	79%	(n = 610)	13%				82%	↓
Direct Care (Army)⁵								
Medical	79%	(n = 1716)	5%	13%			82%	↓
Surgical	85%	(n = 1157)	10%				87%	
Obstetric	70%	(n = 1053)	7%	21%			72%	↓
Direct Care (Navy)⁶								
Medical	81%	(n = 885)	16%				81%	↓
Surgical	83%	(n = 655)	11%				88%	
Obstetric	73%	(n = 874)	5%	19%			76%	↓
Direct Care (Air Force)								
Medical	79%	(n = 731)	12%				84%	
Surgical	91%	(n = 428)	8%				90%	
Obstetric	73%	(n = 483)	6%	15%			79%	↓

- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors 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 doctors always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that doctors always treated them with courtesy and respect ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Surgical services to report that doctors always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that doctors always treated them with courtesy and respect ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors treat you with courtesy and respect?



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁷				
Medical	76%	(n = 1223)	5% 18% 77%	↓
Surgical	89%	(n = 862)	10% 89%	↑
Obstetric	78%	(n = 245)	5% 15% 80%	
Purchased Care (South)⁸				
Medical	77%	(n = 1051)	6% 16% 78%	↓
Surgical	88%	(n = 935)	11% 87%	
Obstetric	81%	(n = 161)	12% 85%	
Purchased Care (West)				
Medical	79%	(n = 1008)	5% 17% 78%	↓
Surgical	88%	(n = 934)	13% 84%	
Obstetric	79%	(n = 190)	5% 12% 83%	
Direct Care (OCONUS), Service				
Army	84%	(n = 165)	16% 83%	
Navy	84%	(n = 212)	12% 86%	
Air Force	79%	(n = 202)	10% 89%	
Direct Care (OCONUS), Region				
Alaska	77%	(n = 169)	13% 86%	
Europe	84%	(n = 177)	13% 86%	
Pacific	84%	(n = 232)	13% 85%	
Coast Guard Sponsored Sample Member				
Direct Care	66%	(n = 92)	12% 84%	
Purchased Care	90%	(n = 113)	11% 86%	

- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors always treated them with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors

How often did doctors listen carefully to you?



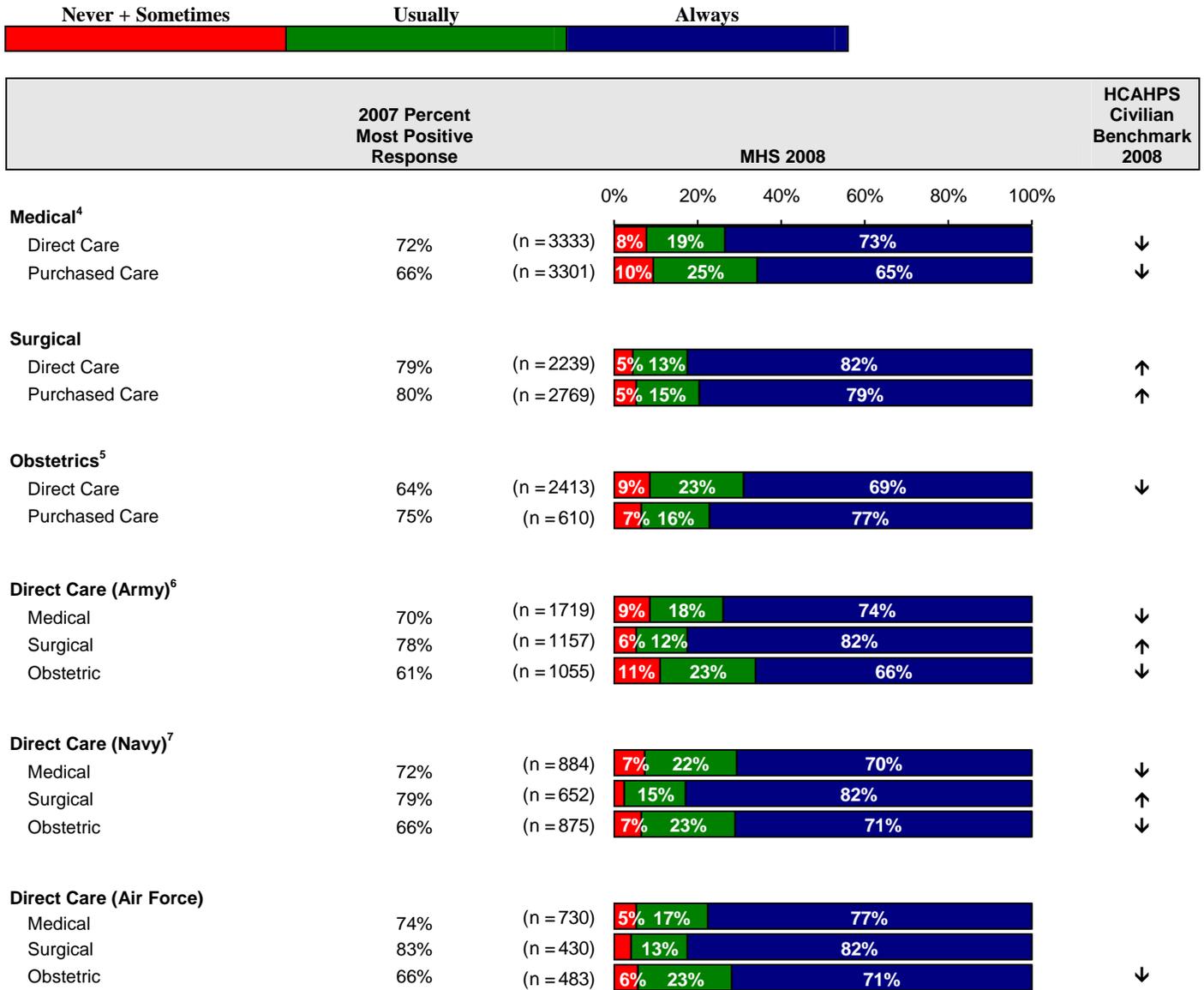
	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	73%							77%	
2007	71%								
2006	71%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	71%	(n = 14665)	7%	19%		73%		↓	
Direct Care	70%	(n = 7985)	7%	19%		74%		↓	
Purchased Care	73%	(n = 6680)	8%	20%		73%		↓	
CONUS	71%	(n = 14002)	8%	19%		73%		↓	
OCONUS ¹	77%	(n = 663)	17%			79%			
Direct Care, Military Service									
Army	69%	(n = 3931)	9%	18%		73%		↓	
Navy	71%	(n = 2411)	6%	21%		73%		↓	
Air Force	73%	(n = 1643)	5%	19%		76%			
Purchased Care, TRICARE Regions									
North	72%	(n = 2326)	8%	19%		72%		↓	
South	74%	(n = 2144)	7%	21%		72%		↓	
West	72%	(n = 2128)	7%	19%		74%		↓	
Direct Care, Age²									
18–44	66%	(n = 3614)	9%	21%		70%		↓	
45–64	79%	(n = 2304)	16%			81%		↑	
65+	81%	(n = 2067)	14%			83%		↑	
Purchased Care, Age³									
18–44	74%	(n = 982)	9%	16%		75%		↓	
45–64	73%	(n = 1623)	9%	22%		69%		↓	
65+	72%	(n = 4075)	6%	22%		72%		↓	

- Overall, beneficiaries receiving care OCONUS were significantly more likely than beneficiaries receiving care in CONUS to report that doctors always listened carefully to them ($p < .05$).
- 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 ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly more 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 2008 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 beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that doctors always listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that doctors always listened carefully to them ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors always listened carefully to them ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors (continued)

How often did doctors listen carefully to you?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁸									
Medical	65%	(n = 1224)	10%	24%	66%				↓
Surgical	81%	(n = 858)	6%	13%	80%				
Obstetric	73%	(n = 244)	9%	18%	74%				
Purchased Care (South)⁹									
Medical	68%	(n = 1050)	11%	26%	64%				↓
Surgical	79%	(n = 934)	5%	16%	80%				
Obstetric	78%	(n = 160)	5%	19%	76%				
Purchased Care (West)¹⁰									
Medical	65%	(n = 1004)	9%	25%	67%				↓
Surgical	79%	(n = 932)	5%	17%	79%				
Obstetric	74%	(n = 192)	6%	12%	82%				
Direct Care (OCONUS), Service									
Army	76%	(n = 169)	5%	15%	80%				
Navy	81%	(n = 210)	19%	79%					
Air Force	77%	(n = 202)	16%	81%					
Direct Care (OCONUS), Region									
Alaska	69%	(n = 170)	8%	11%	81%				
Europe	77%	(n = 178)	18%	80%					
Pacific	83%	(n = 232)	18%	79%					
Coast Guard Sponsored Sample Member									
Direct Care	54%	(n = 91)	7%	12%	80%				
Purchased Care	74%	(n = 112)	5%	23%	72%				

8. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors always listened carefully to them ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that doctors always listened carefully to them ($p < .05$).
9. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that doctors always listened carefully to them ($p < .05$).
10. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors

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



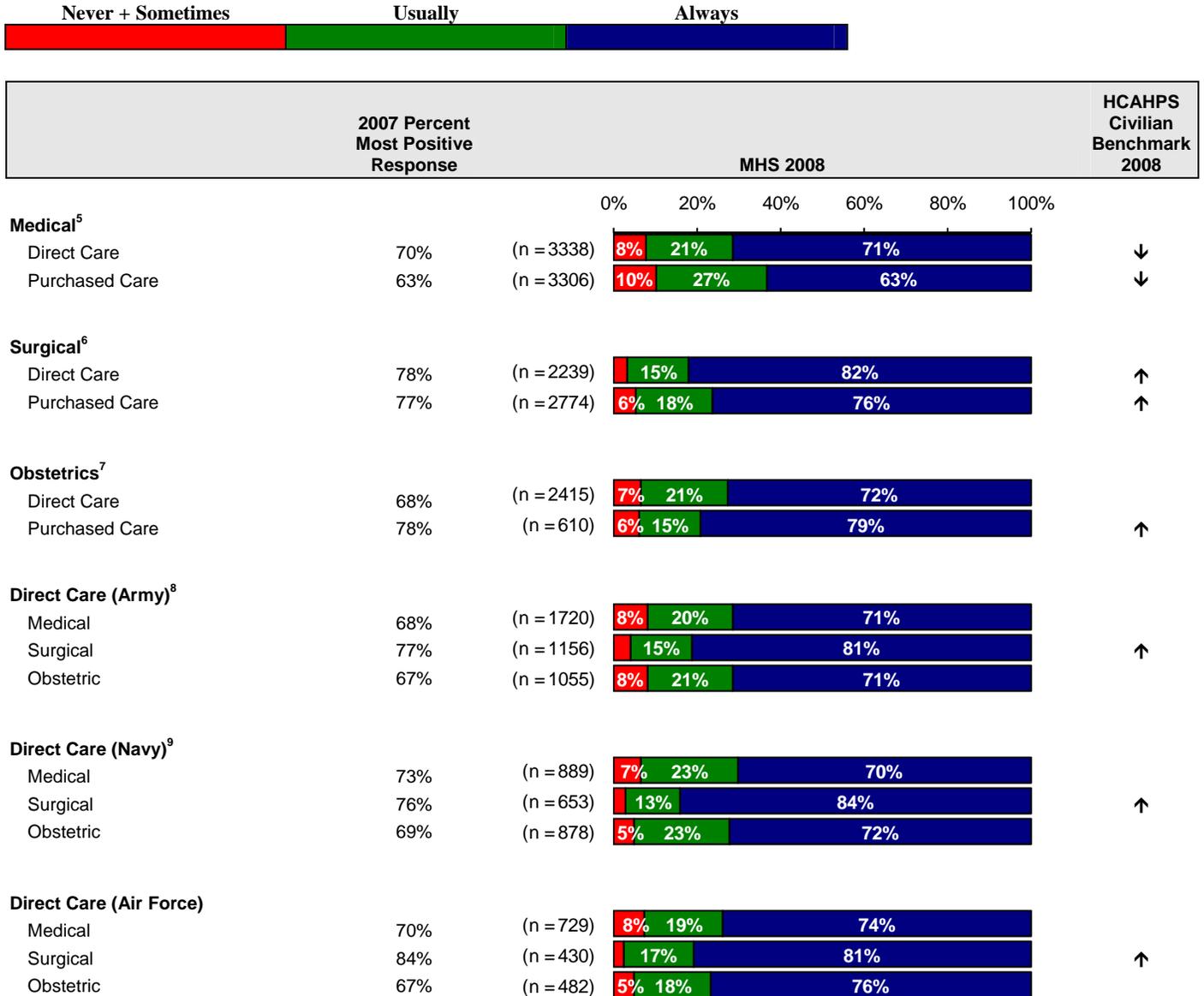
	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008
2008	73%						74%	
2007	71%							
2006	71%							
			0%	20%	40%	60%	80%	100%
Military Health Systems (Overall)¹	71%	(n = 14682)	7%	20%			73%	
Direct Care	71%	(n = 7992)	6%	19%			74%	
Purchased Care	71%	(n = 6690)	8%	21%			71%	
CONUS	70%	(n = 14018)	7%	20%			72%	
OCONUS ²	77%	(n = 664)	16%				81%	
Direct Care, Military Service								
Army	70%	(n = 3931)	7%	19%			74%	
Navy	72%	(n = 2420)	5%	21%			74%	
Air Force	72%	(n = 1641)	6%	18%			76%	
Purchased Care, TRICARE Regions								
North	71%	(n = 2328)	8%	21%			71%	
South	72%	(n = 2148)	8%	22%			71%	
West	70%	(n = 2131)	8%	22%			70%	
Direct Care, Age³								
18–44	68%	(n = 3617)	7%	20%			72%	
45–64	78%	(n = 2311)	17%				79%	
65+	76%	(n = 2064)	17%				79%	
Purchased Care, Age⁴								
18–44	75%	(n = 982)	9%	16%			76%	
45–64	71%	(n = 1626)	8%	23%			69%	
65+	67%	(n = 4082)	7%	25%			68%	

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that doctors always explained things in a way they could understand ($p < .05$).
- Overall, beneficiaries receiving care OCONUS were significantly more likely than beneficiaries receiving care in CONUS to report that doctors always explained things in a way they could understand ($p < .05$).
- 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 ($p < .05$).
- Among Purchased Care beneficiaries, those aged 18–44 were significantly more likely than those in other age groups to report that doctors always explained things in a way they could understand ($p < .05$).

Arrow represents statistically significant differences, at the 95% confidence level, from the HCAHPS civilian score. Your MHS score is: higher ↑ or lower ↓ than the 2008 HCAHPS civilian score.

Composite: Communication with Doctors (continued)

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

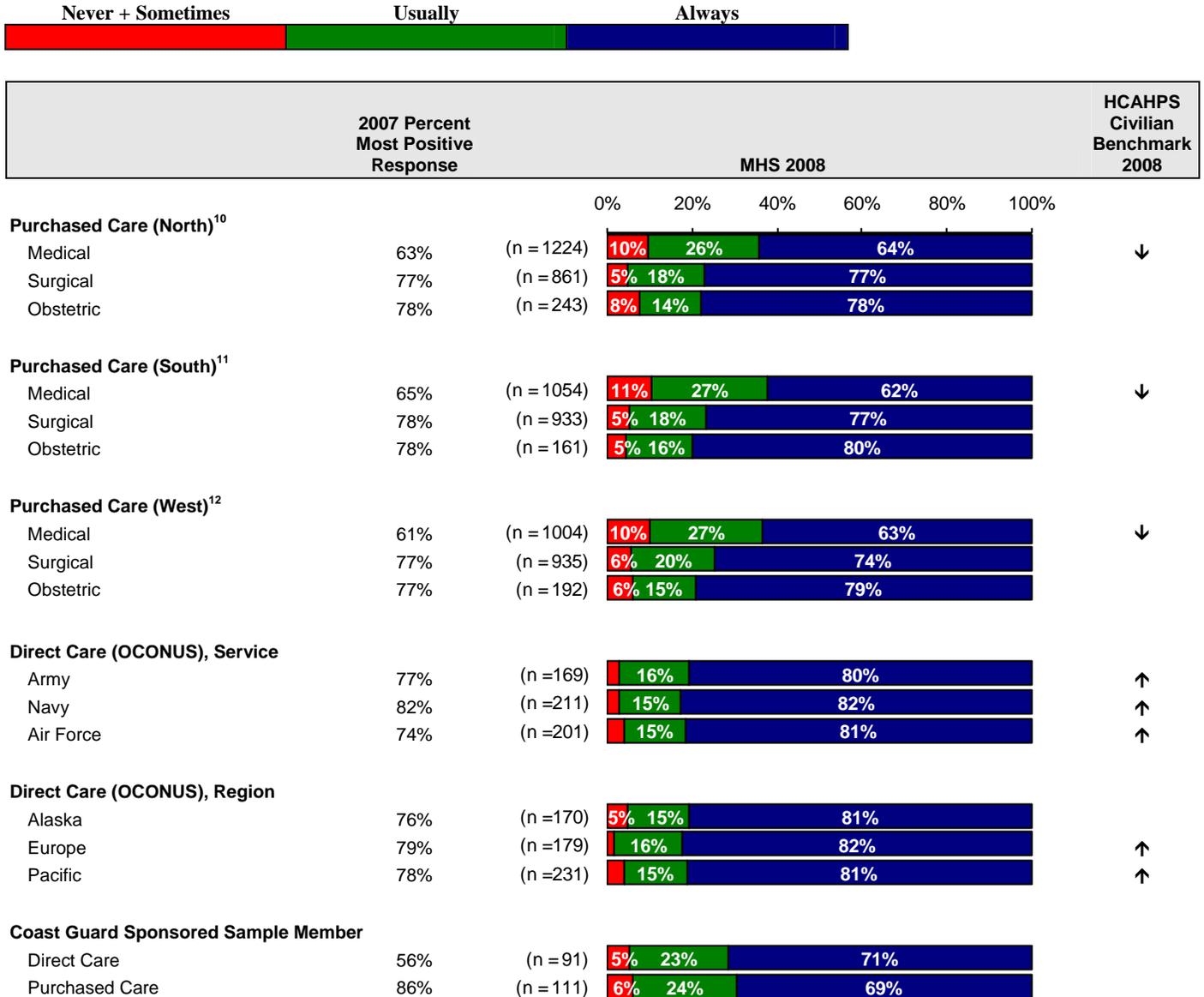


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors always explained things in a way they could understand ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors always explained things in a way they could understand ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that doctors always explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors always explained things in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Communication with Doctors (continued)

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

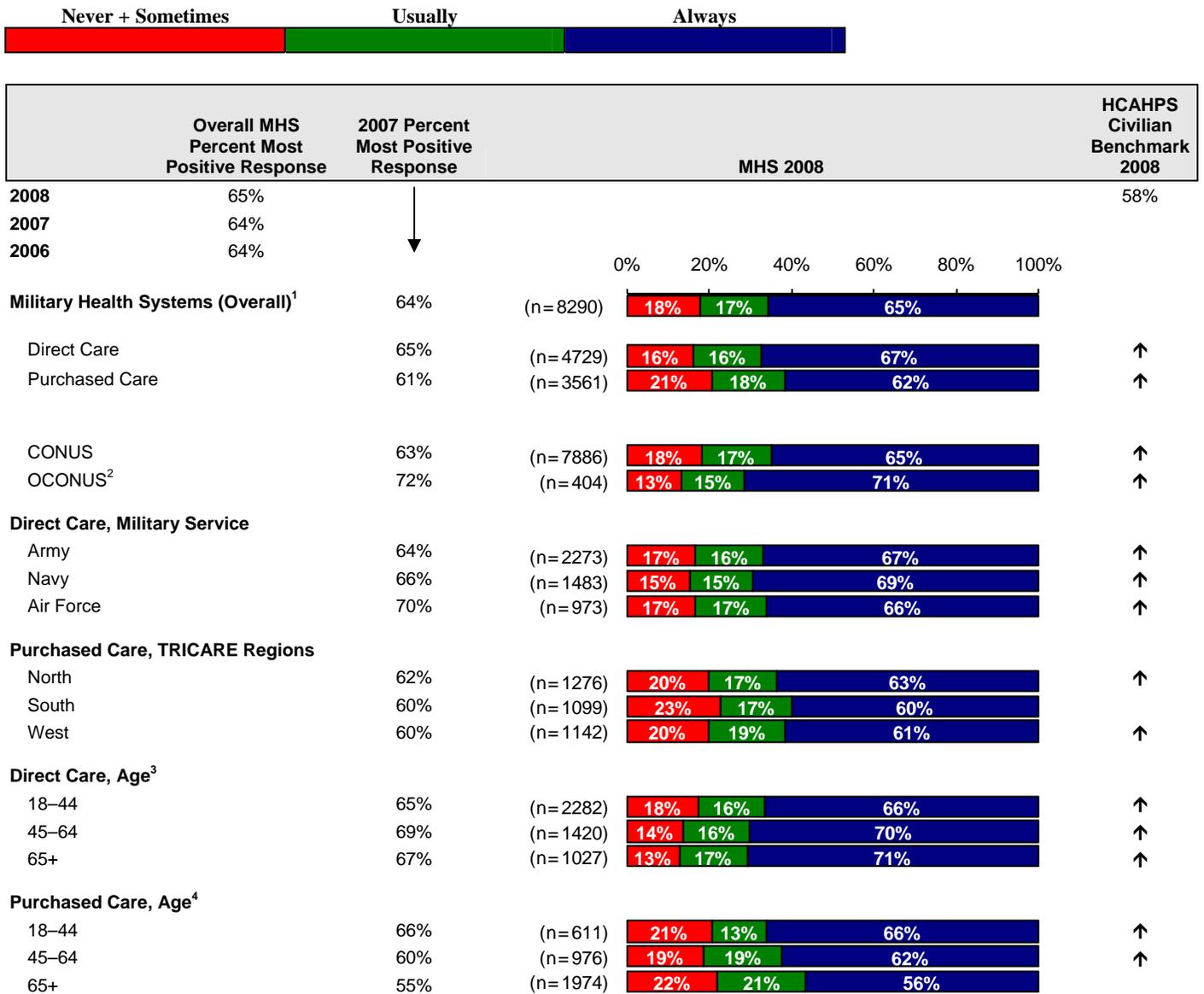


- 10. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that doctors always explained things in a way they could understand ($p < .05$).
- 11. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that doctors always explained things in a way they could understand ($p < .05$).
- 12. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 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.

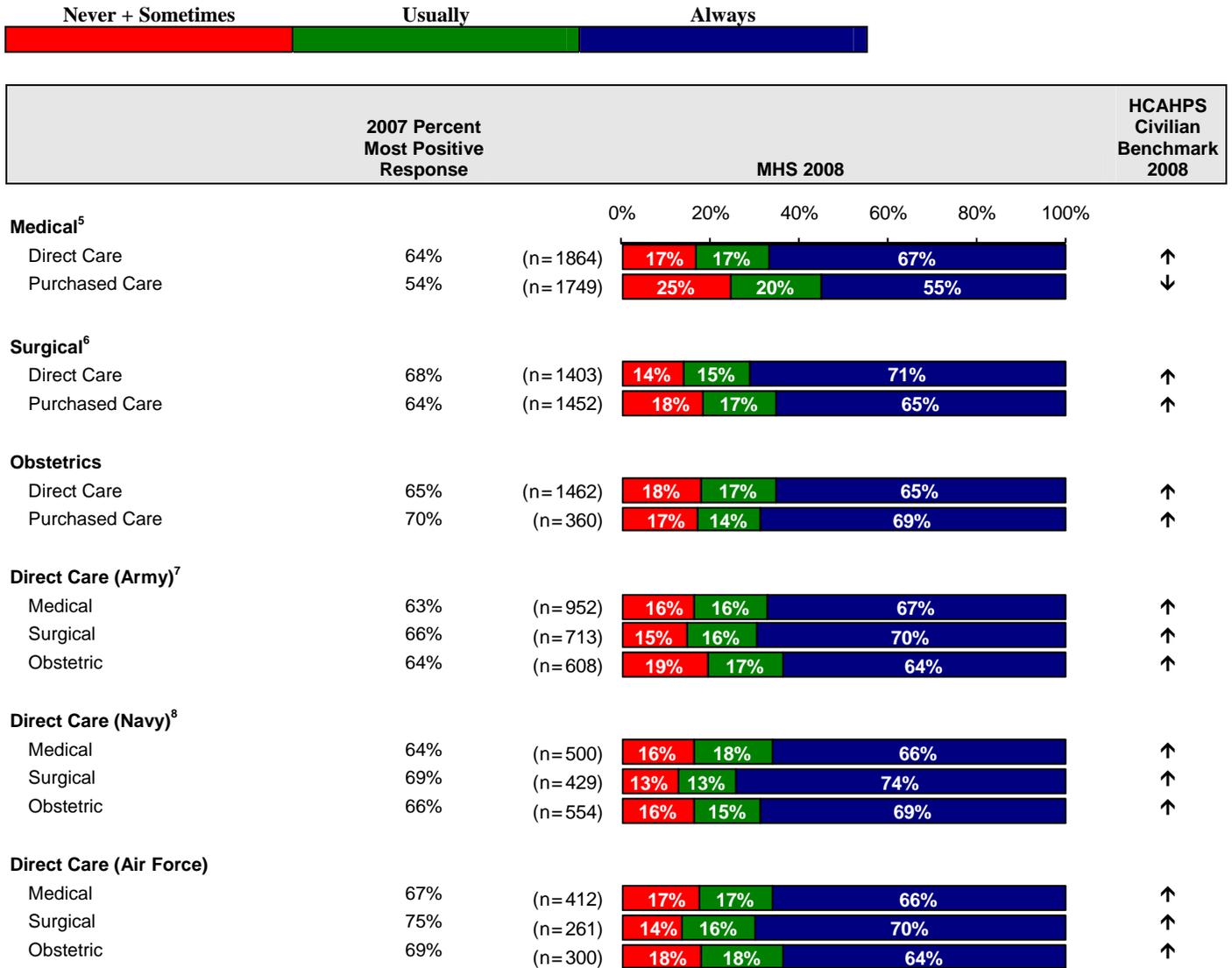


- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report most positive responses to the Communication about Medications composite ($p < .05$).
- Overall, beneficiaries receiving care OCONUS were significantly more likely than those receiving care in CONUS to report most positive responses to the Communication about Medications 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 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 responses to 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 2008 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.

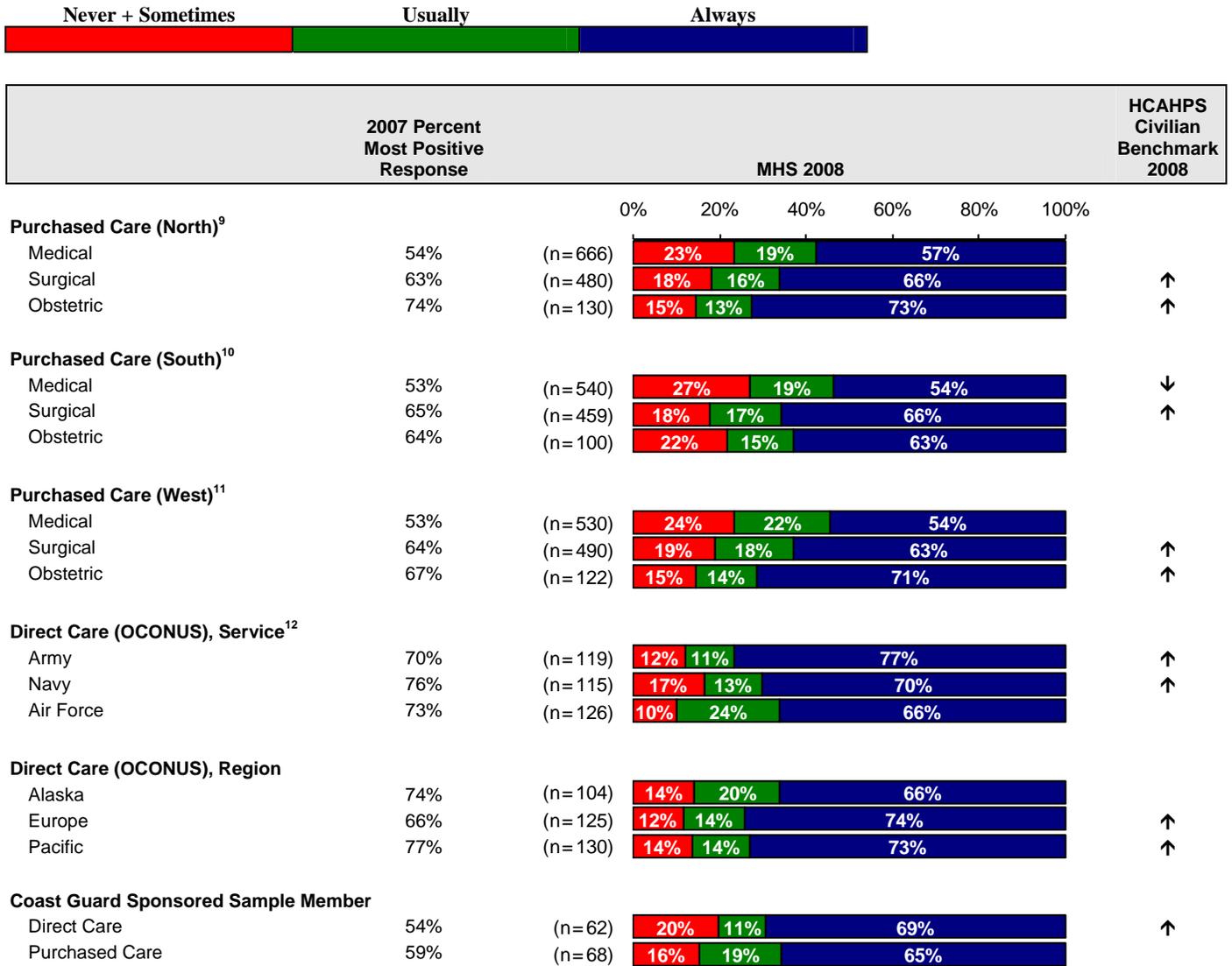


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Communication about Medications composite ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Communication about Medications composite ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics services to report most positive responses to the Communication about Medications composite ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical services to report most positive responses to 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 2008 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.



9. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Communication about Medications composite ($p < .05$).
10. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Communication about Medications composite ($p < .05$).
11. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Communication about Medications composite ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Surgical or Medical services to report most positive responses to the Communication about Medications composite ($p < .05$).
12. Among Direct Care OCONUS beneficiaries, those in Army facilities were significantly more likely than those in Air Force facilities to report most positive responses to 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 2008 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	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	77%							72%	
2007	76%								
2006	75%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	76%	(n = 8237)	9%	14%	77%			↑	
Direct Care	77%	(n = 4697)	8%	13%	79%			↑	
Purchased Care	74%	(n = 3540)	11%	15%	74%			↑	
CONUS	75%	(n = 7835)	9%	14%	77%			↑	
OCONUS	83%	(n = 402)	6%	11%	82%			↑	
Direct Care, Military Service									
Army	75%	(n = 2258)	8%	14%	78%			↑	
Navy	77%	(n = 1476)	8%	12%	80%			↑	
Air Force	81%	(n = 963)	7%	15%	79%			↑	
Purchased Care, TRICARE Regions									
North	77%	(n = 1265)	11%	13%	77%			↑	
South	72%	(n = 1096)	13%	14%	73%				
West	72%	(n = 1136)	10%	18%	72%				
Direct Care, Age									
18–44	76%	(n = 2268)	8%	14%	78%			↑	
45–64	80%	(n = 1413)	6%	12%	82%			↑	
65+	76%	(n = 1016)	6%	13%	80%			↑	
Purchased Care, Age²									
18–44	80%	(n = 609)	11%	11%	79%			↑	
45–64	74%	(n = 971)	8%	17%	75%			↑	
65+	68%	(n = 1960)	14%	18%	68%			↓	

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that hospital staff always told them what the medicine was for ($p < .05$).
- Among Purchased Care beneficiaries, those age 65+ were significantly less likely than those in other age groups to report that 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 2008 HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Composite: Communication about Medications (continued)

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



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical³									
Direct Care	74%	(n = 1845)	9%	13%				79%	↑
Purchased Care	67%	(n = 1734)	15%	18%				67%	↓
Surgical									
Direct Care	79%	(n = 1398)	6%	12%				82%	↑
Purchased Care	76%	(n = 1448)	8%	14%				78%	↑
Obstetrics									
Direct Care	77%	(n = 1454)	8%	15%				77%	↑
Purchased Care	83%	(n = 358)	8%	11%				81%	↑
Direct Care (Army)									
Medical	74%	(n = 942)	10%	11%				79%	↑
Surgical	75%	(n = 711)	6%	13%				80%	↑
Obstetric	76%	(n = 605)	8%	17%				75%	
Direct Care (Navy)									
Medical	74%	(n = 496)	8%	14%				78%	↑
Surgical	81%	(n = 428)	5%	10%				84%	↑
Obstetric	78%	(n = 552)	8%	12%				80%	↑
Direct Care (Air Force)									
Medical	76%	(n = 407)	7%	15%				78%	↑
Surgical	87%	(n = 259)	7%	12%				81%	↑
Obstetric	81%	(n = 297)	6%	16%				78%	↑

3. Among beneficiaries receiving Medical care, those in Direct Care were significantly more likely than those in Purchased Care to report that hospital staff always told them what 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁴									
Medical	69%	(n = 659)	15%	14%				71%	
Surgical	79%	(n = 478)	7%	14%				79%	↑
Obstetric	86%	(n = 128)	6%	8%				86%	↑
Purchased Care (South)									
Medical	67%	(n = 537)	17%	15%				68%	
Surgical	74%	(n = 459)	10%	11%				79%	↑
Obstetric	78%	(n = 100)	9%	16%				75%	
Purchased Care (West)⁵									
Medical	65%	(n = 526)	14%	24%				62%	↓
Surgical	75%	(n = 488)	7%	17%				76%	
Obstetric	82%	(n = 122)	8%	10%				83%	↑
Direct Care (OCONUS), Service									
Army	80%	(n = 119)	7%	6%				87%	↑
Navy	85%	(n = 115)	9%	10%				81%	↑
Air Force	85%	(n = 125)		19%				79%	
Direct Care (OCONUS), Region									
Alaska	84%	(n = 103)	7%	16%				77%	
Europe	78%	(n = 125)	5%	10%				85%	↑
Pacific	86%	(n = 130)	7%	9%				84%	↑
Coast Guard Sponsored Sample Member									
Direct Care	75%	(n = 61)	10%	8%				82%	
Purchased Care	78%	(n = 67)	7%	16%				76%	

- Among Purchased Care beneficiaries in the North, those receiving Medical care were significantly less likely than those receiving Surgical or Obstetrics care to report that hospital staff always told them was medicine was for ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical care were significantly less likely than those receiving Surgical or Obstetrics care to report that hospital staff always told them was 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 2008 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	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	54%			44%
2007	52%			
2006	53%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	52%	(n = 8194)	27% 20% 54%	↑
Direct Care	54%	(n = 4674)	25% 19% 56%	↑
Purchased Care	48%	(n = 3520)	31% 20% 49%	↑
CONUS	51%	(n = 7792)	27% 20% 53%	↑
OCONUS	62%	(n = 402)	20% 19% 60%	↑
Direct Care, Military Service				
Army	53%	(n = 2251)	26% 19% 55%	↑
Navy	55%	(n = 1462)	23% 19% 58%	↑
Air Force	58%	(n = 961)	27% 20% 53%	↑
Purchased Care, TRICARE Regions				
North	48%	(n = 1257)	29% 21% 50%	↑
South	48%	(n = 1088)	33% 21% 46%	↑
West	48%	(n = 1131)	30% 20% 51%	↑
Direct Care, Age²				
18–44	53%	(n = 2262)	27% 19% 55%	↑
45–64	58%	(n = 1405)	22% 20% 58%	↑
65+	58%	(n = 1007)	19% 20% 61%	↑
Purchased Care, Age³				
18–44	53%	(n = 607)	31% 16% 53%	↑
45–64	47%	(n = 968)	30% 21% 49%	↑
65+	43%	(n = 1945)	31% 25% 45%	↑

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that hospital staff always described possible side effects in a way they could understand ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those aged 65+ to report that hospital staff always 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 hospital staff always 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical⁴									
Direct Care	53%	(n = 1838)						↑	
Purchased Care	40%	(n = 1726)							
Surgical⁵									
Direct Care	57%	(n = 1383)						↑	
Purchased Care	52%	(n = 1436)						↑	
Obstetrics									
Direct Care	53%	(n = 1453)						↑	
Purchased Care	56%	(n = 358)						↑	
Direct Care (Army)									
Medical	51%	(n = 938)						↑	
Surgical	56%	(n = 707)						↑	
Obstetric	51%	(n = 606)						↑	
Direct Care (Navy)									
Medical	54%	(n = 494)						↑	
Surgical	57%	(n = 419)						↑	
Obstetric	55%	(n = 549)						↑	
Direct Care (Air Force)									
Medical	57%	(n = 406)						↑	
Surgical	62%	(n = 257)						↑	
Obstetric	57%	(n = 298)							

- Among beneficiaries receiving Medical care, those in Direct Care were significantly more likely than those in Purchased Care to report that hospital staff always described possible side effects in a way they could understand ($p < .05$).
- Among beneficiaries receiving Surgical care, those in Direct Care were significantly more likely than those in Purchased Care to report that hospital staff always 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 2008 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?



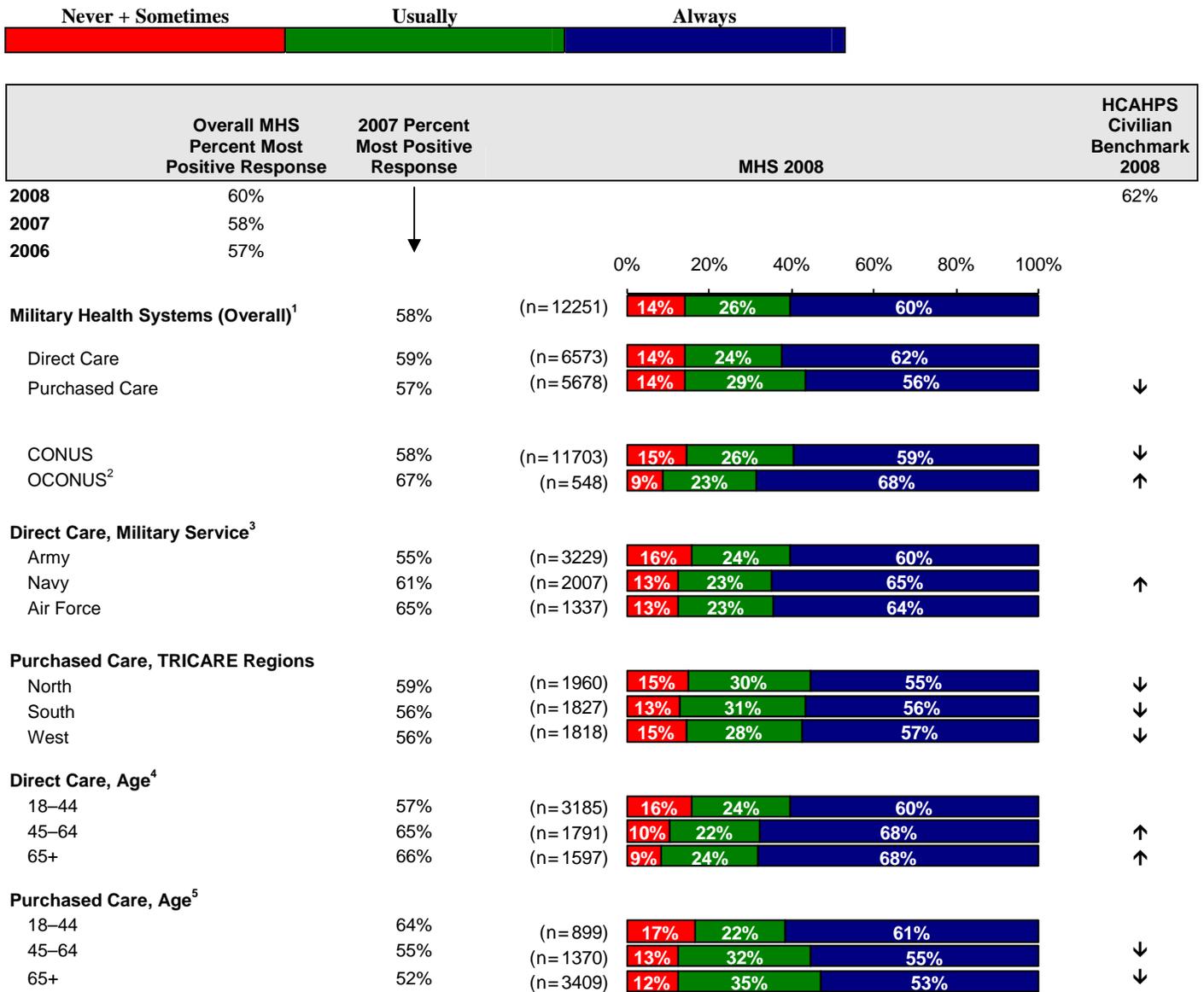
	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)									
Medical	39%	(n = 655)							
Surgical	48%	(n = 473)						↑	
Obstetric	63%	(n = 129)						↑	
Purchased Care (South)⁶									
Medical	39%	(n = 533)						↓	
Surgical	57%	(n = 455)						↑	
Obstetric	49%	(n = 100)							
Purchased Care (West)									
Medical	42%	(n = 525)							
Surgical	53%	(n = 485)							
Obstetric	51%	(n = 121)						↑	
Direct Care (OCONUS), Service									
Army	60%	(n = 119)						↑	
Navy	67%	(n = 115)						↑	
Air Force	61%	(n = 124)							
Direct Care (OCONUS), Region									
Alaska	65%	(n = 102)							
Europe	55%	(n = 125)						↑	
Pacific	68%	(n = 130)						↑	
Coast Guard Sponsored Sample Member									
Direct Care	33%	(n = 62)							
Purchased Care	40%	(n = 68)							

6. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that hospital staff always 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 2008 HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff

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

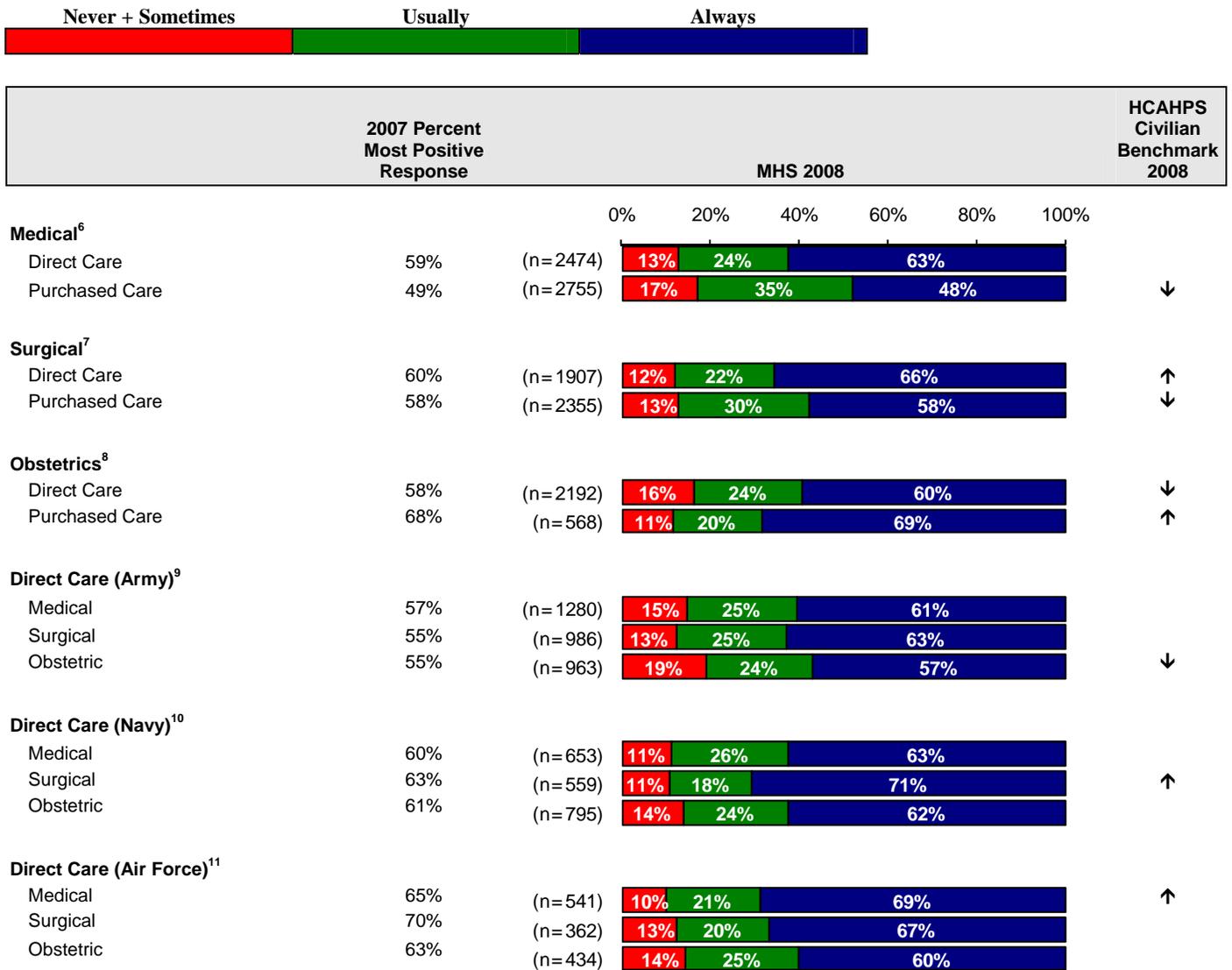


- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
- Overall, beneficiaries receiving care OCONUS were significantly more likely than those receiving care in CONUS to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries, those in Army facilities were significantly less likely than those in Navy or Air Force facilities to report most positive responses to the Responsiveness of Hospital Staff 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 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 responses to 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 2008 HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

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

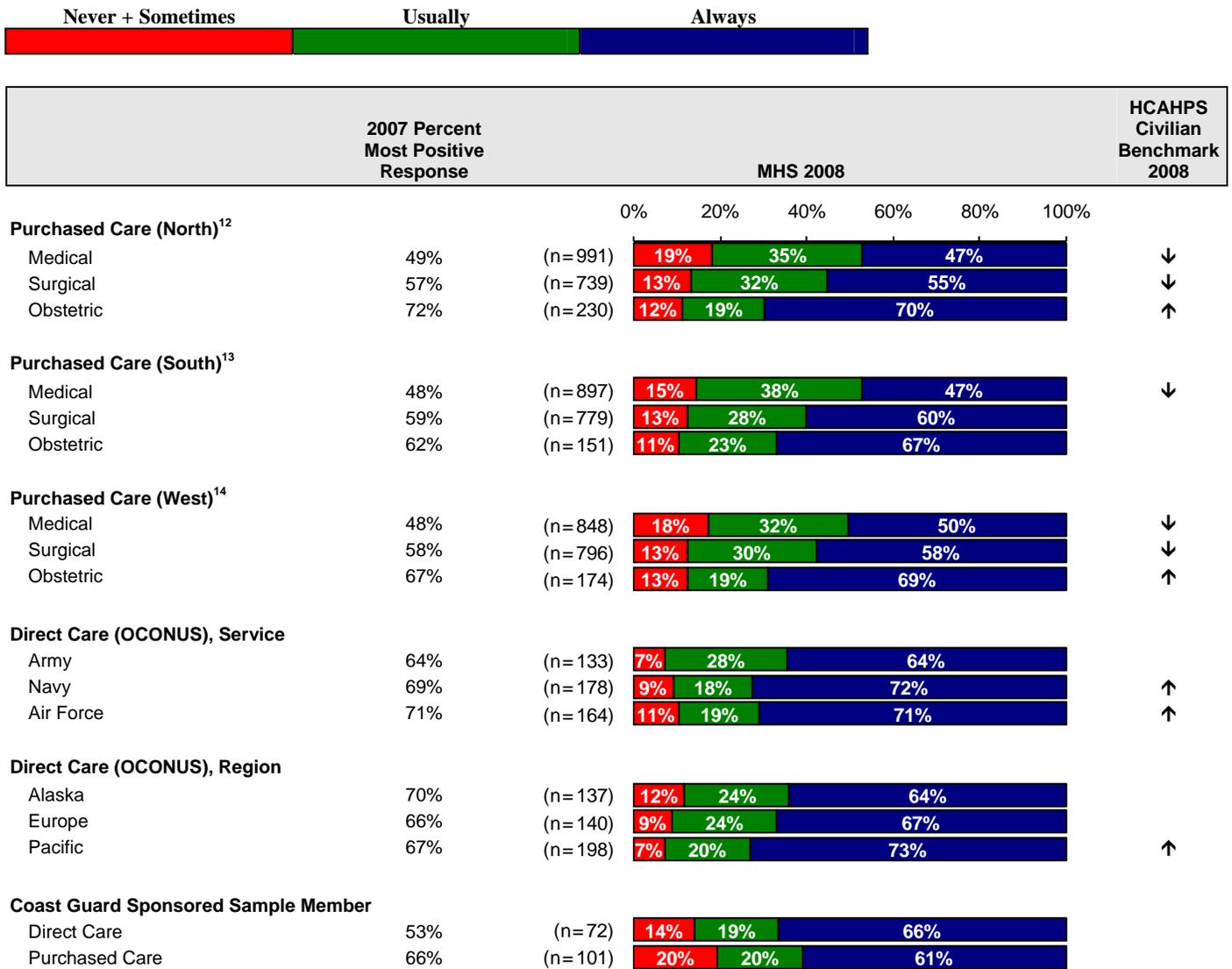


6. Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
7. Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Responsiveness of Hospital Staff 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 Responsiveness of Hospital Staff composite ($p < .05$).
9. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics services to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
10. Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
11. Among Direct Care beneficiaries in Air Force facilities, those receiving Medical services were significantly more likely than those receiving Obstetrics services to report most positive responses to 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 2008 HCAHPS civilian score.

Composite: Responsiveness of Hospital Staff (continued)

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



12. Among Purchased Care beneficiaries in the North region, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical services to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
13. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$).
14. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to the Responsiveness of Hospital Staff composite ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical services to report most positive responses to 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 2008 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?



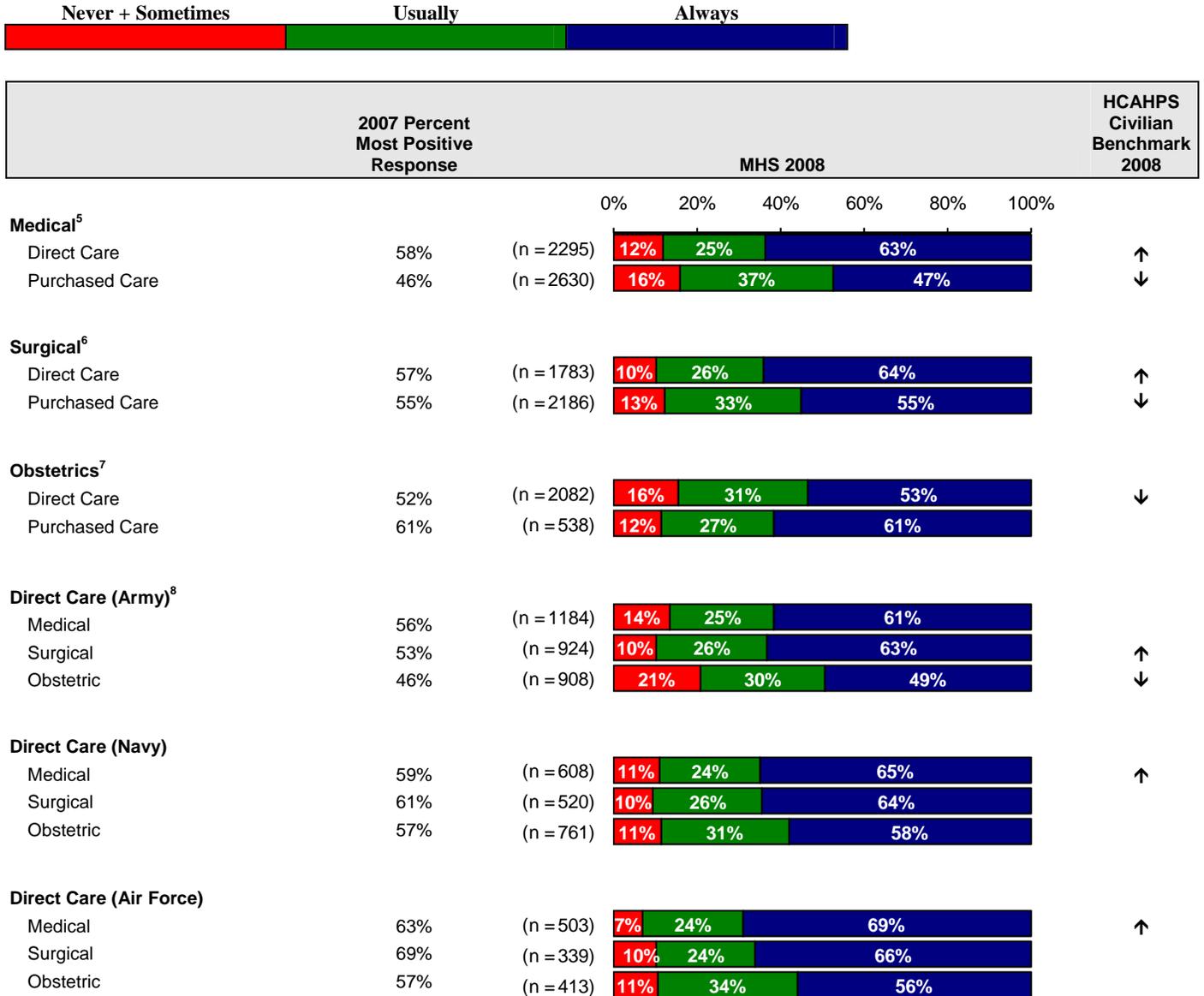
	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	57%							59%	
2007	54%								
2006	53%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	54%	(n = 11514)	13%	30%	57%			↓	
Direct Care	55%	(n = 6160)	13%	28%	59%			↓	
Purchased Care	53%	(n = 5354)	14%	33%	53%			↓	
CONUS	53%	(n = 10992)	14%	30%	56%			↓	
OCONUS ²	67%	(n = 522)	6%	27%	67%			↑	
Direct Care, Military Service									
Army	51%	(n = 3016)	16%	27%	57%			↓	
Navy	59%	(n = 1889)	11%	28%	61%			↓	
Air Force	62%	(n = 1255)	9%	28%	62%			↑	
Purchased Care, TRICARE Regions									
North	53%	(n = 1845)	14%	34%	52%			↓	
South	52%	(n = 1724)	14%	33%	53%			↓	
West	52%	(n = 1715)	14%	33%	53%			↓	
Direct Care, Age³									
18–44	52%	(n = 3030)	15%	29%	56%			↓	
45–64	63%	(n = 1663)	9%	23%	68%			↑	
65+	65%	(n = 1467)	7%	26%	67%			↑	
Purchased Care, Age⁴									
18–44	57%	(n = 861)	16%	28%	56%			↓	
45–64	52%	(n = 1288)	12%	34%	54%			↓	
65+	49%	(n = 3205)	13%	38%	49%			↓	

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that they always received help as soon as they wanted it ($p < .05$).
- Overall, beneficiaries receiving care OCONUS were significantly more likely than beneficiaries receiving care in CONUS to report that they always received help as soon as they wanted it ($p < .05$).
- Among Direct Care beneficiaries, those age 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 age 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 2008 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?



5. 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 ($p < .05$).
6. Among beneficiaries receiving Surgical 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 facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁹				
Medical	45%	(n = 942)	16% 38% 46%	↓
Surgical	53%	(n = 687)	14% 33% 53%	↓
Obstetric	64%	(n = 216)	11% 26% 63%	
Purchased Care (South)				
Medical	47%	(n = 863)	15% 37% 48%	↓
Surgical	56%	(n = 717)	13% 31% 56%	
Obstetric	58%	(n = 144)	11% 29% 60%	
Purchased Care (West)				
Medical	46%	(n = 808)	17% 36% 48%	↓
Surgical	55%	(n = 742)	11% 34% 54%	
Obstetric	59%	(n = 165)	14% 25% 61%	
Direct Care (OCONUS), Service				
Army	63%	(n = 130)	7% 30% 63%	
Navy	68%	(n = 168)	6% 21% 72%	↑
Air Force	72%	(n = 154)	5% 27% 68%	↑
Direct Care (OCONUS), Region				
Alaska	65%	(n = 127)	9% 29% 62%	
Europe	67%	(n = 137)	7% 29% 64%	
Pacific	67%	(n = 188)	5% 22% 74%	↑
Coast Guard Sponsored Sample Member				
Direct Care	53%	(n = 69)	10% 22% 68%	
Purchased Care	56%	(n = 97)	15% 24% 61%	

9. Among Purchased Care beneficiaries in the North, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical services to report that they always received help as soon as they wanted it ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical 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 2008 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	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	63%			65%
2007	62%			
2006	61%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	62%	(n = 6317)	15% 22% 63%	↓
Direct Care	63%	(n = 3315)	15% 19% 65%	
Purchased Care	61%	(n = 3002)	14% 25% 60%	↓
CONUS	62%	(n = 6032)	15% 22% 63%	↓
OCONUS	67%	(n = 285)	12% 19% 70%	
Direct Care, Military Service				
Army	60%	(n = 1560)	16% 21% 63%	
Navy	64%	(n = 1034)	14% 18% 68%	
Air Force	69%	(n = 721)	16% 18% 66%	
Purchased Care, TRICARE Regions				
North	64%	(n = 1016)	16% 26% 59%	↓
South	59%	(n = 928)	13% 28% 59%	↓
West	60%	(n = 1010)	15% 23% 62%	
Direct Care, Age²				
18–44	61%	(n = 1637)	17% 19% 64%	
45–64	66%	(n = 862)	12% 21% 67%	
65+	67%	(n = 816)	10% 21% 68%	↑
Purchased Care, Age³				
18–44	70%	(n = 519)	17% 17% 66%	
45–64	58%	(n = 731)	13% 31% 56%	↓
65+	55%	(n = 1752)	12% 32% 56%	↓

- Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Purchased Care, those aged 18–44 were significantly more likely than those in other age groups to report that they always got help 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical⁴									
Direct Care	60%	(n = 1060)	14%	24%	62%				
Purchased Care	51%	(n = 1253)	18%	33%	49%				↓
Surgical									
Direct Care	62%	(n = 1054)	14%	19%	67%				
Purchased Care	61%	(n = 1410)	13%	27%	61%				↓
Obstetrics⁵									
Direct Care	65%	(n = 1201)	17%	17%	66%				
Purchased Care	75%	(n = 339)	11%	13%	76%				↑
Direct Care (Army)									
Medical	57%	(n = 514)	16%	24%	60%				
Surgical	57%	(n = 536)	15%	23%	63%				
Obstetric	63%	(n = 510)	17%	18%	65%				
Direct Care (Navy)⁶									
Medical	60%	(n = 277)	11%	28%	60%				
Surgical	65%	(n = 308)	12%	11%	77%				↑
Obstetric	64%	(n = 449)	16%	17%	67%				
Direct Care (Air Force)									
Medical	67%	(n = 269)	12%	19%	69%				
Surgical	70%	(n = 210)	15%	17%	68%				
Obstetric	70%	(n = 242)	18%	17%	64%				

- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Direct Care were significantly less likely than those in Purchased Care to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that they always got help 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁷									
Medical	53%	(n = 445)	21%	31%	48%				↓
Surgical	61%	(n = 442)	13%	31%	57%				↓
Obstetric	79%	(n = 129)	12%	11%	76%				↑
Purchased Care (South)⁸									
Medical	50%	(n = 378)	14%	39%	46%				↓
Surgical	63%	(n = 469)	12%	24%	64%				
Obstetric	65%	(n = 81)	10%	17%	73%				
Purchased Care (West)⁹									
Medical	49%	(n = 418)	18%	29%	53%				↓
Surgical	60%	(n = 472)	14%	25%	61%				
Obstetric	74%	(n = 120)	11%	12%	77%				↑
Direct Care (OCONUS), Service									
Army	65%	(n = 63)	7%	27%	66%				
Navy	70%	(n = 93)	12%	15%	72%				
Air Force	70%	(n = 81)	16%	11%	73%				
Direct Care (OCONUS), Region									
Alaska	74%	(n = 61)	15%	19%	65%				
Europe	65%	(n = 77)	12%	19%	70%				
Pacific	67%	(n = 99)	10%	18%	72%				
Coast Guard Sponsored Sample Member									
Direct Care	53%	(n = 35)	19%	16%	65%				
Purchased Care	76%	(n = 45)	24%	15%	61%				

- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical services to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they always got help getting to the bathroom or using a bedpan as soon as they wanted ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical services to report that they always got help 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 2008 HCAHPS civilian score.

Composite: Pain Control

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



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008				HCAHPS Civilian Benchmark 2008	
2008	63%						69%	
2007	61%	↓						
2006	60%	↓						
			0%	20%	40%	60%	80%	100%
Military Health Systems (Overall)¹	61%	(n=10260)	10%	27%	63%			
Direct Care	60%	(n=5845)	11%	28%	62%	↓		
Purchased Care	65%	(n=4415)	8%	26%	66%	↓		
CONUS	61%	(n=9735)	10%	27%	63%	↓		
OCONUS ²	64%	(n=525)	5%	27%	67%			
Direct Care, Military Service³								
Army	58%	(n=2838)	12%	27%	61%	↓		
Navy	60%	(n=1832)	9%	29%	62%	↓		
Air Force	62%	(n=1175)	9%	27%	64%	↓		
Purchased Care, TRICARE Regions								
North	64%	(n=1537)	9%	27%	64%	↓		
South	64%	(n=1403)	8%	25%	67%			
West	68%	(n=1410)	8%	25%	67%			
Direct Care, Age⁴								
18–44	57%	(n=3217)	12%	29%	59%	↓		
45–64	69%	(n=1617)	7%	24%	69%			
65+	73%	(n=1011)	6%	23%	71%			
Purchased Care, Age								
18–44	63%	(n=889)	11%	24%	65%	↓		
45–64	66%	(n=1229)	7%	27%	66%	↓		
65+	67%	(n=2297)	5%	27%	68%			

- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report most positive responses to the Pain Control composite ($p < .05$).
- Overall, beneficiaries receiving care OCONUS were significantly more likely than those receiving care in CONUS to report most positive responses to the Pain Control composite ($p < .05$).
- Among Direct Care beneficiaries, those in the Air Force were significantly more likely than those in the Army to report most positive responses to 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 responses to 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 2008 HCAHPS civilian score.

Composite: Pain Control (continued)

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



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical									
Direct Care	61%	(n= 1718)	11%	29%		60%			↓
Purchased Care	56%	(n= 1728)	10%	30%		59%			↓
Surgical									
Direct Care	64%	(n= 1890)	8%	23%		70%			
Purchased Care	71%	(n= 2124)	6%	23%		70%			
Obstetrics⁵									
Direct Care	56%	(n= 2237)	13%	30%		58%			↓
Purchased Care	67%	(n= 563)	9%	23%		69%			
Direct Care (Army)⁶									
Medical	59%	(n= 891)	12%	28%		60%			↓
Surgical	63%	(n= 965)	8%	22%		70%			
Obstetric	54%	(n= 982)	16%	30%		54%			↓
Direct Care (Navy)⁷									
Medical	63%	(n= 463)	10%	32%		58%			↓
Surgical	62%	(n= 566)	7%	23%		70%			↓
Obstetric	59%	(n= 803)	9%	31%		60%			↓
Direct Care (Air Force)									
Medical	61%	(n= 364)	8%	26%		65%			
Surgical	73%	(n= 359)	7%	26%		67%			
Obstetric	56%	(n= 452)	11%	27%		62%			↓

- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Pain Control composite ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to the Pain Control composite ($p < .05$). Also, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Pain Control composite ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to 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 2008 HCAHPS civilian score.

Composite: Pain Control (continued)

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



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁸									
Medical	53%	(n=623)	11%	29%		60%			↓
Surgical	69%	(n=685)	6%	26%		68%			
Obstetric	68%	(n=229)	9%	25%		65%			
Purchased Care (South)⁹									
Medical	56%	(n=561)	11%	31%		58%			↓
Surgical	72%	(n=697)	5%	21%		73%			↑
Obstetric	62%	(n=145)	9%	21%		70%			
Purchased Care (West)¹⁰									
Medical	60%	(n=531)	9%	30%		61%			↓
Surgical	72%	(n=702)	8%	23%		69%			
Obstetric	71%	(n=177)	9%	20%		72%			
Direct Care (OCONUS), Service									
Army	64%	(n=137)	6%	30%		64%			
Navy	63%	(n=159)	6%	27%		68%			
Air Force	62%	(n=164)	5%	24%		71%			
Direct Care (OCONUS), Region									
Alaska	69%	(n=139)	8%	29%		63%			
Europe	64%	(n=143)		30%		65%			
Pacific	61%	(n=177)	5%	24%		71%			
Coast Guard Sponsored Sample Member									
Direct Care	64%	(n=72)	12%	27%		62%			
Purchased Care	70%	(n=83)	9%	21%		70%			

- 8. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical services to report most positive responses to the Pain Control composite ($p < .05$).
- 9. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to the Pain Control composite ($p < .05$).
- 10. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to 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 2008 HCAHPS civilian score.

Composite: Pain Control

How often was your pain well controlled?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008			HCAHPS Civilian Benchmark 2008			
2008	55%					62%			
2007	53%								
2006	52%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	53%	(n = 10172)	11%	33%	55%				↓
Direct Care	51%	(n = 5785)	12%	34%	53%				↓
Purchased Care	58%	(n = 4387)	9%	31%	60%				↓
CONUS	53%	(n = 9650)	12%	33%	55%				↓
OCONUS	53%	(n = 522)	6%	36%	58%				
Direct Care, Military Service									
Army	51%	(n = 2805)	14%	33%	53%				↓
Navy	52%	(n = 1818)	10%	37%	53%				↓
Air Force	52%	(n = 1162)	11%	34%	55%				↓
Purchased Care, TRICARE Regions									
North	55%	(n = 1528)	10%	33%	57%				↓
South	57%	(n = 1392)	9%	29%	61%				
West	61%	(n = 1402)	9%	30%	61%				
Direct Care, Age²									
18–44	48%	(n = 3185)	14%	35%	51%				↓
45–64	61%	(n = 1603)	8%	31%	61%				
65+	64%	(n = 997)	8%	31%	62%				
Purchased Care, Age									
18–44	54%	(n = 881)	12%	29%	58%				↓
45–64	59%	(n = 1224)	8%	33%	59%				↓
65+	61%	(n = 2282)	6%	32%	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 2008 HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Composite: Pain Control (continued)

How often was your pain well controlled?



		2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical									
Direct Care	52%	(n = 1694)	13%	36%	50%				↓
Purchased Care	48%	(n = 1712)	12%	36%	52%				↓
Surgical									
Direct Care	56%	(n = 1873)	9%	28%	62%				
Purchased Care	64%	(n = 2116)	7%	29%	64%				
Obstetrics³									
Direct Care	48%	(n = 2218)	14%	37%	50%				↓
Purchased Care	60%	(n = 559)	10%	27%	62%				
Direct Care (Army)⁴									
Medical	51%	(n = 875)	15%	34%	51%				↓
Surgical	55%	(n = 958)	10%	27%	64%				
Obstetric	47%	(n = 972)	17%	36%	47%				↓
Direct Care (Navy)									
Medical	56%	(n = 459)	12%	40%	48%				↓
Surgical	52%	(n = 561)	9%	30%	61%				
Obstetric	50%	(n = 798)	10%	38%	51%				↓
Direct Care (Air Force)									
Medical	52%	(n = 360)	10%	37%	53%				↓
Surgical	63%	(n = 354)	9%	32%	59%				
Obstetric	47%	(n = 448)	12%	34%	54%				↓

- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care groups to report that their pain was always well-controlled ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 2008 HCAHPS civilian score.

Composite: Pain Control (continued)

How often was your pain well controlled?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)									
Medical	44%	(n = 619)	12%	35%	52%				↓
Surgical	63%	(n = 683)	7%	32%	61%				
Obstetric	59%	(n = 226)	11%	30%	58%				
Purchased Care (South)⁵									
Medical	48%	(n = 554)	13%	36%	51%				↓
Surgical	65%	(n = 693)	6%	26%	68%				↑
Obstetric	55%	(n = 145)	10%	26%	64%				
Purchased Care (West)									
Medical	53%	(n = 526)	10%	36%	54%				↓
Surgical	66%	(n = 700)	7%	29%	64%				
Obstetric	65%	(n = 176)	10%	25%	65%				
Direct Care (OCONUS), Service									
Army	54%	(n = 136)	6%	40%	54%				
Navy	56%	(n = 158)	8%	33%	59%				
Air Force	50%	(n = 163)	5%	32%	63%				
Direct Care (OCONUS), Region									
Alaska	61%	(n = 139)	8%	40%	52%				↓
Europe	52%	(n = 141)	5%	39%	56%				
Pacific	53%	(n = 176)	7%	30%	63%				
Coast Guard Sponsored Sample Member									
Direct Care	58%	(n = 72)	11%	36%	53%				
Purchased Care	57%	(n = 82)	10%	27%	63%				

5. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 HCAHPS civilian score.

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Composite: Pain Control

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



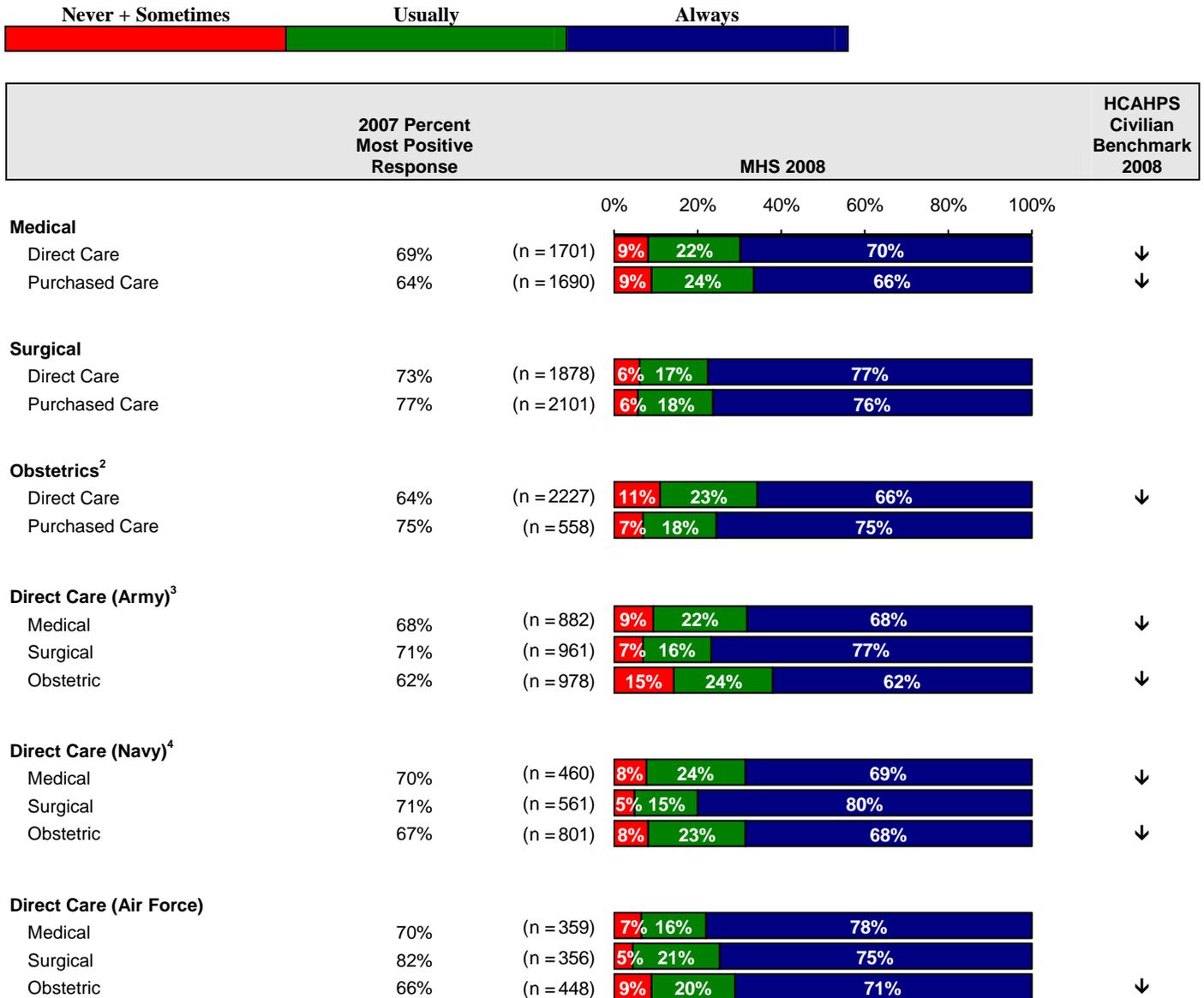
	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	71%							76%	
2007	69%								
2006	68%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	69%	(n = 10155)	9%	21%		71%		↓	
Direct Care	68%	(n = 5806)	9%	21%		70%		↓	
Purchased Care	73%	(n = 4349)	7%	20%		73%		↓	
CONUS	69%	(n = 9634)	9%	21%		70%		↓	
OCONUS	74%	(n = 521)		19%		76%			
Direct Care, Military Service									
Army	66%	(n = 2821)	11%	21%		68%		↓	
Navy	69%	(n = 1822)	7%	21%		71%		↓	
Air Force	71%	(n = 1163)	7%	19%		74%			
Purchased Care, TRICARE Regions									
North	72%	(n = 1512)	8%	21%		71%		↓	
South	72%	(n = 1384)	7%	20%		73%		↓	
West	74%	(n = 1388)	8%	19%		73%			
Direct Care, Age¹									
18–44	65%	(n = 3204)	10%	22%		67%		↓	
45–64	78%	(n = 1612)	6%	17%		77%			
65+	81%	(n = 990)	5%	16%		79%		↑	
Purchased Care, Age									
18–44	72%	(n = 879)	10%	19%		71%		↓	
45–64	73%	(n = 1215)	6%	20%		73%			
65+	73%	(n = 2255)		22%		74%		↓	

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 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 2008 HCAHPS civilian score.

Composite: Pain Control (continued)

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



- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that the hospital staff always did everything they could do to help with pain ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that the hospital staff always did everything they could do to help with pain ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that the hospital staff always did everything they could do to help with pain ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that the hospital staff always did everything they could do 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 2008 HCAHPS civilian score.

Composite: Pain Control (continued)

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



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)				
Medical	62%	(n = 607)	10% 23% 67%	↓
Surgical	76%	(n = 677)	5% 20% 75%	
Obstetric	77%	(n = 228)	7% 21% 72%	
Purchased Care (South)⁵				
Medical	63%	(n = 552)	10% 26% 64%	↓
Surgical	80%	(n = 689)	5% 16% 79%	
Obstetric	69%	(n = 143)	7% 16% 76%	
Purchased Care (West)				
Medical	67%	(n = 518)	8% 24% 68%	↓
Surgical	77%	(n = 695)	8% 17% 75%	
Obstetric	78%	(n = 175)	7% 15% 78%	
Direct Care (OCONUS), Service				
Army	75%	(n = 137)	5% 20% 74%	
Navy	70%	(n = 159)	20% 76%	
Air Force	74%	(n = 160)	16% 79%	
Direct Care (OCONUS), Region				
Alaska	76%	(n = 136)	8% 18% 74%	
Europe	76%	(n = 142)	22% 74%	
Pacific	70%	(n = 177)	17% 79%	
Coast Guard Sponsored Sample Member				
Direct Care	70%	(n = 72)	12% 18% 70%	
Purchased Care	83%	(n = 82)	8% 16% 76%	

5. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that the hospital staff always did everything they could do 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 2008 HCAHPS civilian score.

Composite: Discharge Information

This composite combines responses from two questions regarding discharge information.



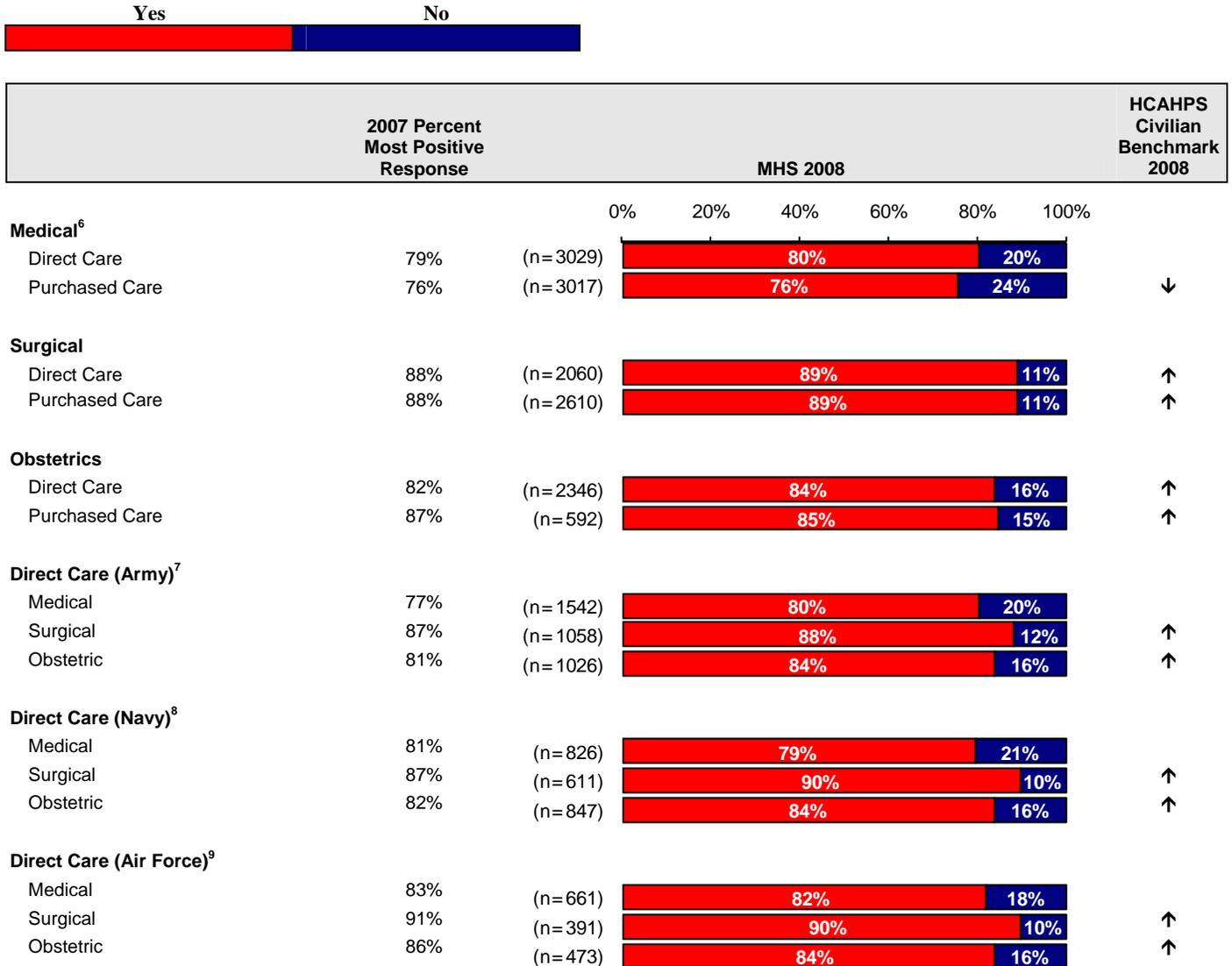
	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	83%			81%
2007	83%			
2006	83%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	83%	(n= 13654)		↑
Direct Care	83%	(n= 7435)		↑
Purchased Care	82%	(n= 6219)		↑
CONUS	82%	(n= 13036)		↑
OCONUS ²	86%	(n= 618)		↑
Direct Care, Military Service				
Army	81%	(n= 3626)		↑
Navy	83%	(n= 2284)		↑
Air Force	86%	(n= 1525)		↑
Purchased Care, TRICARE Regions³				
North	83%	(n= 2189)		
South	82%	(n= 1971)		
West	82%	(n= 1983)		↑
Direct Care, Age⁴				
18–44	82%	(n= 3467)		↑
45–64	86%	(n= 2178)		↑
65+	83%	(n= 1790)		↑
Purchased Care, Age				
18–44	86%	(n= 948)		↑
45–64	84%	(n= 1556)		↑
65+	79%	(n= 3715)		↓

- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report most positive responses to the Discharge Information composite ($p < .05$).
- Overall, beneficiaries receiving care OCONUS were significantly more likely than those receiving care in CONUS to report most positive responses to the Discharge Information composite ($p < .05$).
- Among Purchased Care beneficiaries, those in the West were significantly more likely than those in the North to report most positive responses to 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 responses to 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 responses to 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 2008 HCAHPS civilian score.

Composite: Discharge Information (continued)

This composite combines responses from two questions regarding discharge information.

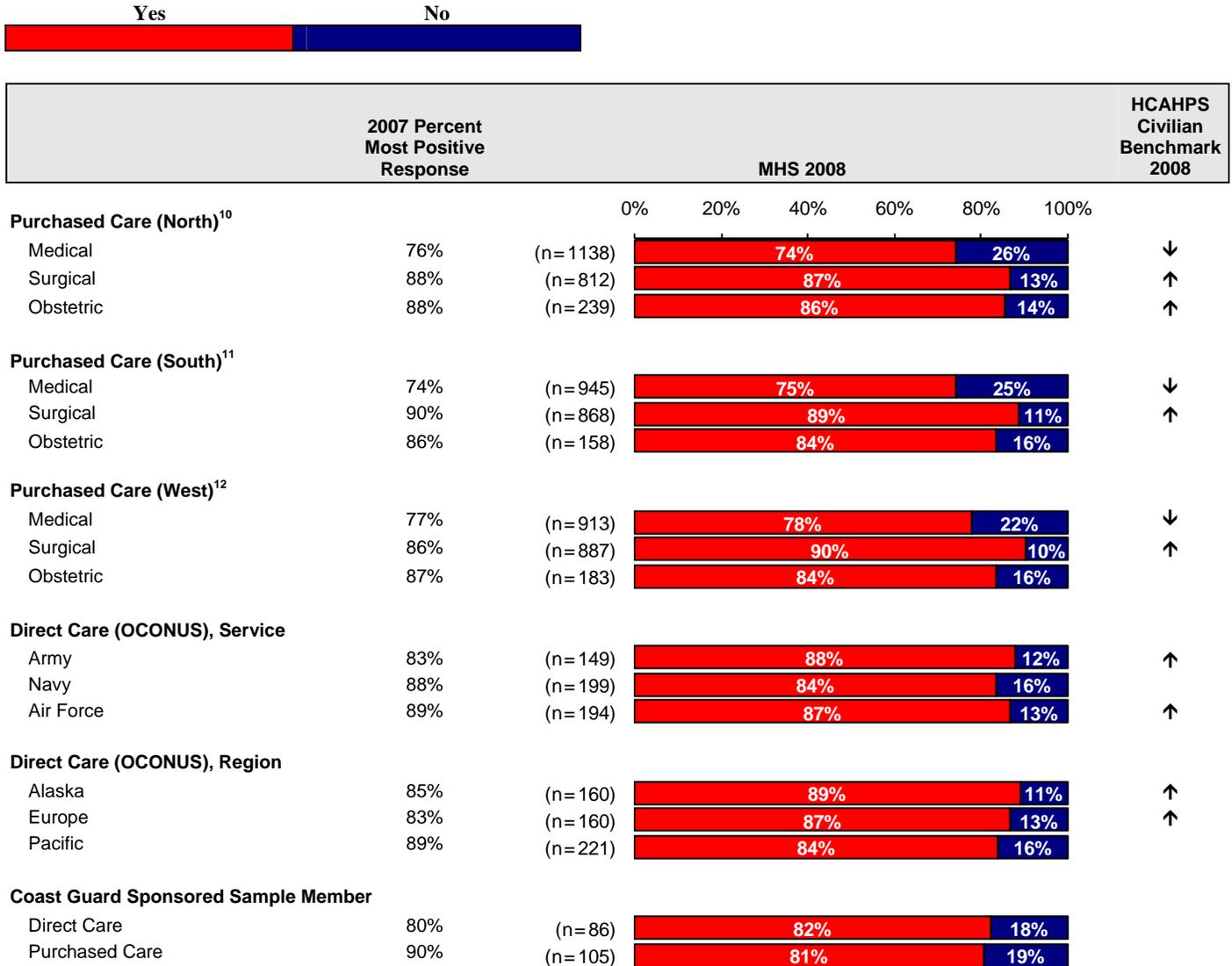


- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report most positive responses to the Discharge Information composite ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to 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 2008 HCAHPS civilian score.

Composite: Discharge Information (continued)

This composite combines responses from two questions regarding discharge information.



10. Among Purchased Care beneficiaries the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$).

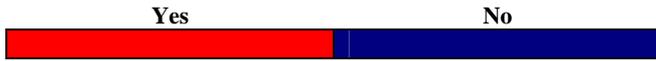
11. Among Purchased Care beneficiaries the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$).

12. Among Purchased Care beneficiaries the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Discharge Information composite ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to 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 2008 HCAHPS civilian score.

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	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	78%			78%
2007	77%			
2006	78%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)		77% (n = 13479)	78% 22%	
Direct Care		77% (n = 7353)	78% 22%	
Purchased Care		79% (n = 6126)	78% 22%	
CONUS		77% (n = 12864)	78% 22%	
OCONUS		81% (n = 615)	81% 19%	
Direct Care, Military Service				
Army		75% (n = 3587)	78% 22%	
Navy		77% (n = 2251)	78% 22%	
Air Force		80% (n = 1515)	79% 21%	
Purchased Care, TRICARE Regions				
North		78% (n = 2151)	77% 23%	
South		79% (n = 1945)	77% 23%	
West		80% (n = 1954)	81% 19%	↑
Direct Care, Age¹				
18–44		74% (n = 3436)	77% 23%	
45–64		83% (n = 2156)	83% 17%	↑
65+		83% (n = 1761)	83% 17%	↑
Purchased Care, Age				
18–44		79% (n = 941)	77% 23%	
45–64		80% (n = 1541)	80% 20%	
65+		78% (n = 3644)	79% 21%	

1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors, nurses, or other 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 2008 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?



		2007 Percent Most Positive Response	MHS 2008		HCAHPS Civilian Benchmark 2008				
			0%	20%	40%	60%	80%	100%	
Medical									
Direct Care	77%	(n = 2991)							
Purchased Care	73%	(n = 2956)							↓
Surgical									
Direct Care	85%	(n = 2041)							↑
Purchased Care	86%	(n = 2583)							↑
Obstetrics									
Direct Care	71%	(n = 2321)							↓
Purchased Care	78%	(n = 587)							
Direct Care (Army)²									
Medical	75%	(n = 1521)							
Surgical	85%	(n = 1052)							↑
Obstetric	69%	(n = 1014)							↓
Direct Care (Navy)³									
Medical	78%	(n = 814)							
Surgical	83%	(n = 600)							↑
Obstetric	73%	(n = 837)							
Direct Care (Air Force)⁴									
Medical	79%	(n = 656)							
Surgical	91%	(n = 389)							↑
Obstetric	74%	(n = 470)							

- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors, nurses, or other 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 Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors, nurses, or other 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 2008 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?



		2007 Percent Most Positive Response	MHS 2008		HCAHPS Civilian Benchmark 2008				
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)⁴									
Medical	73%	(n = 1114)							↓
Surgical	84%	(n = 801)							↑
Obstetric	78%	(n = 236)							
Purchased Care (South)⁵									
Medical	71%	(n = 929)							↓
Surgical	88%	(n = 859)							↑
Obstetric	78%	(n = 157)							
Purchased Care (West)⁶									
Medical	77%	(n = 892)							
Surgical	84%	(n = 880)							↑
Obstetric	79%	(n = 182)							
Direct Care (OCONUS), Service									
Army	77%	(n = 148)							↑
Navy	85%	(n = 198)							
Air Force	85%	(n = 193)							
Direct Care (OCONUS), Region									
Alaska	79%	(n = 159)							
Europe	76%	(n = 159)							
Pacific	86%	(n = 220)							
Coast Guard Sponsored Sample Member									
Direct Care	75%	(n = 86)							
Purchased Care	91%	(n = 103)							

- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors, nurses, or other 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, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors, nurses, or other 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, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors, nurses, or other 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 2008 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	2007 Percent Most Positive Response	MHS 2008	HCAHPS Civilian Benchmark 2008
2008	87%			84%
2007	88%			
2005	86%			
			0% 20% 40% 60% 80% 100%	
Military Health Systems (Overall)¹	88%	(n = 13487)	88% 12%	↑
Direct Care	89%	(n = 7349)	89% 11%	↑
Purchased Care	86%	(n = 6138)	86% 14%	↑
CONUS	88%	(n = 12876)	88% 12%	↑
OCONUS	91%	(n = 611)	92% 8%	↑
Direct Care, Military Service				
Army	88%	(n = 3586)	89% 11%	↑
Navy	89%	(n = 2258)	89% 11%	↑
Air Force	92%	(n = 1505)	90% 10%	↑
Purchased Care, TRICARE Regions				
North	88%	(n = 2160)	85% 15%	
South	86%	(n = 1941)	86% 14%	↑
West	85%	(n = 1962)	87% 13%	↑
Direct Care, Age²				
18–44	89%	(n = 3436)	90% 10%	↑
45–64	89%	(n = 2154)	92% 8%	↑
65+	83%	(n = 1759)	83% 17%	
Purchased Care, Age³				
18–44	93%	(n = 938)	90% 10%	↑
45–64	88%	(n = 1542)	88% 12%	↑
65+	79%	(n = 3658)	80% 20%	↓

- 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 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Medical⁴				
Direct Care	82% (n = 2988)		84% 16%	
Purchased Care	78% (n = 2967)		78% 22%	↓
Surgical				
Direct Care	90% (n = 2038)		92% 8%	↑
Purchased Care	91% (n = 2580)		91% 9%	↑
Obstetrics				
Direct Care	93% (n = 2323)		93% 7%	↑
Purchased Care	95% (n = 591)		94% 6%	↑
Direct Care (Army)⁵				
Medical	80% (n = 1524)		84% 16%	
Surgical	89% (n = 1048)		92% 8%	↑
Obstetric	93% (n = 1014)		93% 7%	↑
Direct Care (Navy)⁶				
Medical	84% (n = 813)		83% 17%	
Surgical	90% (n = 605)		92% 8%	↑
Obstetric	91% (n = 840)		93% 7%	↑
Direct Care (Air Force)⁷				
Medical	86% (n = 651)		85% 15%	
Surgical	90% (n = 385)		93% 7%	↑
Obstetric	98% (n = 469)		92% 8%	↑

- 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 facilities, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 facilities, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 facilities, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 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?



	2007 Percent Most Positive Response		MHS 2008	HCAHPS Civilian Benchmark 2008
			0% 20% 40% 60% 80% 100%	
Purchased Care (North)⁸				
Medical	79%	(n = 1120)	76% 24%	↓
Surgical	92%	(n = 802)	89% 11%	↑
Obstetric	97%	(n = 238)	95% 5%	↑
Purchased Care (South)⁹				
Medical	77%	(n = 927)	78% 22%	↓
Surgical	91%	(n = 856)	91% 9%	↑
Obstetric	93%	(n = 158)	96%	↑
Purchased Care (West)¹⁰				
Medical	77%	(n = 899)	80% 20%	↓
Surgical	89%	(n = 880)	92% 8%	↑
Obstetric	94%	(n = 183)	92% 8%	↑
Direct Care (OCONUS), Service				
Army	89%	(n = 148)	91% 9%	↑
Navy	92%	(n = 198)	90% 10%	↑
Air Force	94%	(n = 190)	96%	↑
Direct Care (OCONUS), Region				
Alaska	90%	(n = 156)	95% 5%	↑
Europe	90%	(n = 159)	91% 9%	↑
Pacific	92%	(n = 220)	91% 9%	↑
Coast Guard Sponsored Sample Member				
Direct Care	85%	(n = 86)	91% 9%	↑
Purchased Care	89%	(n = 102)	90% 10%	

- 8. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Surgical or Medical services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$).
- 9. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they received information in writing about what symptoms or health problems to look out for after they left the hospital ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Surgical or Medical 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 West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics 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 2008 HCAHPS civilian score.

Hospital Environment

How often were your room and bathroom kept clean?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	70%							69%	
2007	68%								
2006	68%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)	68%	(n = 14654)	10%	20%				70%	↑
Direct Care	68%	(n = 7973)	10%	20%				70%	↑
Purchased Care	68%	(n = 6681)	10%	21%				69%	
CONUS	68%	(n = 13990)	10%	20%				69%	
OCONUS	71%	(n = 664)	9%	18%				73%	↑
Direct Care, Military Service									
Army	68%	(n = 3927)	10%	19%				71%	↑
Navy	66%	(n = 2407)	11%	22%				67%	
Air Force	72%	(n = 1639)	9%	18%				72%	↑
Purchased Care, TRICARE Regions									
North	67%	(n = 2319)	10%	22%				68%	
South	66%	(n = 2148)	10%	21%				68%	
West	72%	(n = 2132)	10%	20%				70%	
Direct Care, Age¹									
18–44	66%	(n = 3613)	11%	21%				68%	
45–64	71%	(n = 2301)	8%	18%				74%	↑
65+	75%	(n = 2059)	6%	17%				78%	↑
Purchased Care, Age									
18–44	70%	(n = 981)	12%	19%				70%	
45–64	70%	(n = 1624)	10%	22%				68%	
65+	66%	(n = 4076)	9%	23%				68%	

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 ($p < .05$). Also, those aged 65+ were significantly more 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 2008 HCAHPS civilian score.

Hospital Environment (continued)

How often were your room and bathroom kept clean?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical²									
Direct Care	72%	(n = 3329)	8%	18%				73%	↑
Purchased Care	64%	(n = 3304)	11%	24%				65%	↓
Surgical									
Direct Care	71%	(n = 2228)	8%	18%				74%	↑
Purchased Care	72%	(n = 2768)	8%	20%				72%	↑
Obstetrics									
Direct Care	63%	(n = 2416)	13%	22%				65%	↓
Purchased Care	70%	(n = 609)	11%	17%				72%	
Direct Care (Army)³									
Medical	72%	(n = 1717)	9%	17%				74%	↑
Surgical	71%	(n = 1152)	7%	19%				75%	↑
Obstetric	62%	(n = 1058)	13%	22%				66%	
Direct Care (Navy)⁴									
Medical	70%	(n = 882)	9%	22%				68%	
Surgical	69%	(n = 649)	9%	15%				75%	↑
Obstetric	62%	(n = 876)	13%	24%				63%	↓
Direct Care (Air Force)									
Medical	75%	(n = 730)	6%	16%				78%	↑
Surgical	77%	(n = 427)	9%	20%				72%	
Obstetric	66%	(n = 482)	13%	19%				68%	

- 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 Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical care to report that their room and bathroom were always kept clean ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that their room and bathroom were always kept clean ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 2008 HCAHPS civilian score.

Hospital Environment (continued)

How often were your room and bathroom kept clean?



	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Purchased Care (North)									
Medical	64%	(n = 1219)	11%	25%		65%			↓
Surgical	69%	(n = 857)	8%	21%		70%			
Obstetric	70%	(n = 243)	13%	16%		71%			
Purchased Care (South)⁵									
Medical	61%	(n = 1056)	12%	24%		64%			↓
Surgical	73%	(n = 931)	7%	20%		73%			↑
Obstetric	66%	(n = 161)	12%	17%		71%			
Purchased Care (West)									
Medical	68%	(n = 1005)	12%	22%		66%			
Surgical	75%	(n = 936)	9%	19%		72%			↑
Obstetric	76%	(n = 191)	8%	19%		73%			
Direct Care (OCONUS), Service									
Army	75%	(n = 169)		19%		77%			↑
Navy	65%	(n = 212)	15%	20%		65%			
Air Force	70%	(n = 201)	10%	15%		75%			
Direct Care (OCONUS), Region									
Alaska	76%	(n = 169)	6%	18%		76%			
Europe	72%	(n = 179)	7%	16%		77%			↑
Pacific	69%	(n = 233)	13%	21%		66%			
Coast Guard Sponsored Sample Member									
Direct Care	55%	(n = 92)		29%		67%			
Purchased Care	70%	(n = 112)	7%	23%		70%			

5. Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical 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 2008 HCAHPS civilian score.

Hospital Environment

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



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008					HCAHPS Civilian Benchmark 2008	
2008	58%							55%	
2007	57%								
2006	58%								
			0%	20%	40%	60%	80%	100%	
Military Health Systems (Overall)¹	57%	(n = 14449)	12%	30%	58%			↑	
Direct Care	60%	(n = 7880)	11%	28%	61%			↑	
Purchased Care	52%	(n = 6569)	13%	34%	53%			↓	
CONUS	56%	(n = 13787)	12%	30%	58%			↑	
OCONUS ²	70%	(n = 662)	8%	28%	64%			↑	
Direct Care, Military Service									
Army	60%	(n = 3880)	11%	28%	61%			↑	
Navy	59%	(n = 2380)	11%	28%	61%			↑	
Air Force	63%	(n = 1620)	9%	28%	62%			↑	
Purchased Care, TRICARE Regions³									
North	50%	(n = 2287)	14%	35%	51%			↓	
South	56%	(n = 2099)	11%	33%	56%				
West	48%	(n = 2100)	15%	34%	51%			↓	
Direct Care, Age⁴									
18–44	62%	(n = 3600)	11%	26%	63%			↑	
45–64	57%	(n = 2274)	11%	32%	57%				
65+	57%	(n = 2006)	9%	35%	57%				
Purchased Care, Age⁵									
18–44	61%	(n = 979)	12%	23%	65%			↑	
45–64	50%	(n = 1619)	15%	36%	49%			↓	
65+	45%	(n = 3971)	13%	42%	45%			↓	

- Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that the area around their room was always quiet at night ($p < .05$).
- Overall, those receiving care OCONUS were significantly more likely than those receiving care in CONUS to report that the area around their room was always quiet at night ($p < .05$).
- Among Purchased Care, those in the South were significantly more likely than those in the North or West to report that the area around their room was always quiet at night ($p < .05$).
- Among Direct Care, those aged 18–44 were significantly less likely than those in other age groups to report that the area around their room was always quiet at night ($p < .05$).
- Among Purchased Care, those aged 18–44 were significantly more likely than those in other age groups to report that the area around their room was always quiet at night ($p < .05$). Also, those aged 65+ were significantly less likely than those in other age groups to report that the area around their room was always 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 2008 HCAHPS civilian score.

Hospital Environment (continued)

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



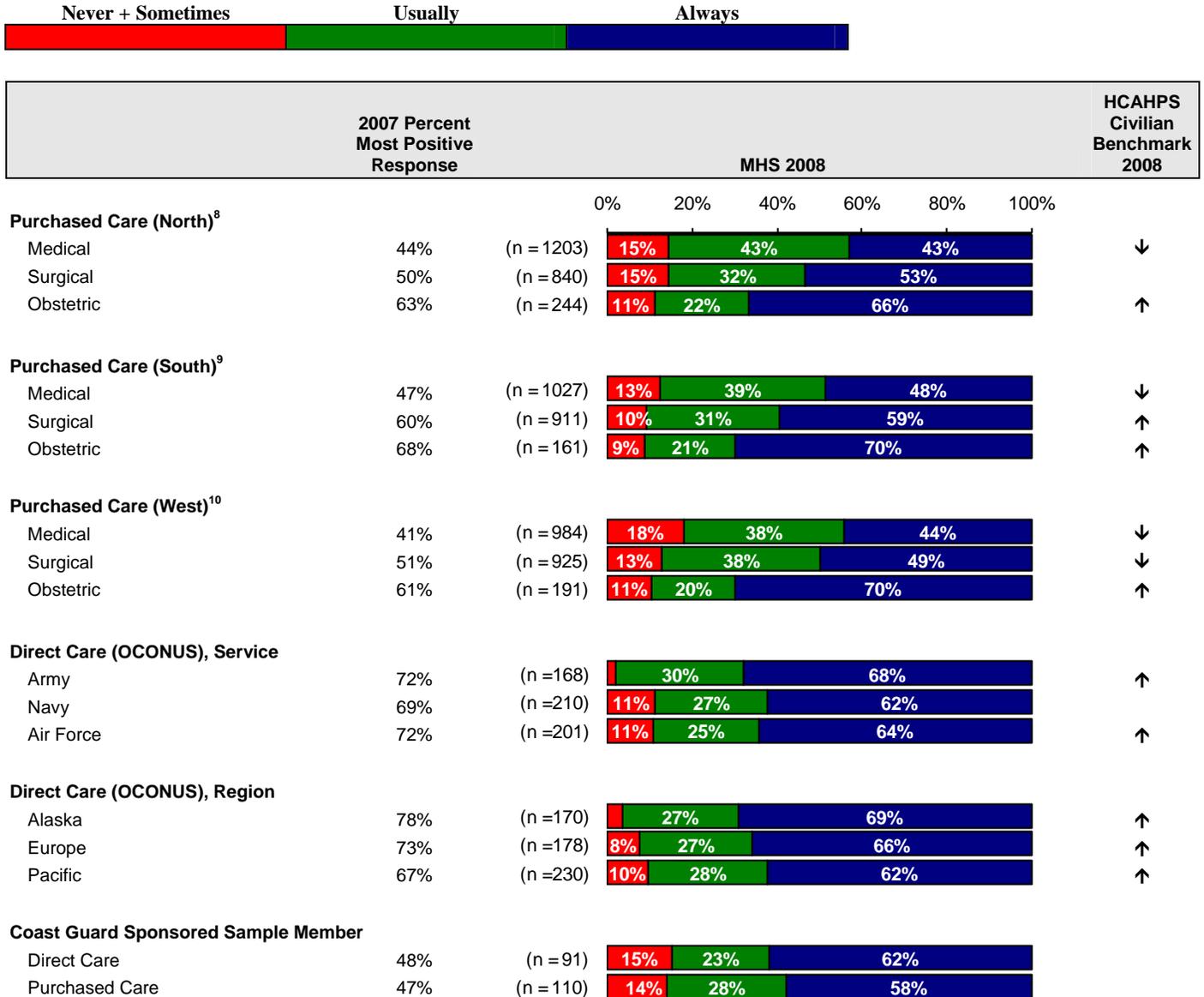
	2007 Percent Most Positive Response		MHS 2008					HCAHPS Civilian Benchmark 2008	
			0%	20%	40%	60%	80%	100%	
Medical⁶									
Direct Care	58%	(n = 3273)	10%	31%	58%				↑
Purchased Care	44%	(n = 3238)	15%	40%	45%				↓
Surgical⁷									
Direct Care	58%	(n = 2196)	10%	26%	63%				↑
Purchased Care	54%	(n = 2721)	12%	34%	54%				
Obstetrics									
Direct Care	63%	(n = 2411)	11%	27%	62%				↑
Purchased Care	64%	(n = 610)	10%	21%	68%				↑
Direct Care (Army)									
Medical	60%	(n = 1687)	10%	30%	59%				↑
Surgical	59%	(n = 1140)	10%	27%	64%				↑
Obstetric	61%	(n = 1053)	13%	28%	60%				↑
Direct Care (Navy)									
Medical	57%	(n = 867)	12%	32%	56%				
Surgical	53%	(n = 638)	11%	26%	63%				↑
Obstetric	63%	(n = 875)	10%	26%	64%				↑
Direct Care (Air Force)									
Medical	56%	(n = 719)	7%	33%	60%				
Surgical	65%	(n = 418)	12%	26%	62%				↑
Obstetric	69%	(n = 483)	10%	26%	64%				↑

- 6. 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 quiet at night ($p < .05$).
- 7. Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report that the area around their room was always 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 2008 HCAHPS civilian score.

Hospital Environment (continued)

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



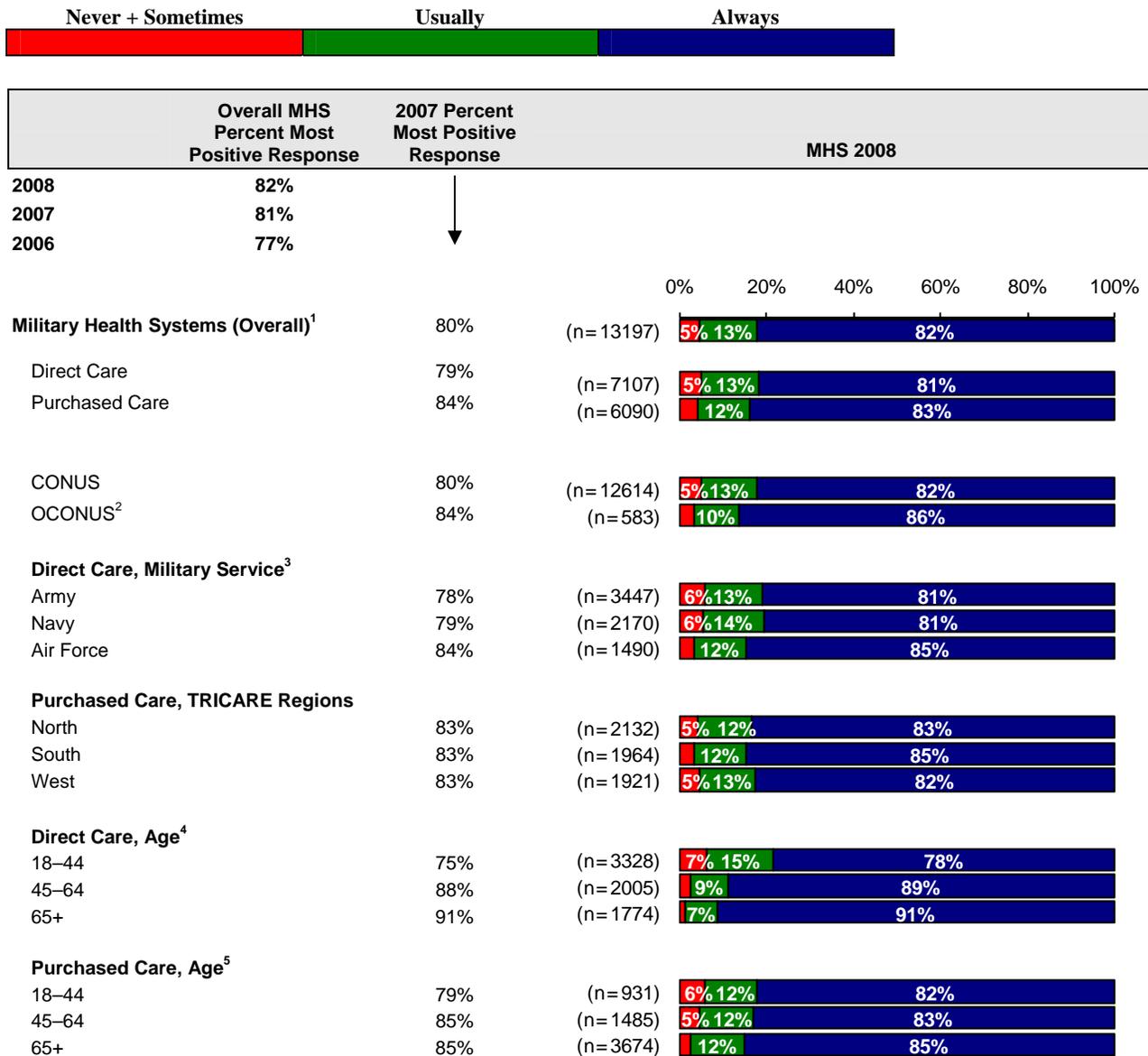
- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that the area around their room was always quiet at night ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Surgical or Medical services to report that the area around their room was always quiet at night ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that the area around their room was always quiet at night ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Surgical or Medical services to report that the area around their room was always quiet at night ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that the area around their room was always quiet at night ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Surgical or Medical services to report that the area around their room was always 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 2008 HCAHPS civilian score.

Survey Results:
DoD Composites and Questions

Composite: Your Family and Friends

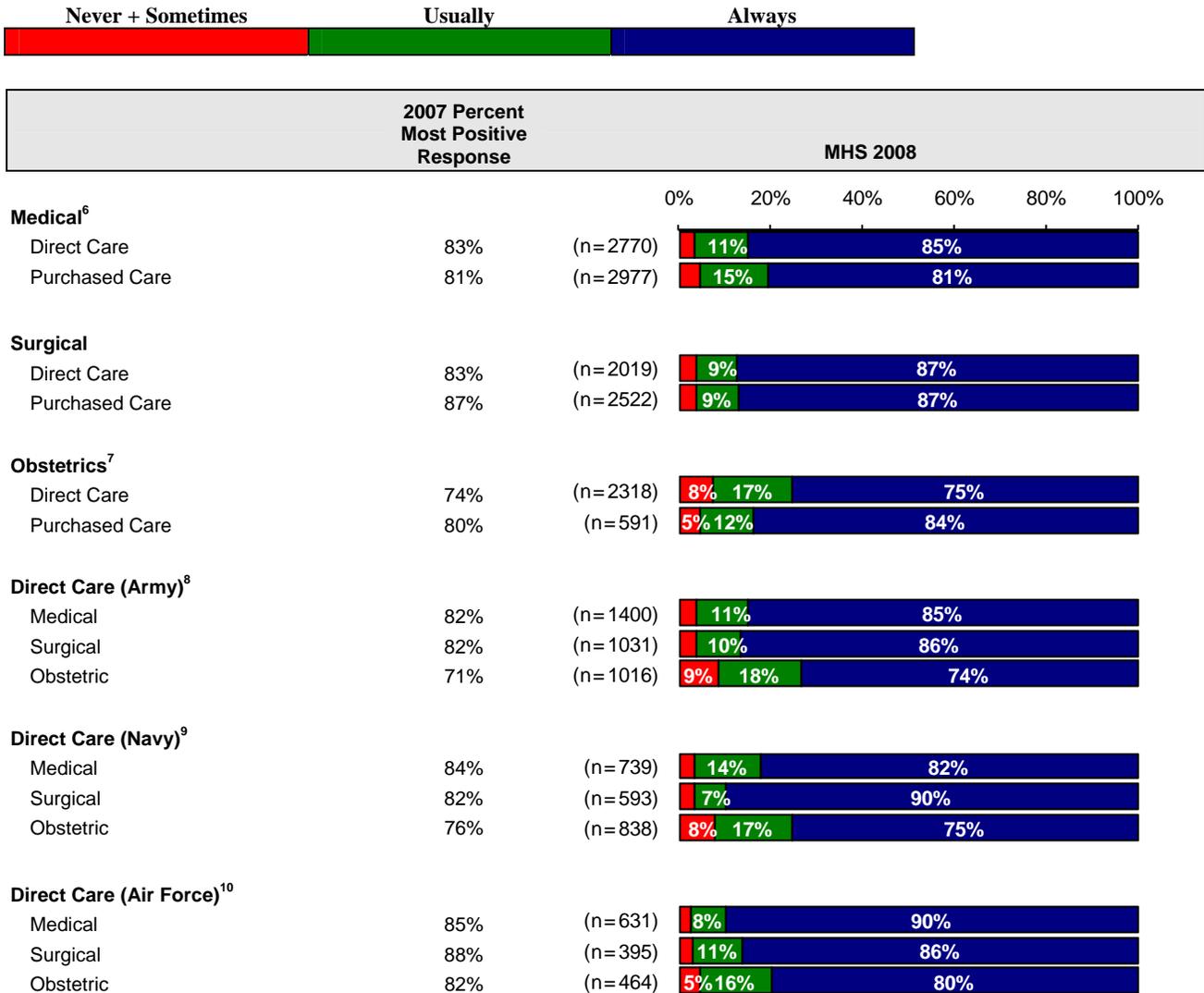
This composite combines responses from two questions about communications with family and close friends.



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report most positive responses to the Family and Friends composite ($p < .05$).
- OCONUS beneficiaries were significantly more likely than CONUS beneficiaries to report most positive responses to the Family and Friends composite ($p < .05$).
- Beneficiaries in Air Force facilities were significantly more likely than beneficiaries in Army or Navy facilities to report most positive responses to the Family and Friends composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 65+ were significantly more likely than beneficiaries in other age groups to report most positive responses to the Family and Friends composite ($p < .05$). Furthermore, those aged 18–44 were significantly less likely than beneficiaries in other age groups to report most positive responses to the Family and Friends composite ($p < .05$).
- Among Purchased Care beneficiaries, those aged 65+ were significantly more likely than those aged 18–44 to report most positive responses to the 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 Friends and Family composite ($p < .05$).

7. Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report most positive responses to the Friends and Family composite ($p < .05$).

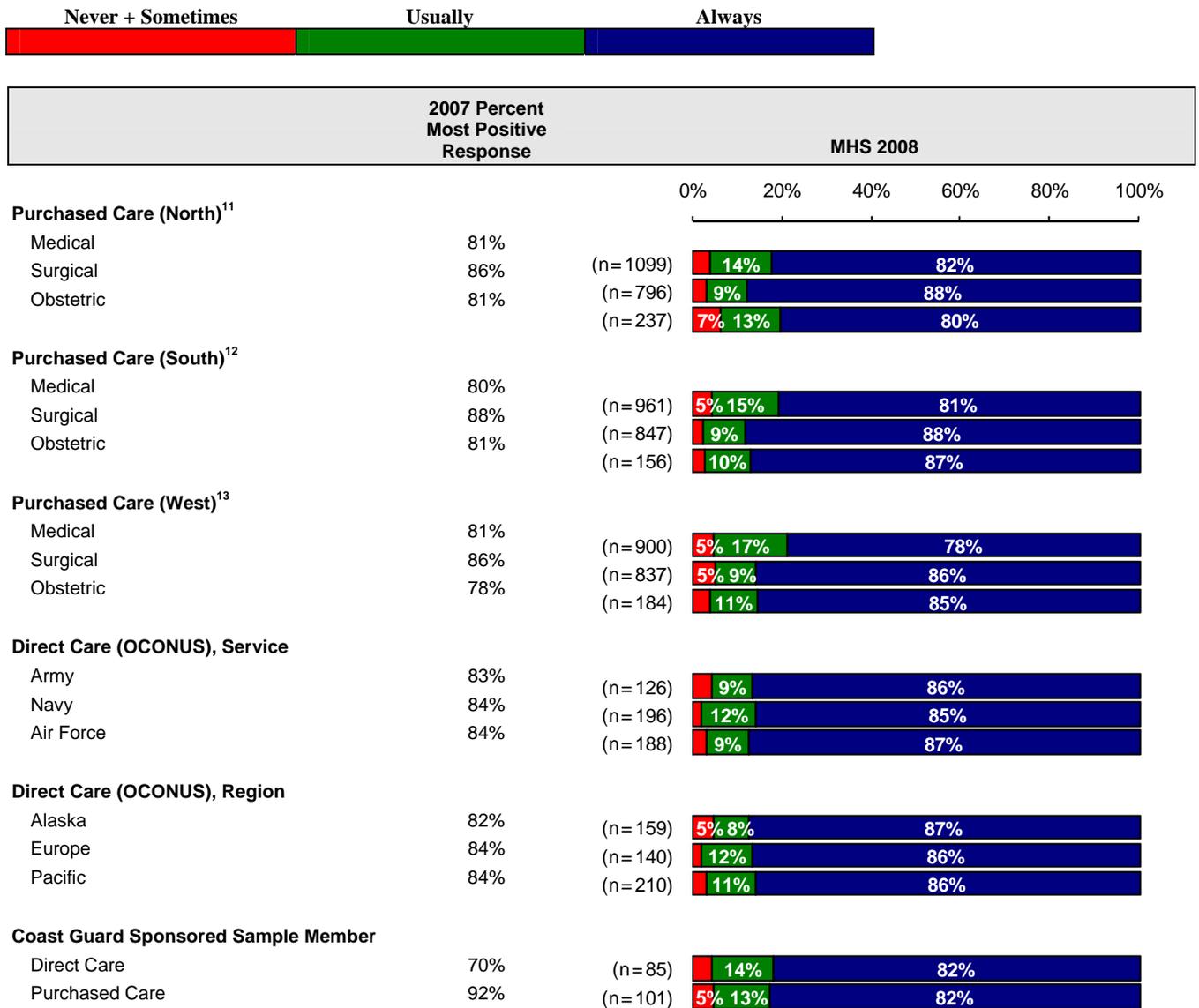
8. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Friends and Family composite ($p < .05$).

9. Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report most positive responses to the Friends and Family composite ($p < .05$). Furthermore, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to the Friends and Family composite ($p < .05$).

10. Among Direct Care beneficiaries in Air Force facilities, those receiving Medical services were significantly more likely than those receiving Obstetrics services to report most positive responses to the Friends and Family composite ($p < .05$).

Composite: Your Family and Friends (continued)

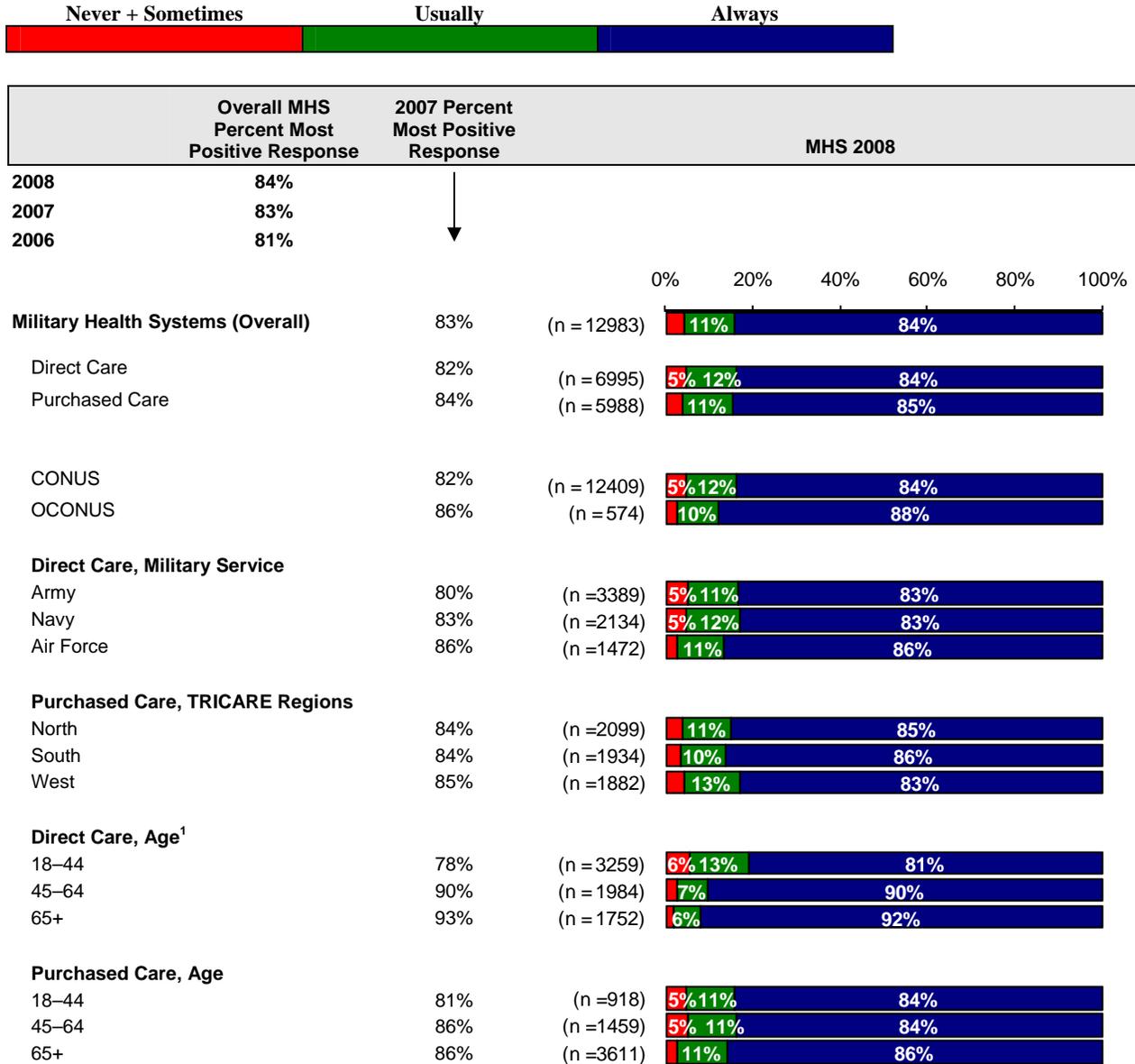
This composite combines responses from two questions about communications with family and close friends.



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report most positive responses to the Friends and Family composite ($p < .05$).
- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Friends and Family composite ($p < .05$).
- Among Purchased Care beneficiaries in the West those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Friends and Family composite ($p < .05$).

Composite: Your Family and Friends

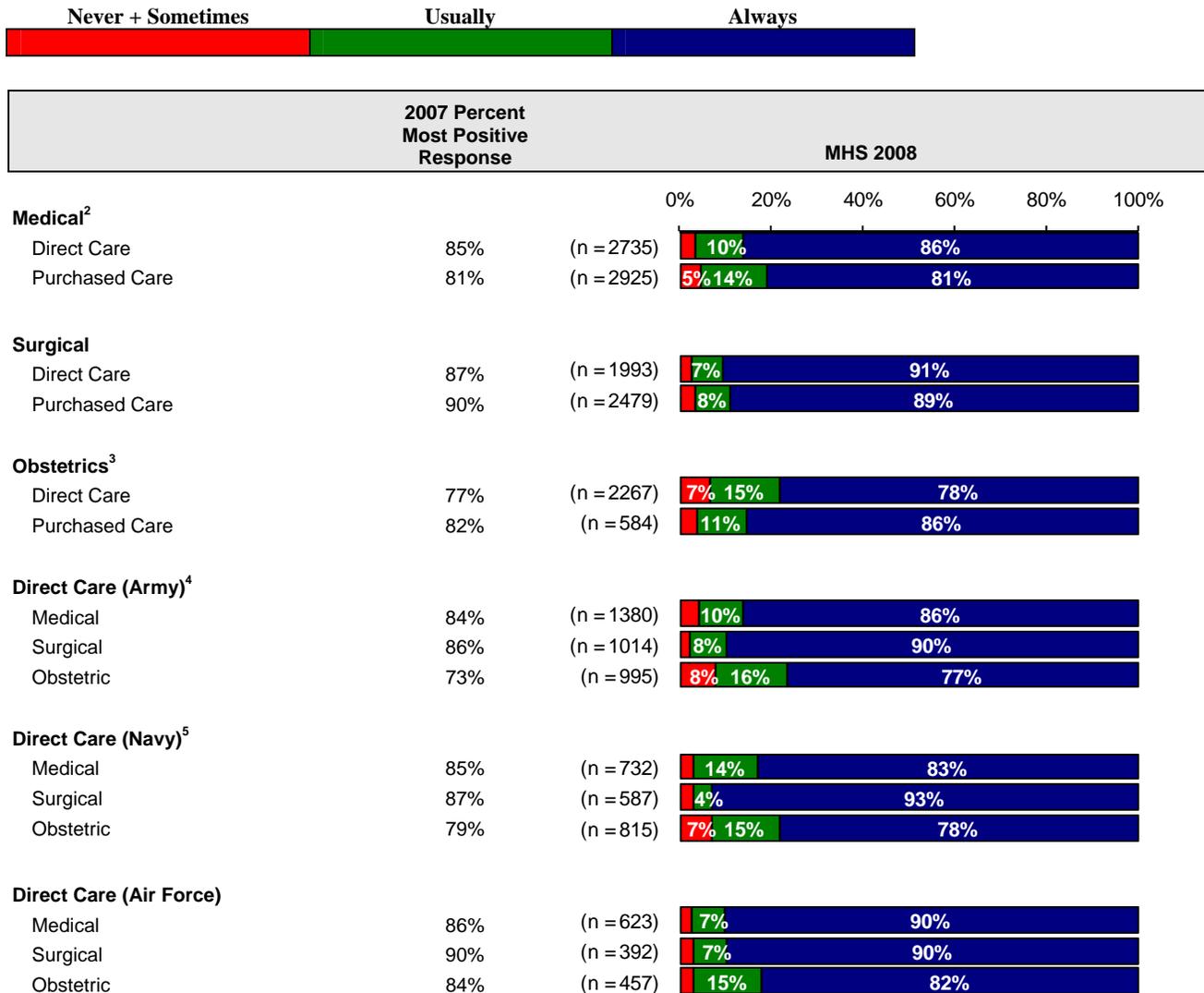
How often did doctors treat your family or close friend with courtesy and respect?



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 friends with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

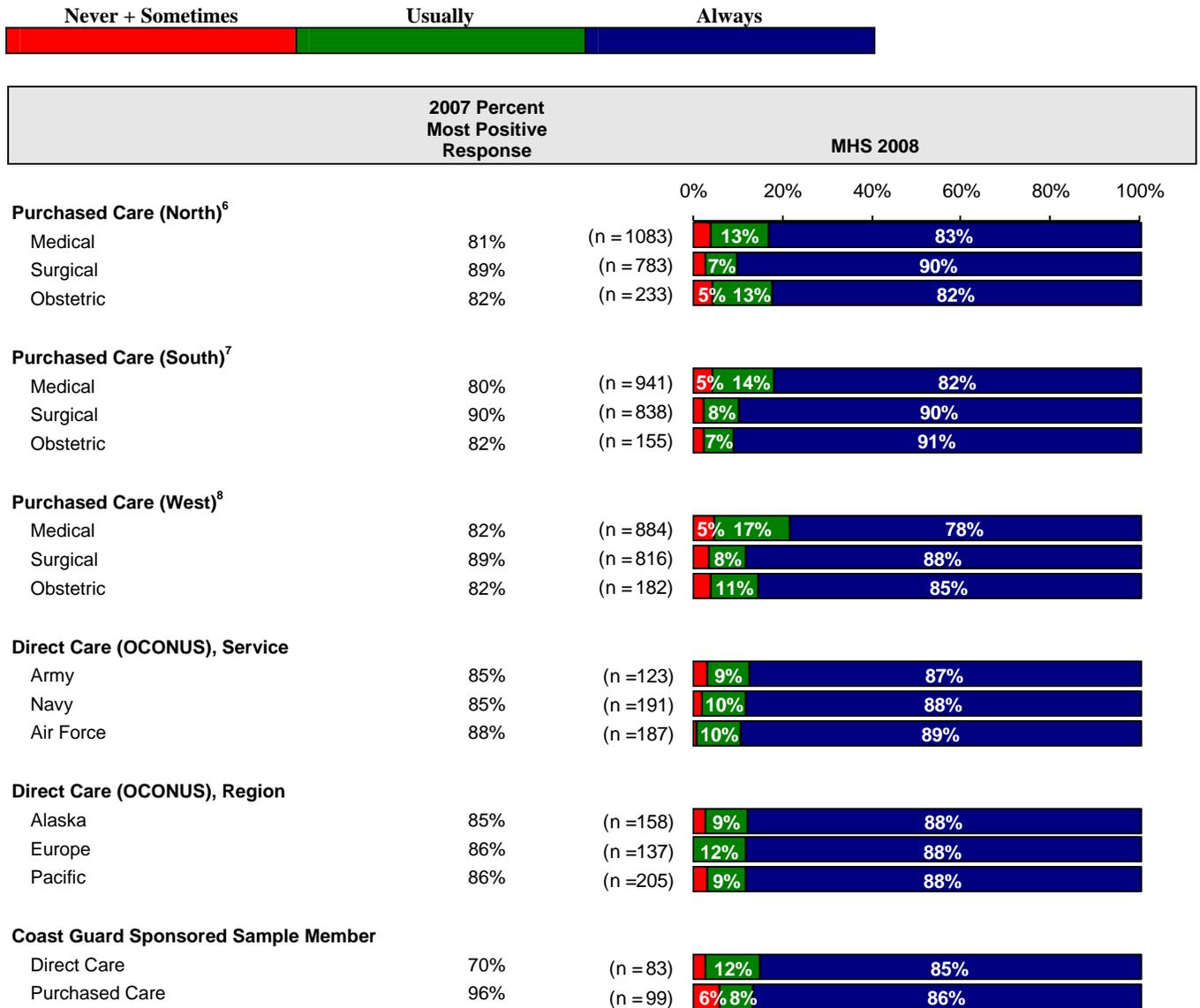
**How often did doctors treat your family or close friend with courtesy and respect?
(continued)**



- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors always treated their family or close friends 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 doctors always treated their family or close friends with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report that doctors always treated their family or close friends with courtesy and respect ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that doctors always treated their family or close friends with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that doctors always treated their family or close friends with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

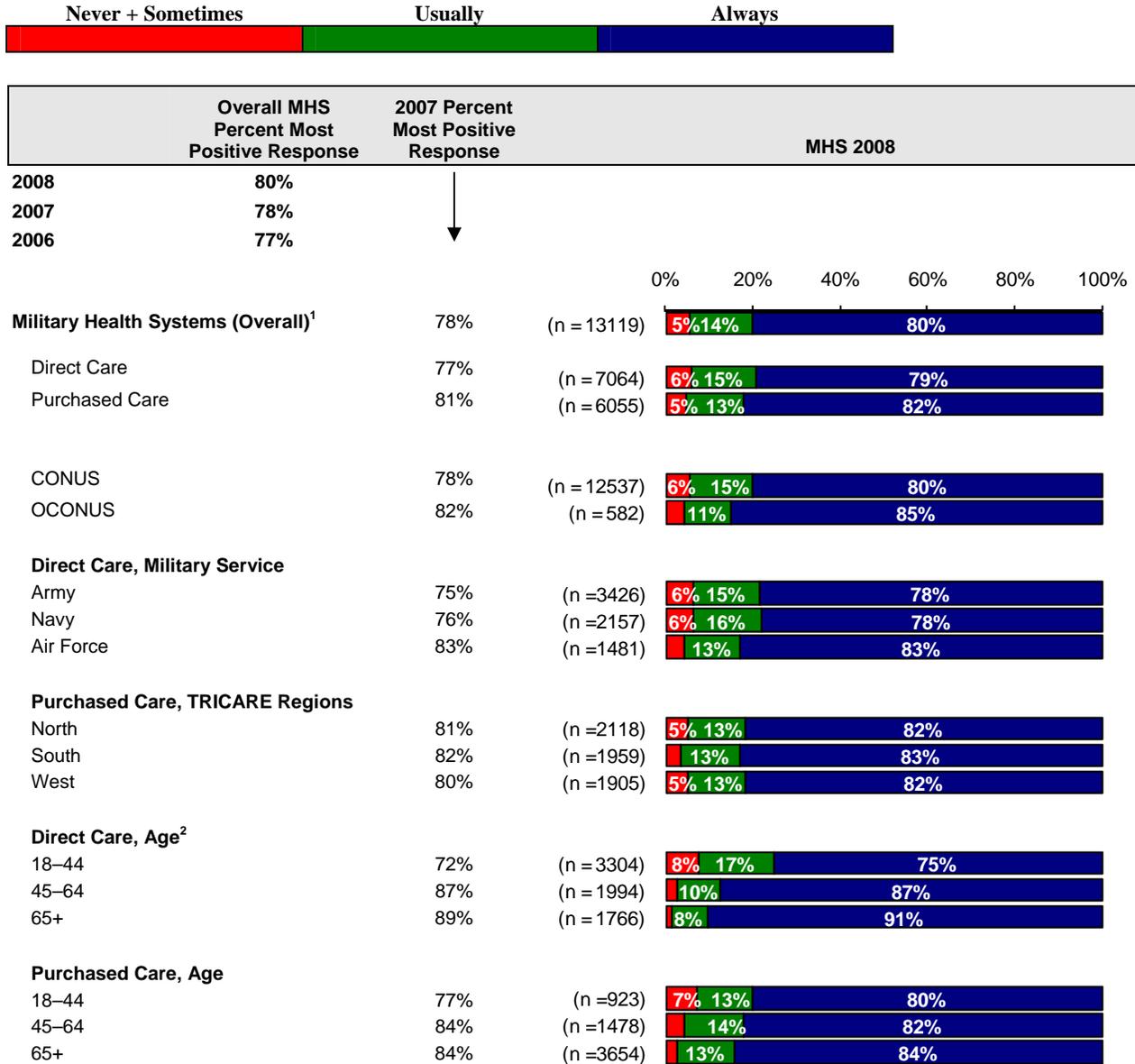
**How often did doctors treat your family or close friend with courtesy and respect?
(continued)**



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

Composite: Your Family and Friends

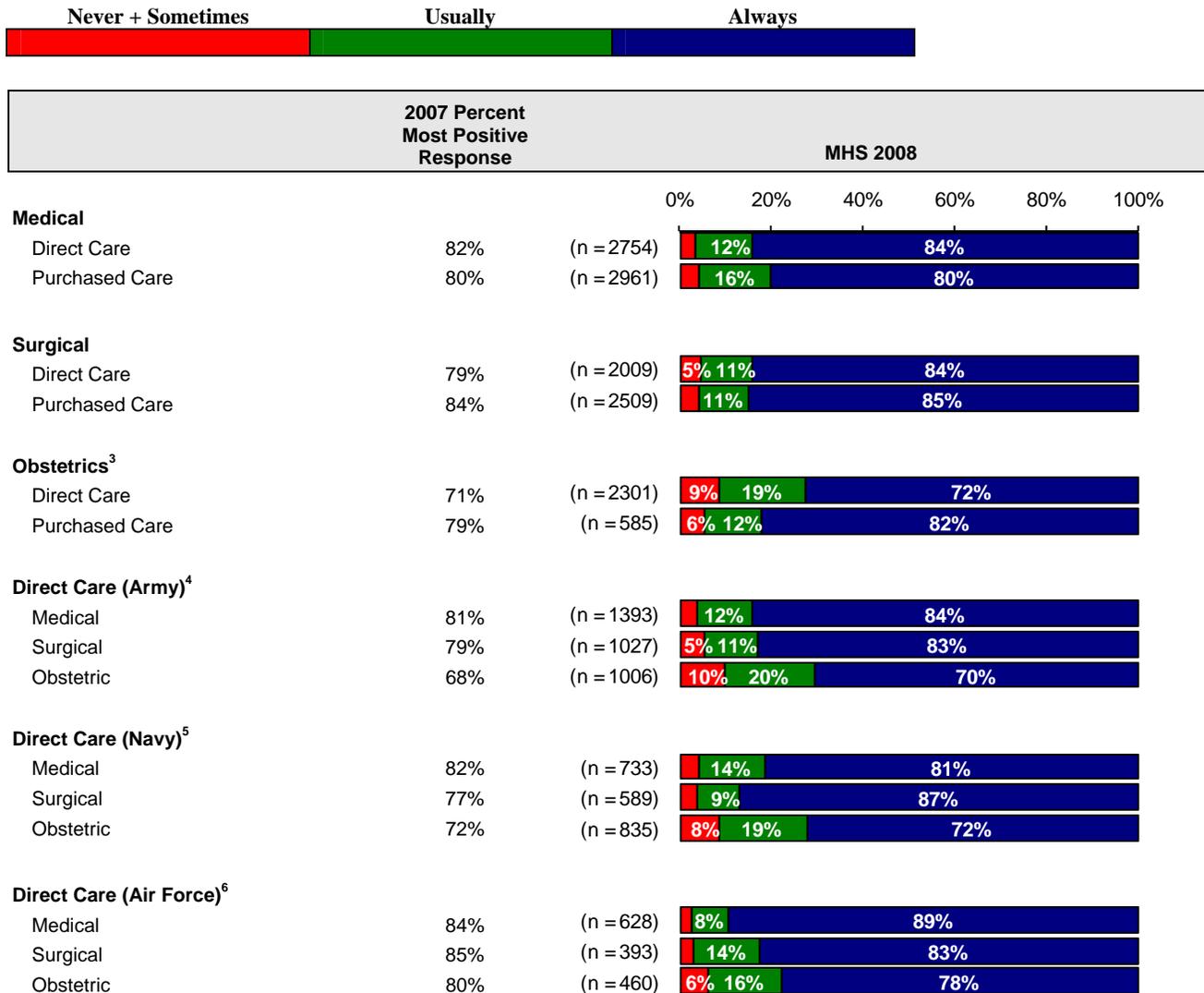
How often did nurses treat your family or close friend with courtesy and respect?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that nurses always treated their family or close friends 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 friends with courtesy and respect ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to report that nurses always treated their family or close friends with courtesy and respect ($p < .05$).

Composite: Your Family and Friends (continued)

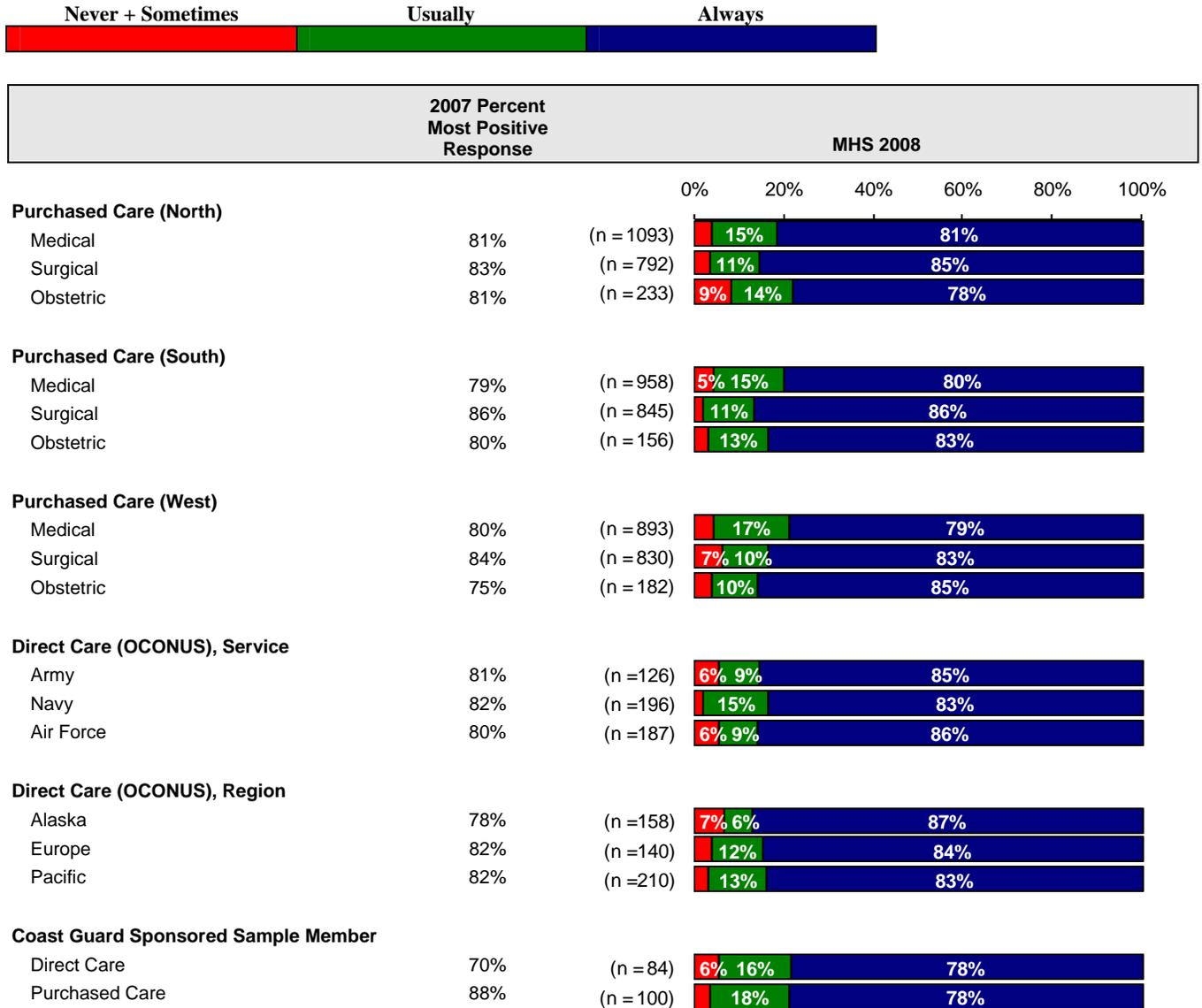
**How often did nurses treat your family or close friend with courtesy and respect?
(continued)**



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

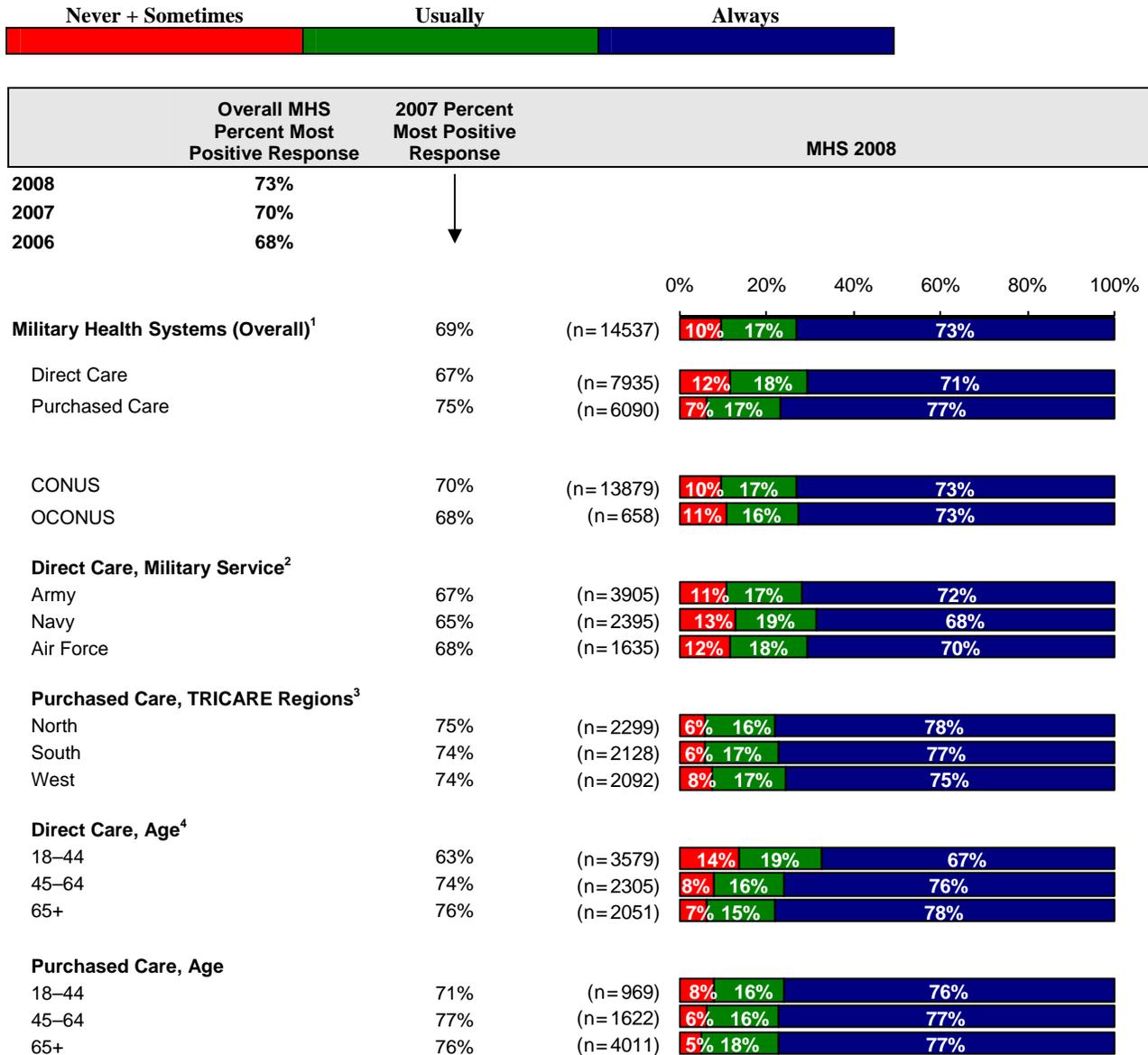
Composite: Your Family and Friends (continued)

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



Composite: Interaction with Other Hospital Staff

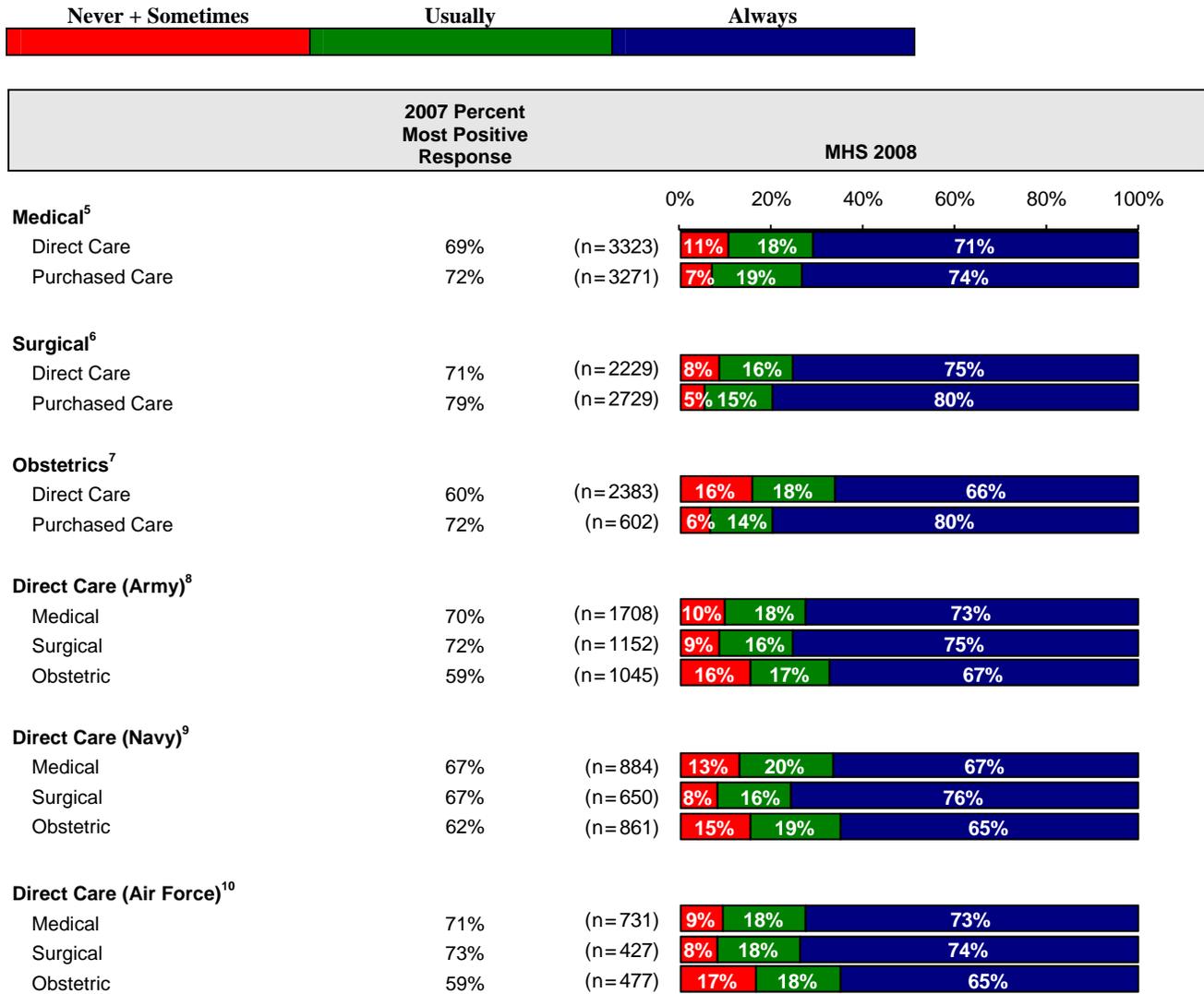
This composite combines responses from eight questions about interactions with other hospital staff.



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries, those in Army facilities were significantly more likely than those in Navy facilities to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Purchased Care beneficiaries, those in the North were significantly more likely than those in the West to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Direct Care beneficiaries, those aged 65+ were significantly more likely than beneficiaries in other age groups to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$). Furthermore, those aged 18–44 were significantly less likely than beneficiaries 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)

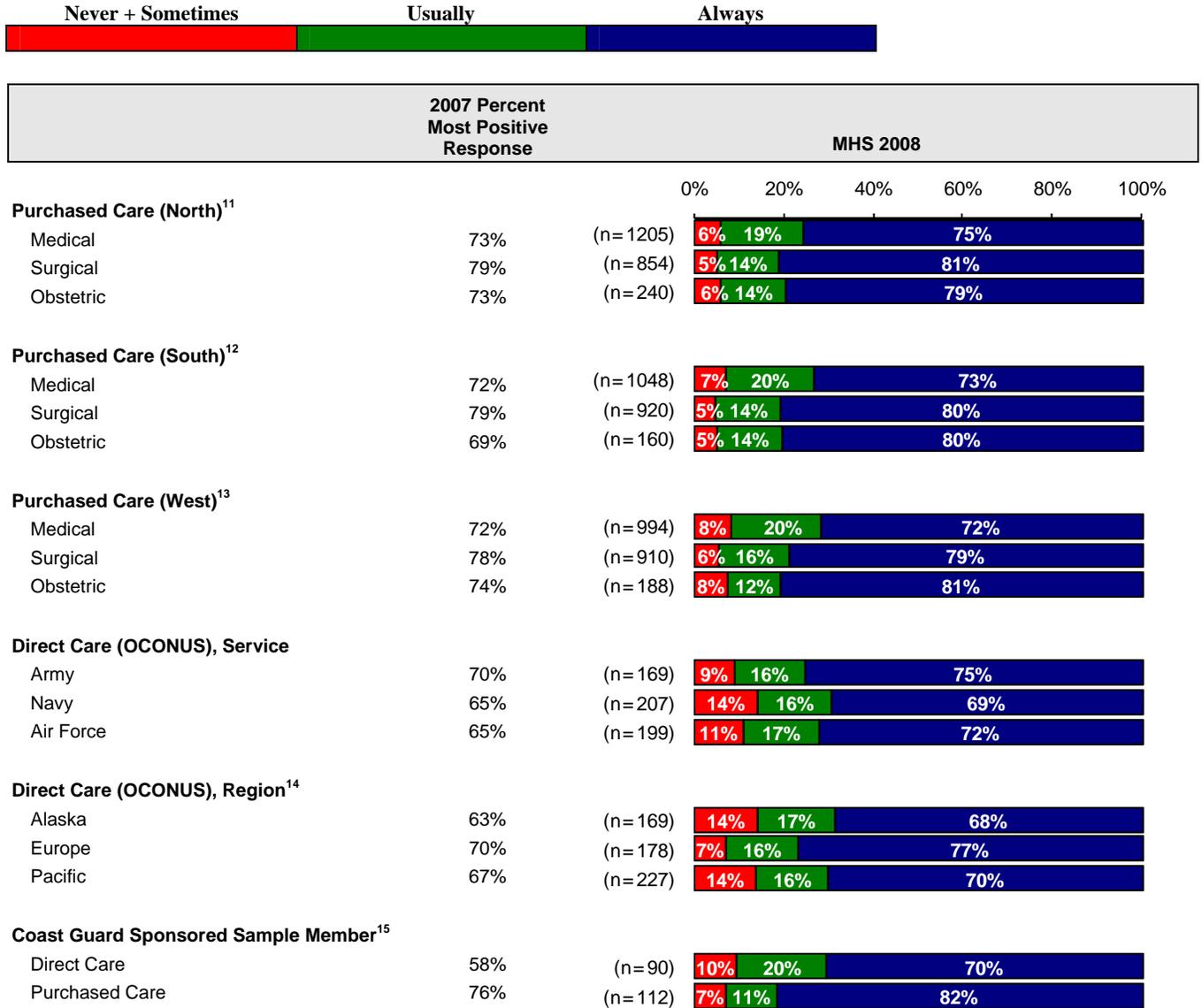
This composite combines responses from eight questions about interactions with other hospital staff.



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

Composite: Interaction with Other Hospital Staff (continued)

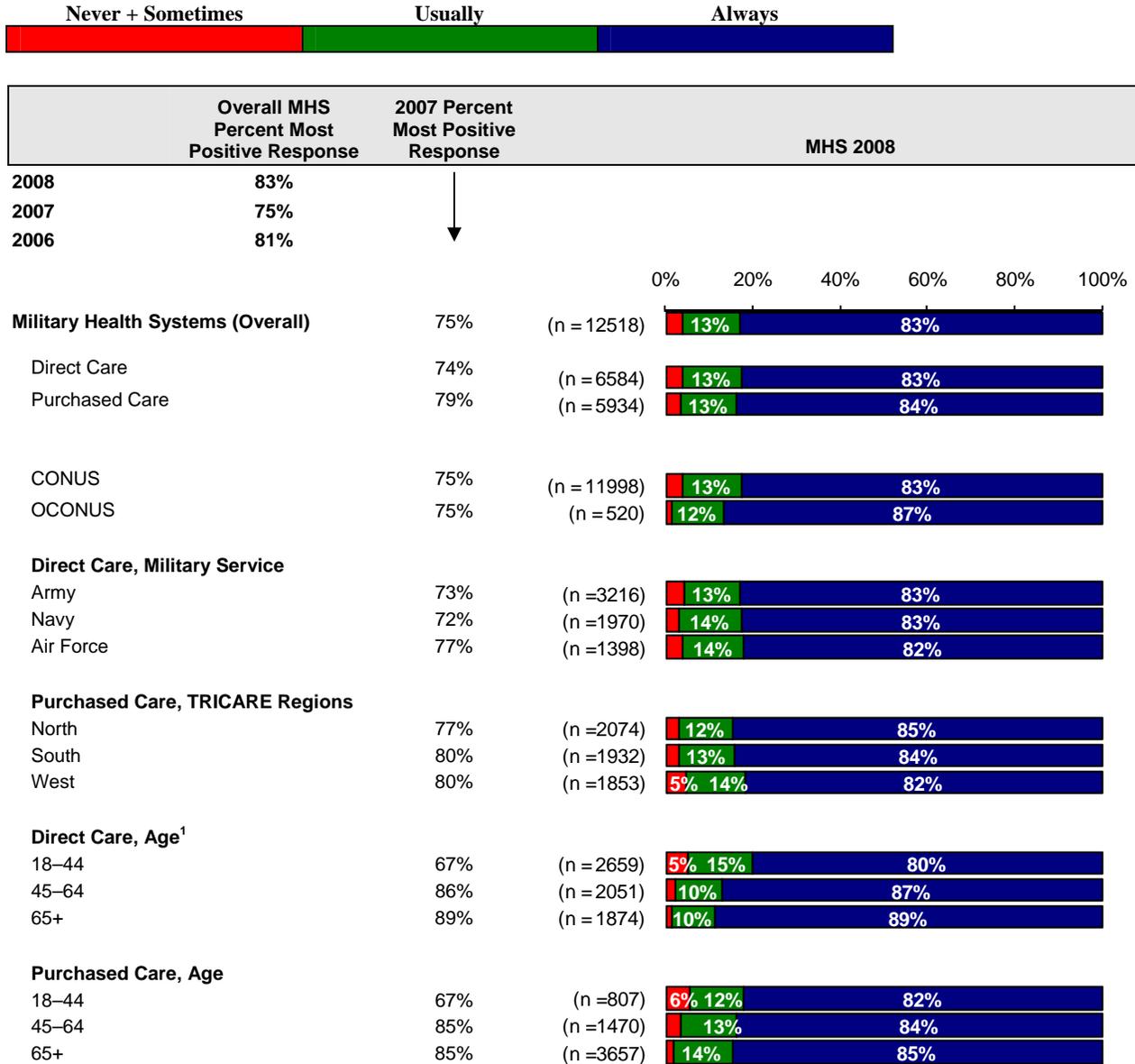
This composite combines responses from eight questions about interactions with other hospital staff.



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Direct Care OCONUS beneficiaries, those receiving care in the Europe region were significantly more likely than those receiving care in the Alaska or Pacific regions to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).
- Among Coast Guard beneficiaries, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report most positive responses to the Interaction with Other Hospital Staff composite ($p < .05$).

Composite: Interaction with Other Hospital Staff

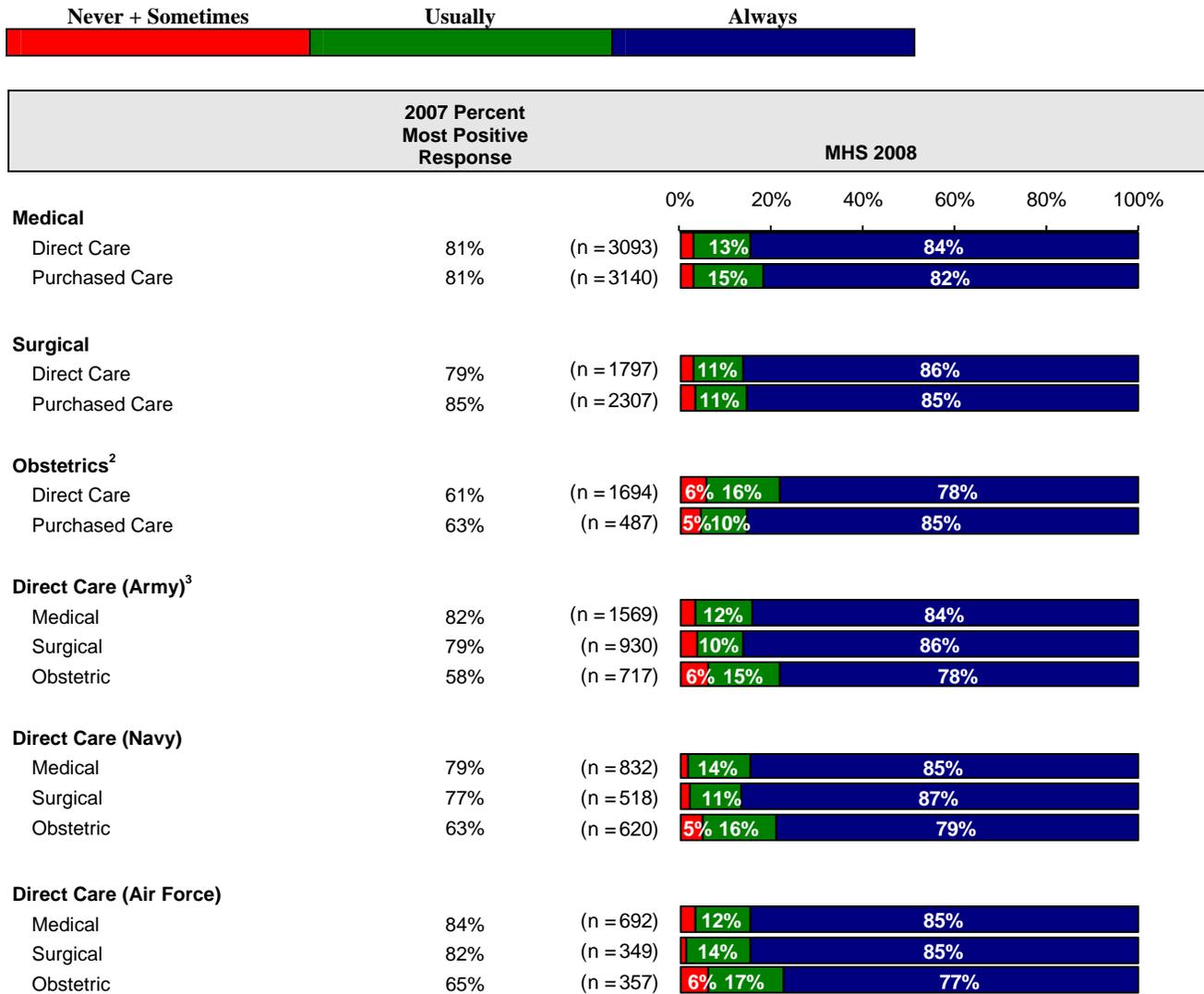
How often did the staff who took blood from you treat you with courtesy and respect?



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

Composite: Interaction with Other Hospital Staff (continued)

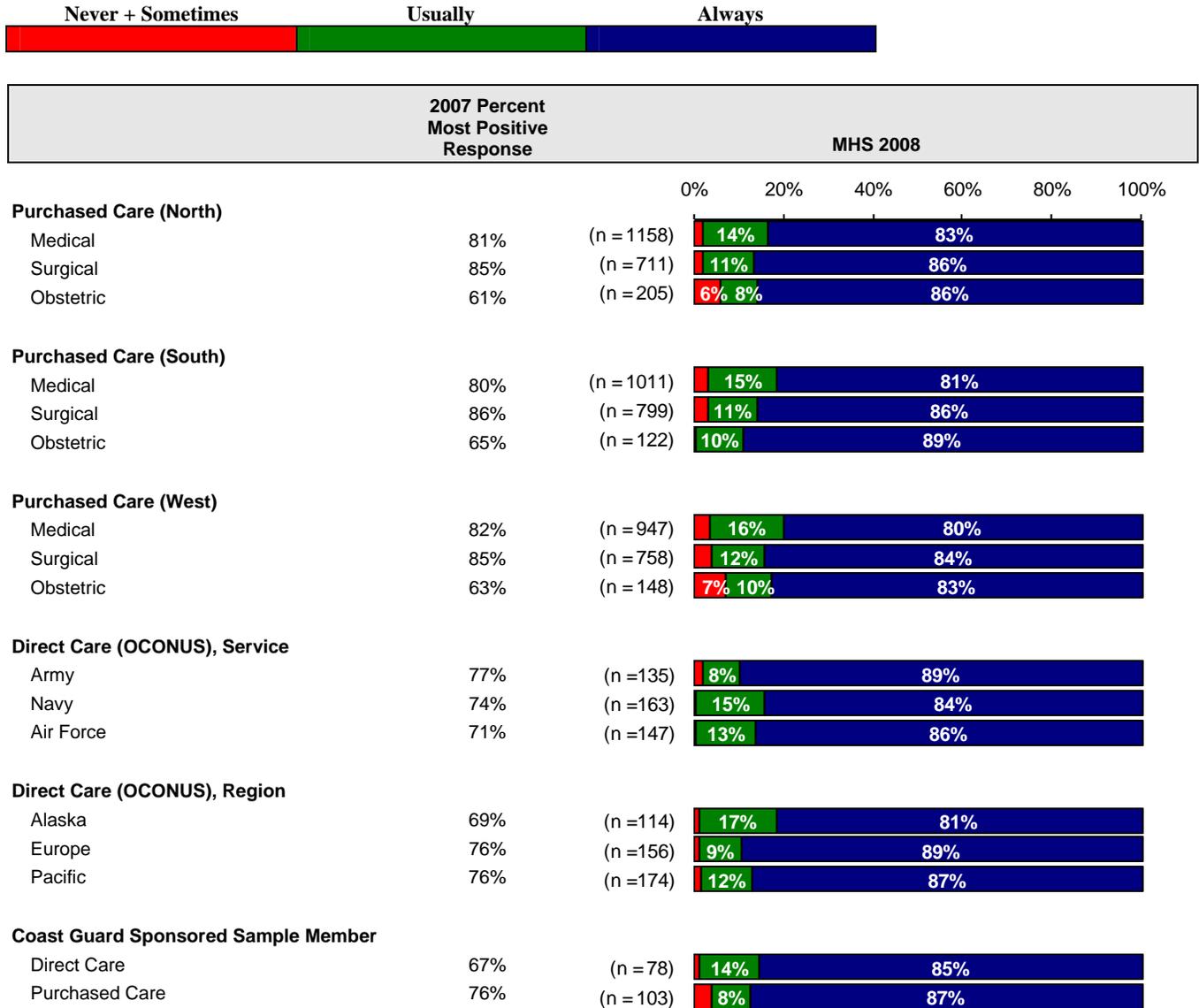
How often did the staff who took blood from you treat you with courtesy and respect? (continued)



- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff who took blood from them always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that staff who took blood from them always treated them with courtesy and respect ($p < .05$).

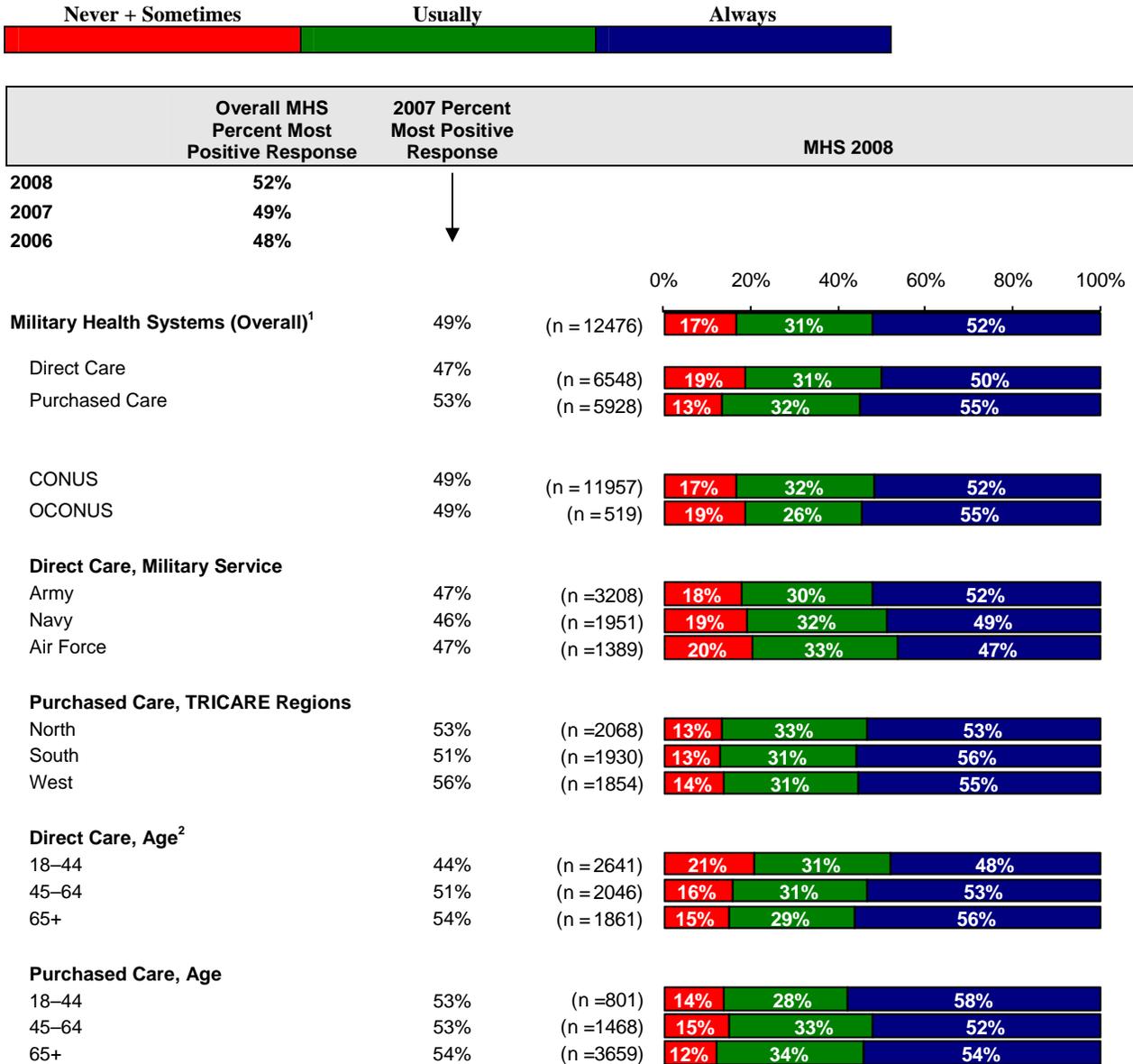
Composite: Interaction with Other Hospital Staff (continued)

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



Composite: Interaction with Other Hospital Staff

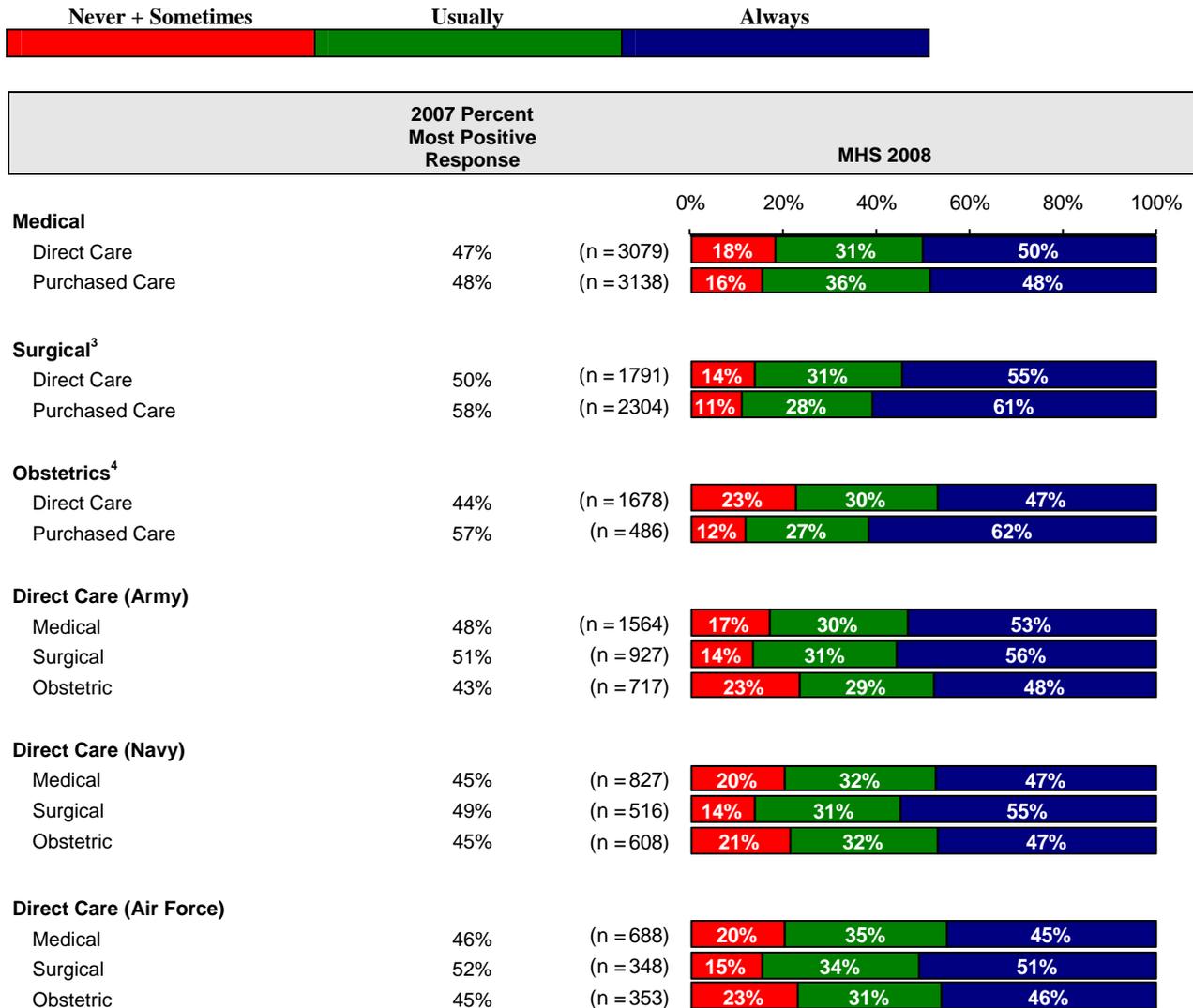
How often did the staff who took blood from you do this without causing you too much pain?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff who took blood from them always 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 staff who took blood from them always 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)

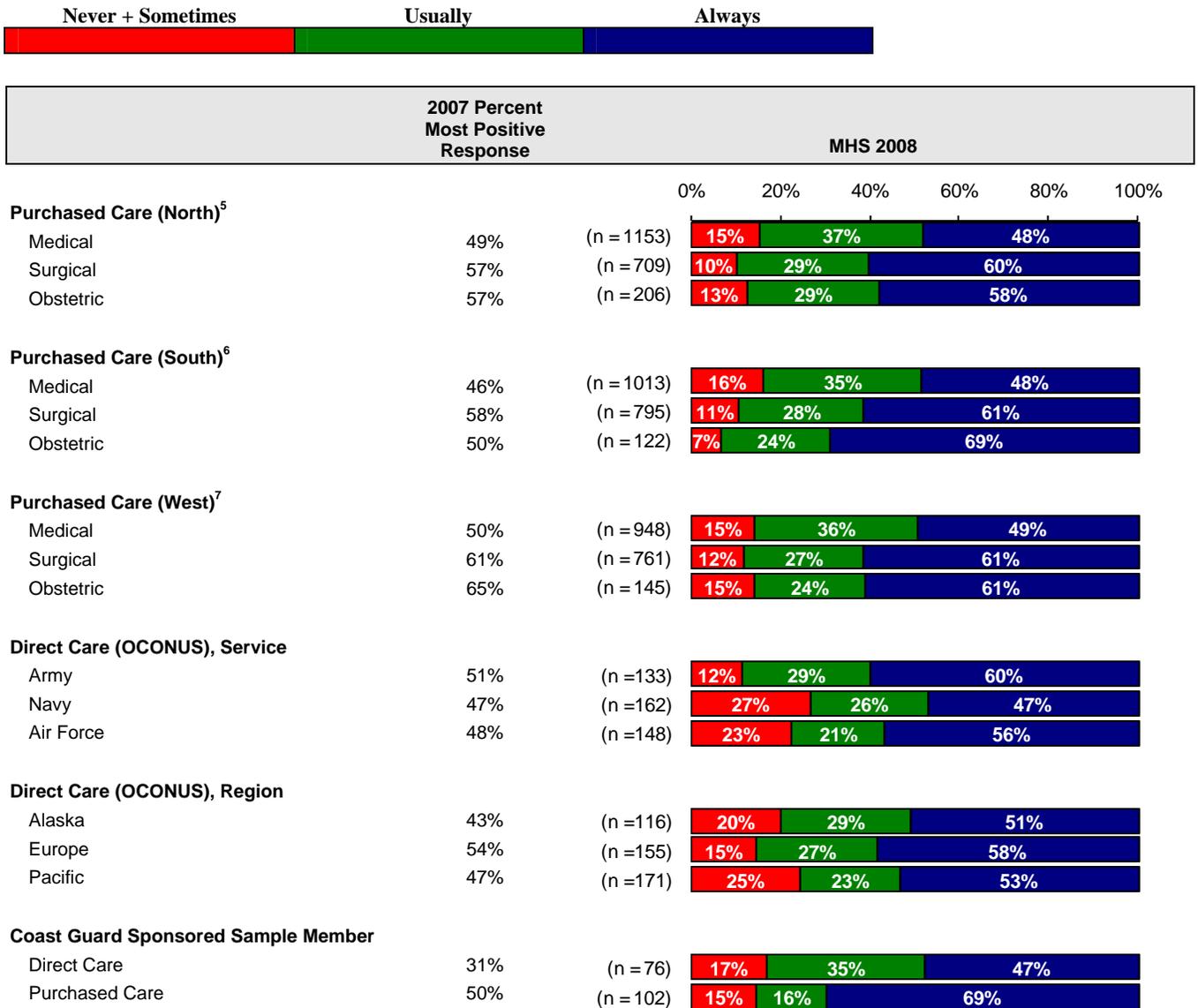


3. Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than Direct Care to report that staff who took blood from them always did it without causing too much pain ($p < .05$).

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

Composite: Interaction with Other Hospital Staff (continued)

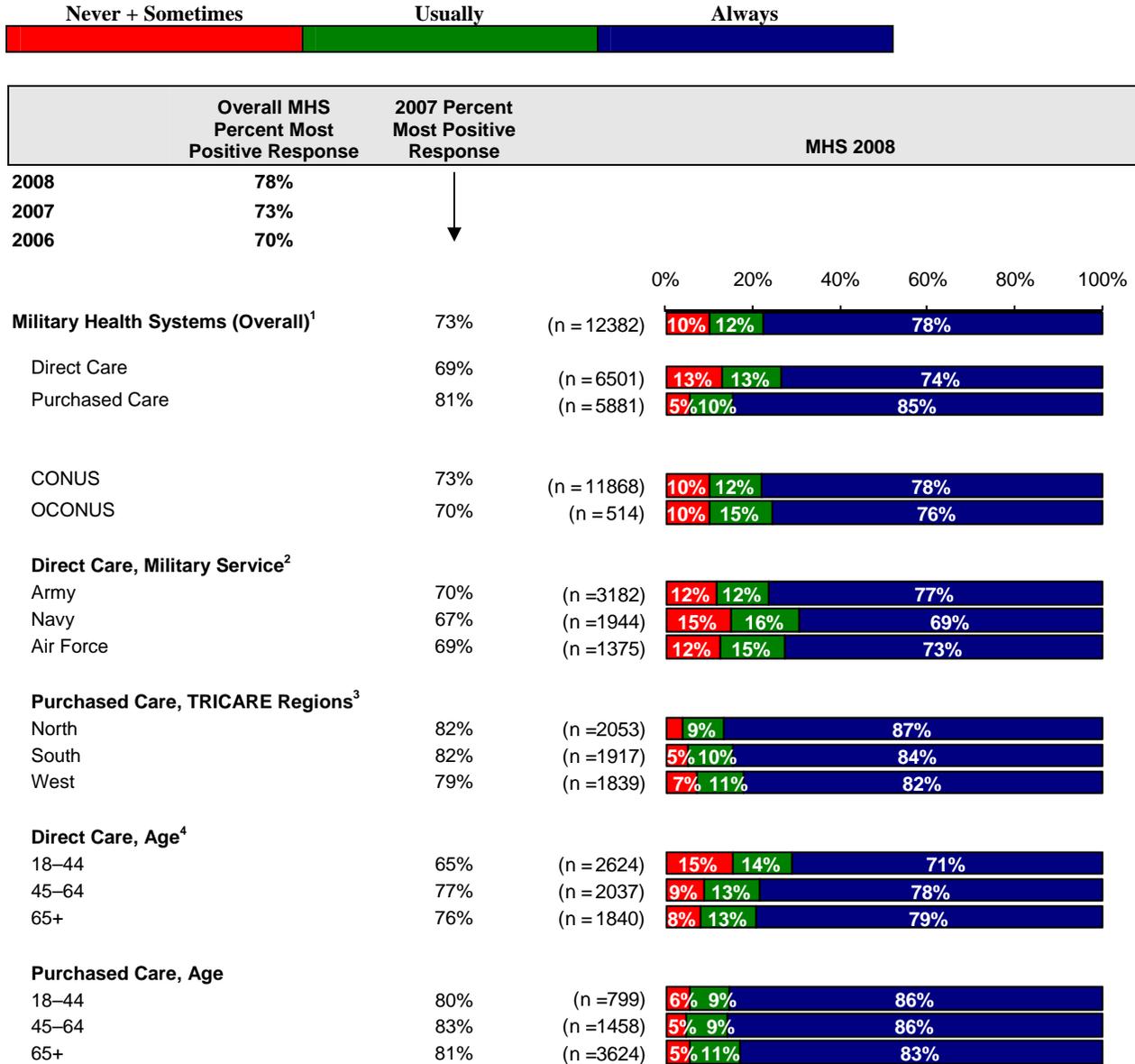
How often did the staff who took blood from you do this without causing you too much pain? (continued)



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

Composite: Interaction with Other Hospital Staff

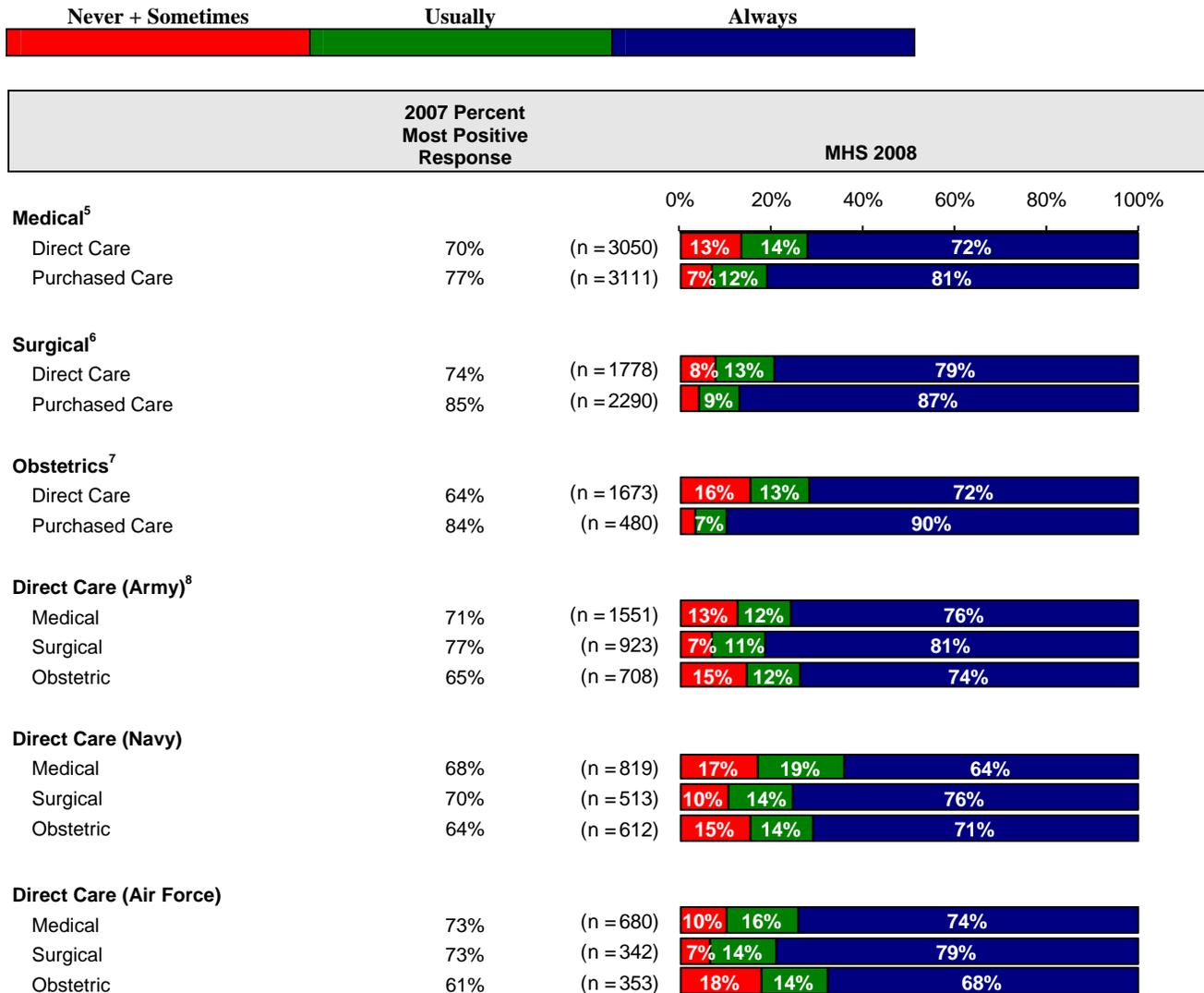
How often did staff check your identification band before taking your blood?



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before taking their blood ($p < .05$).
- Among Direct Care beneficiaries, those in Army facilities were significantly more likely than those in Navy or Air Force facilities to report that staff always checked their identification band before taking their blood ($p < .05$).
- Among Purchased Care beneficiaries, those in the North were significantly more likely than those in the West to report that staff always checked their identification band before taking their blood ($p < .05$).
- Among Direct Care beneficiaries, 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 taking their blood ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

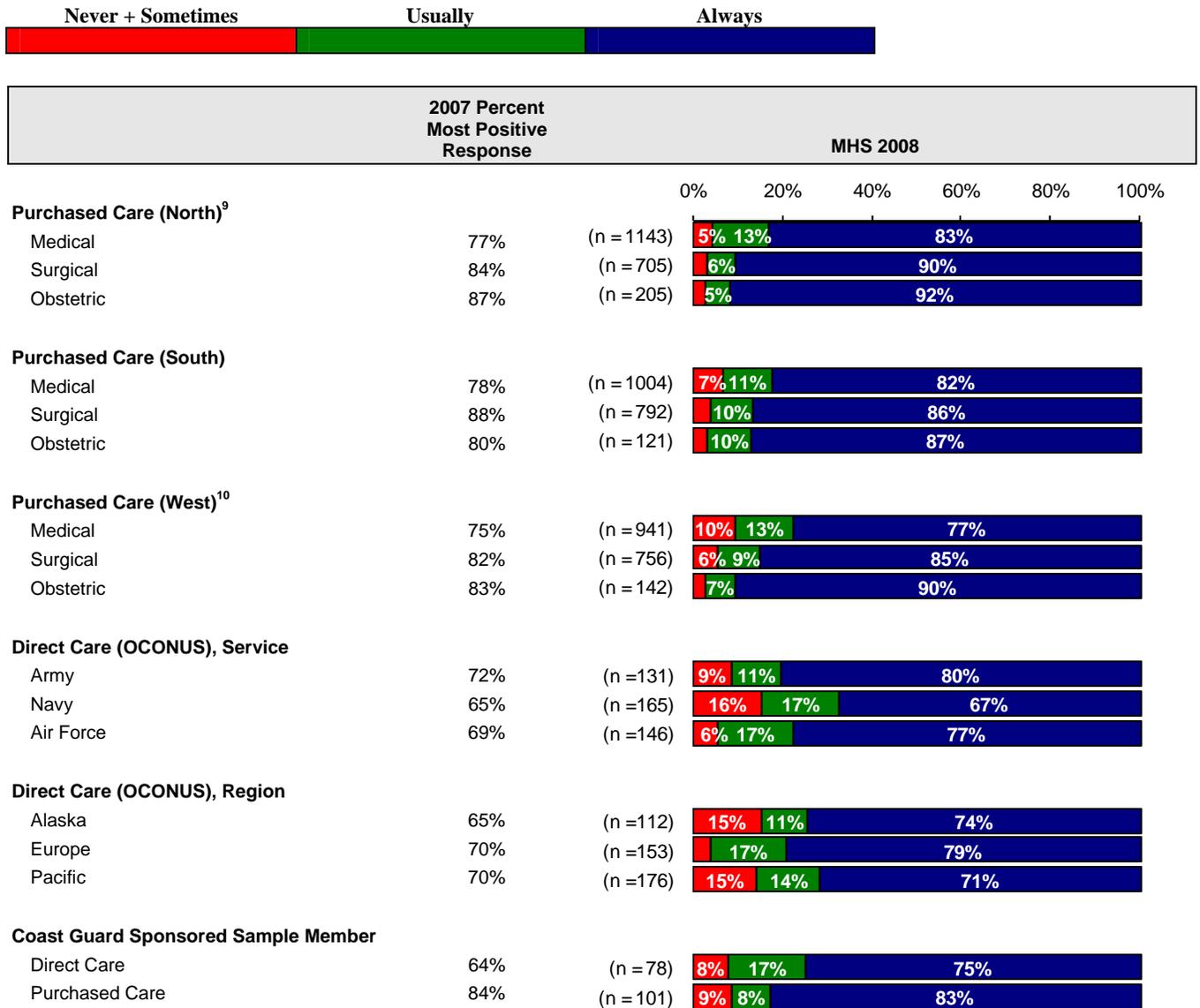
**How often did staff check your identification band before taking your blood?
(continued)**



- Among beneficiaries receiving Medical services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before taking their blood ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before taking their blood ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before taking their blood ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that staff always checked their identification band before taking their blood ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

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

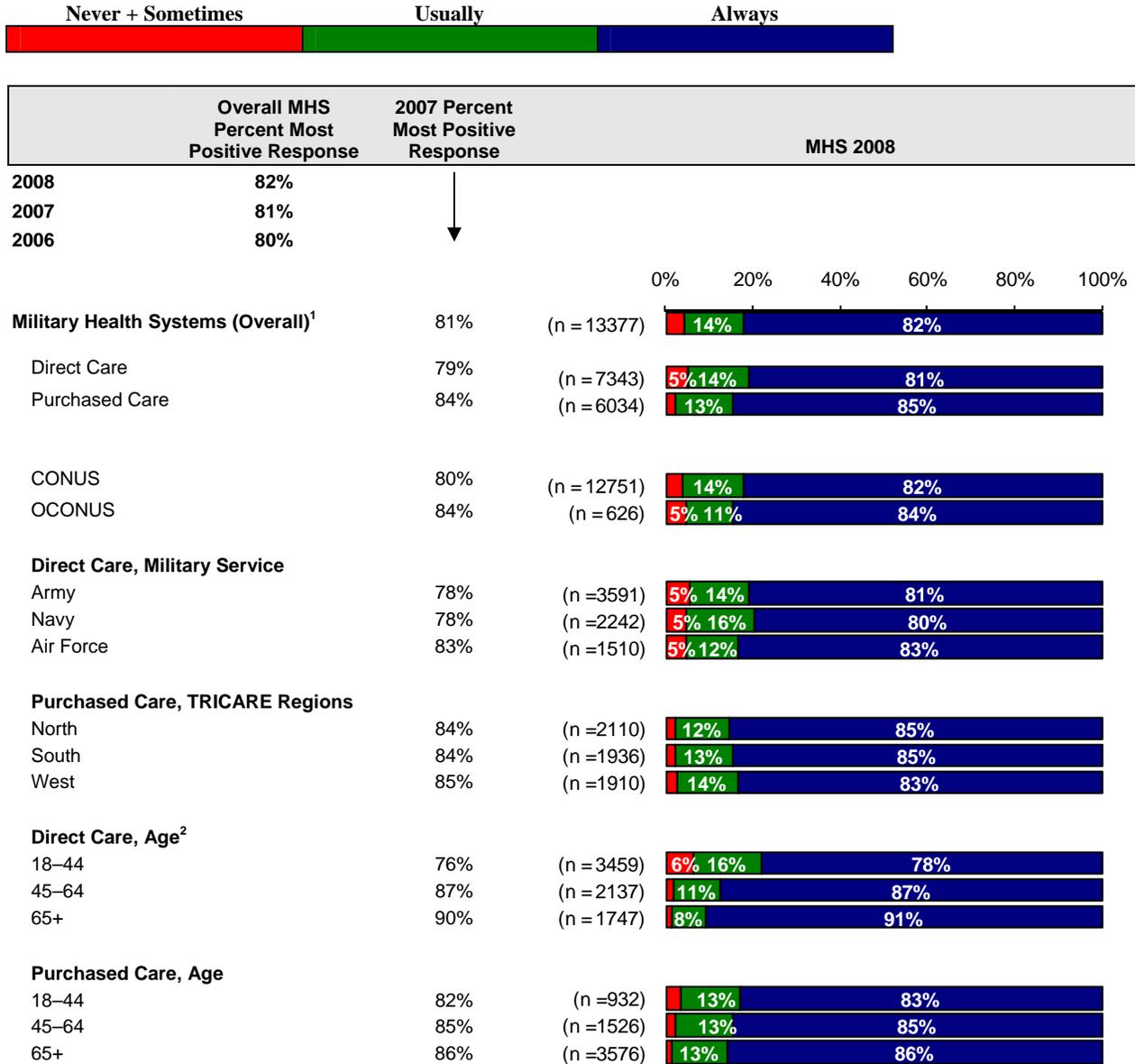


9. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that staff always checked their identification band before taking their blood ($p < .05$).

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

Composite: Interaction with Other Hospital Staff

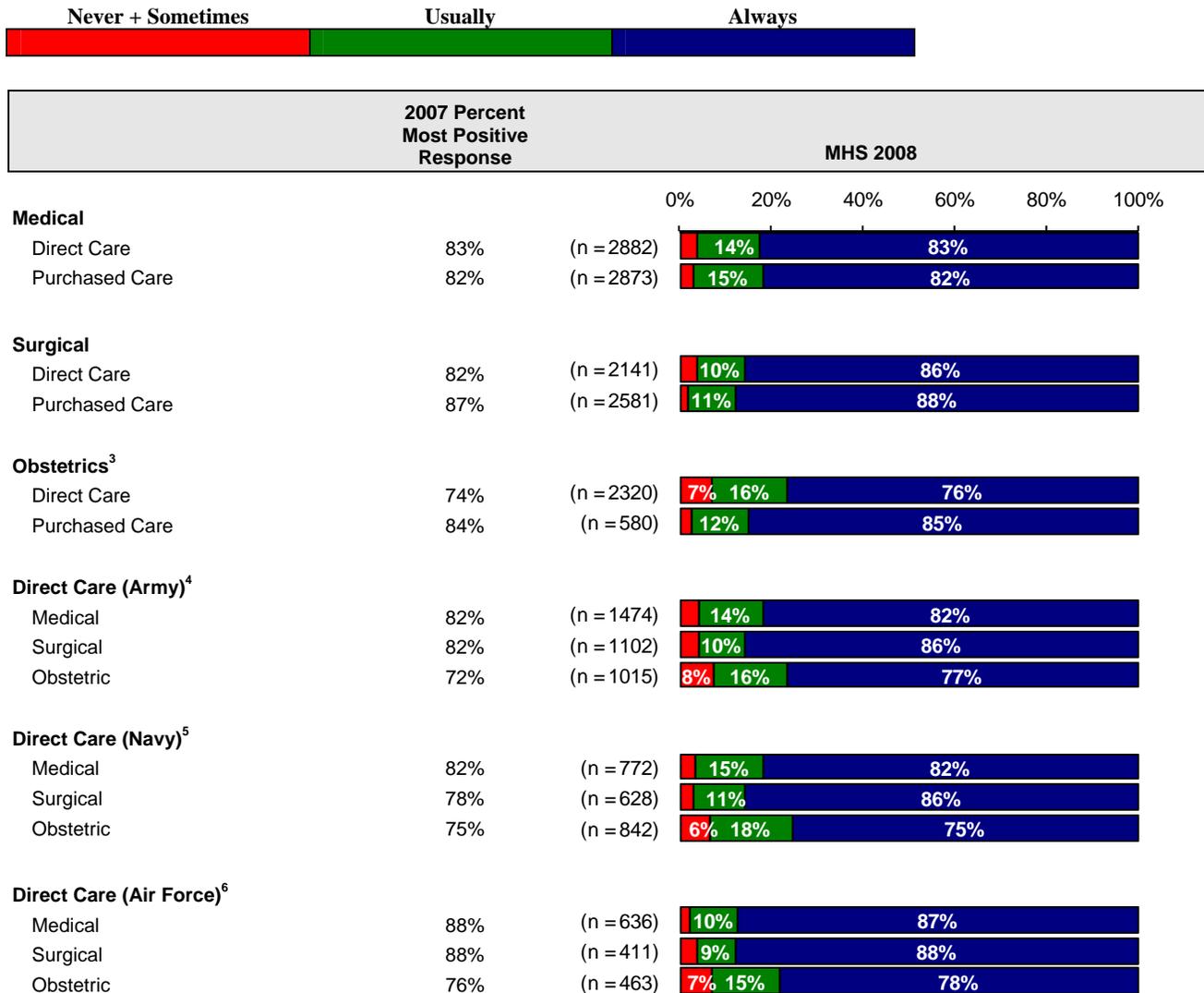
How often did the staff starting your IVs treat you with courtesy and respect?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries 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 ($p < .05$). Also, those aged 65+ were significantly more 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)

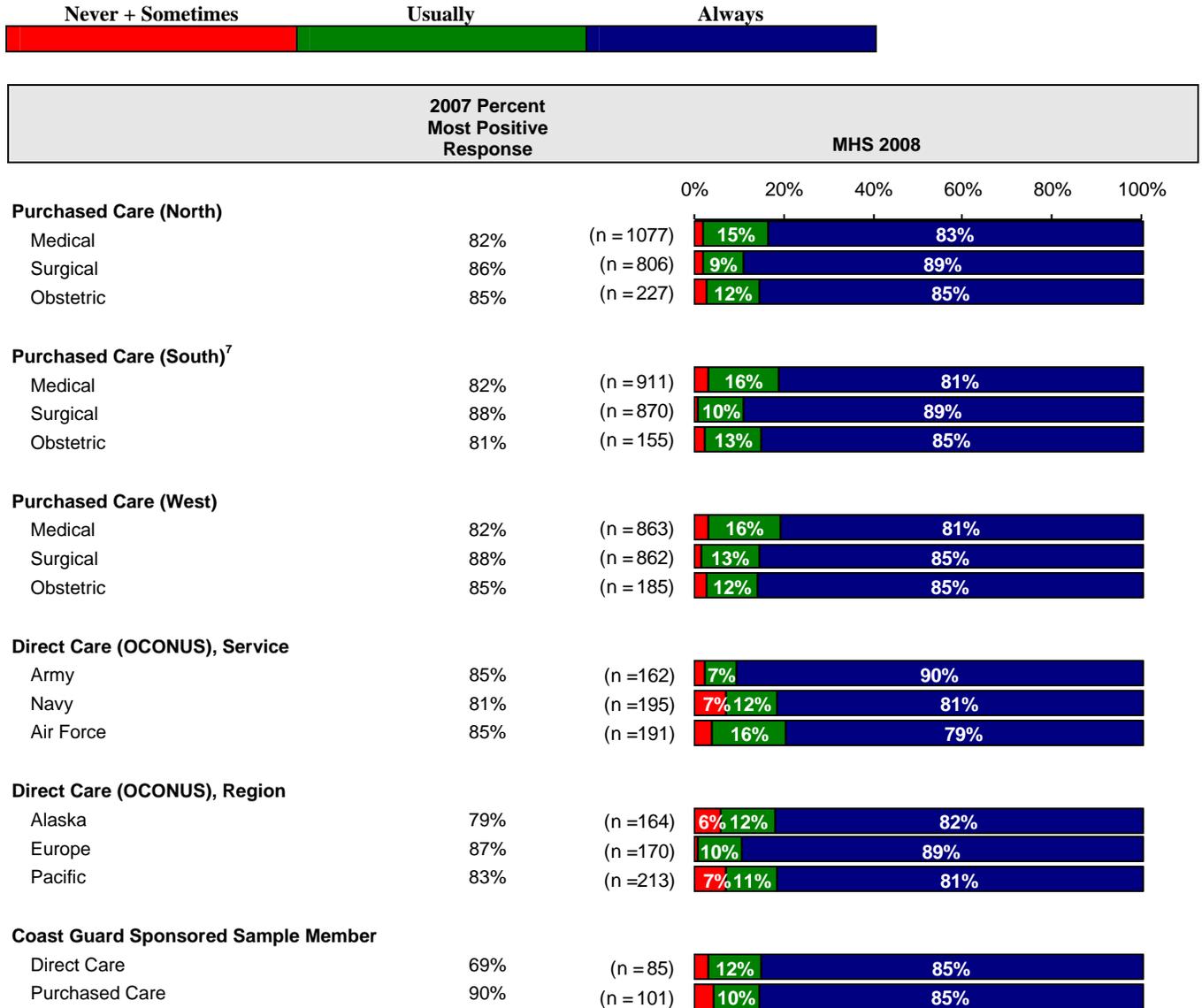
**How often did the staff starting your IVs treat you with courtesy and respect?
(continued)**



- Among beneficiaries receiving Obstetrics services, 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 in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

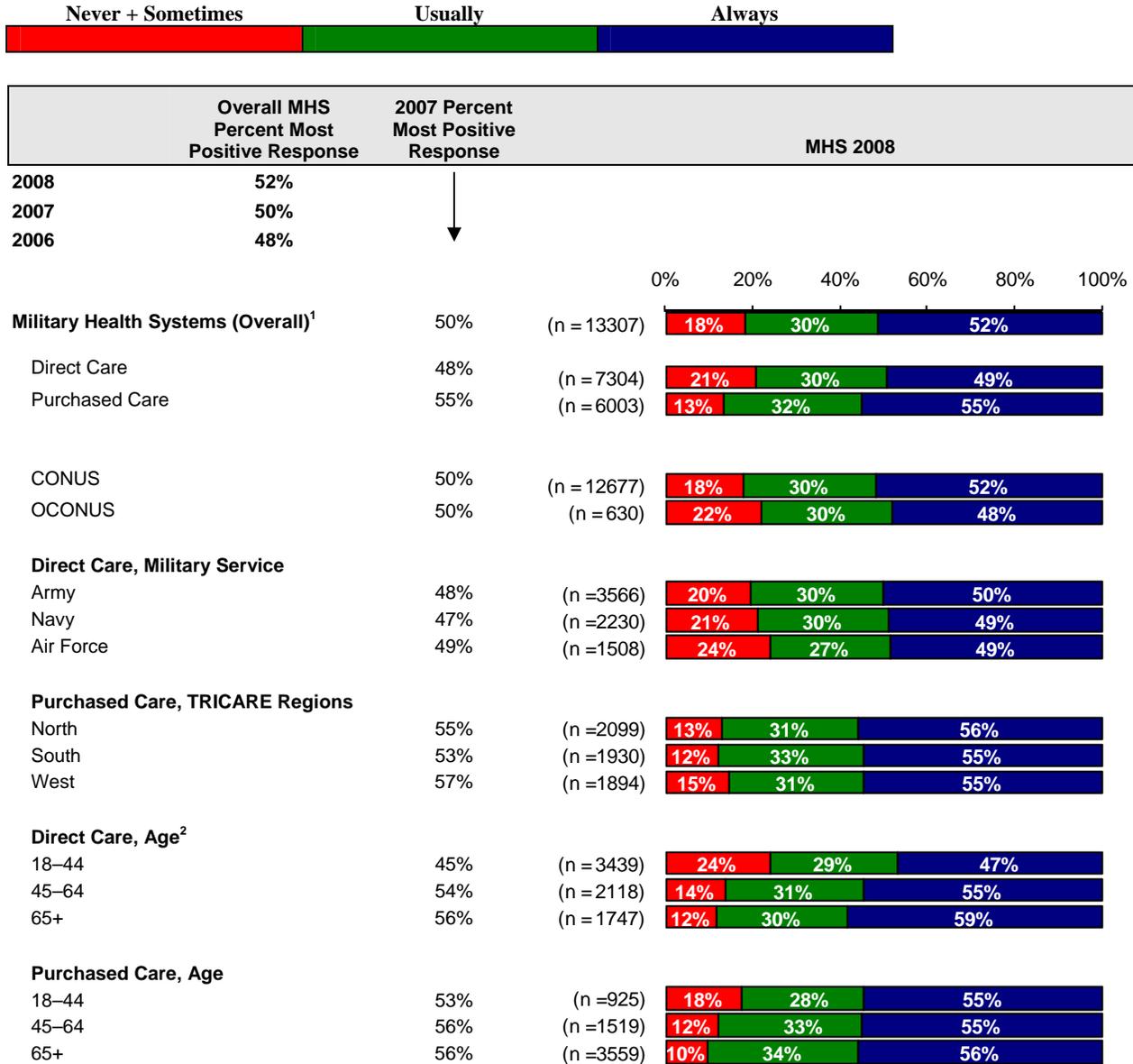
**How often did the staff starting your IVs treat you with courtesy and respect?
(continued)**



7. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).

Composite: Interaction with Other Hospital Staff

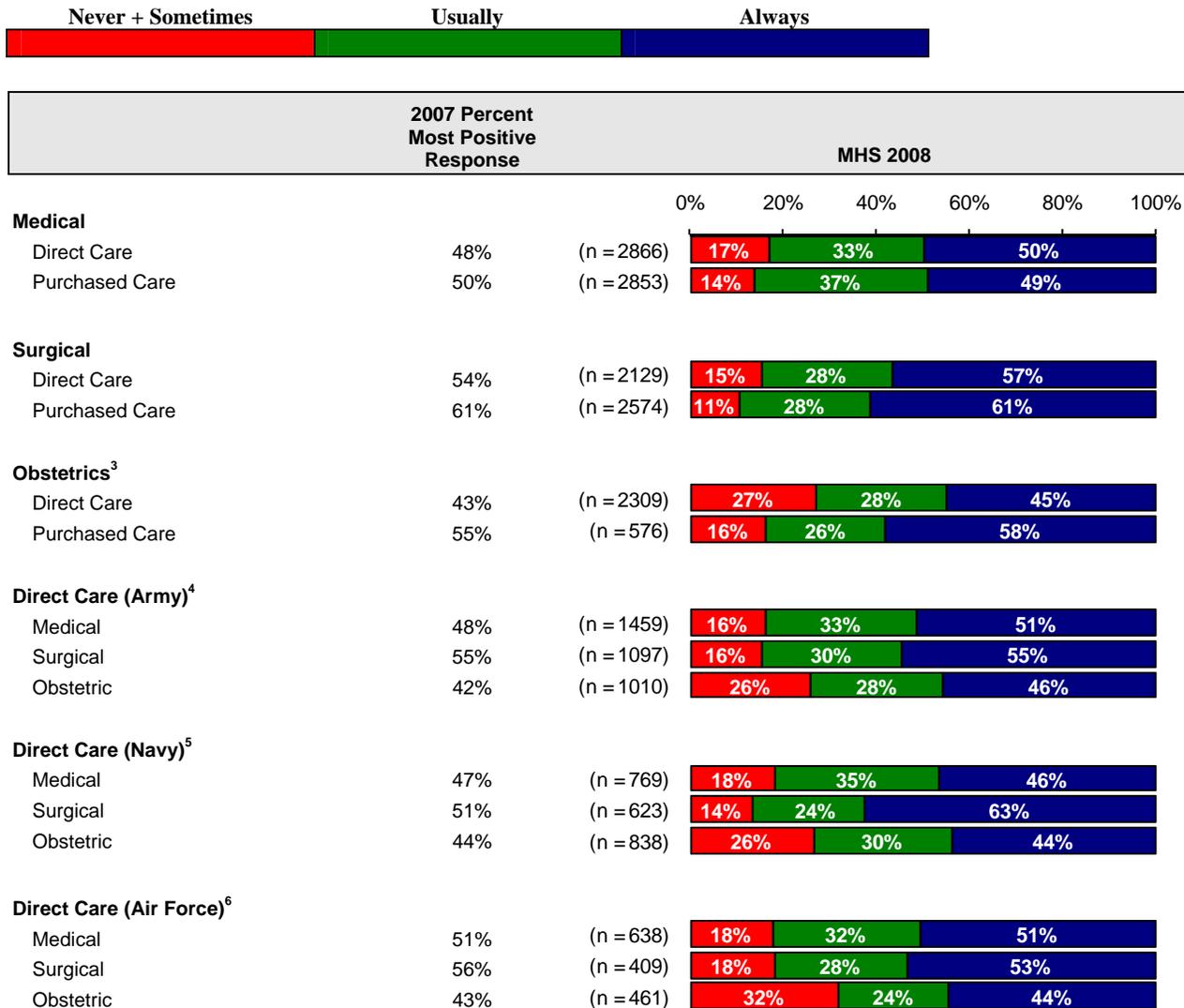
How often did the staff starting your IVs do this without causing you too much pain?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff starting their IVs always did this 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 ($p < .05$). Also, 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)

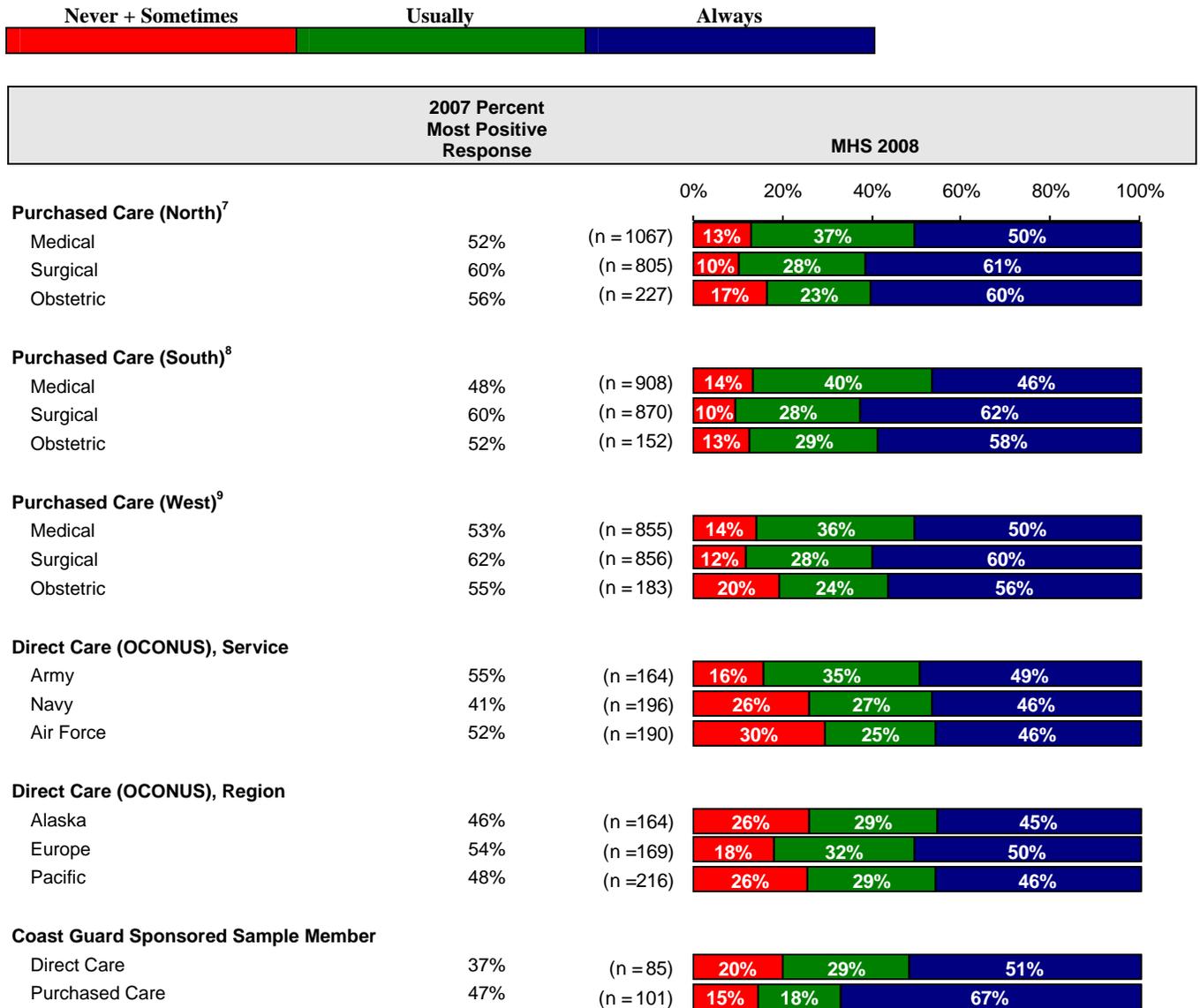
How often did the staff starting your IVs do this without causing you too much pain? (continued)



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

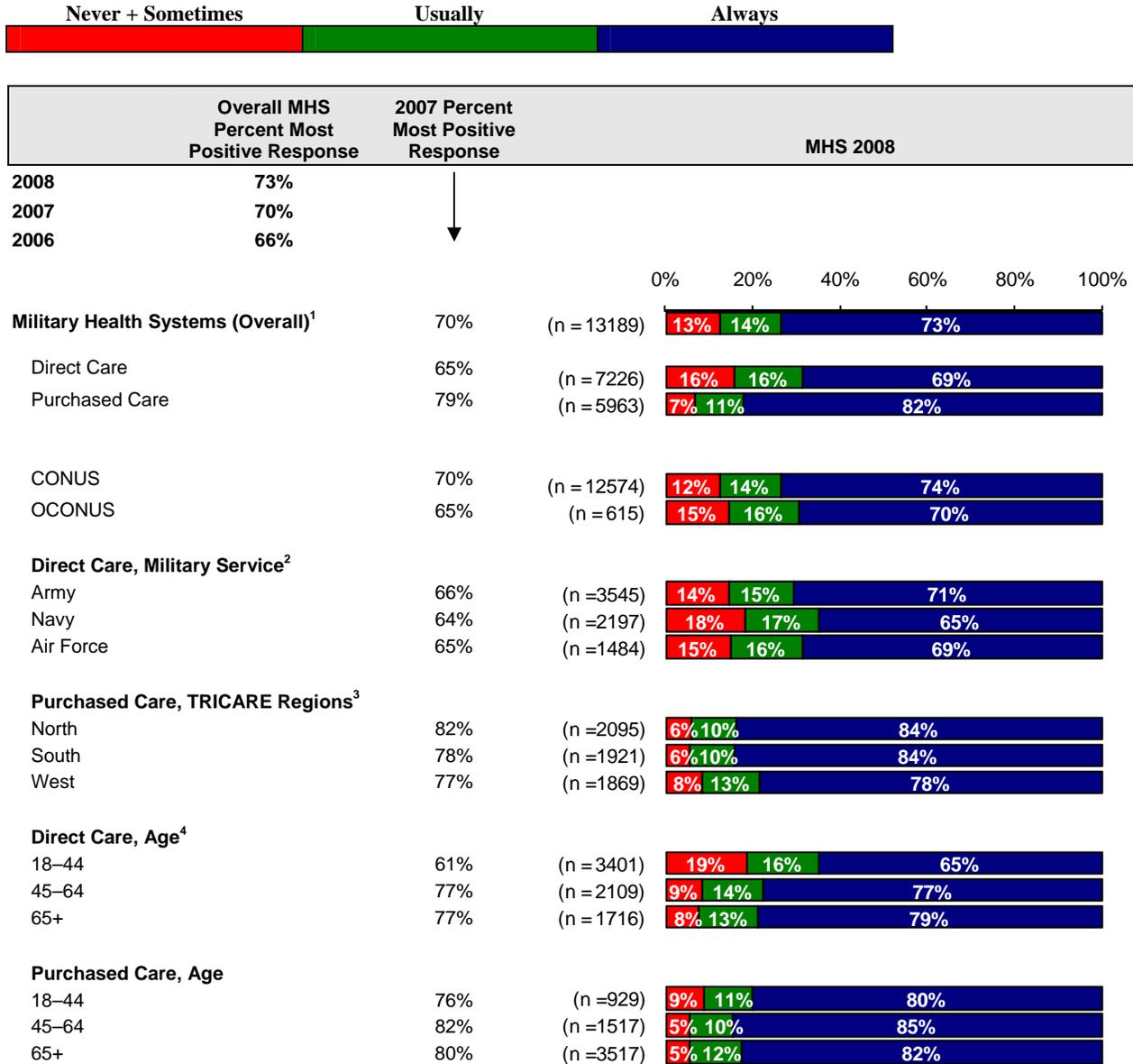
How often did the staff starting your IVs do this without causing you too much pain? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical services to report that staff starting their IVs always treated them with courtesy and respect ($p < .05$).

Composite: Interaction with Other Hospital Staff

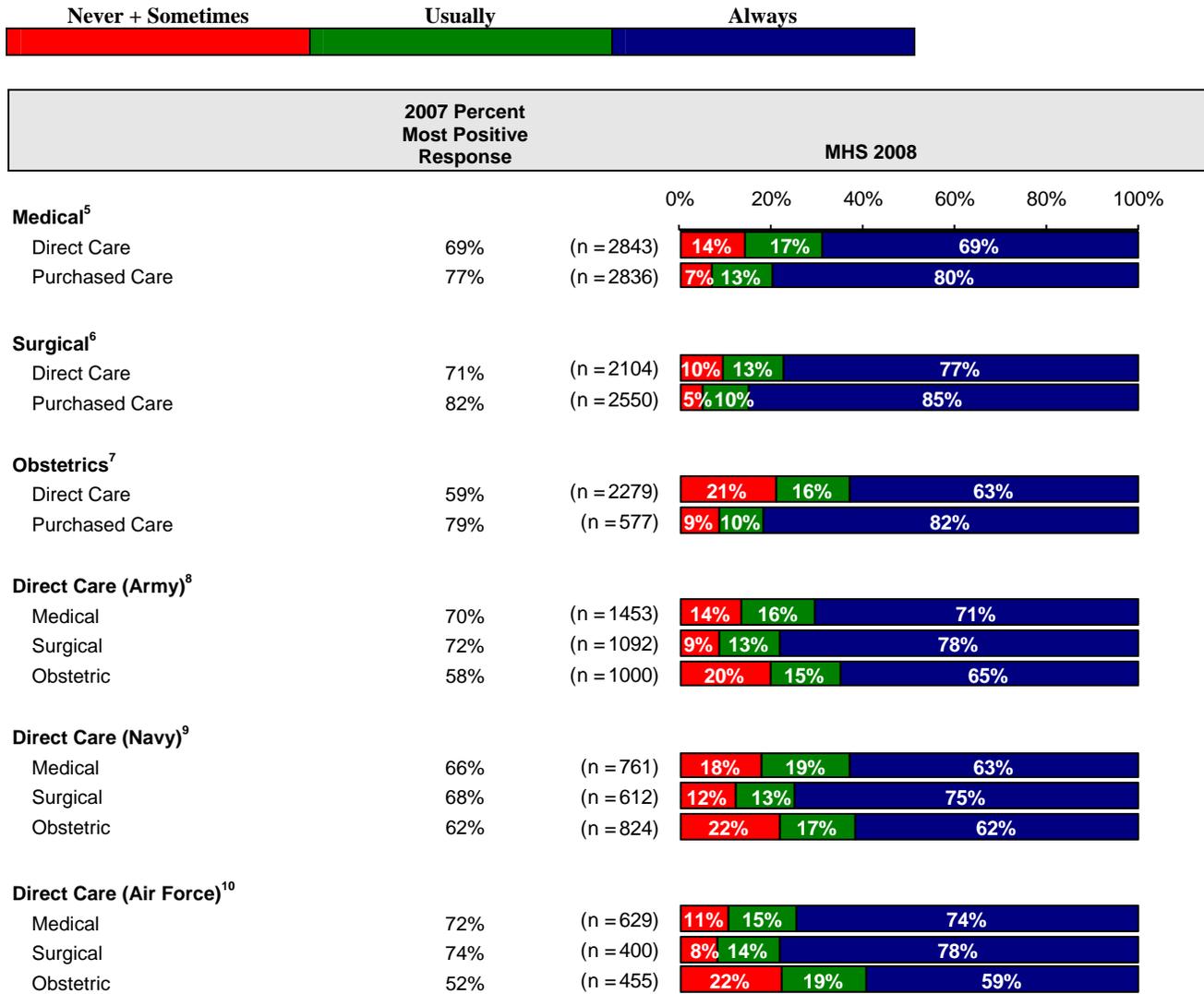
How often did staff check your identification band before starting your IV?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff always checked their identification band before starting their IV ($p < .05$).
- Among Direct Care beneficiaries, those in Army facilities were significantly more likely than those in Navy facilities to report that staff always checked their identification band before starting their IV ($p < .05$).
- Among Purchased Care beneficiaries, those in the West were significantly less likely than those in the North or South to report that staff always checked their identification band before starting their IV ($p < .05$).
- 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)

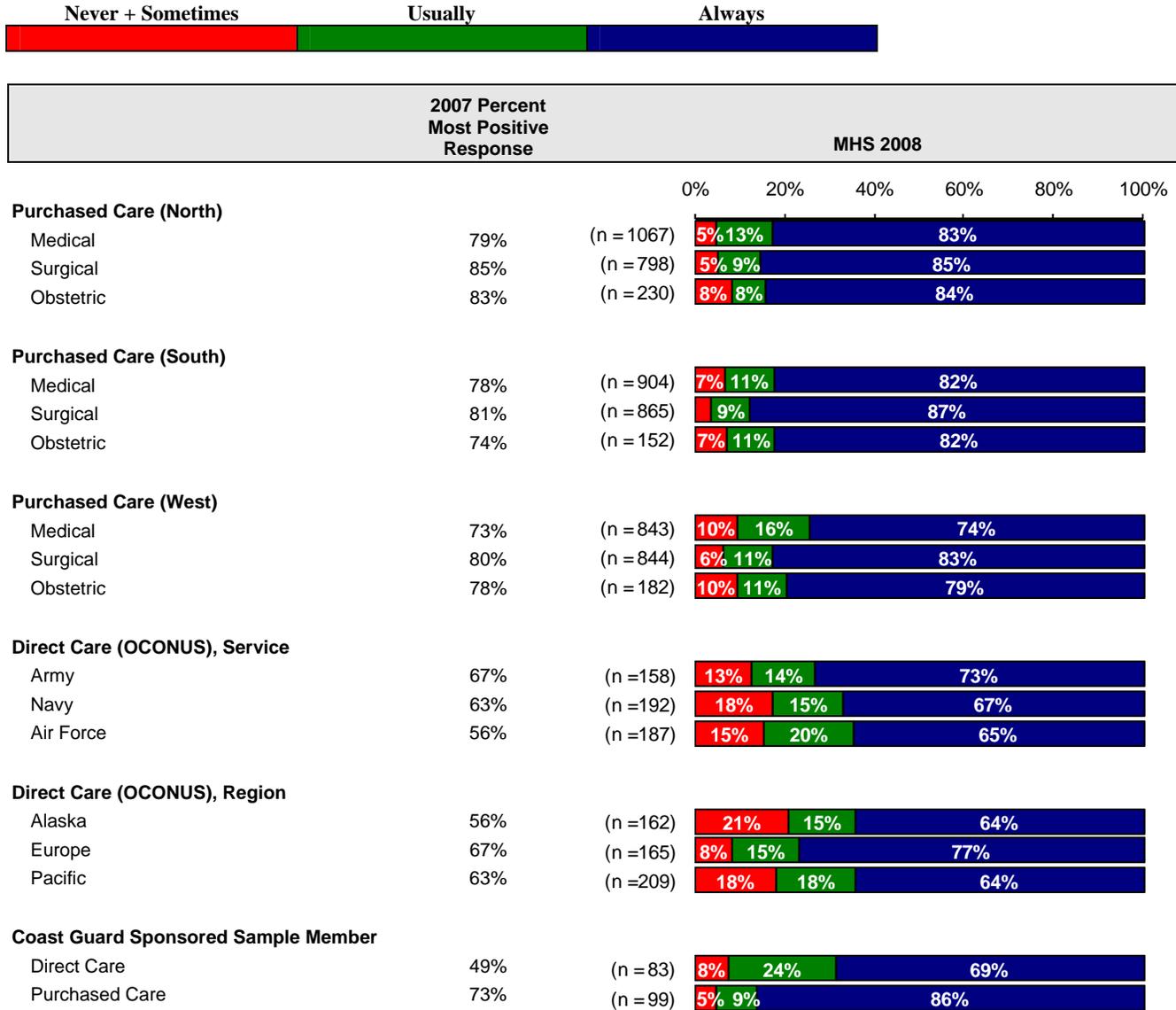
How often did staff check your identification band before starting your IV? (continued)



5. Among beneficiaries receiving Medical services, 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 ($p < .05$).
6. Among beneficiaries receiving Surgical services, 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 ($p < .05$).
7. Among beneficiaries receiving Obstetrics services, 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 ($p < .05$).
8. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those in Medical or Surgical services to report that staff always checked their identification band before starting their IV ($p < .05$). Also, those receiving Surgical services were significantly more likely than those in Medical or Obstetrics services to report that staff always checked their identification band before starting their IV ($p < .05$).
9. Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those in Medical or Obstetrics services to report that staff always checked their identification band before starting their IV ($p < .05$).
10. Among Direct Care beneficiaries in Air Force facilities, those receiving Surgical services were significantly more likely than those in Medical or Obstetrics services to report that staff always checked their identification band before starting their IV ($p < .05$).

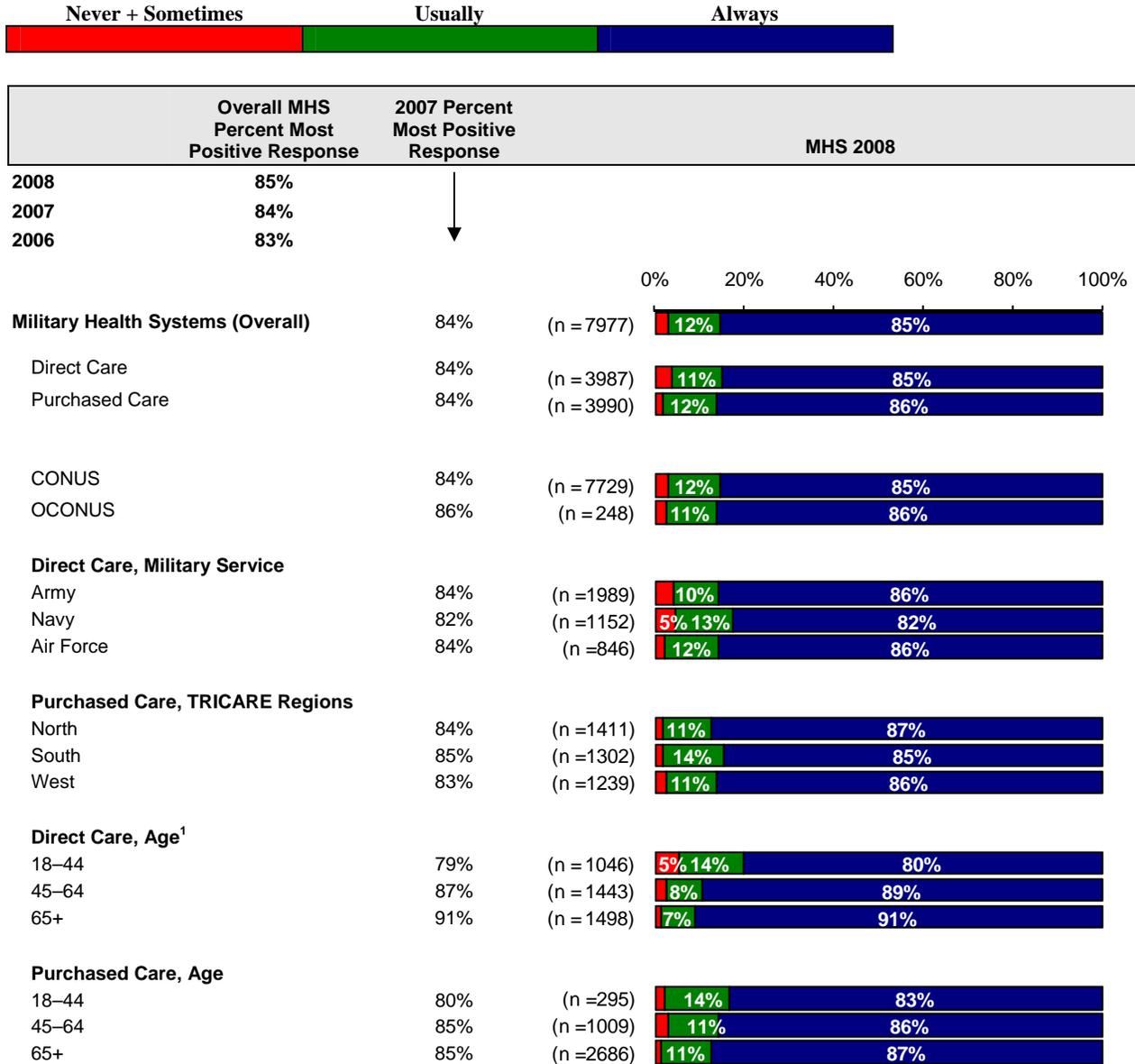
Composite: Interaction with Other Hospital Staff (continued)

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



Composite: Interaction with Other Hospital Staff

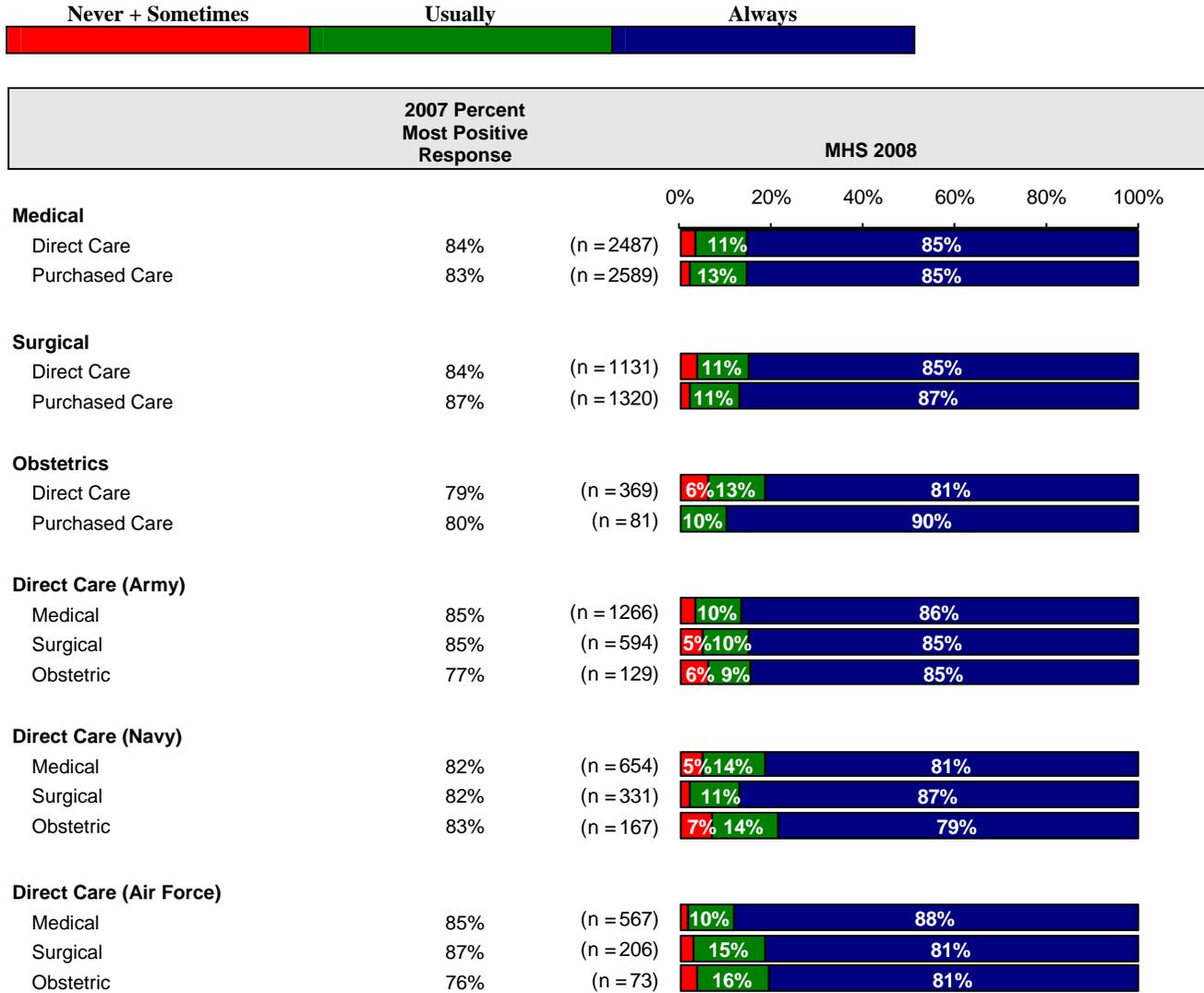
How often did the radiology staff treat you with courtesy and respect?



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

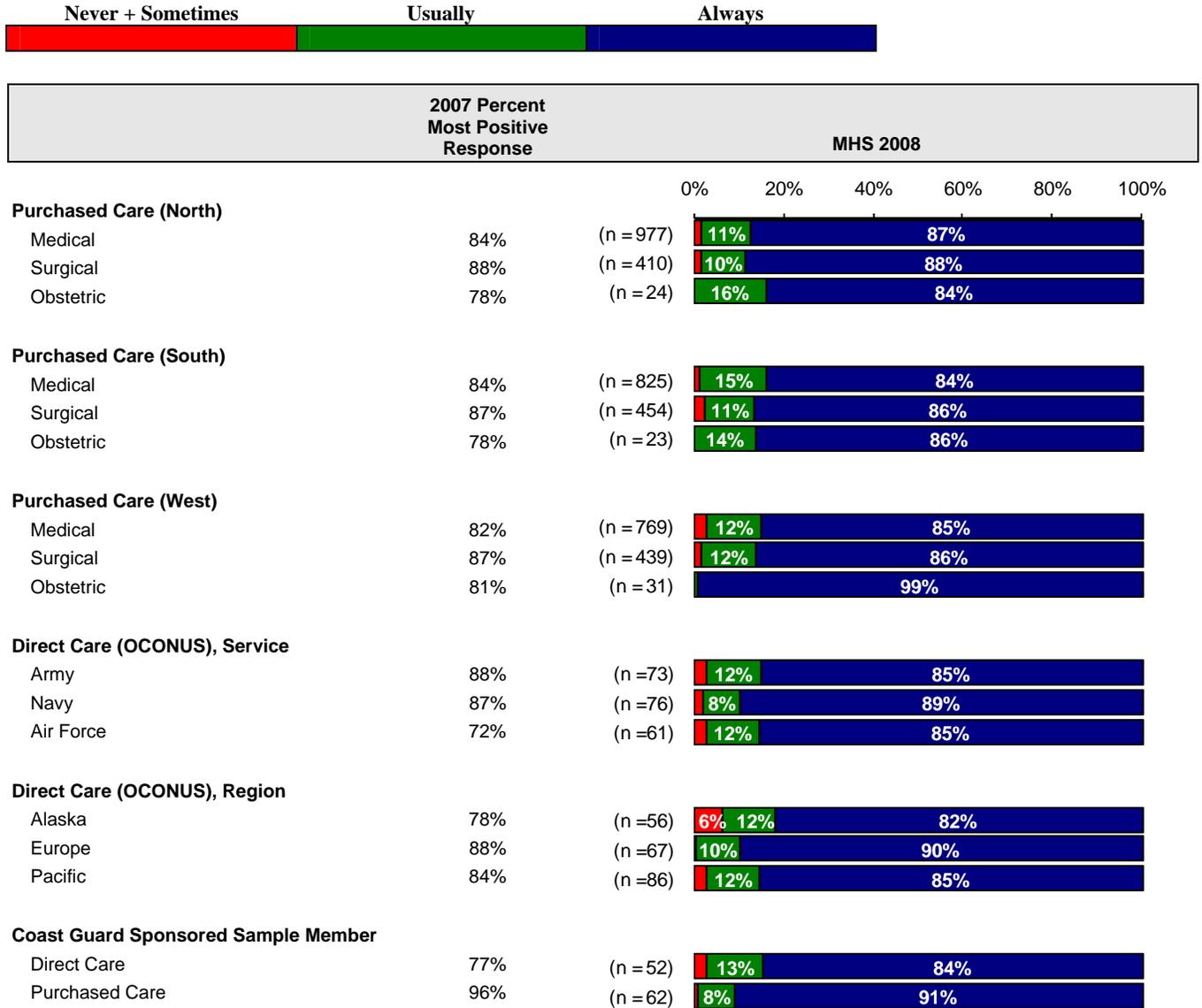
Composite: Interaction with Other Hospital Staff (continued)

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



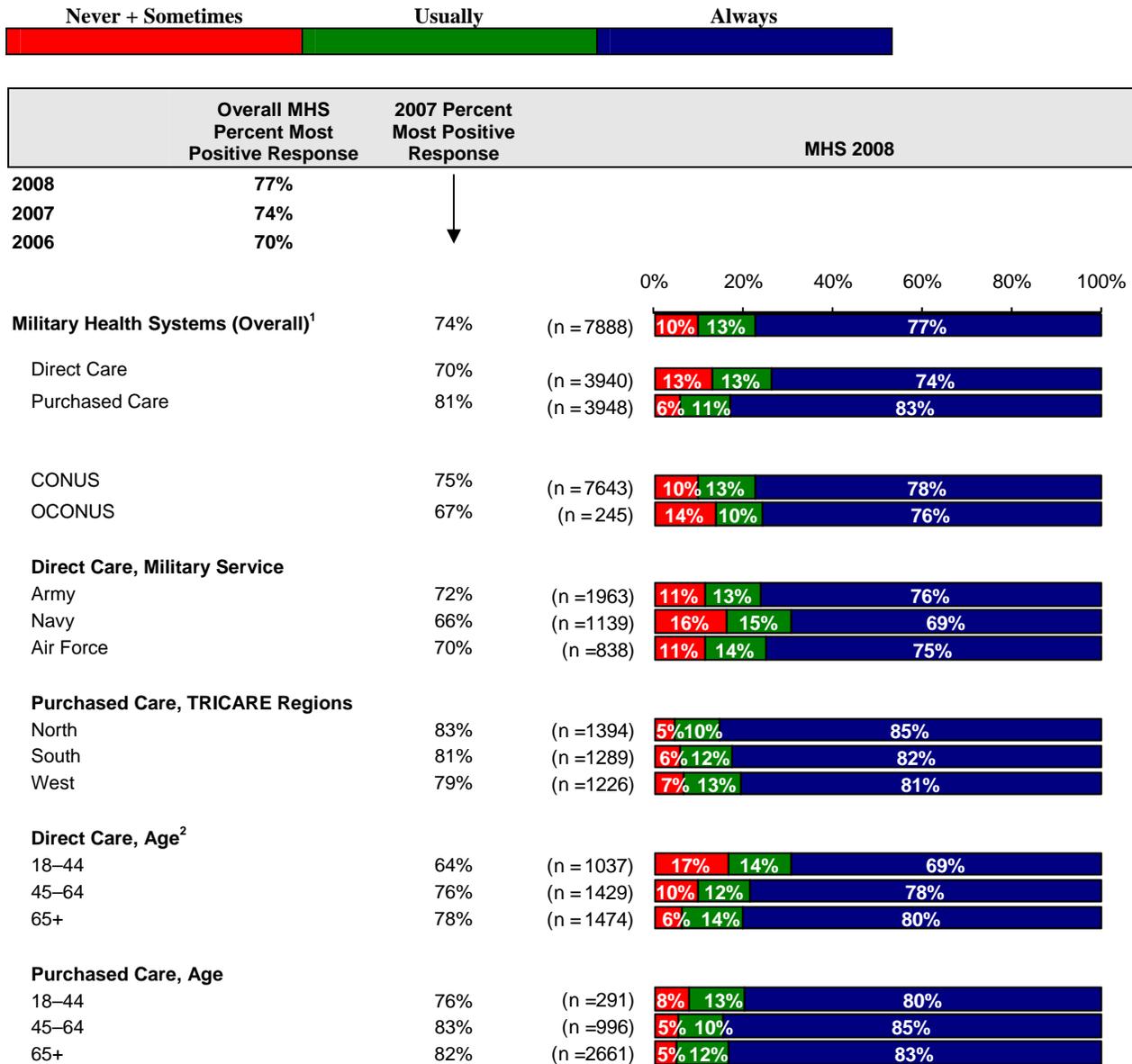
Composite: Interaction with Other Hospital Staff (continued)

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



Composite: Interaction with Other Hospital Staff

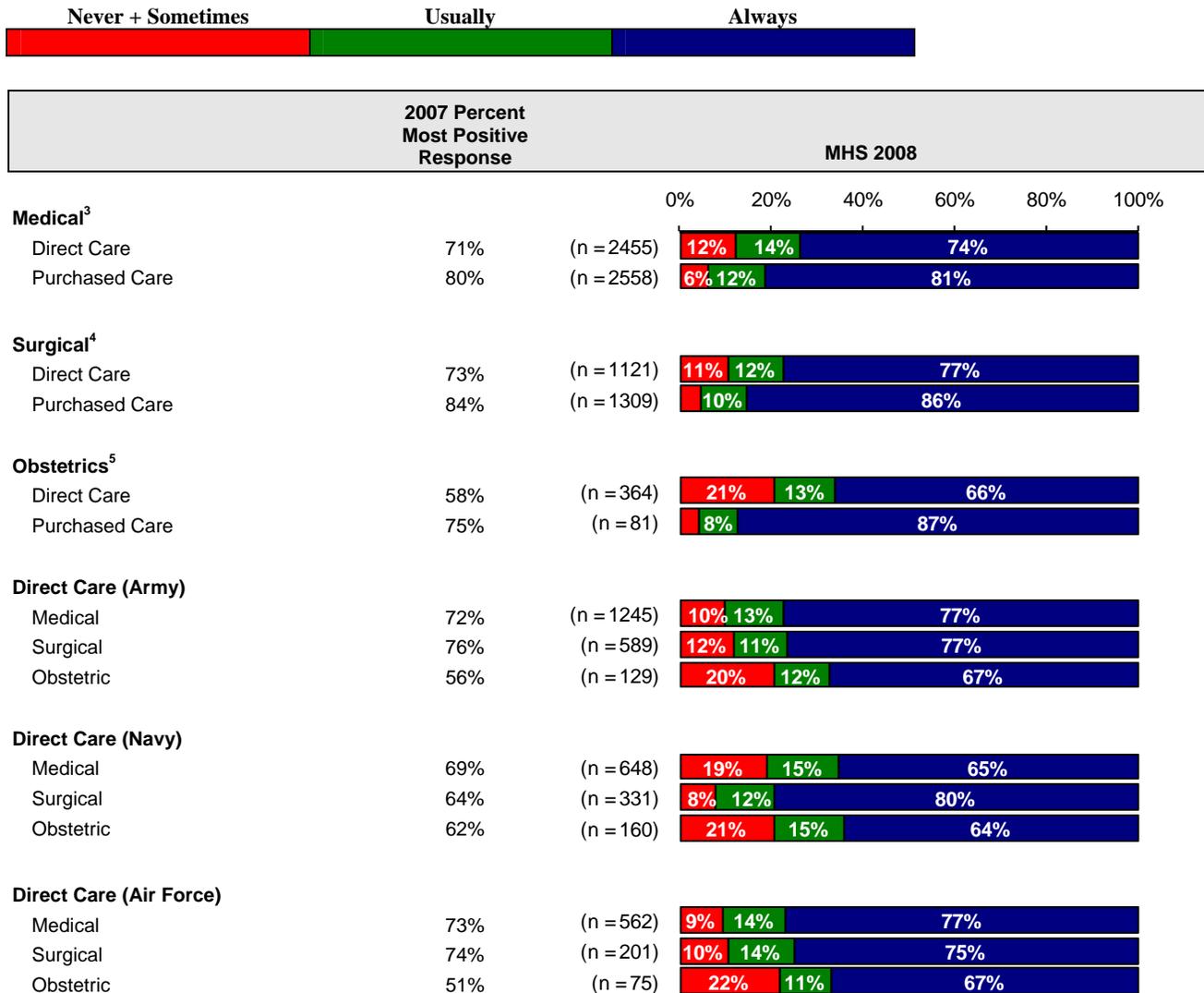
How often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound or any other radiological test or treatment?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff always checked their identification band before doing an X-ray, CAT scan, MRI, ultrasound, or any other radiological test or treatment ($p < .05$).
- 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 doing an X-ray, CAT scan, MRI, ultrasound, or any other radiological test or treatment ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

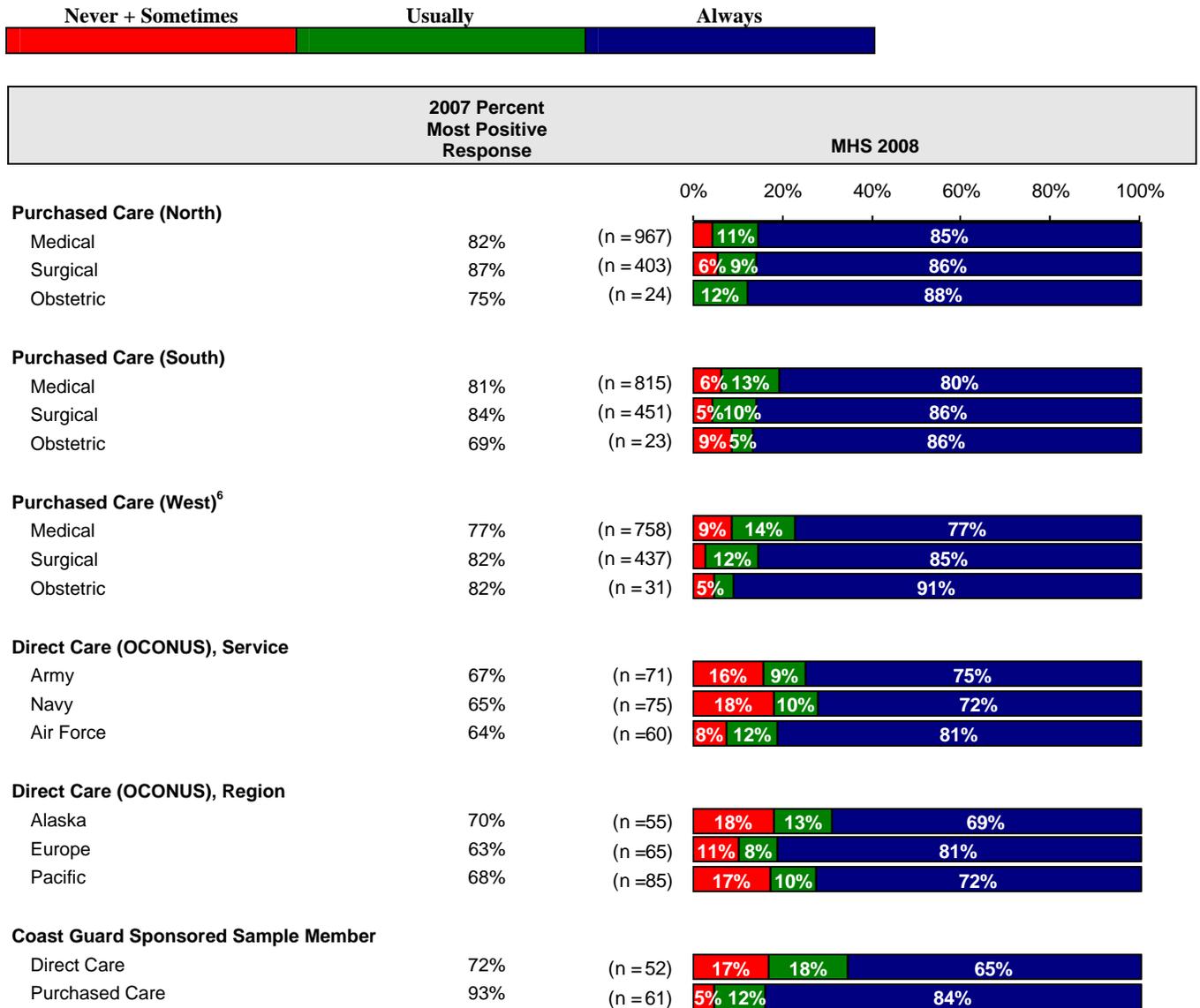
How often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound or any other radiological test or treatment? (continued)



- Among beneficiaries receiving Medical services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before doing an X-ray, CAT scan, MRI, ultrasound, or any other radiological test or treatment ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before doing an X-ray, CAT scan, MRI, ultrasound, or any other radiological test or treatment ($p < .05$).
- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that staff always checked their identification band before doing an X-ray, CAT scan, MRI, ultrasound, or any other radiological test or treatment ($p < .05$).

Composite: Interaction with Other Hospital Staff (continued)

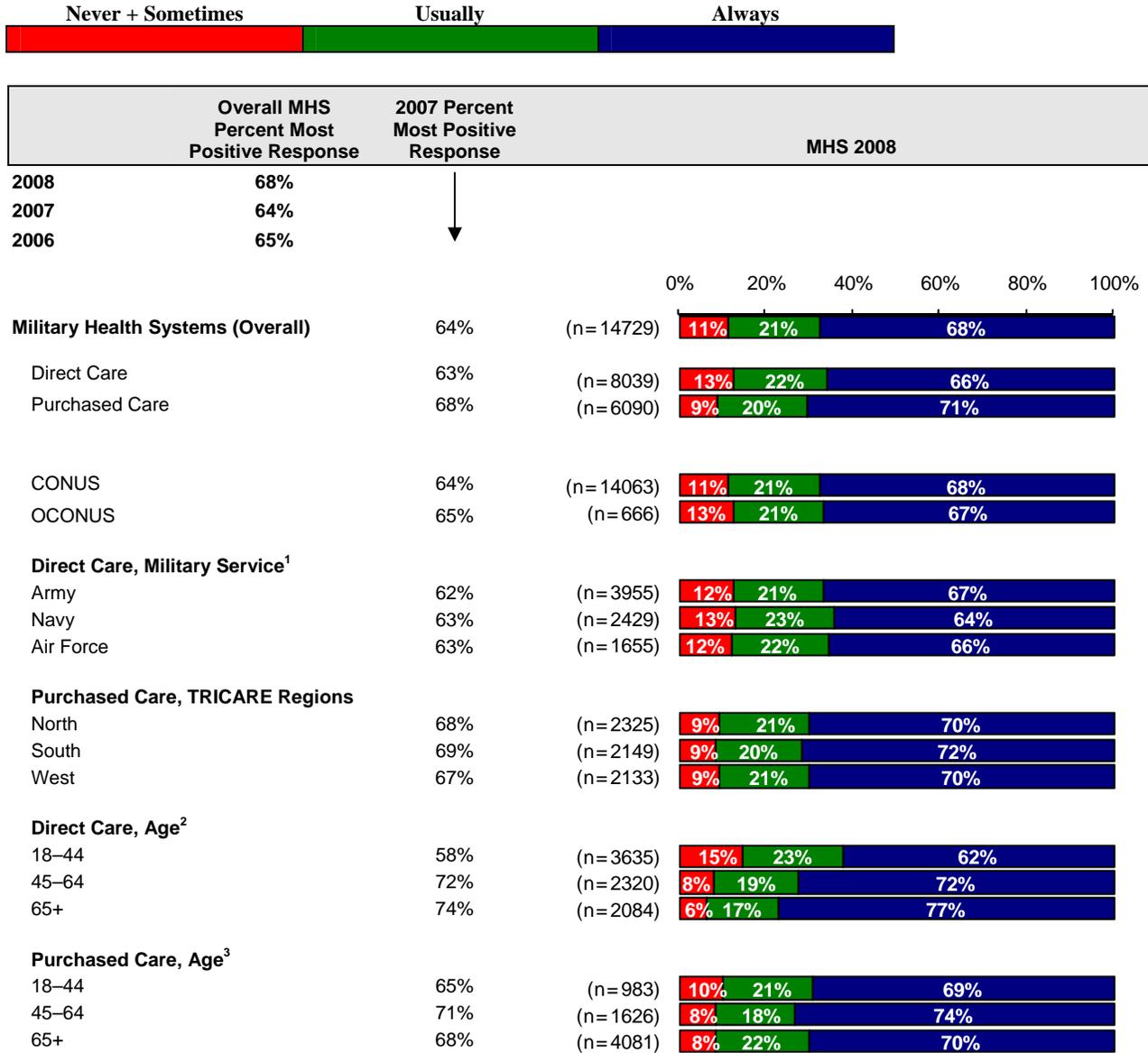
How often did staff check your identification band before doing an X-ray, a CAT scan, an MRI, an ultrasound or any other radiological test or treatment? (continued)



6. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report that staff always checked their identification band before doing an X-ray, CAT scan, MRI, ultrasound, or any other radiological test or treatment (p<.05).

Composite: Patient Safety

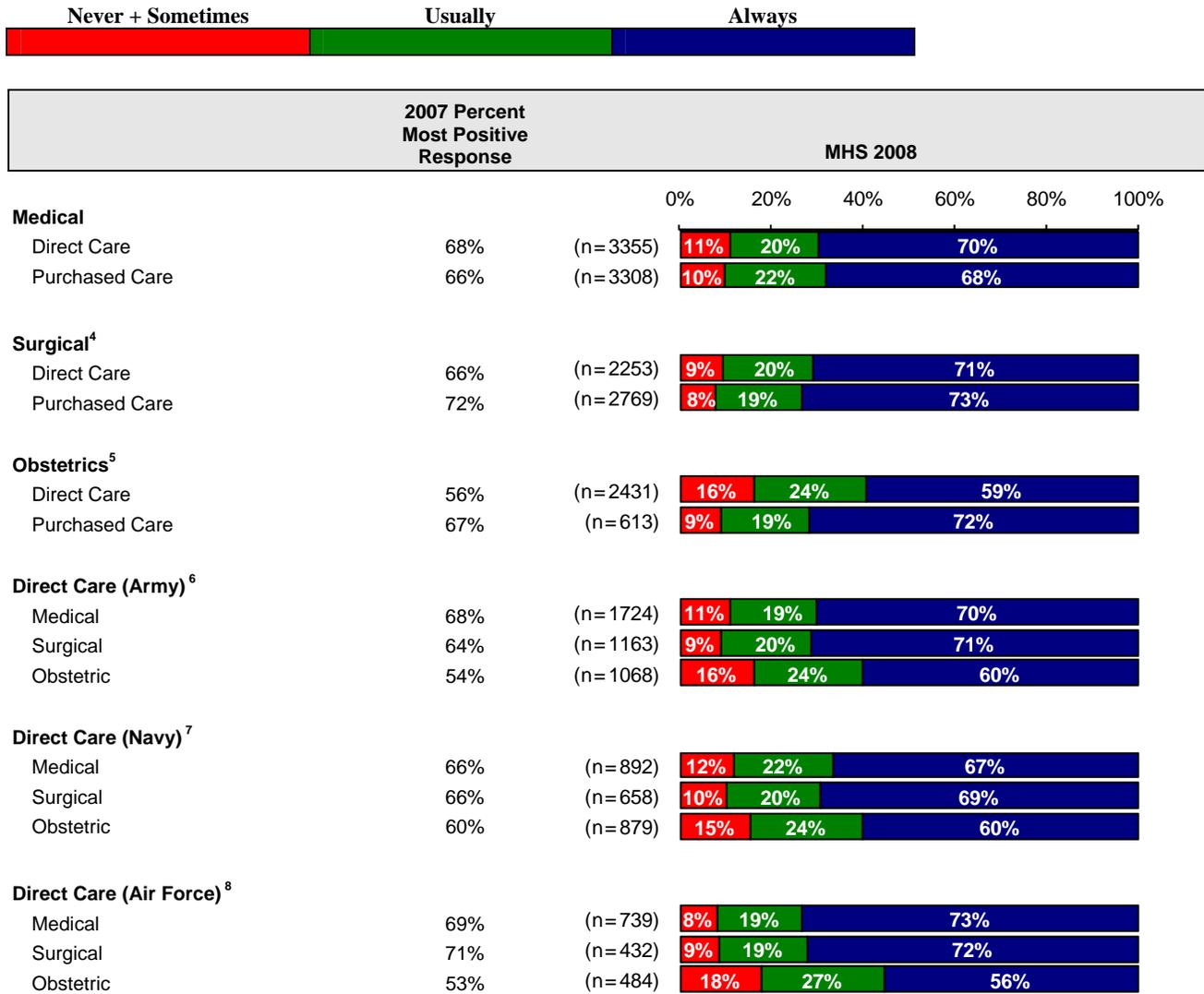
This composite combines responses from three questions about patient safety.



1. Among Direct Care beneficiaries, those in Army facilities were significantly more likely than those in Navy facilities to report most positive responses to the Patient Safety composite ($p < .05$).
2. 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 ($p < .05$). Furthermore, those aged 65+ were significantly more likely than those in other age groups to report most positive responses to the Patient Safety composite ($p < .05$).
3. 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)

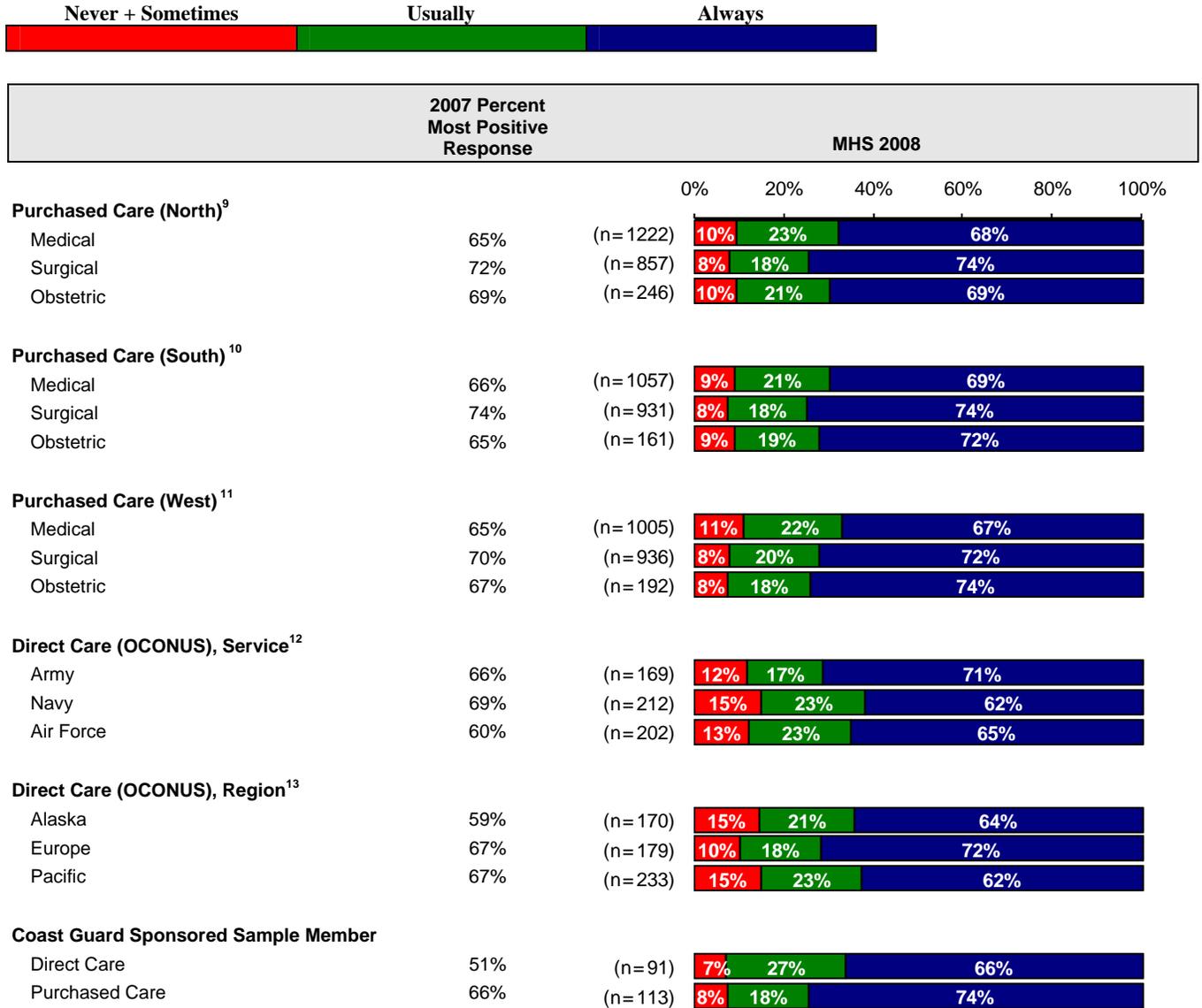
This composite combines responses from three questions about patient safety.



4. Among those receiving Surgical services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report most positive responses to the Patient Safety composite ($p < .05$).
5. Among those receiving Obstetrics services, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report most positive responses to the Patient Safety composite ($p < .05$).
6. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report most positive responses to the Patient Safety composite ($p < .05$).
7. Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report most positive responses to the Patient Safety composite ($p < .05$).
8. Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report most positive responses to the Patient Safety composite ($p < .05$).

Composite: Patient Safety (continued)

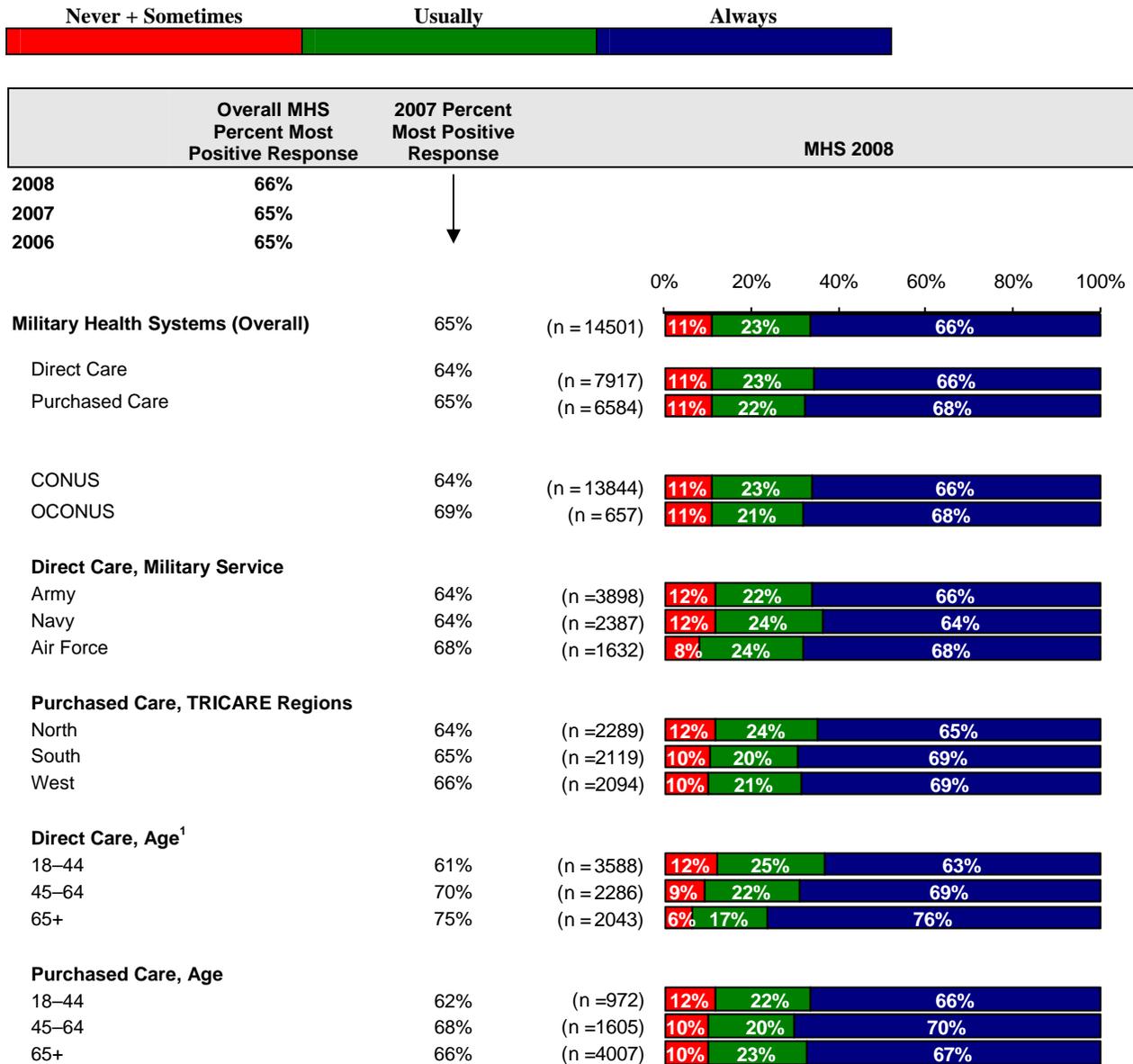
This composite combines responses from three questions about patient safety.



9. Among Purchased Care beneficiaries in the North region, those receiving Surgical services were significantly more likely than those receiving Medical services to report most positive responses to the Patient Safety composite ($p < .05$).
10. Among Purchased Care beneficiaries in the South region, those receiving Surgical services were significantly more likely than those receiving Medical services to report most positive responses to the Patient Safety composite ($p < .05$).
11. Among Purchased Care beneficiaries in the West region, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report most positive responses to the Patient Safety composite ($p < .05$).
12. Among Direct Care OCONUS beneficiaries, those in Army facilities were significantly more likely than those in Navy facilities to report most positive responses to the Patient Safety composite ($p < .05$).
13. Among Direct Care OCONUS beneficiaries, those in Europe were significantly more likely than those in the Pacific to report most positive responses to the Patient Safety composite ($p < .05$).

Composite: Patient Safety

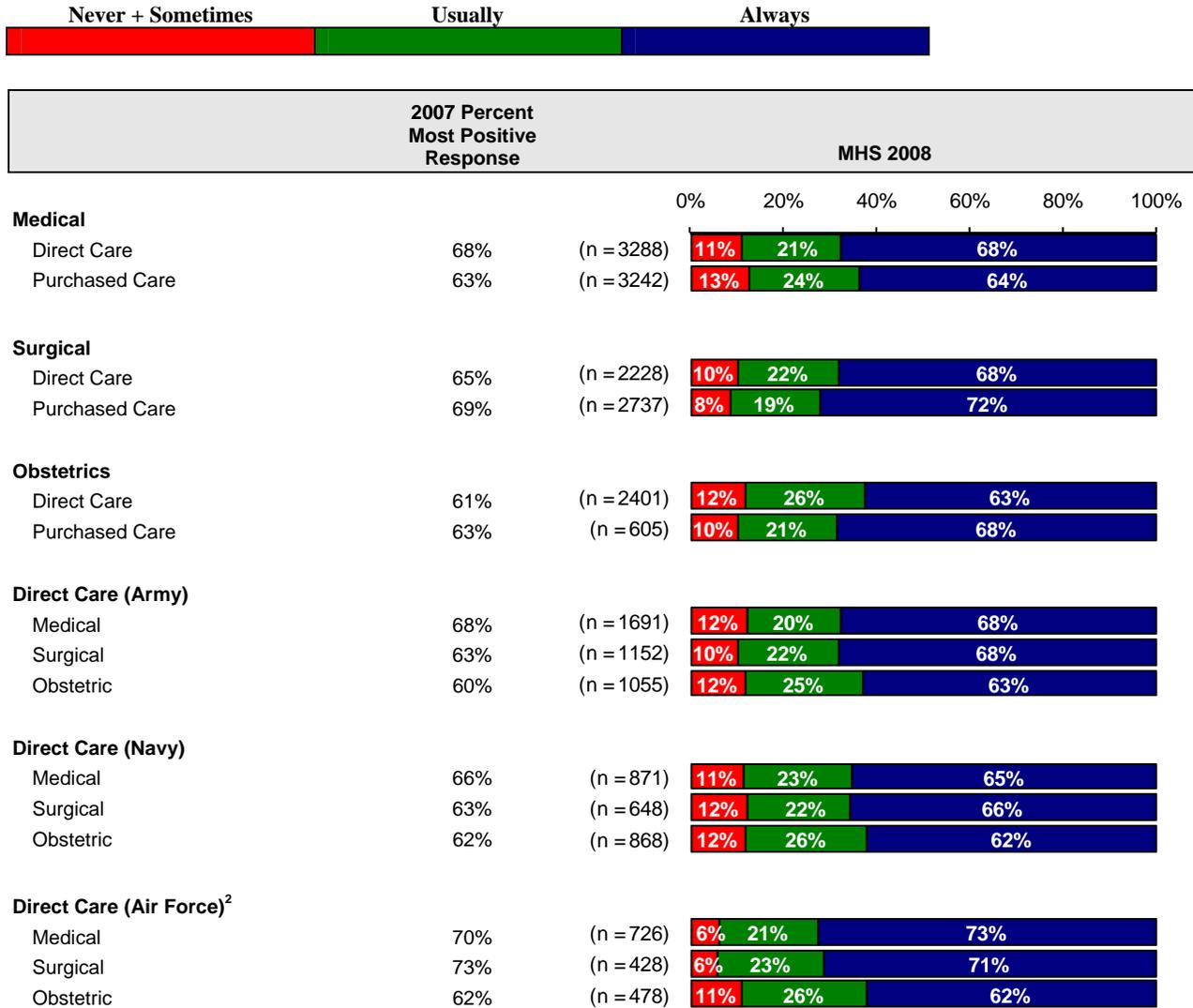
How often did you see staff wash their hands or use gloves before treating or checking you?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that they always saw staff wash their hands or use gloves before checking them ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to report that they always saw staff wash their hands or use gloves before checking them ($p < .05$).

Composite: Patient Safety (continued)

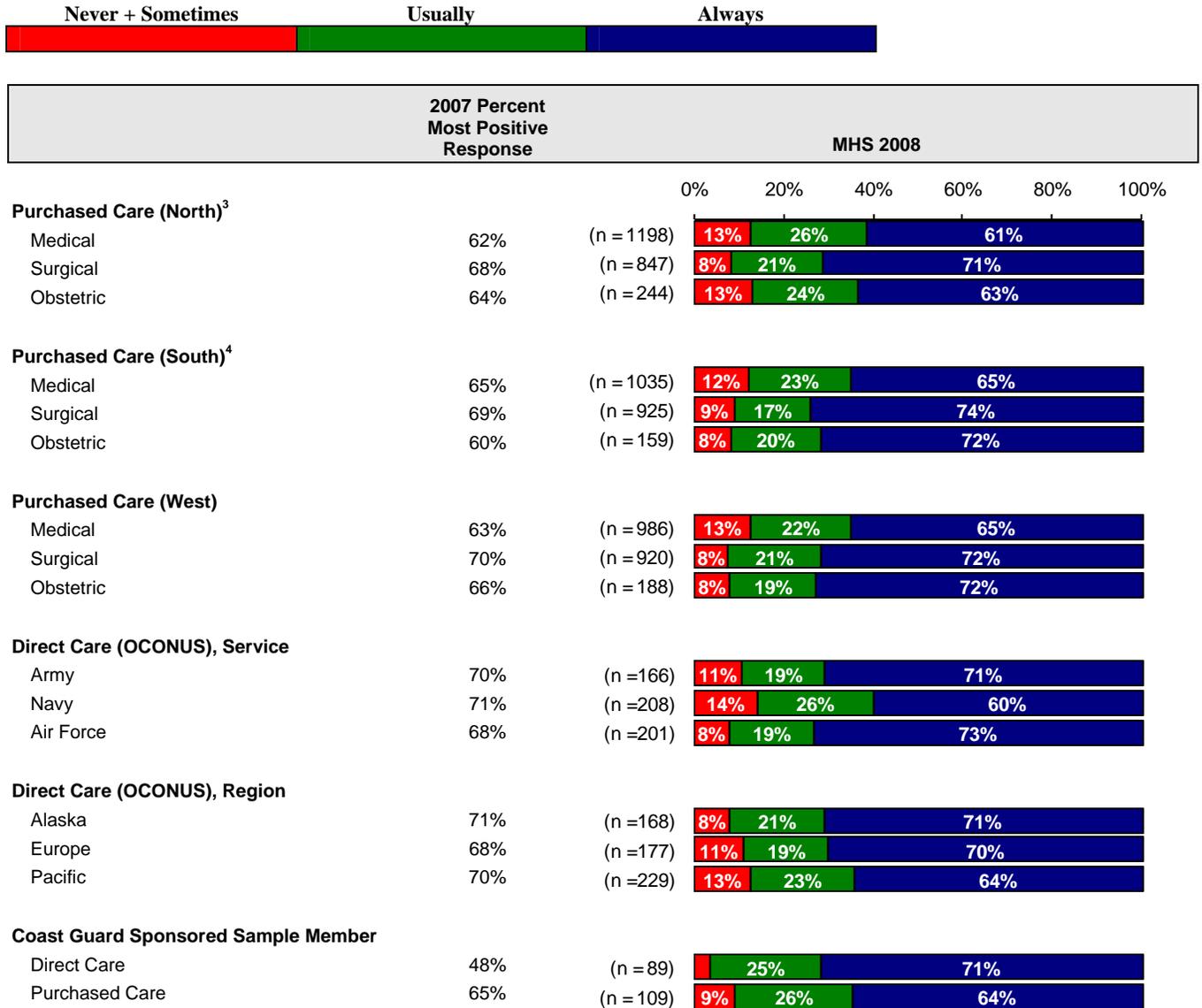
How often did you see staff wash their hands or use gloves before treating or checking you? (continued)



2. Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report that they always saw staff wash their hands or use gloves before checking 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)

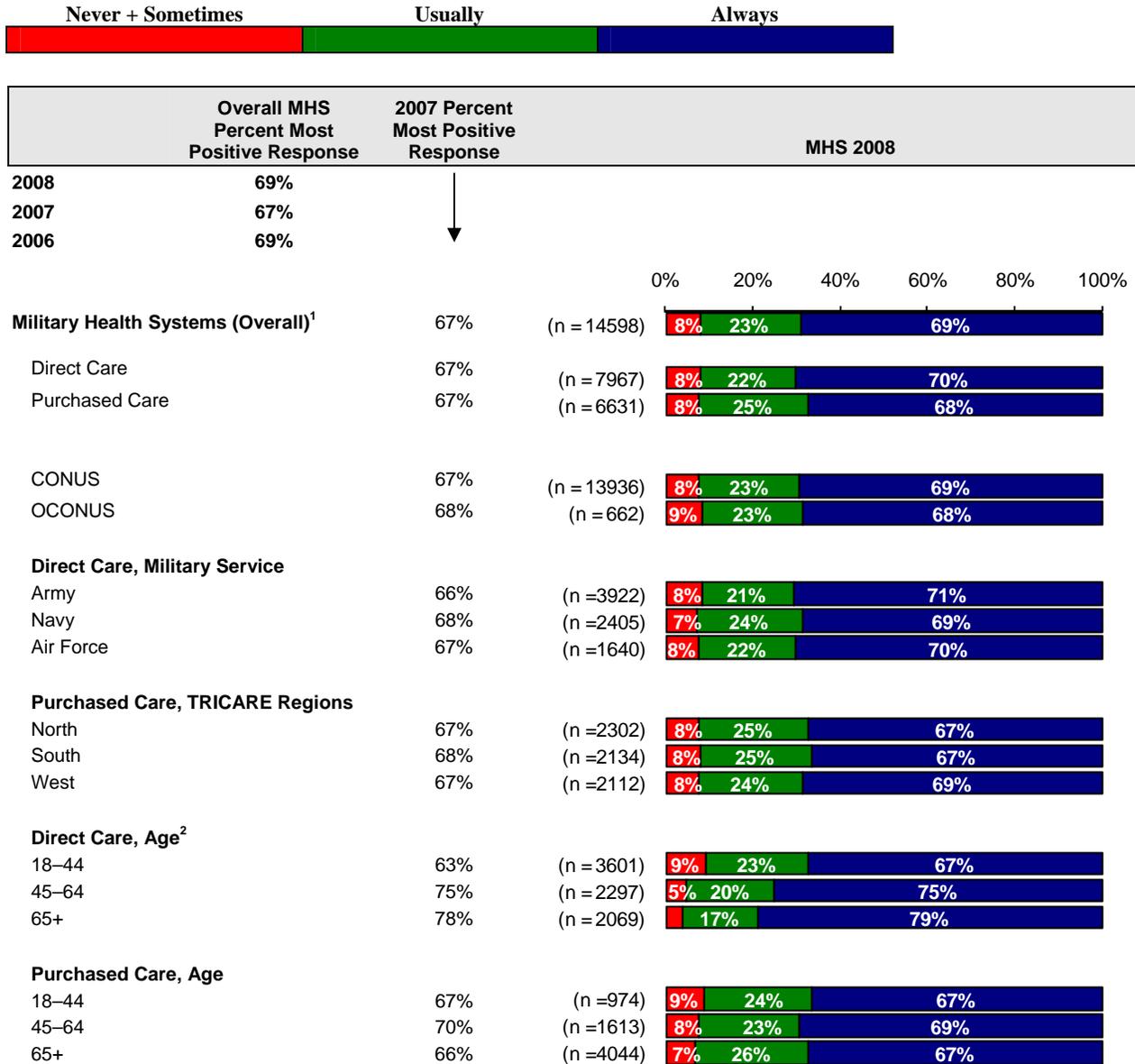


3. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that they always saw staff wash their hands or use gloves before checking them ($p < .05$).

4. 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 saw staff wash their hands or use gloves before checking them ($p < .05$).

Composite: Patient Safety

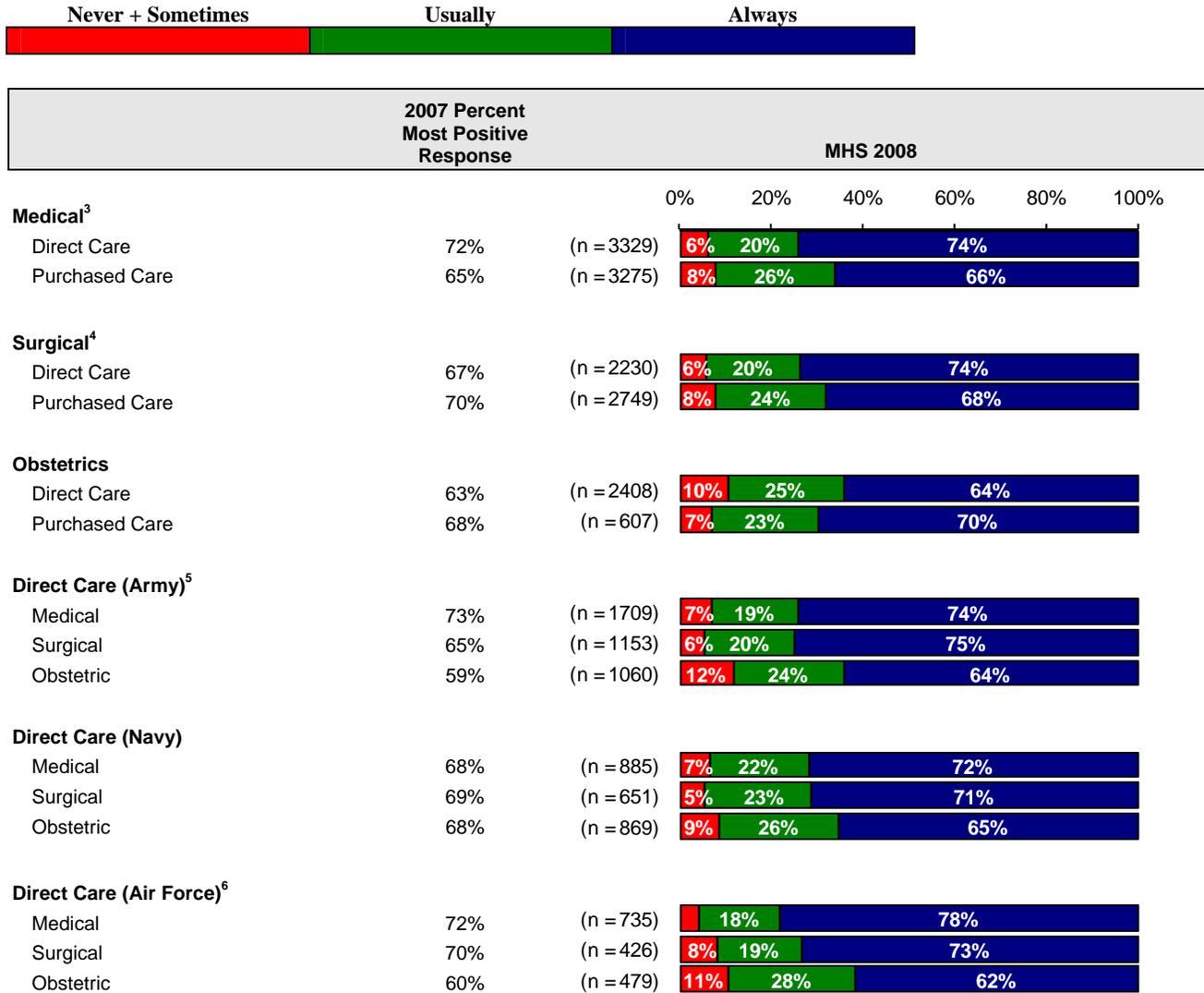
When doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves?



- Overall, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$).
- Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$).

Composite: Patient Safety (continued)

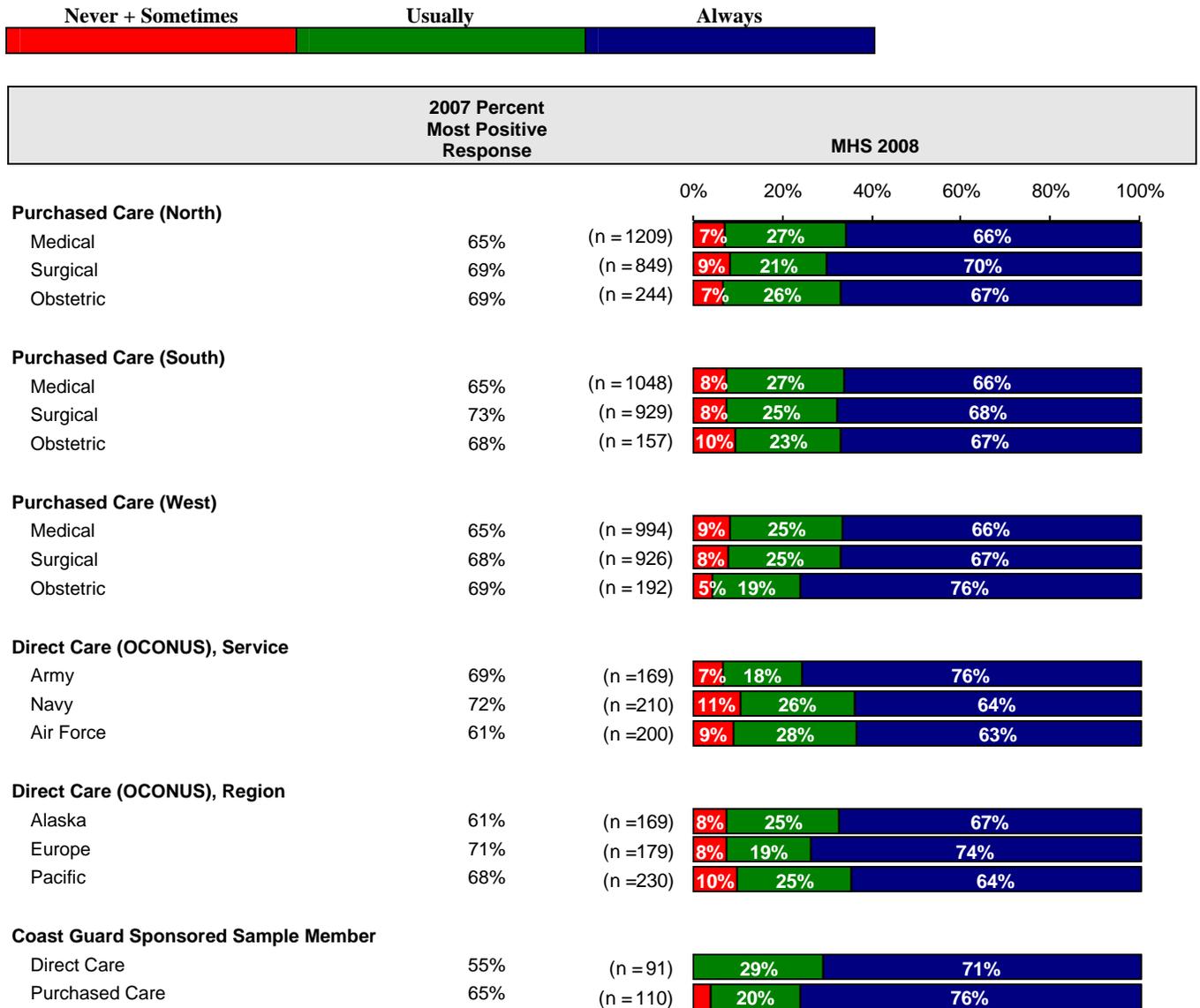
When doctors, nurses, or other hospital staff first came to your room, how often did they introduce themselves? (continued)



- Among beneficiaries receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$).
- Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that doctors, nurses, or other hospital staff always introduced themselves when they first came into their room ($p < .05$).

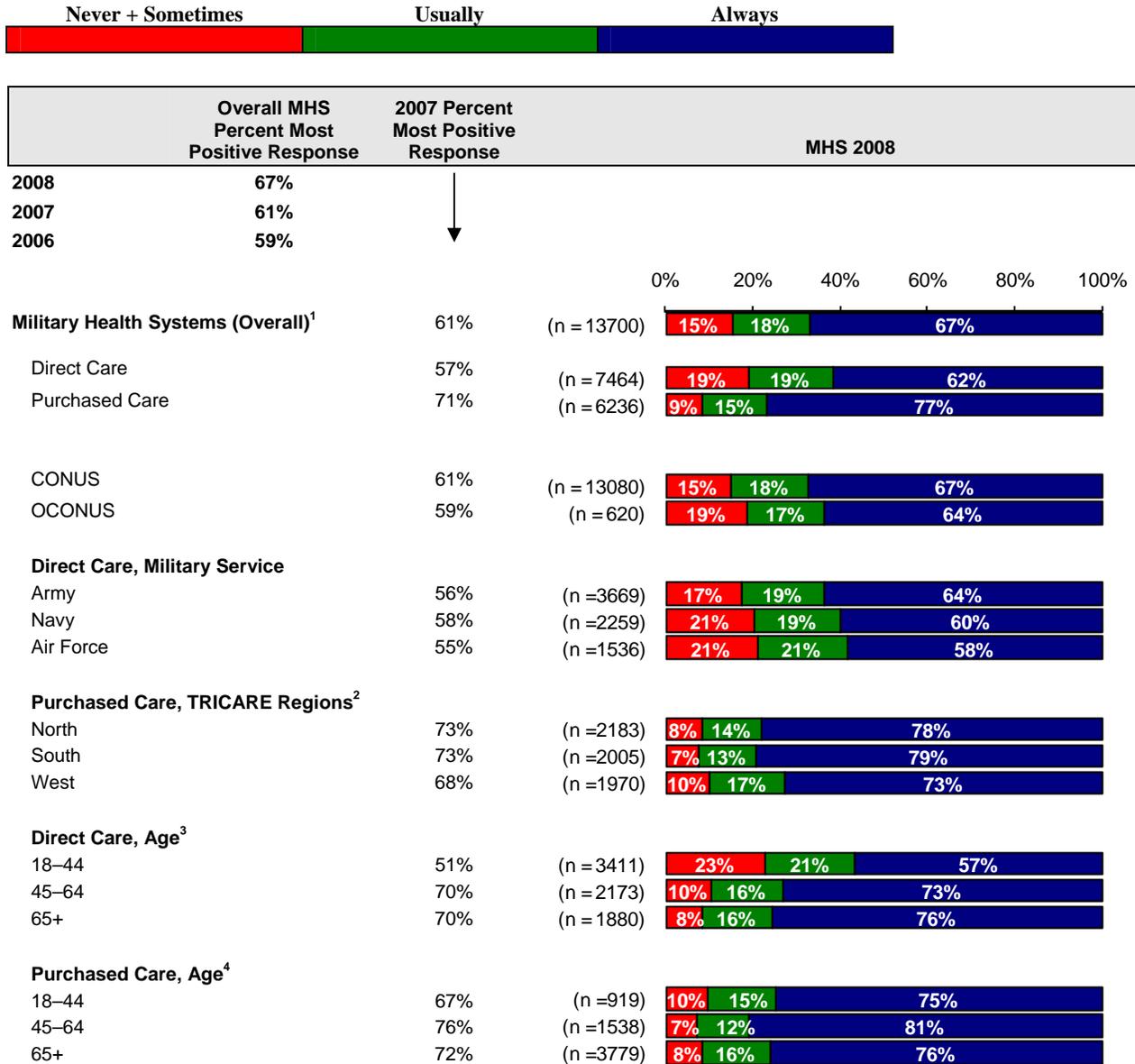
Composite: Patient Safety (continued)

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



Composite: Patient Safety

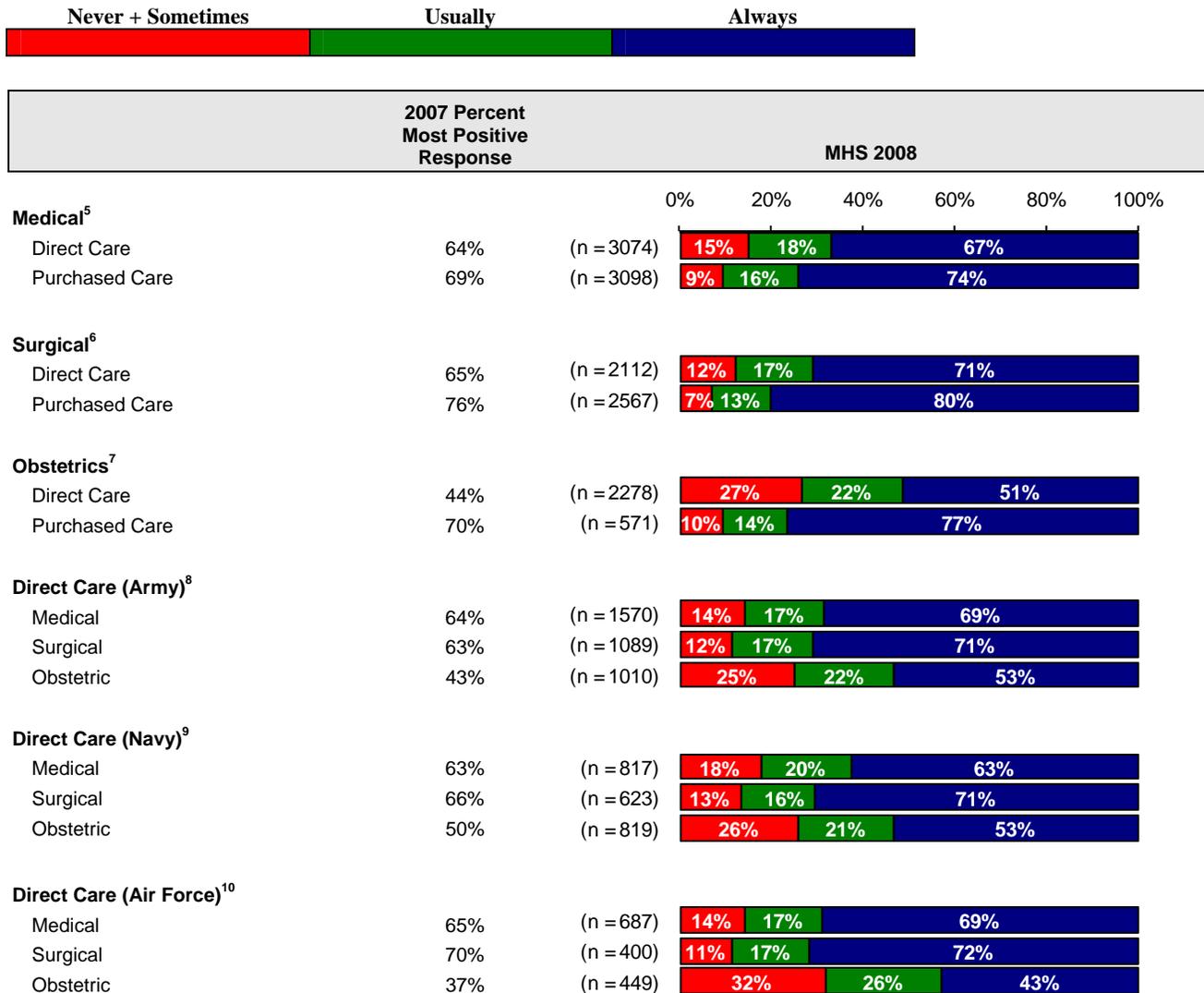
How often did staff check your identification band before giving you any medicines, even over the counter medicines like Tylenol or ibuprofen?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen ($p < .05$).
2. Among Purchased Care beneficiaries, those in the West were significantly less likely than those in the North or South to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen ($p < .05$).
3. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen ($p < .05$).
4. Among Direct Care beneficiaries, those aged 45–64 were significantly more likely than those in other age groups to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen ($p < .05$).

Composite: Patient Safety (continued)

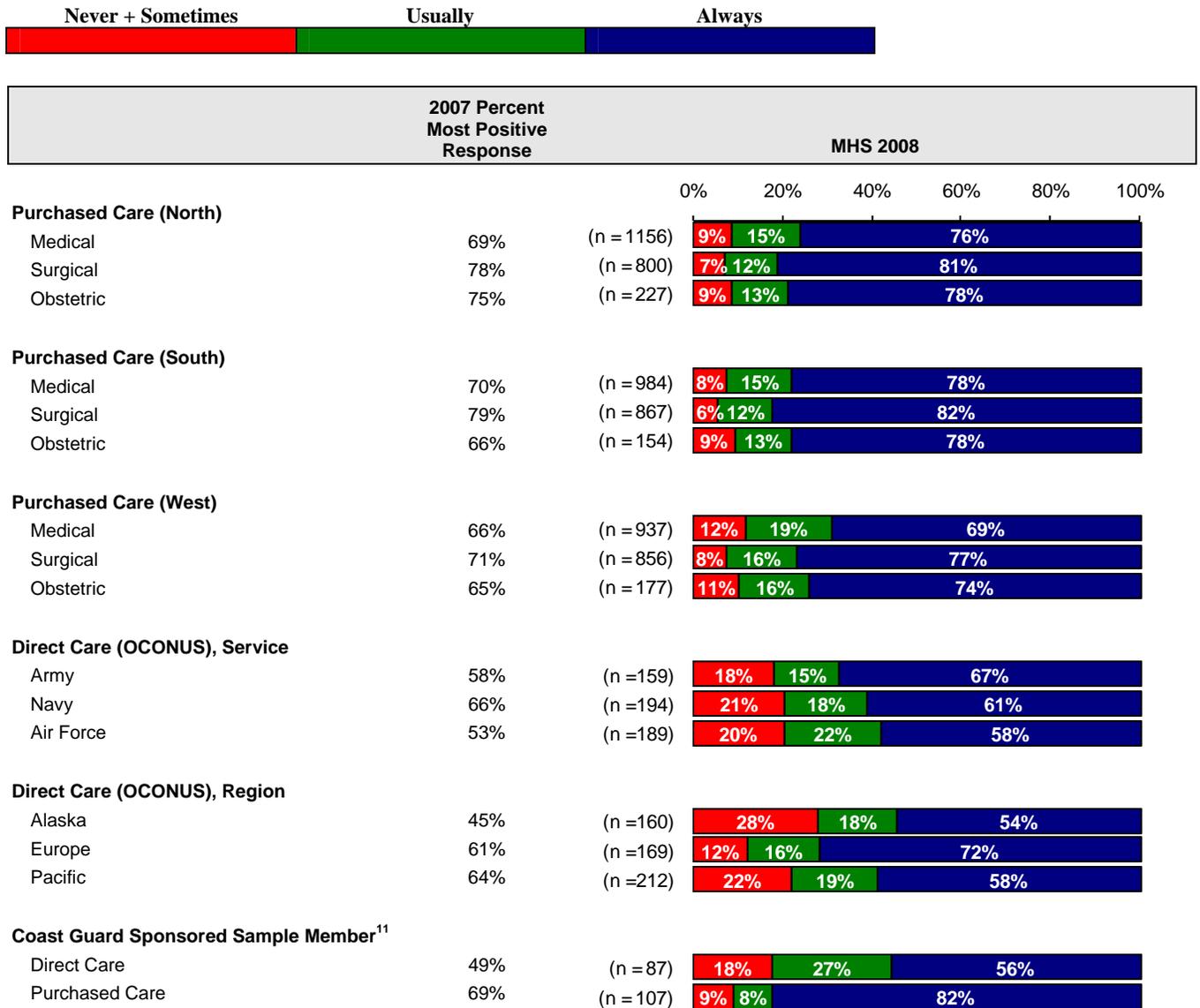
How often did staff check your identification band before giving you any medicines, even over the counter medicines like Tylenol or ibuprofen? (continued)



5. Among beneficiaries receiving Medical services, those in Purchased Care were significantly more likely than those Direct Care to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05).
6. Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than those Direct Care to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05).
7. Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those Direct Care to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05).
8. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05).
9. Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05). Also, those receiving Surgical services were significantly more likely than those receiving Obstetric or Medical services to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05).
10. Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (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)

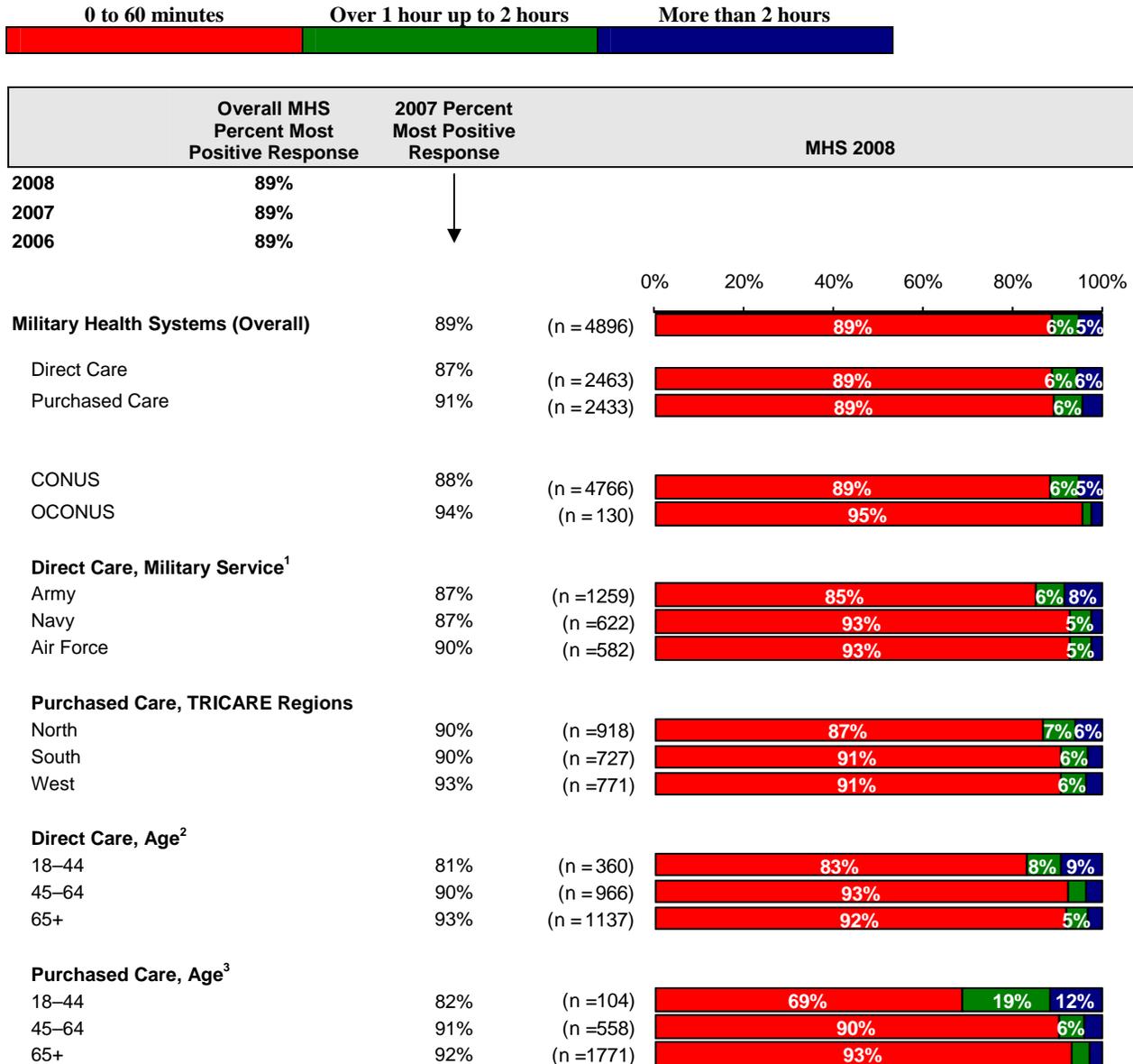


11. Among Coast Guard Sponsored sample members, those in Purchased Care were significantly more likely than those in Direct Care to report that doctors, nurses, or other hospital staff always checked their identification band before giving them any medicines, even over the counter medicines like Tylenol or Ibuprofen (p<.05).

Survey Results:
Additional DoD Questions

Being Admitted Through the Emergency Room (Medical Questionnaire Only)

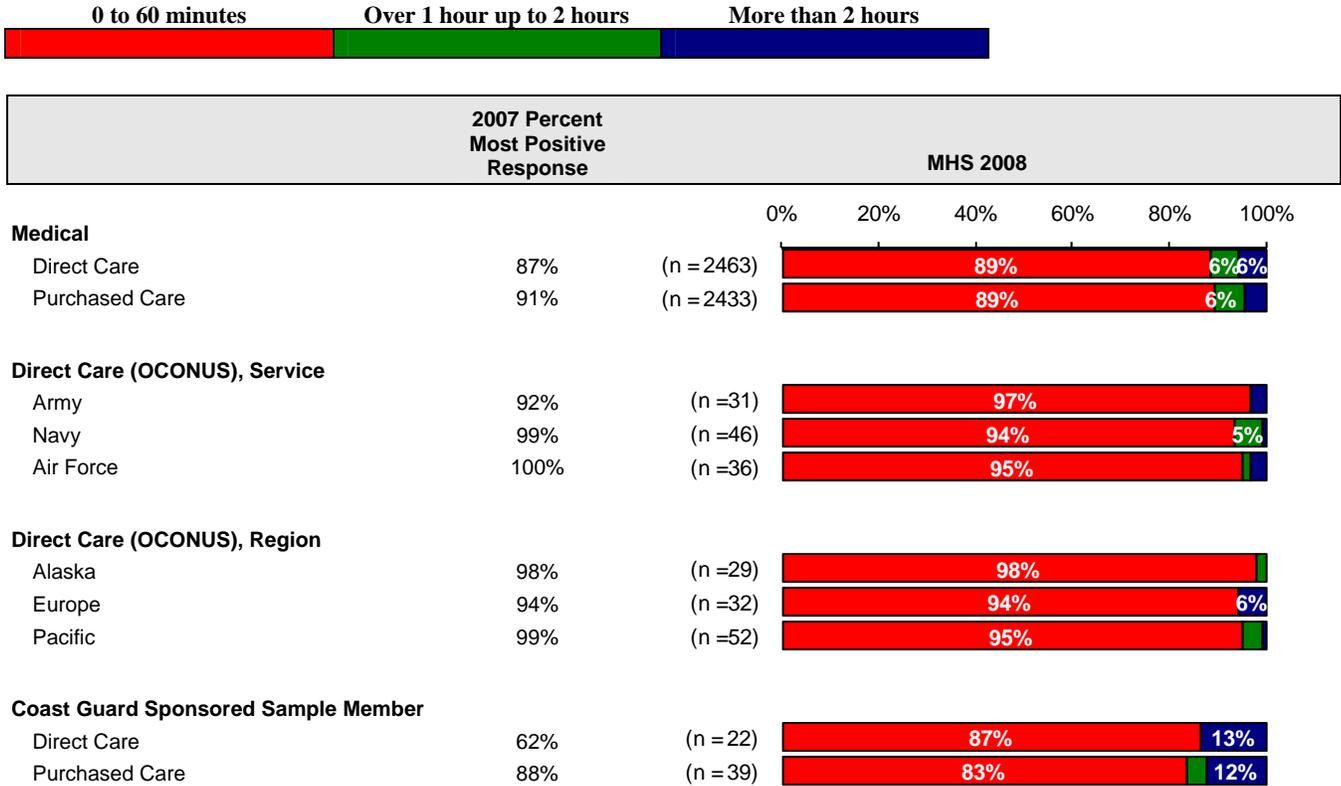
Think about when you were in the Emergency Room during this hospital stay. How long did you have to wait before someone checked your condition for the first time?



1. Among Direct Care beneficiaries, those in Army facilities were significantly less likely than those in Navy or Air Force facilities to report that they had to wait 0 – 60 minutes before someone checked their condition the first time ($p < .05$).
2. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that they had to wait 0 to 60 minutes before someone checked their condition the first time ($p < .05$).
3. Among Purchased Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that they had to wait 0 to 60 minutes before someone checked their condition the first time ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to report that they had to wait 0 to 60 minutes before someone checked their condition for the first time ($p < .05$).

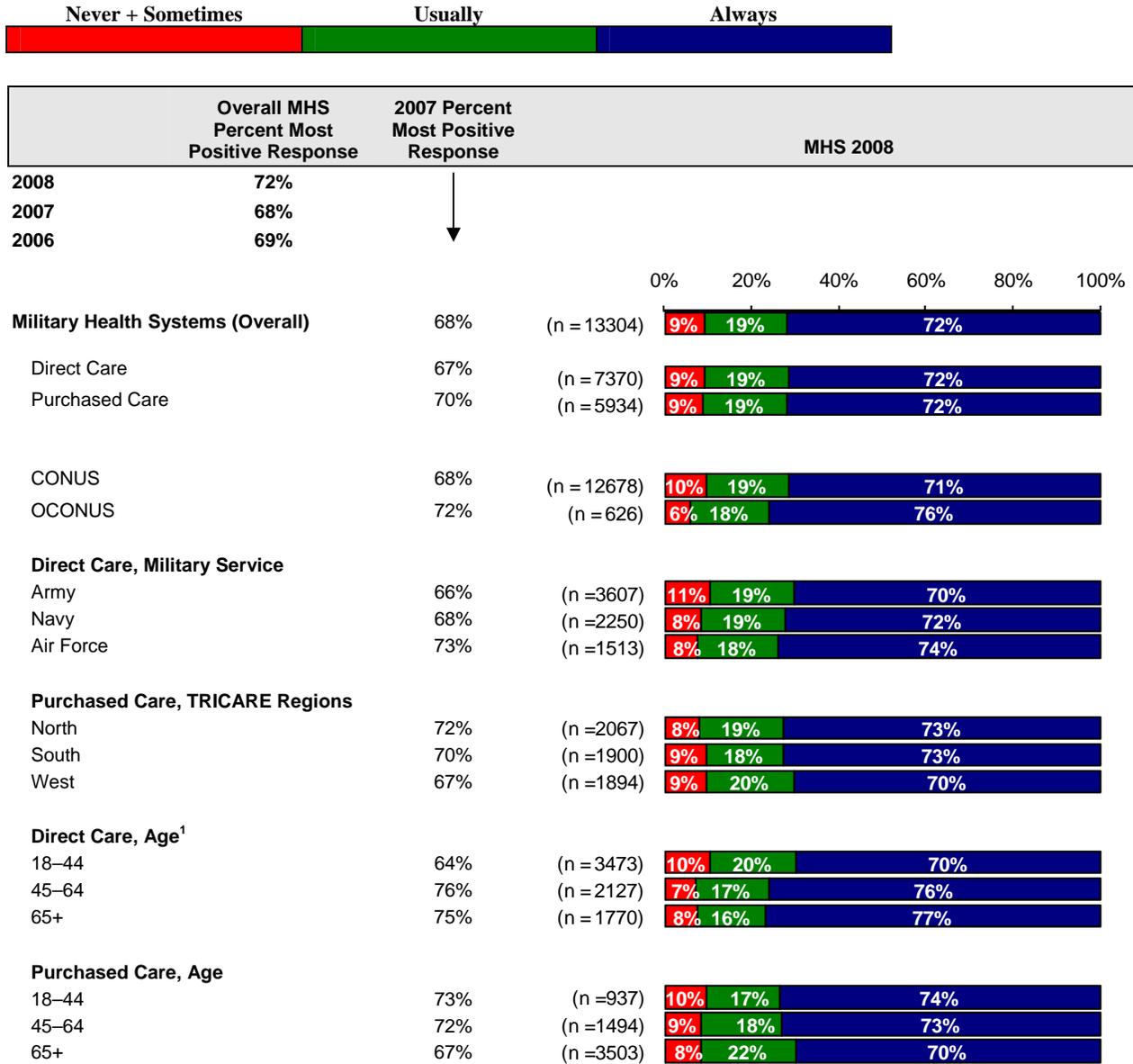
Being Admitted Through the Emergency Room (Medical Questionnaire Only)

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)



Your Care from Nurses

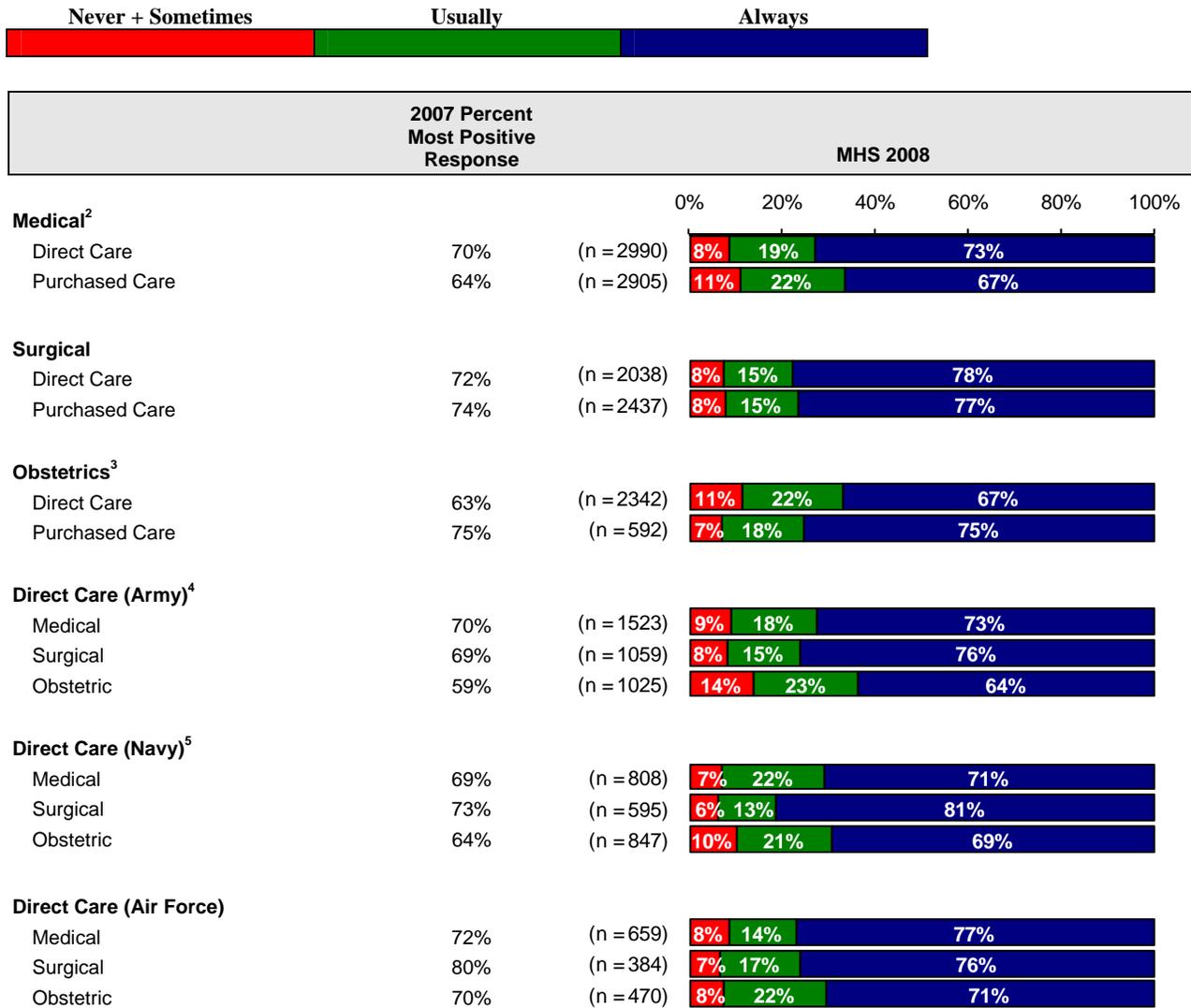
How often did you feel comfortable asking the nurses all the questions you wanted about your condition?



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

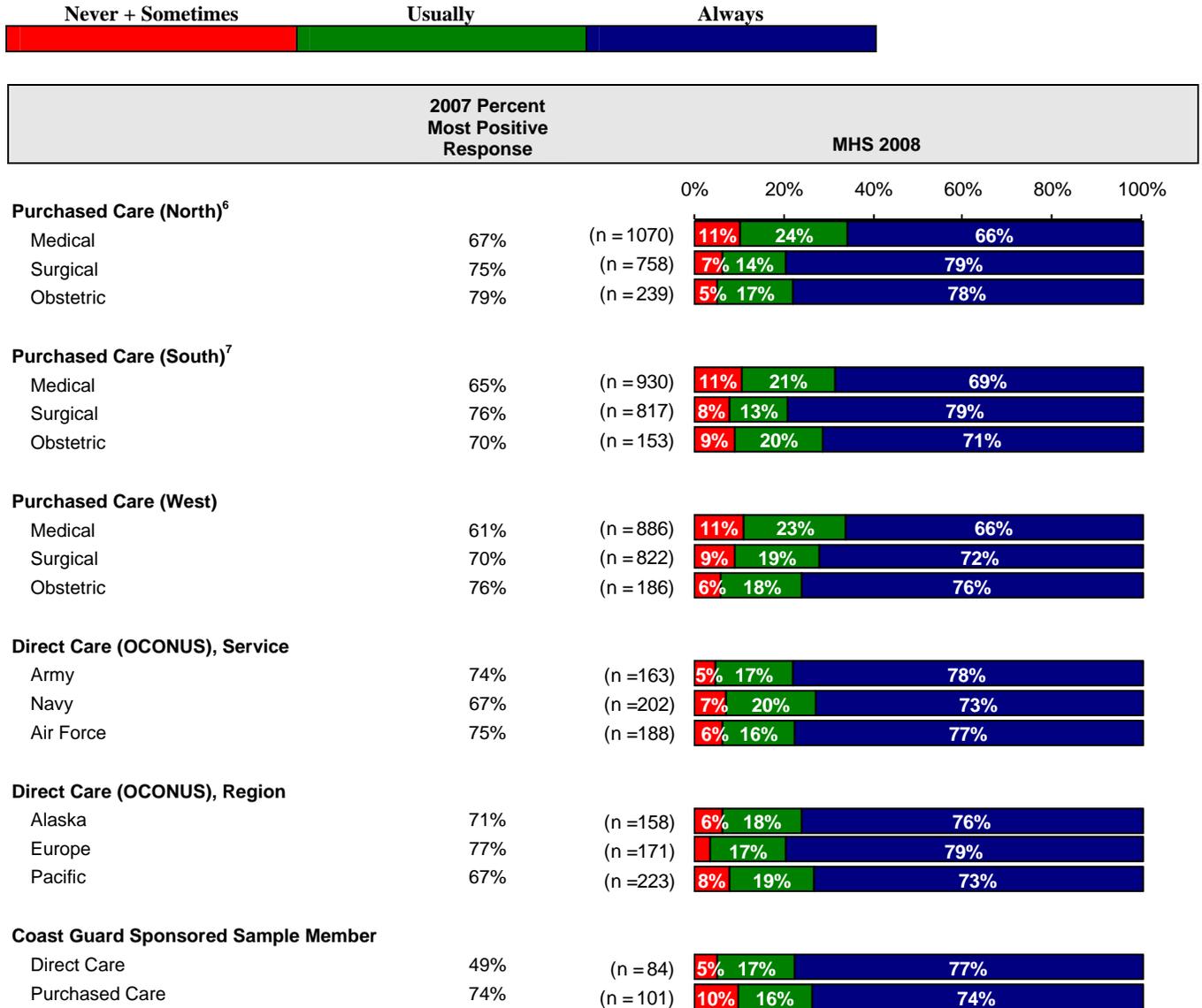
How often did you feel comfortable asking the nurses all the questions you wanted about your condition? (continued)



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

Your Care from Nurses

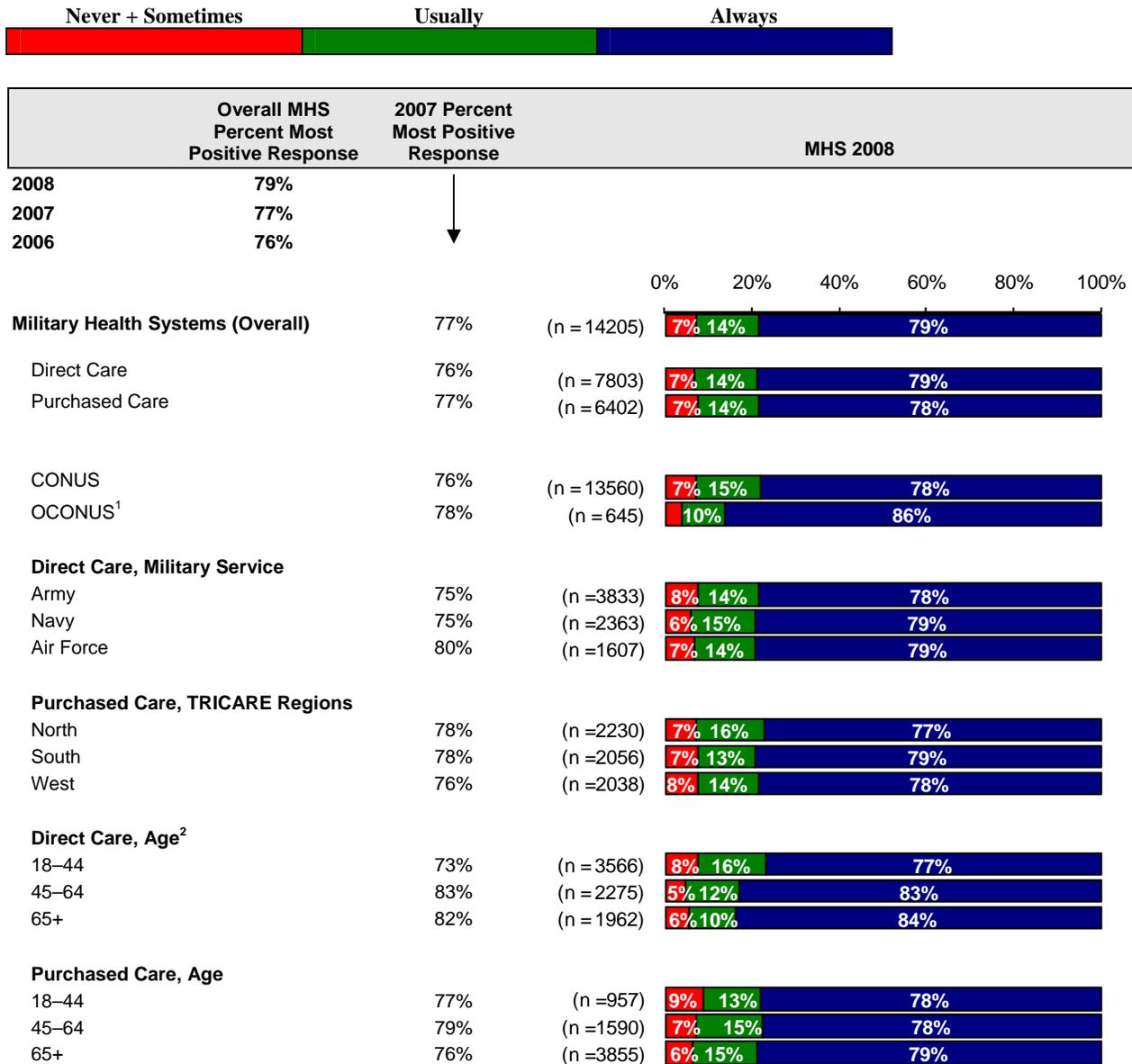
How often did you feel comfortable asking the nurses all the questions you wanted about your condition? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical 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 ($p < .05$).

Your Care from Doctors

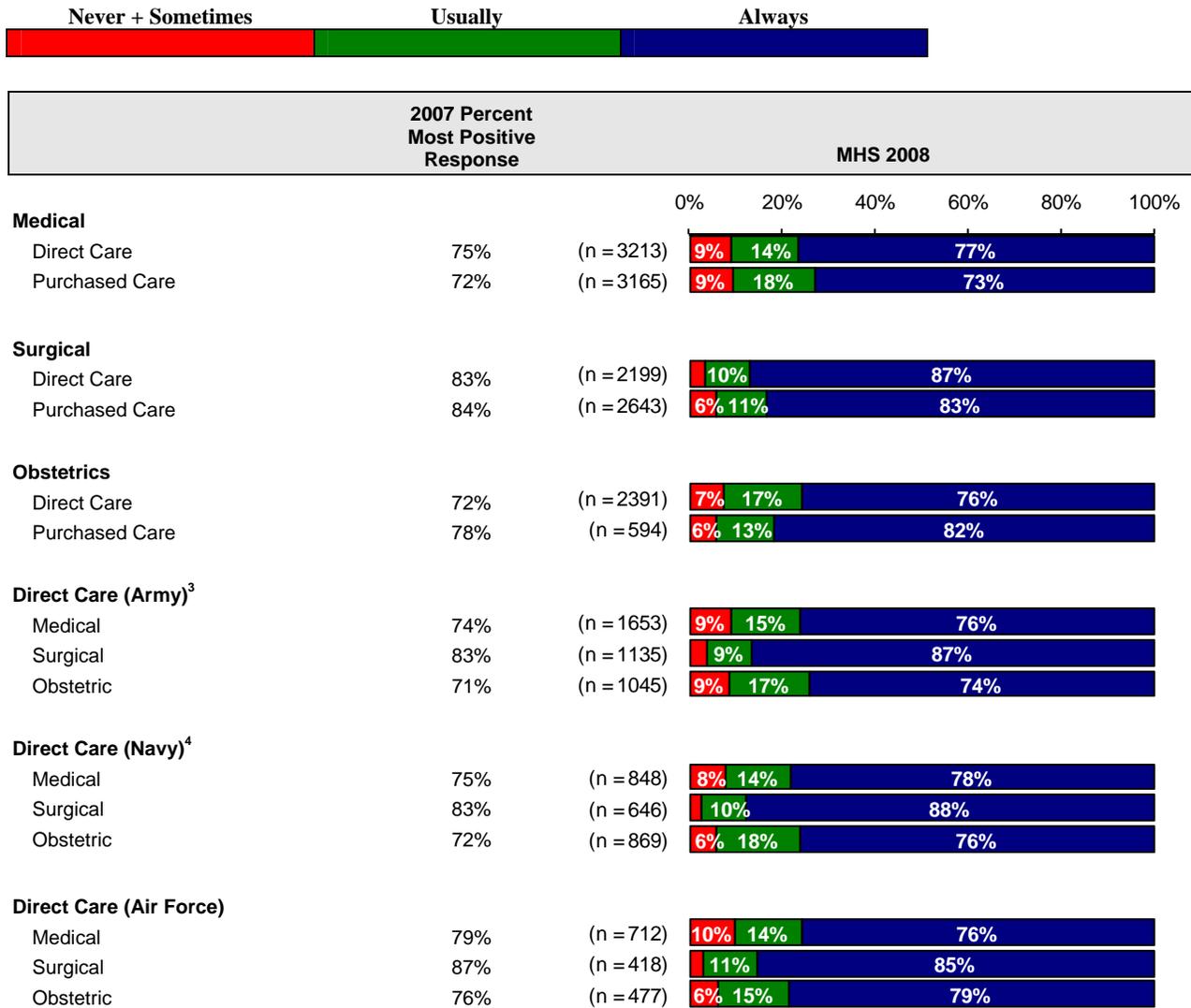
How often did you feel comfortable asking the doctors all the questions you wanted about your condition?



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

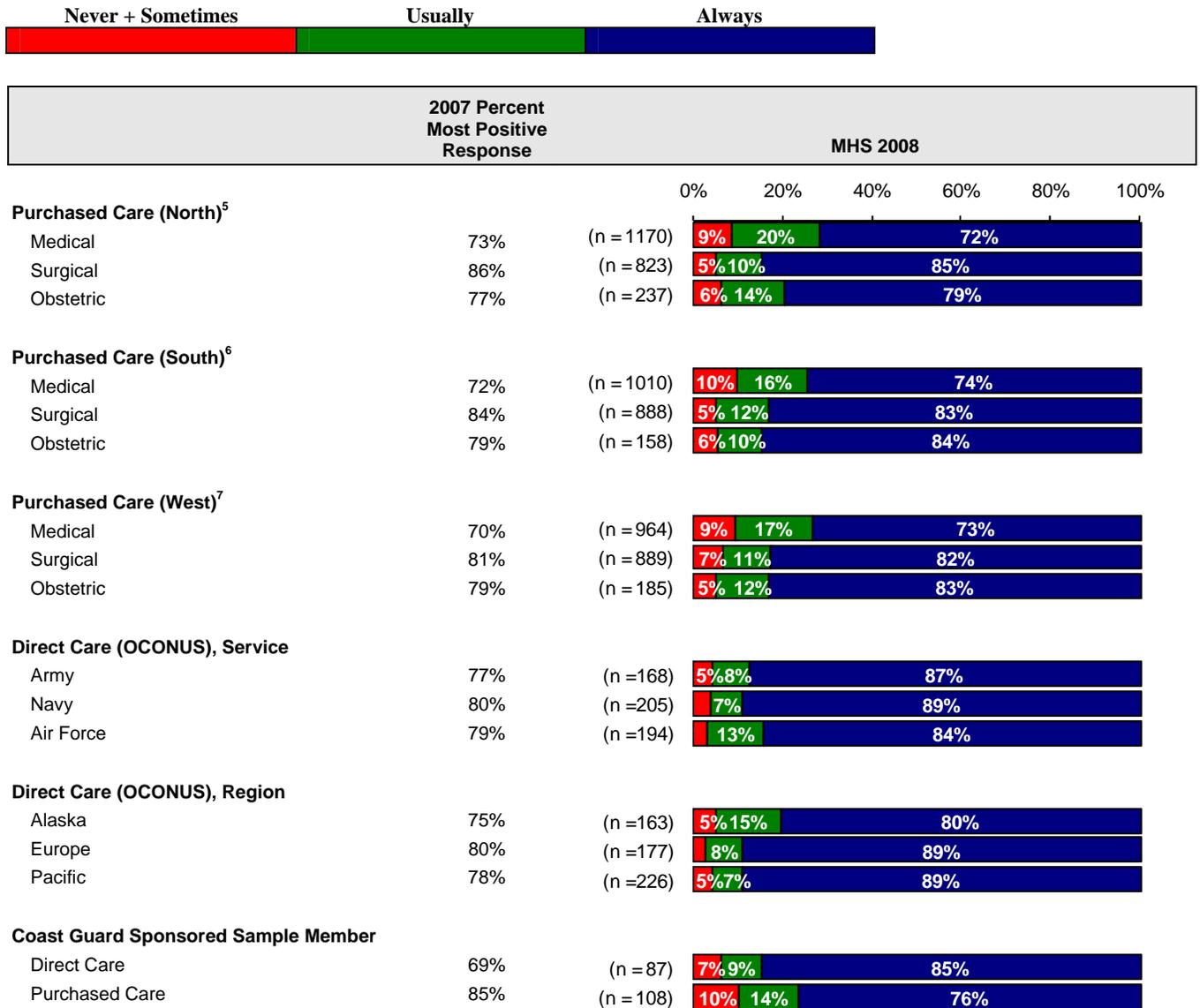


3. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that they always felt comfortable asking the doctors questions ($p < .05$).

4. Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that they always felt comfortable asking the doctors questions ($p < .05$).

Your Care from Doctors

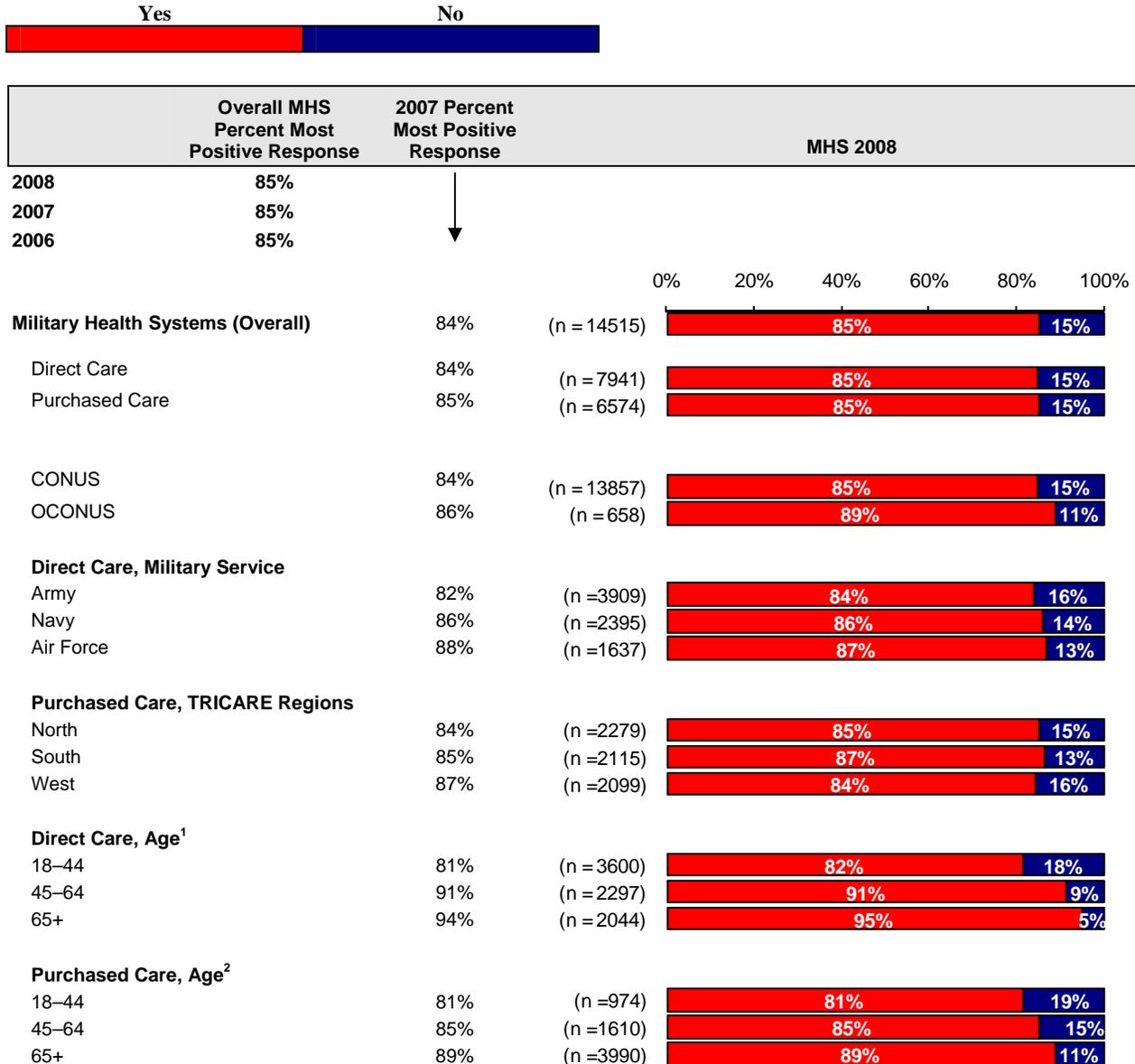
How often did you feel comfortable asking the doctors all the questions you wanted about your condition? (continued)



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

Your Care from Doctors

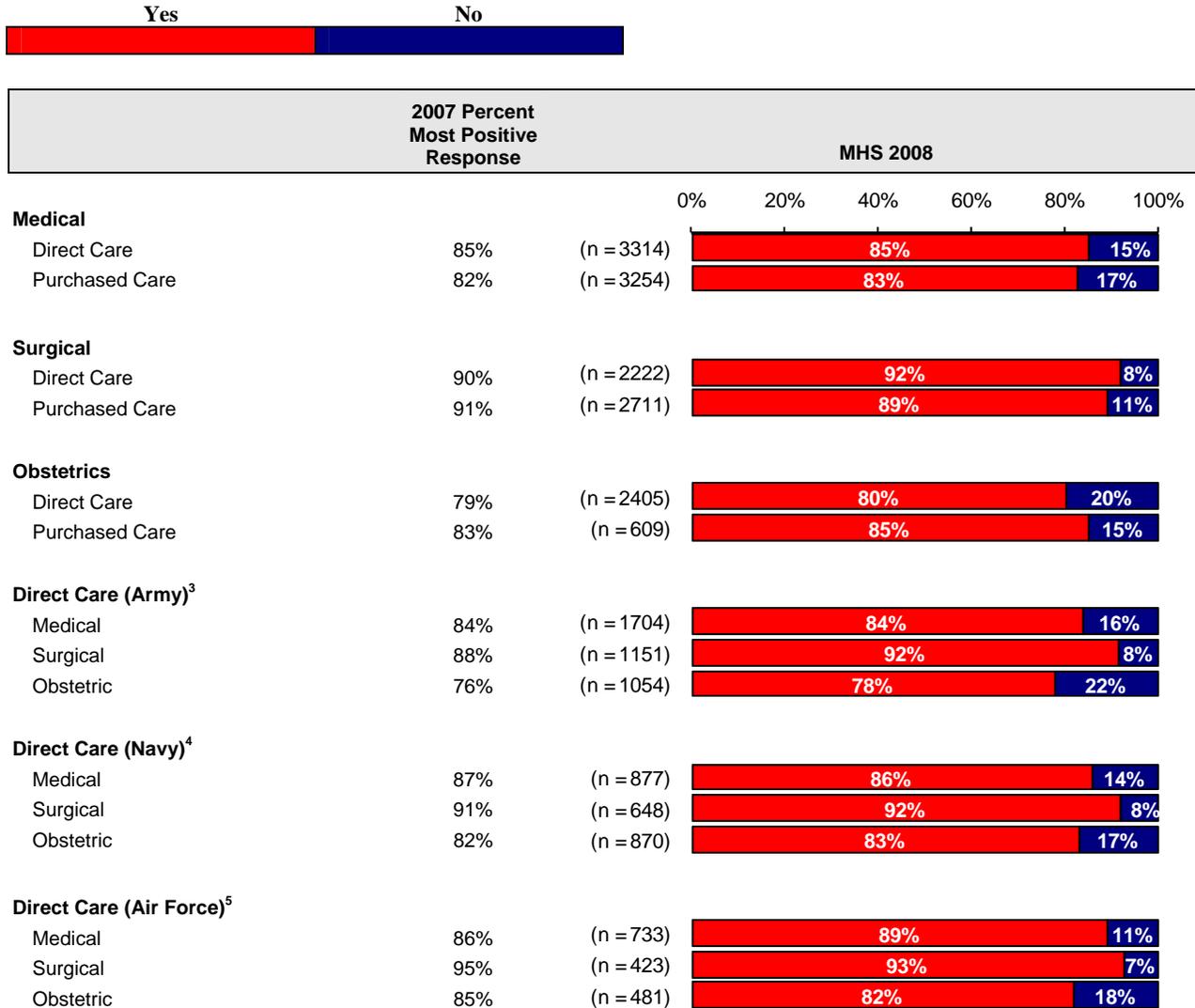
Did you feel that the doctors checked on you as much as you needed?



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

Your Care from Doctors

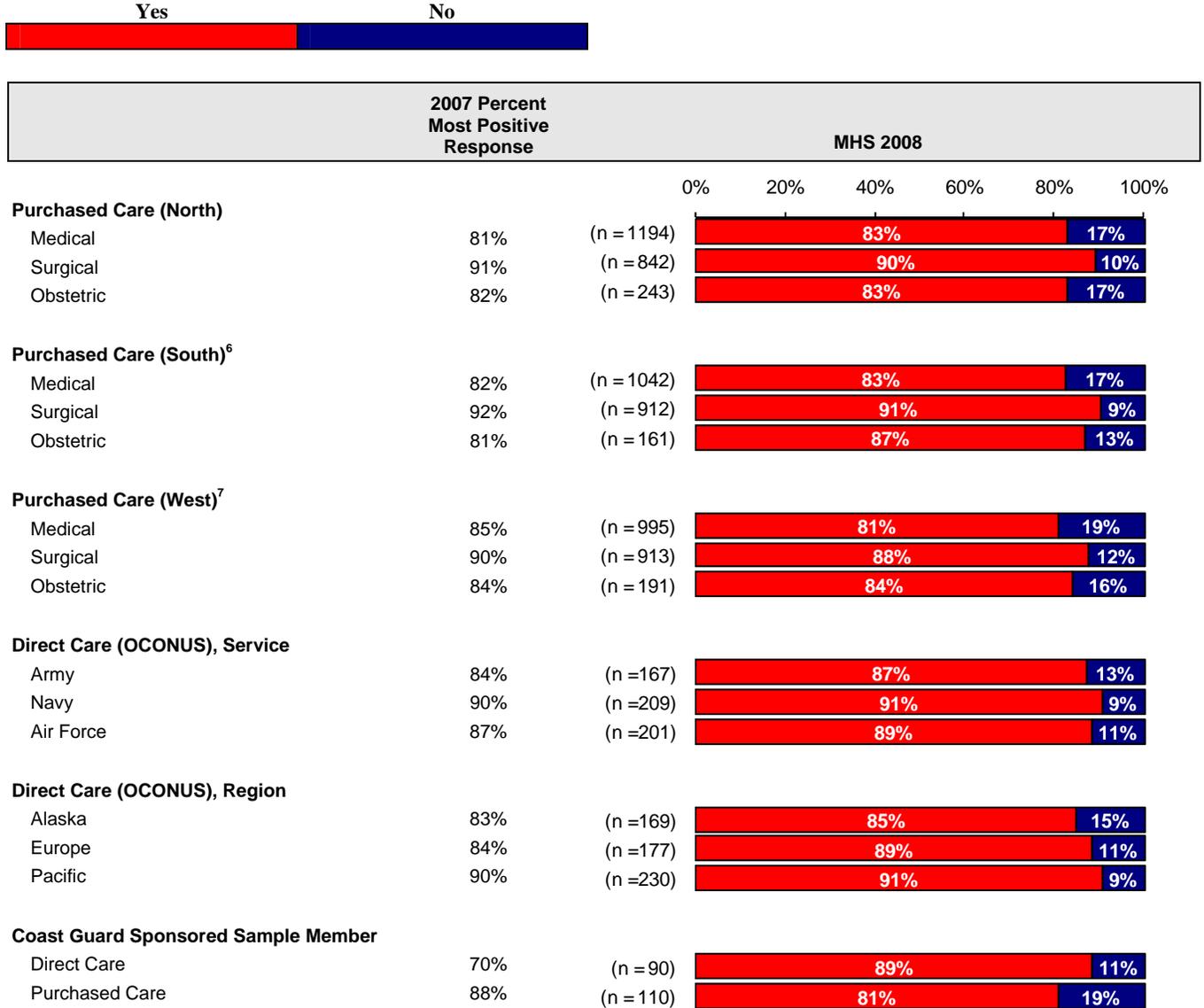
Did you feel that the doctors checked on you as much as you needed? (continued)



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

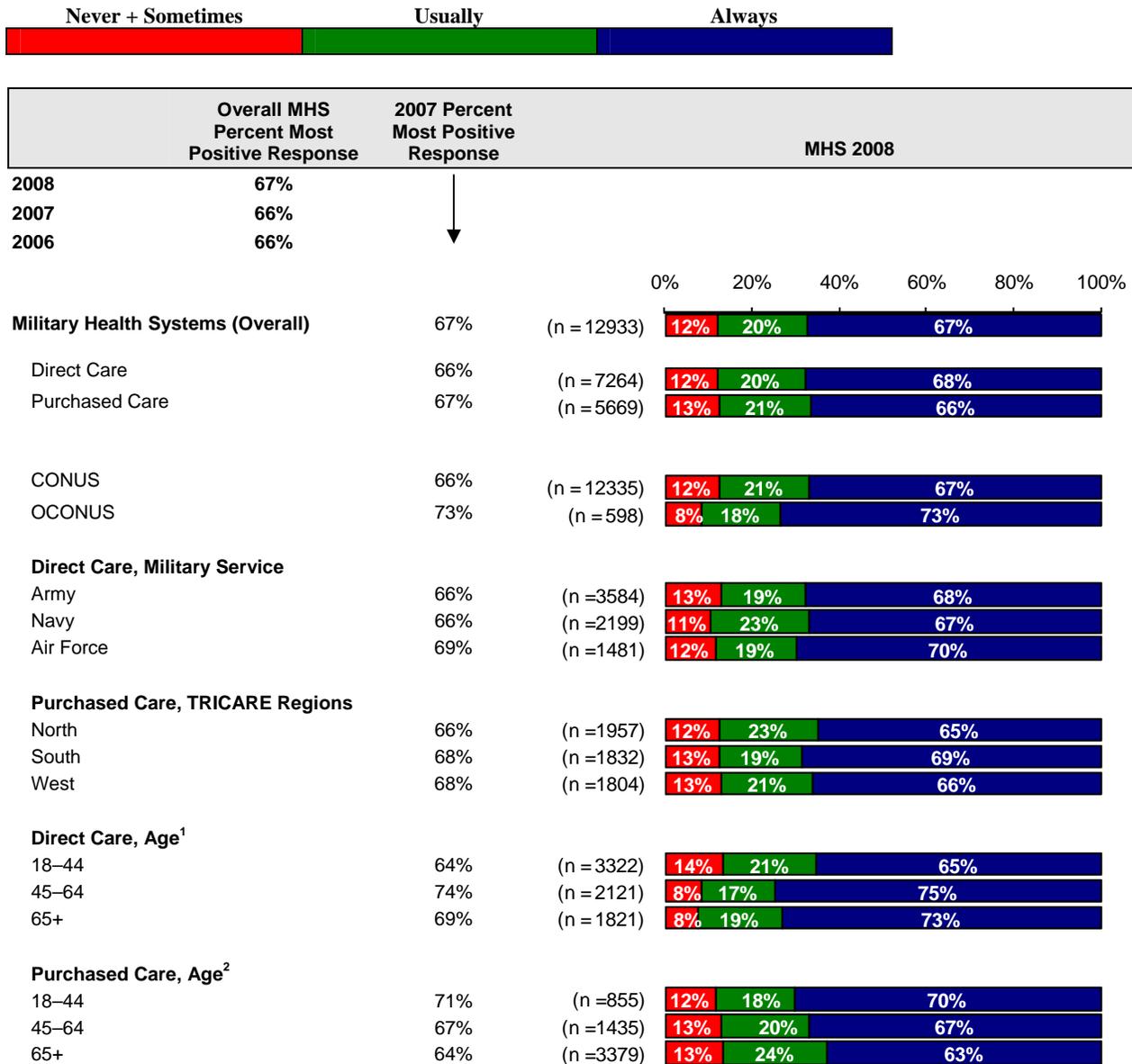


6. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Surgical services to report that the doctors checked on them as much as they needed ($p < .05$).

7. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Surgical services to report that the doctors checked on them as much as they needed ($p < .05$).

Your Care from Doctors

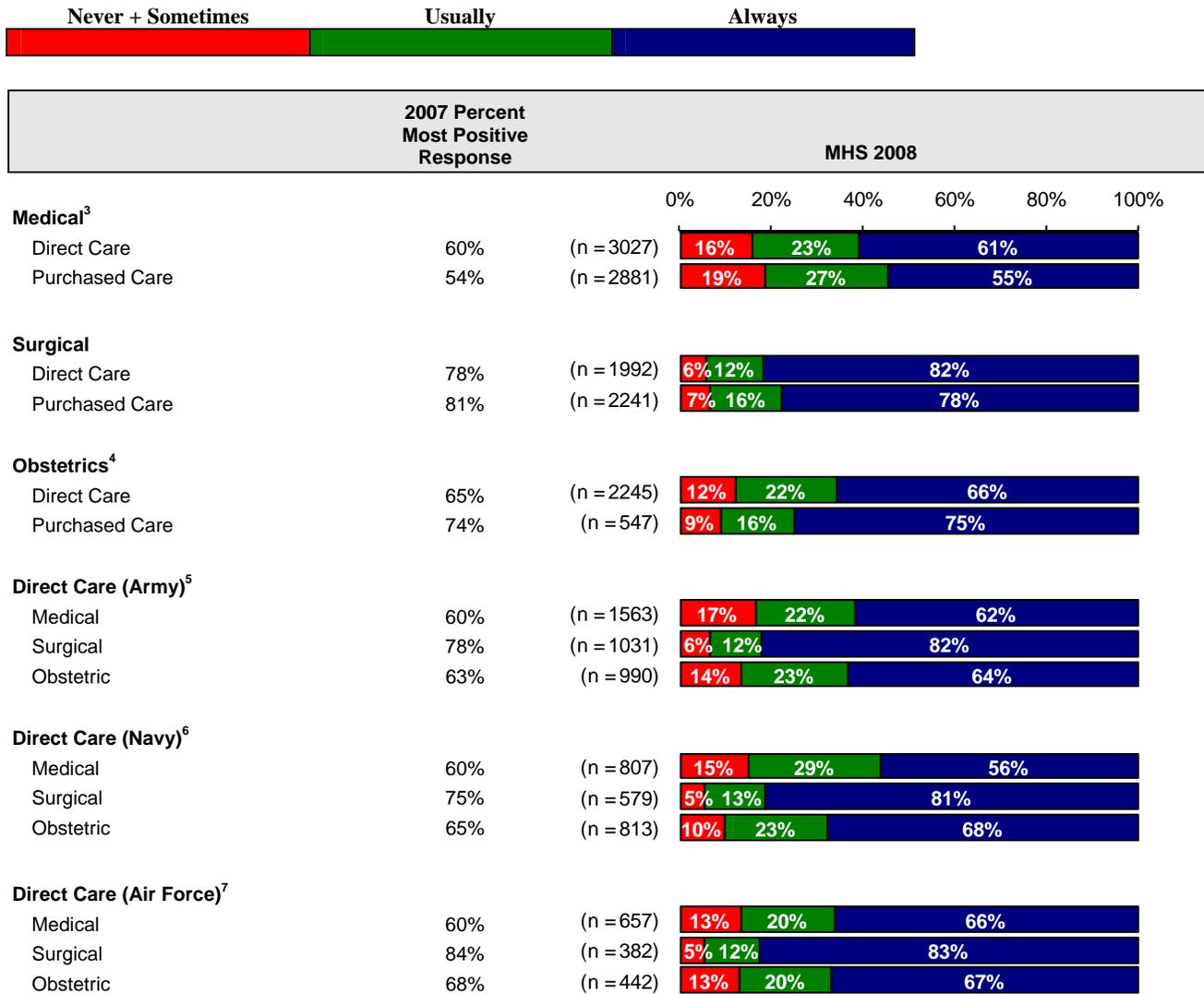
How often did doctors involve you as much as you wanted in decisions about your treatment?



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

Your Care from Doctors

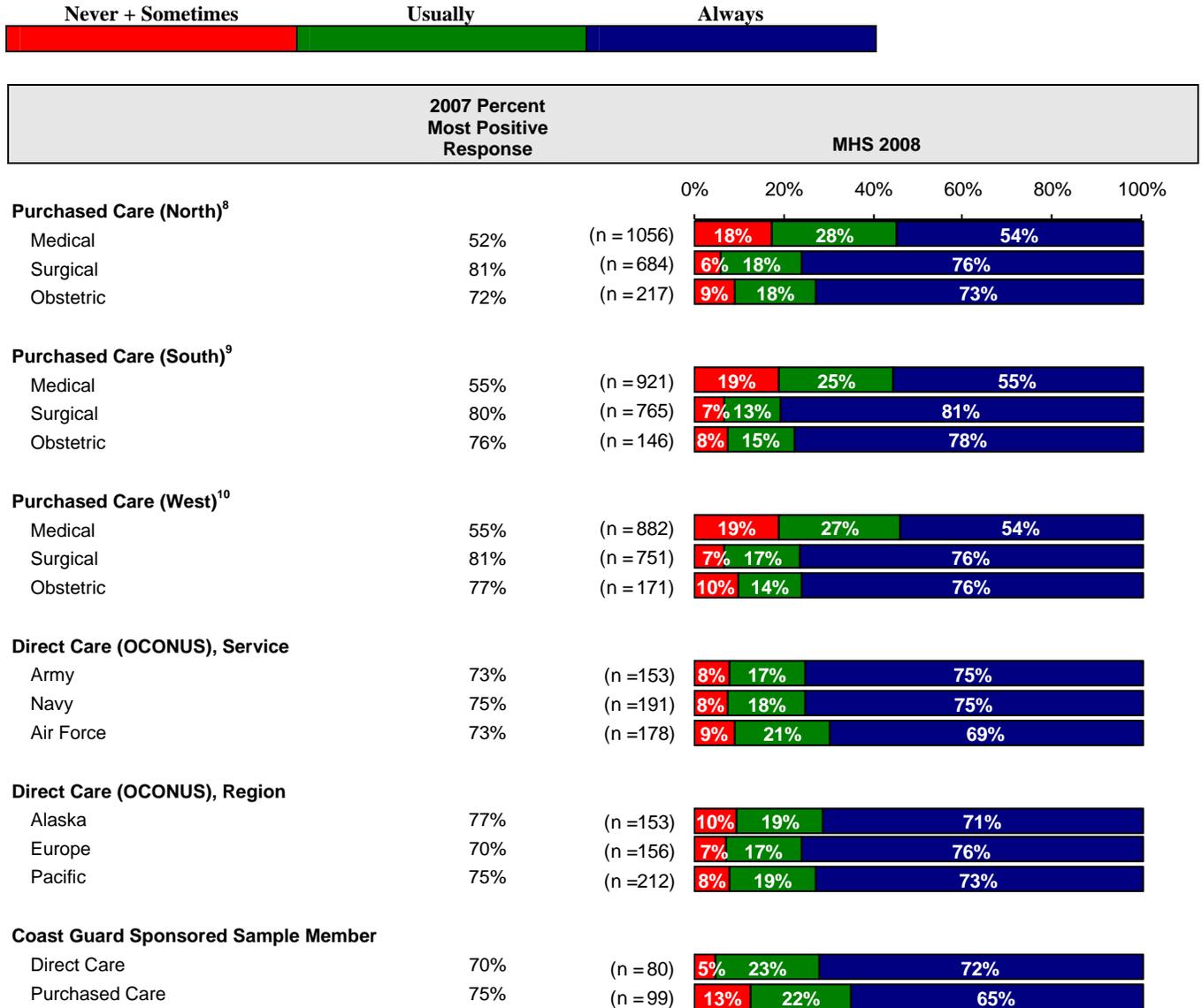
How often did doctors involve you as much as you wanted in decisions about your treatment? (continued)



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

Your Care from Doctors

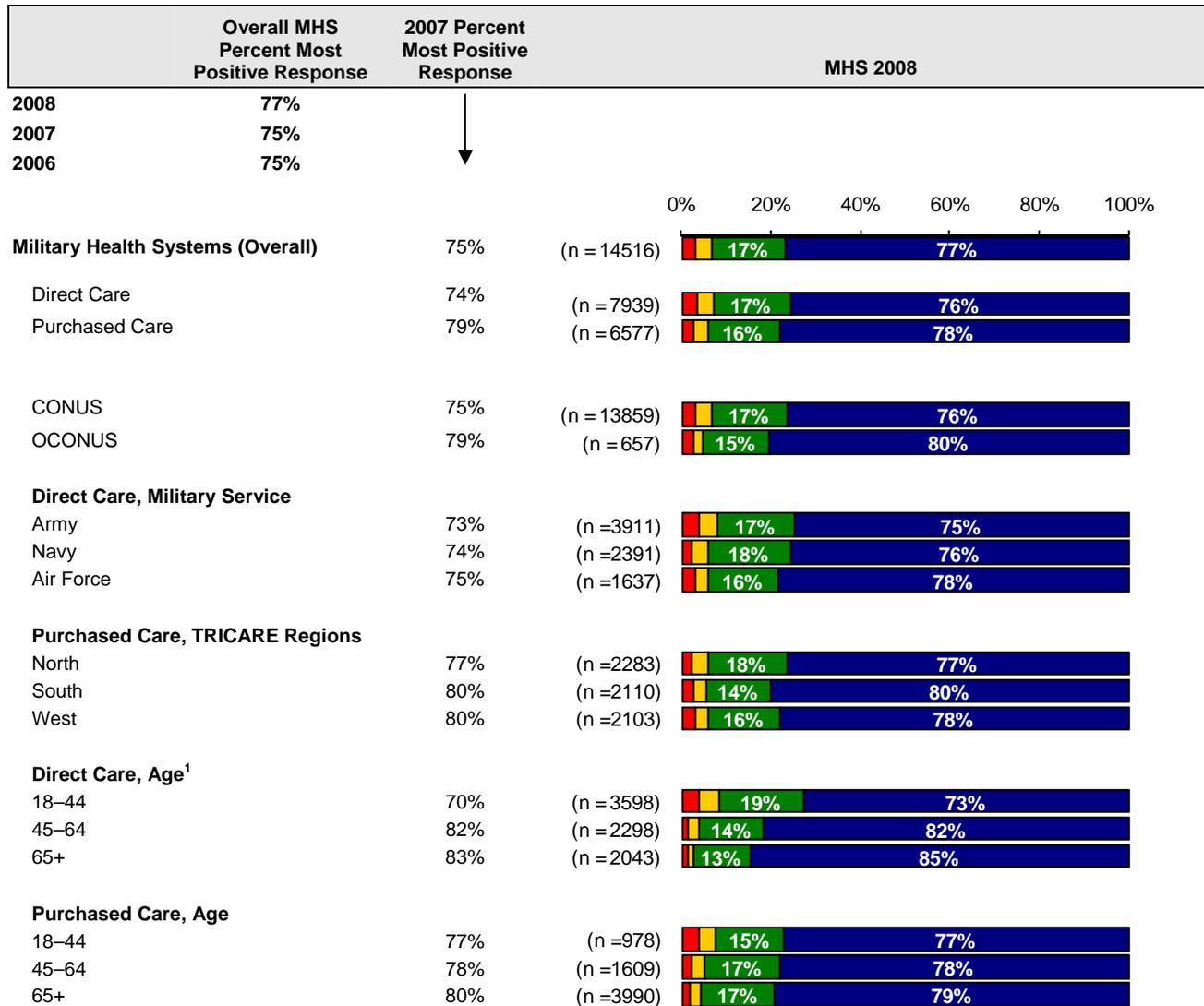
How often did doctors involve you as much as you wanted in decisions about your treatment? (continued)



8. Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving either Surgical or Obstetrics services to report that doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
9. Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving either Surgical or Obstetrics services to report that doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).
10. Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving either Surgical or Obstetrics services to report that doctors always involved them as much as they wanted in decisions about their treatment ($p < .05$).

Coordination of Care

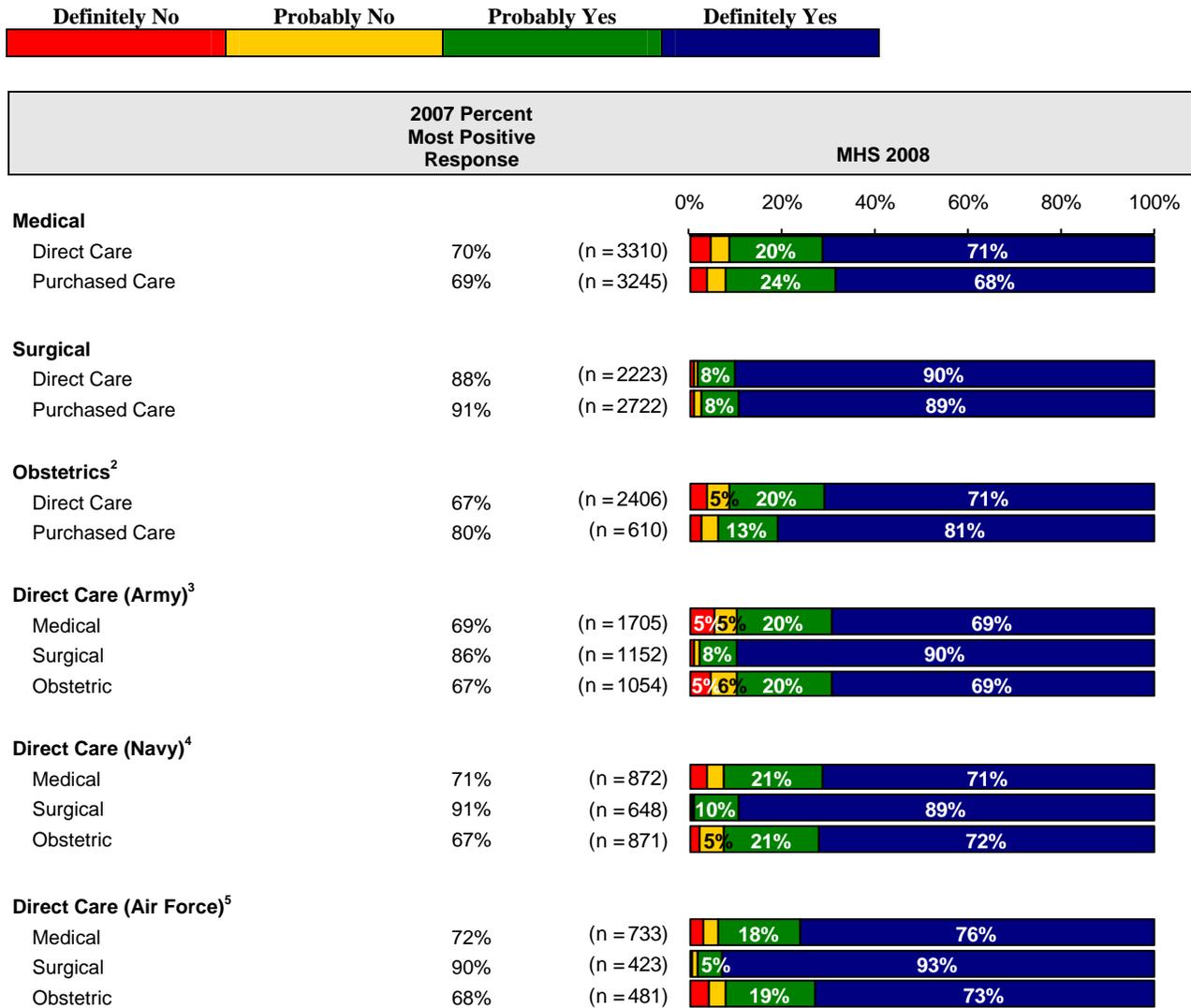
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your condition and treatment?



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

Coordination of Care

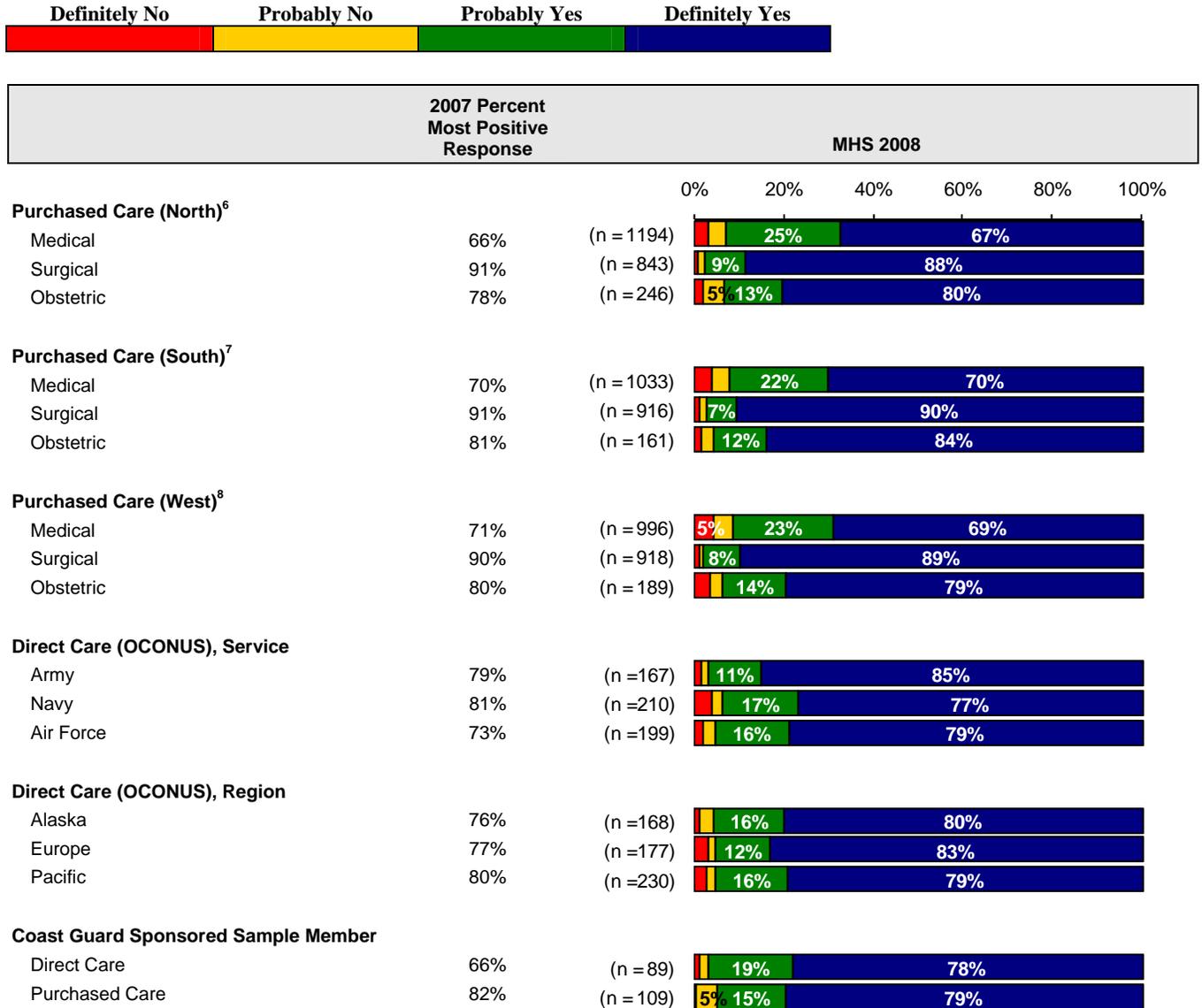
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your condition and treatment? (continued)



- Among beneficiaries receiving Obstetrics care, those in Purchased Care were significantly more likely than those in Direct Care to report that they definitely felt 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 facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to report that they definitely felt 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 facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to report that they definitely felt 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 facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to report that they definitely felt that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).

Coordination of Care

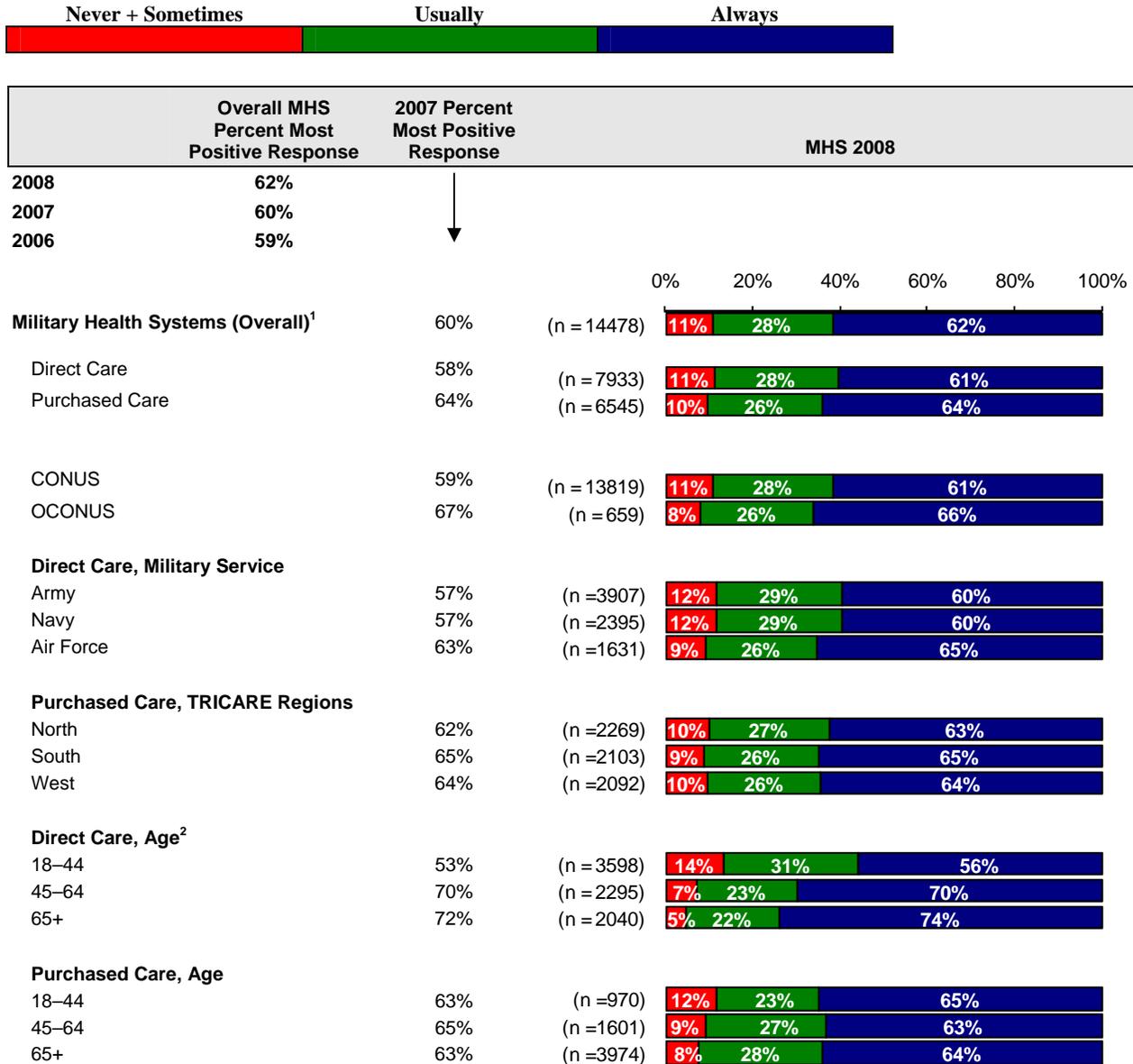
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your condition and treatment? (continued)



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to report that they definitely felt that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving either Surgical or Obstetrics services to report that they definitely felt 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 either Medical or Obstetrics services to report that they definitely felt that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving either Surgical or Obstetrics services to report that they definitely felt 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 either Medical or Obstetrics services to report that they definitely felt that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$). Also, those receiving Medical services were significantly less likely than those receiving either Surgical or Obstetrics services to report that they definitely felt that there was at least one doctor who had a full understanding of their condition and treatment ($p < .05$).

Coordination of Care

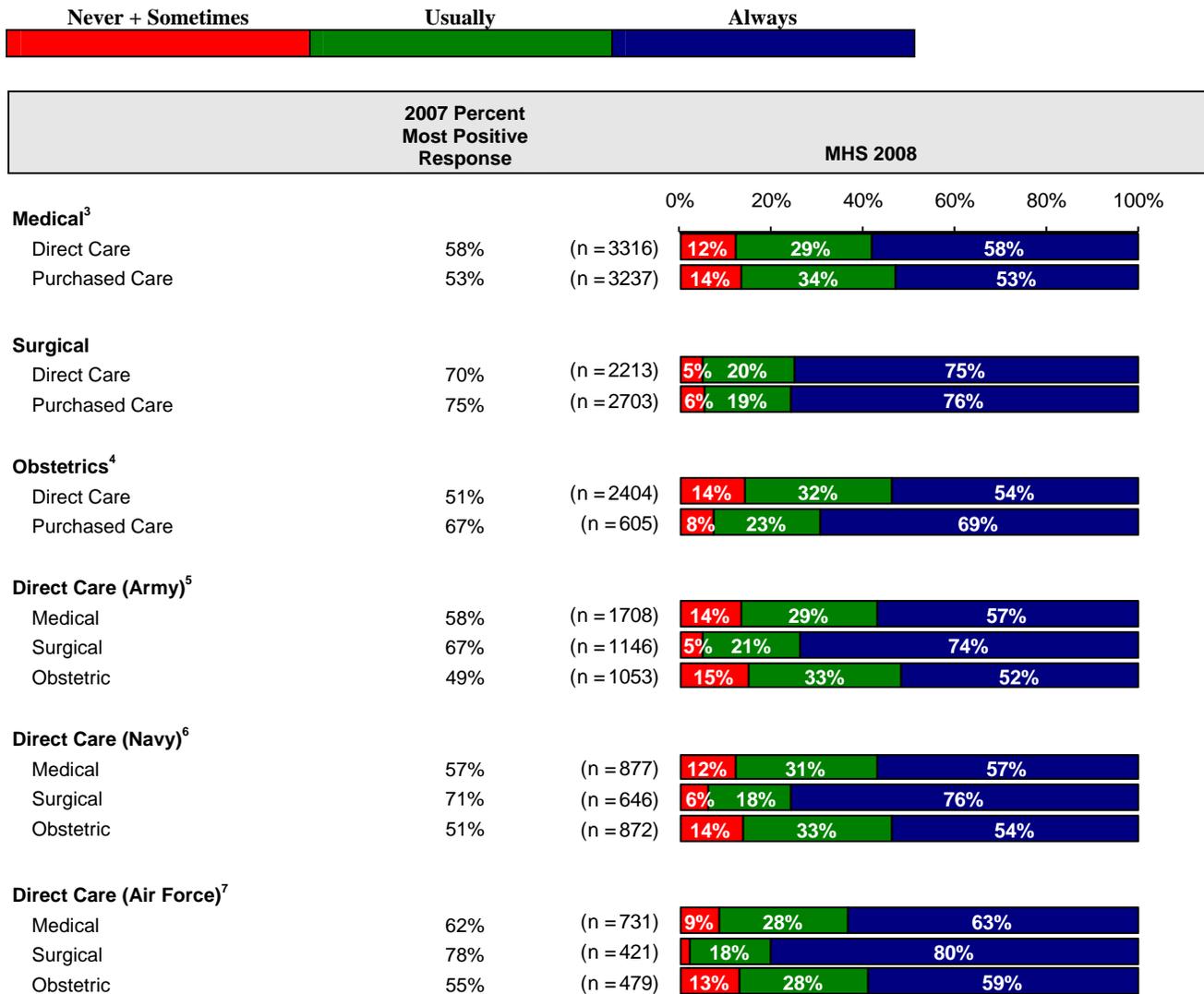
How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving?



- Overall, those in Purchased Care were significantly more likely than those in Direct Care to report that doctors and nurses always seemed informed and up-to-date about 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 doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$).

Coordination of Care

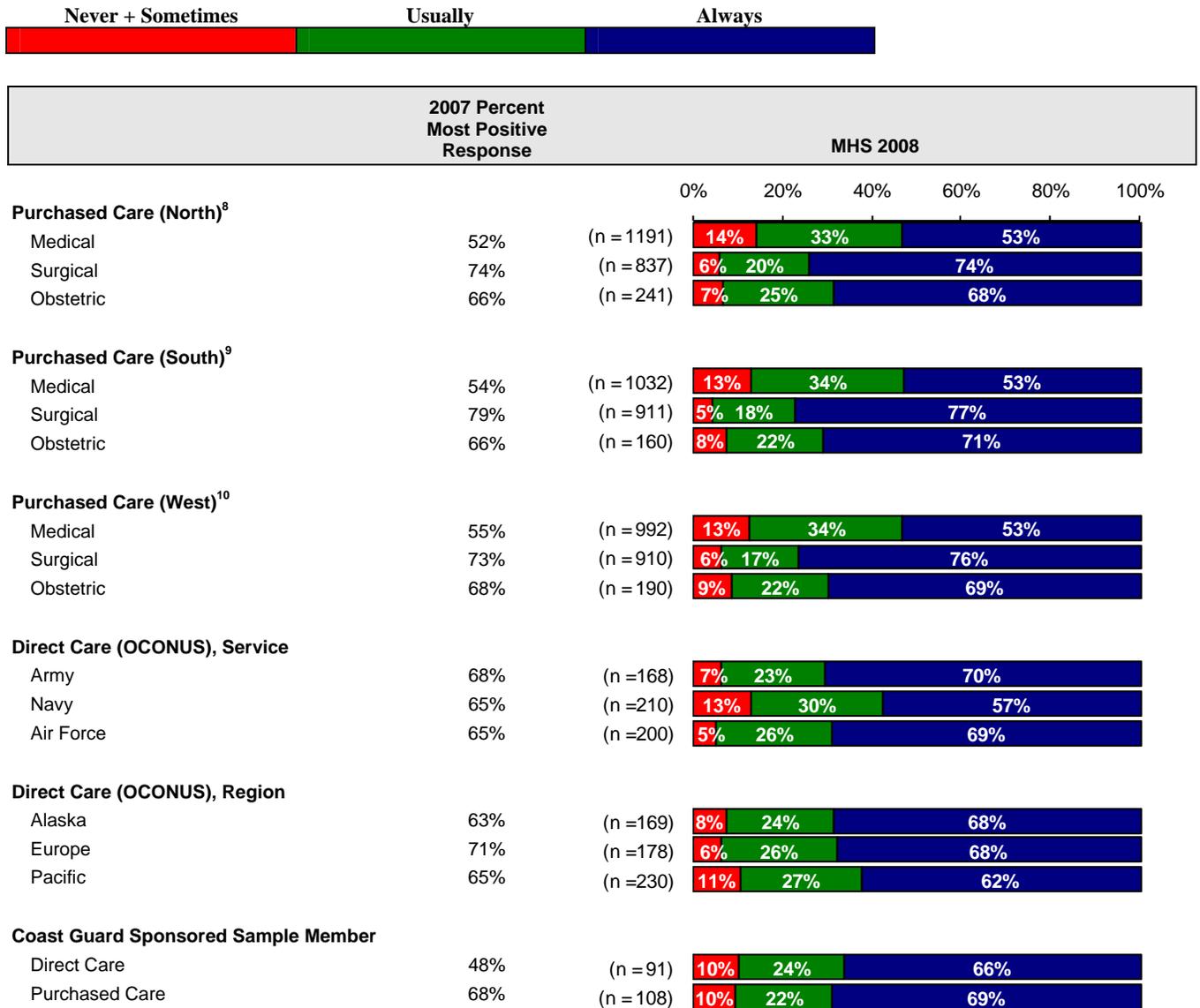
How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving? (continued)



- Among those receiving Medical services, those in Direct Care were significantly more likely than those in Purchased Care to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$).
- Among those receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$).
- Among Direct Care beneficiaries in Navy facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$).
- Among Direct Care beneficiaries in Air Force facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that doctors and nurses always seemed informed and up-to-date about the care they were receiving ($p < .05$).

Coordination of Care

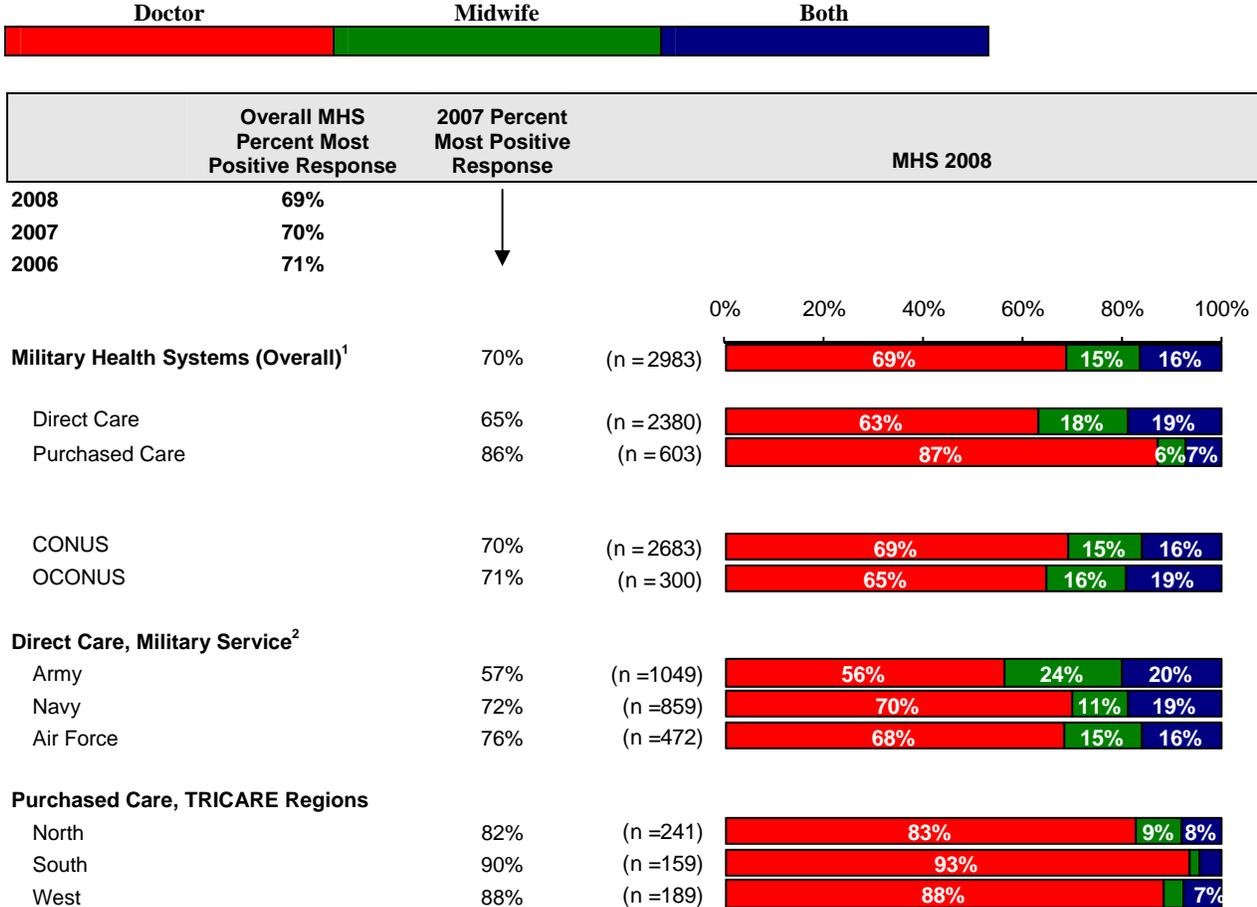
How often did the doctors and nurses seem informed and up-to-date about all the care you were receiving? (continued)



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

Maternity Care (Maternity Questionnaire Only)

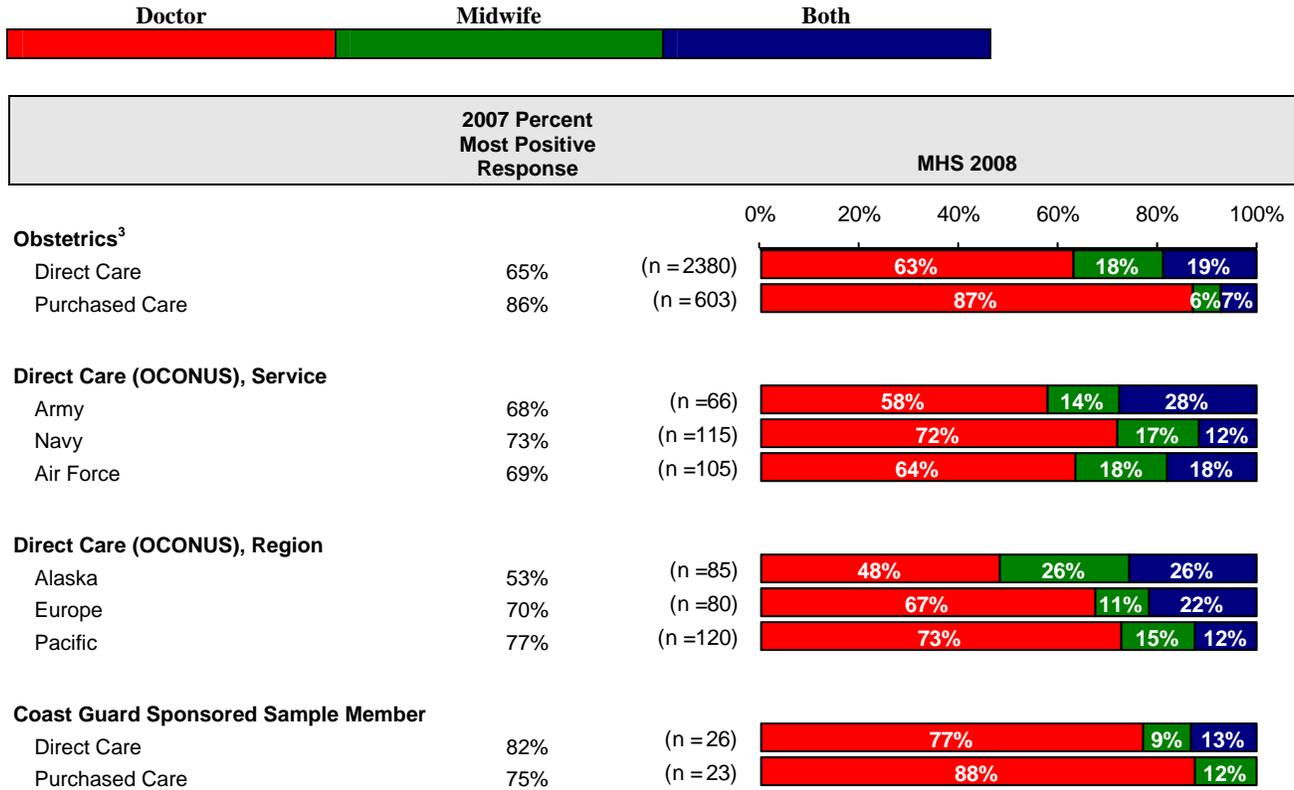
Was your primary provider during labor and delivery a doctor, midwife or both?



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

Maternity Care (Maternity Questionnaire Only)

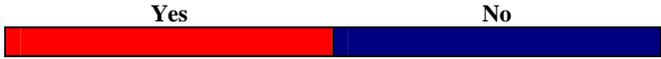
**Was your primary provider during labor and delivery a doctor, midwife or both?
(continued)**



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

Maternity Care (Maternity Questionnaire Only)

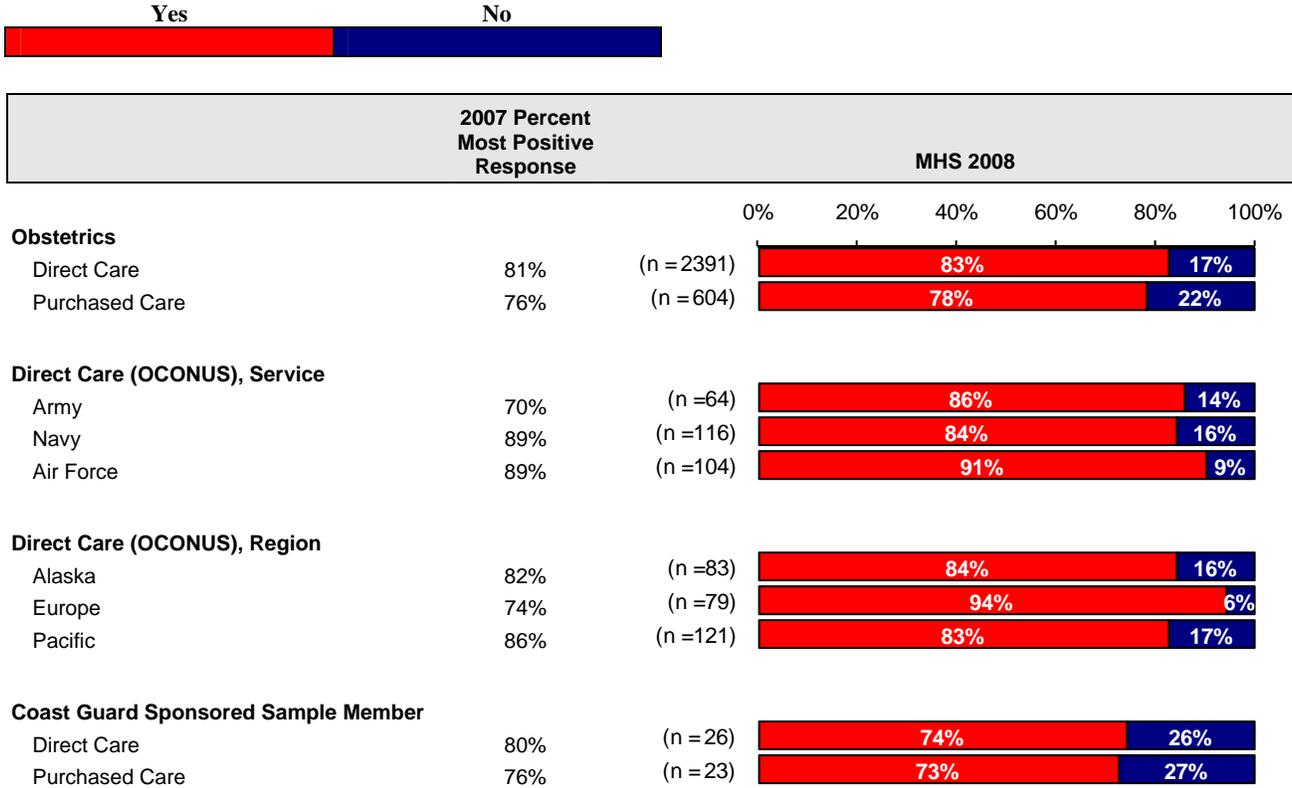
Before you left the hospital, did someone on the hospital staff talk with you about the signs and symptoms of post-partum depression?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008
2008	82%		
2007	80%		
2006	79%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)	80%	(n = 2995)	82% 18%
Direct Care	81%	(n = 2391)	83% 17%
Purchased Care	76%	(n = 604)	78% 22%
CONUS	80%	(n = 2697)	81% 19%
OCONUS	81%	(n = 298)	87% 13%
Direct Care, Military Service			
Army	79%	(n = 1052)	83% 17%
Navy	83%	(n = 866)	81% 19%
Air Force	82%	(n = 473)	86% 14%
Purchased Care, TRICARE Regions			
North	80%	(n = 240)	82% 18%
South	71%	(n = 158)	74% 26%
West	75%	(n = 192)	77% 23%

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)



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?

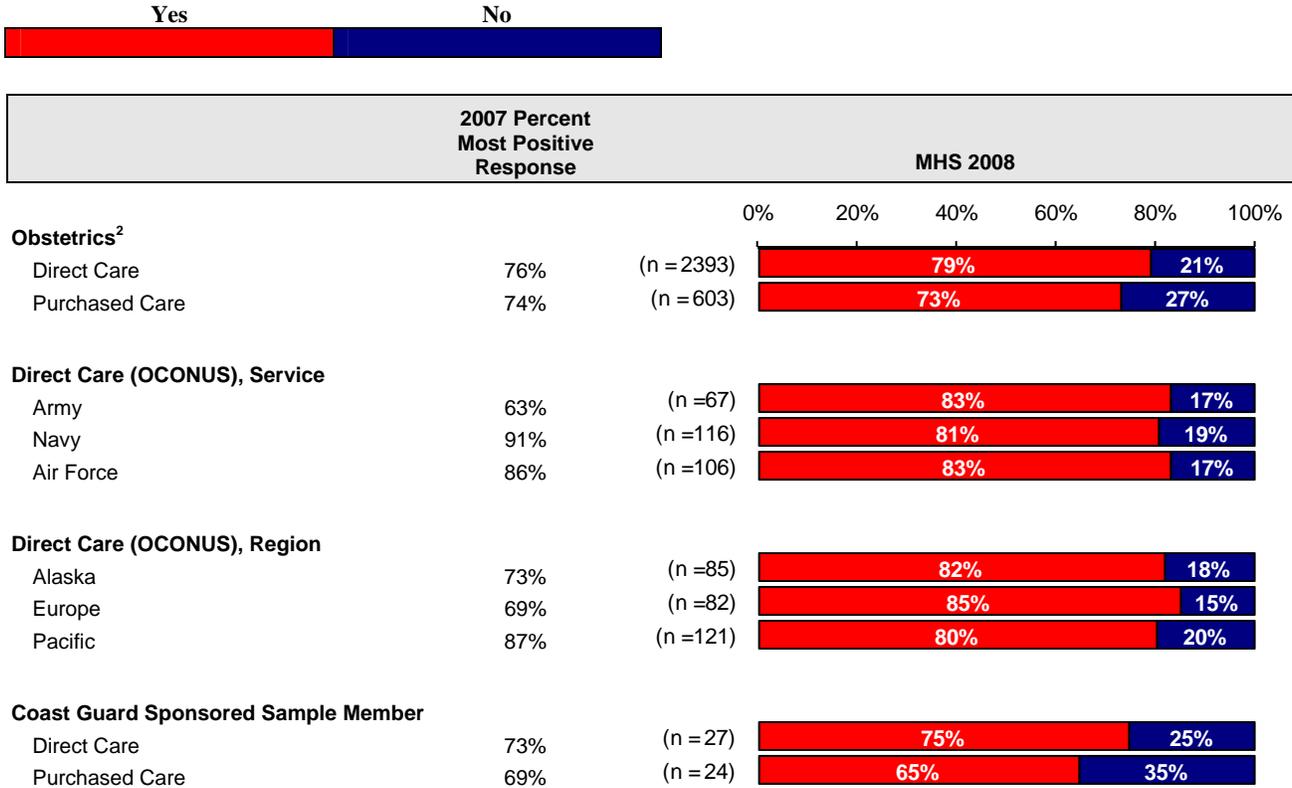


	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008
2008	78%		
2007	76%		
2006	75%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)¹	76%	(n = 2996)	78% (Yes) / 22% (No)
Direct Care	76%	(n = 2393)	79% (Yes) / 21% (No)
Purchased Care	74%	(n = 603)	73% (Yes) / 27% (No)
CONUS	76%	(n = 2694)	77% (Yes) / 23% (No)
OCONUS	78%	(n = 302)	82% (Yes) / 18% (No)
Direct Care, Military Service			
Army	74%	(n = 1049)	79% (Yes) / 21% (No)
Navy	79%	(n = 864)	77% (Yes) / 23% (No)
Air Force	78%	(n = 480)	82% (Yes) / 18% (No)
Purchased Care, TRICARE Regions			
North	77%	(n = 242)	74% (Yes) / 26% (No)
South	70%	(n = 159)	72% (Yes) / 28% (No)
West	74%	(n = 189)	73% (Yes) / 27% (No)

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

Maternity Care (Maternity Questionnaire Only)

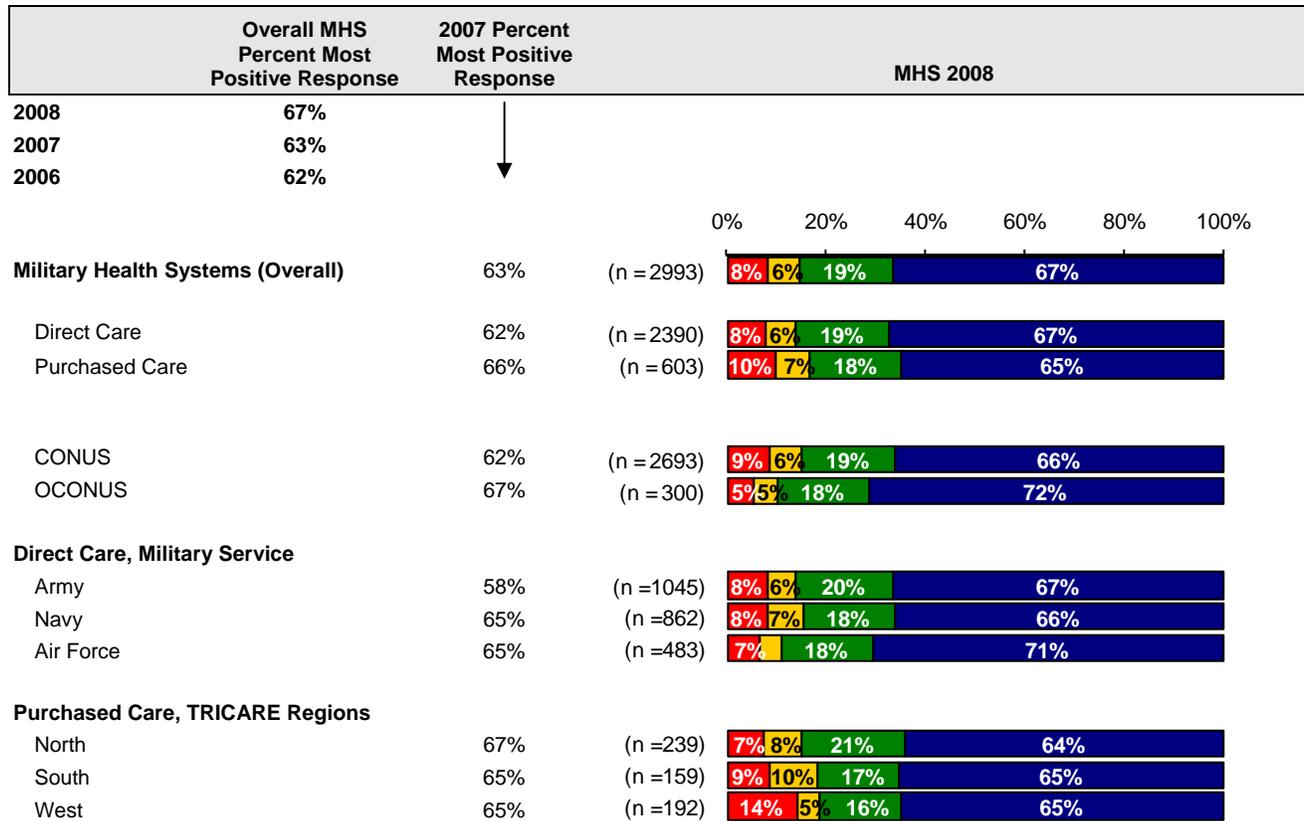
Before you left the hospital, did someone on the hospital staff talk with you about what to do or who to contact if you felt that you were having signs or symptoms of post-partum depression? (continued)



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

Maternity Care (Maternity Questionnaire Only)

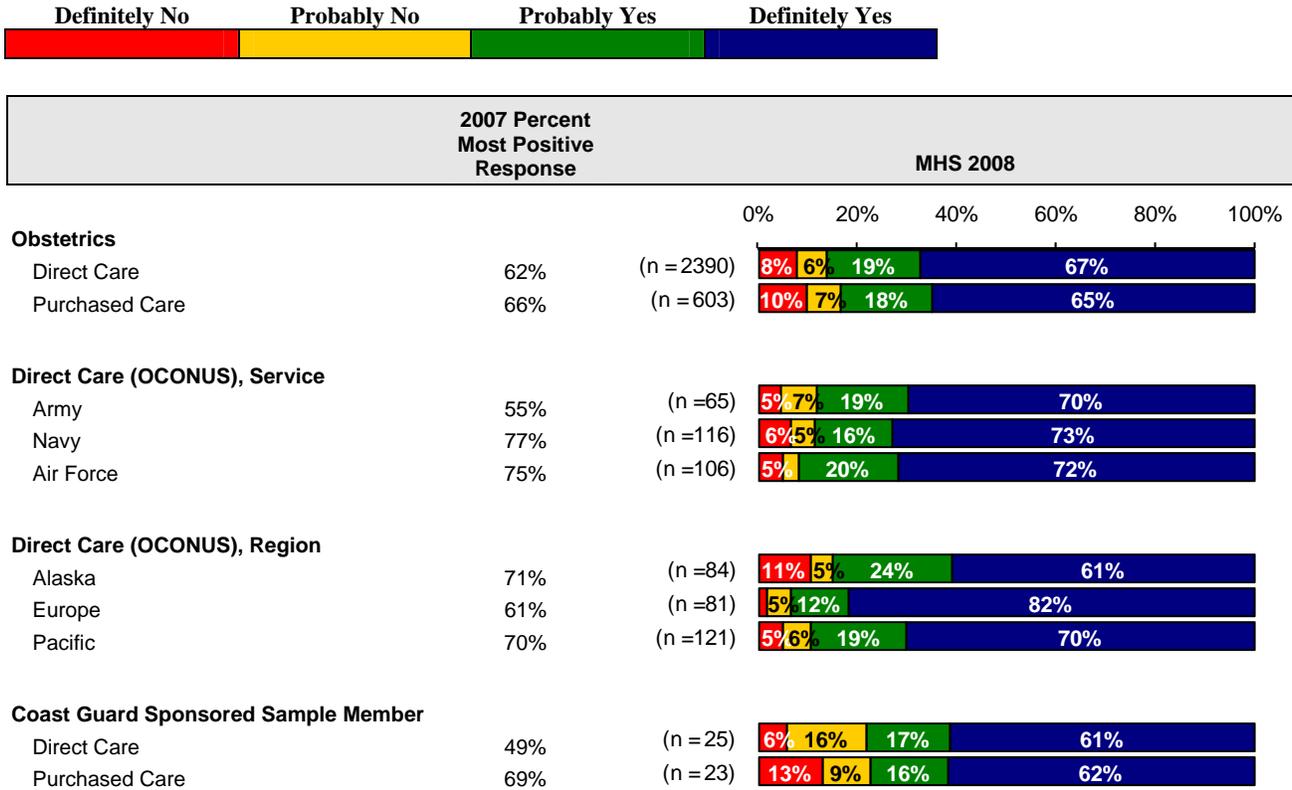
Before you left the hospital, did you feel confident that you knew what to do or who to contact if you were having signs or symptoms of postpartum depression?



TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

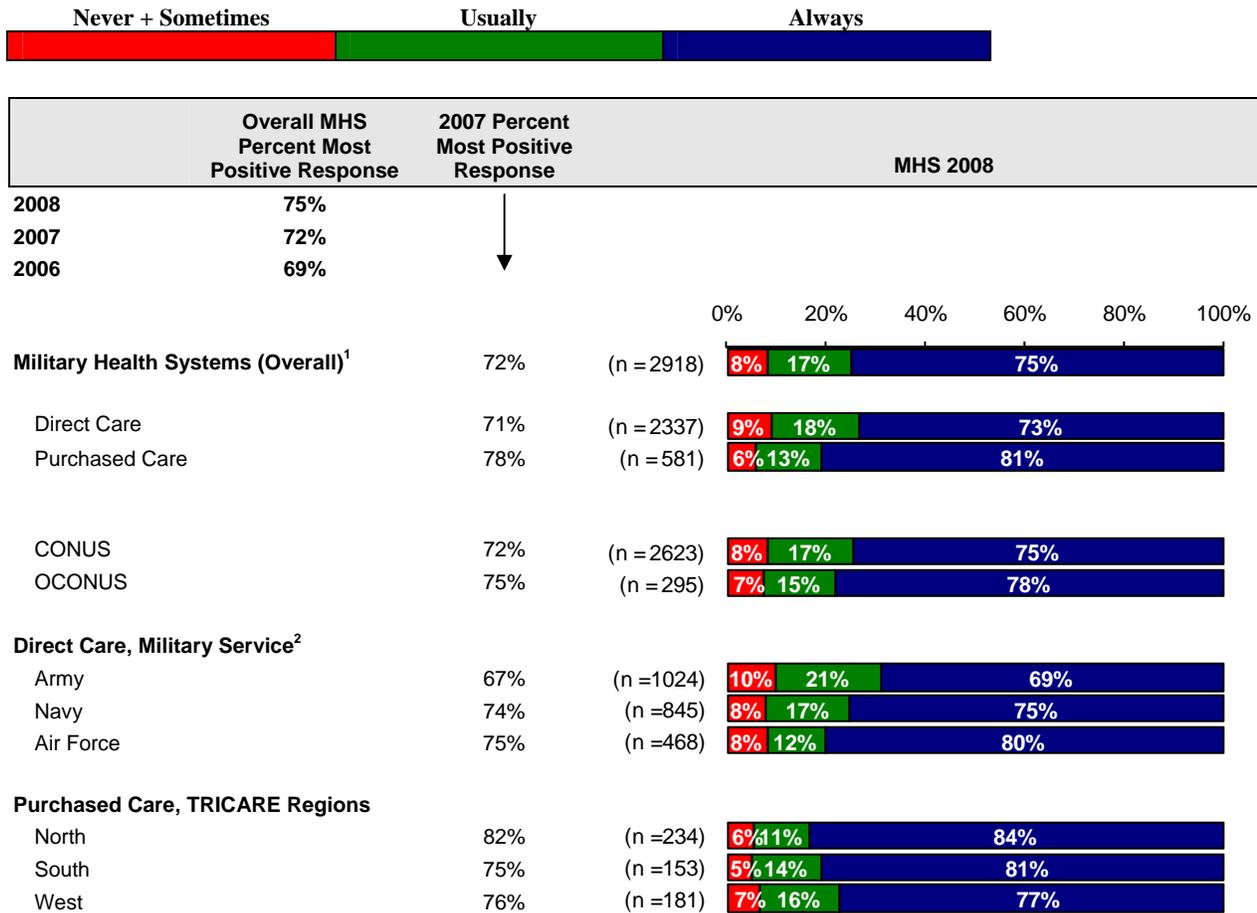
Maternity Care (Maternity Questionnaire Only)

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)

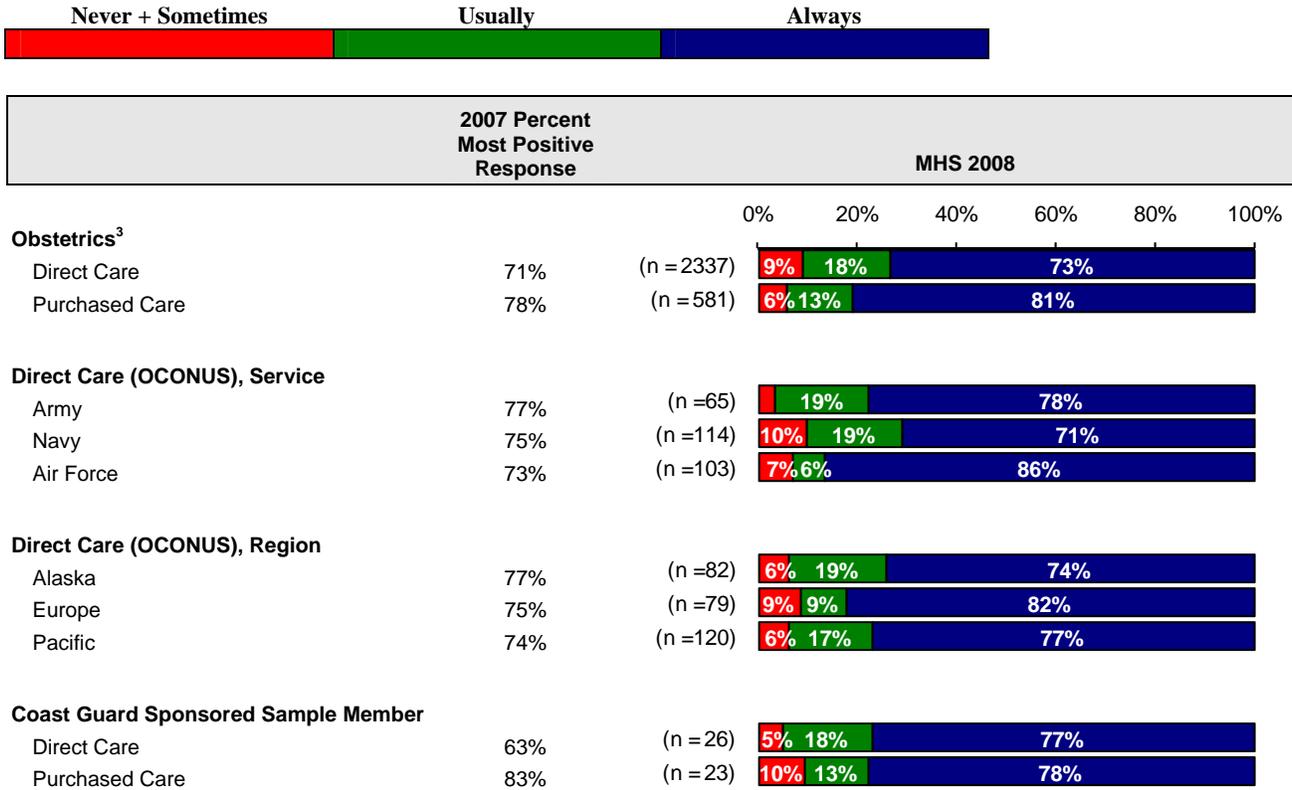
During this hospital stay, how often did you feel comfortable asking the nurses all the questions you wanted about your baby’s care?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that they always felt comfortable asking the nurses all the questions they wanted about their baby's care ($p < .05$).
2. Among Direct Care beneficiaries, those in Army facilities were significantly less likely than those in Air Force or Navy facilities to report that they always felt comfortable asking the nurses all the questions they wanted about their baby's care ($p < .05$).

After Your Baby Was Born (Maternity Only)

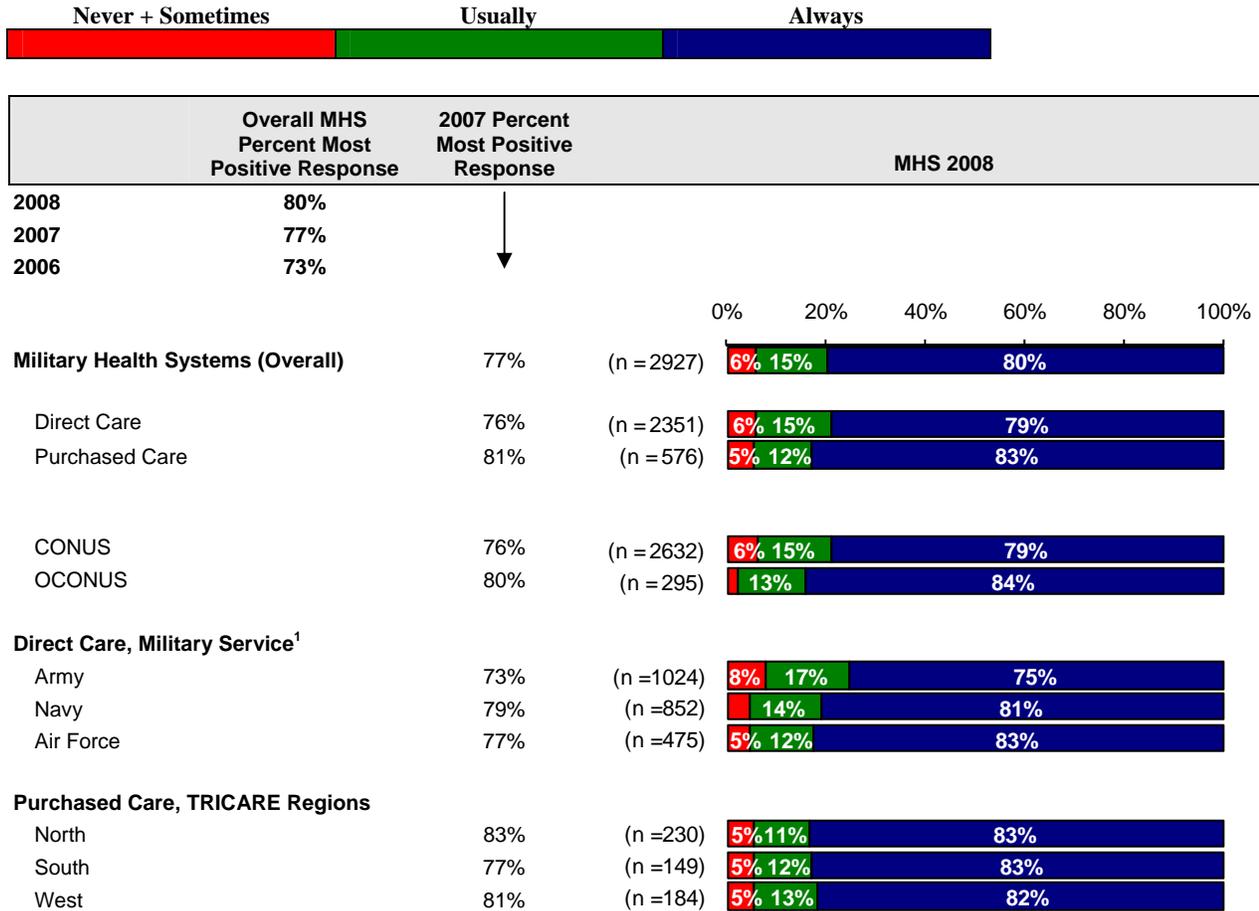
During this hospital stay, how often did you feel comfortable asking the nurses all the questions you wanted about your baby’s care? (continued)



3. Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that they always felt comfortable asking the nurses all the questions they wanted about their baby’s care (p<.05).

After Your Baby Was Born (Maternity Only)

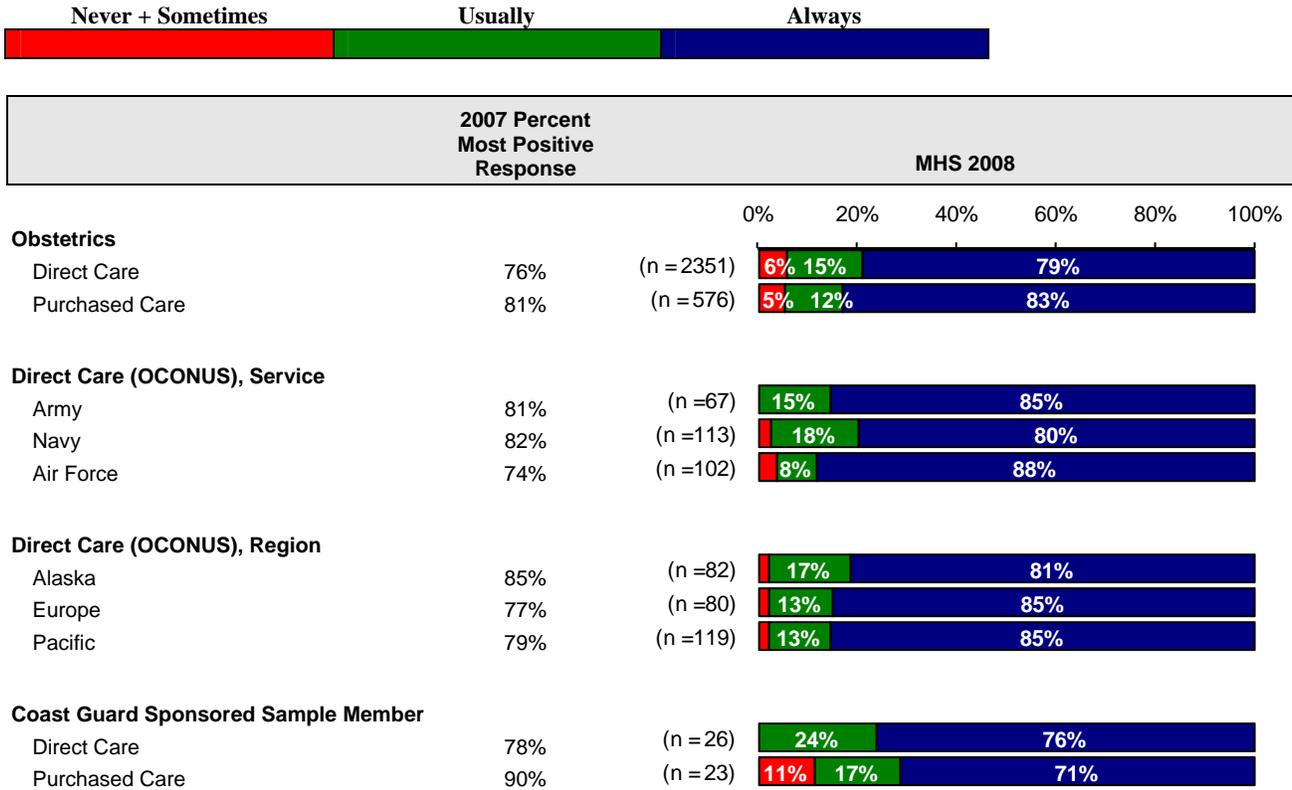
During this hospital stay, how often did you feel comfortable asking the doctors all the questions you wanted about your baby’s care?



1. Among Direct Care beneficiaries, those in Army facilities were significantly less likely than those in Air Force or Navy facilities to report that they always felt comfortable asking the doctors all the questions they wanted about their baby's care ($p < .05$).

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?

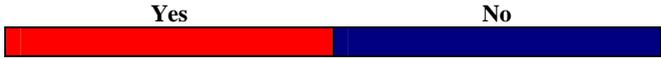


	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008
2008	92%		
2007	90%		
2006	91%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)	90%	(n = 2993)	92% 8%
Direct Care	90%	(n = 2394)	92% 8%
Purchased Care	92%	(n = 599)	94% 6%
CONUS	90%	(n = 2693)	92% 8%
OCONUS	95%	(n = 300)	96%
Direct Care, Military Service¹			
Army	88%	(n = 1048)	90% 10%
Navy	91%	(n = 864)	93% 7%
Air Force	94%	(n = 482)	94% 6%
Purchased Care, TRICARE Regions			
North	95%	(n = 238)	94% 6%
South	88%	(n = 157)	96%
West	92%	(n = 190)	93% 7%

1. Among Direct Care beneficiaries, those in Army facilities were significantly less likely than those in Air Force or Navy facilities to report that they felt that the doctors checked on their baby as much as needed ($p < .05$).

After Your Baby Was Born (Maternity Only)

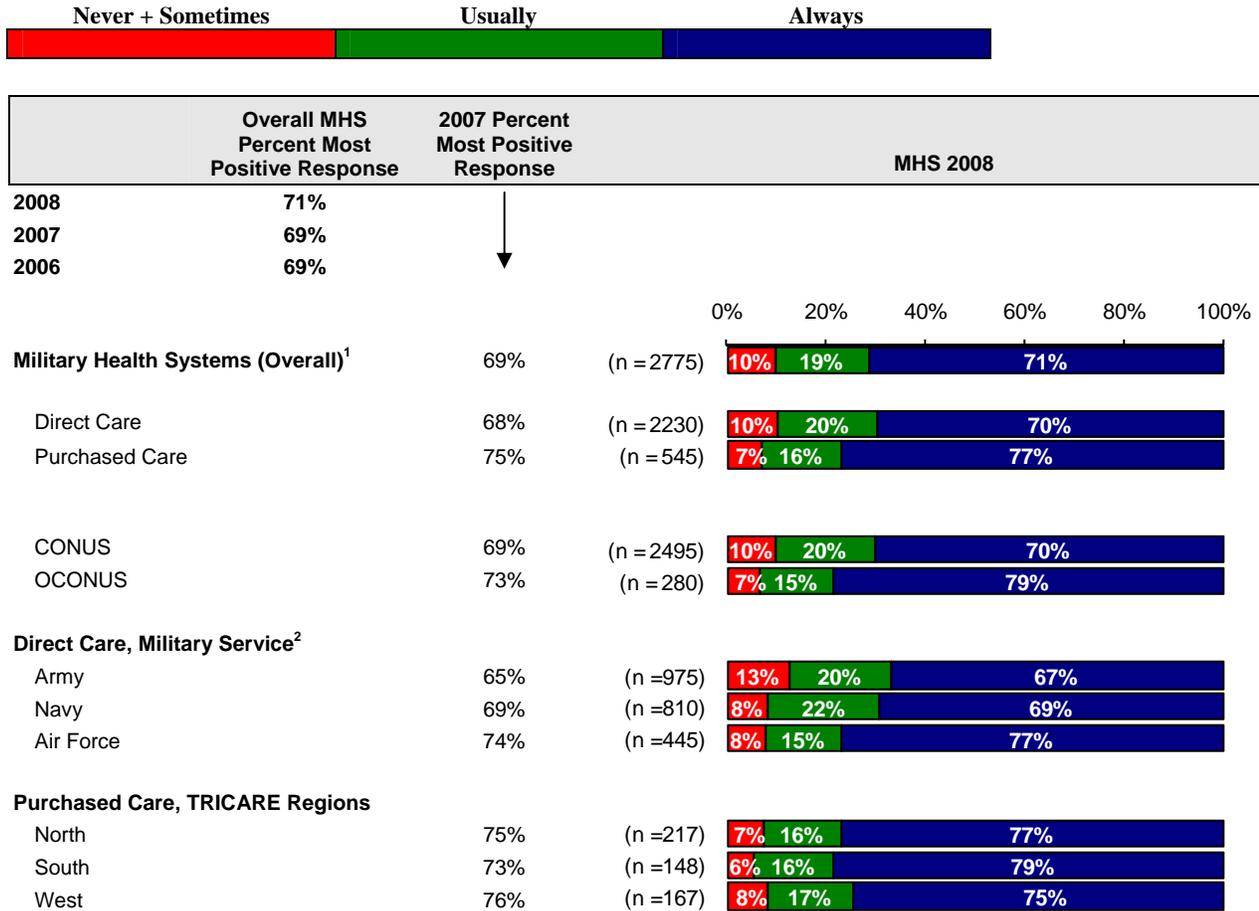
During this hospital stay, did you feel that the doctors checked on your baby as much as needed? (continued)



	2007 Percent Most Positive Response		MHS 2008
			0% 20% 40% 60% 80% 100%
Obstetrics			
Direct Care	90%	(n = 2394)	92% 8%
Purchased Care	92%	(n = 599)	94% 6%
Direct Care (OCONUS), Service			
Army	92%	(n =66)	96%
Navy	94%	(n =115)	95% 5%
Air Force	99%	(n =105)	97%
Direct Care (OCONUS), Region			
Alaska	96%	(n =83)	98%
Europe	93%	(n =82)	96%
Pacific	95%	(n =120)	95% 5%
Coast Guard Sponsored Sample Member			
Direct Care	87%	(n =27)	92% 8%
Purchased Care	100%	(n =23)	79% 21%

After Your Baby Was Born (Maternity Only)

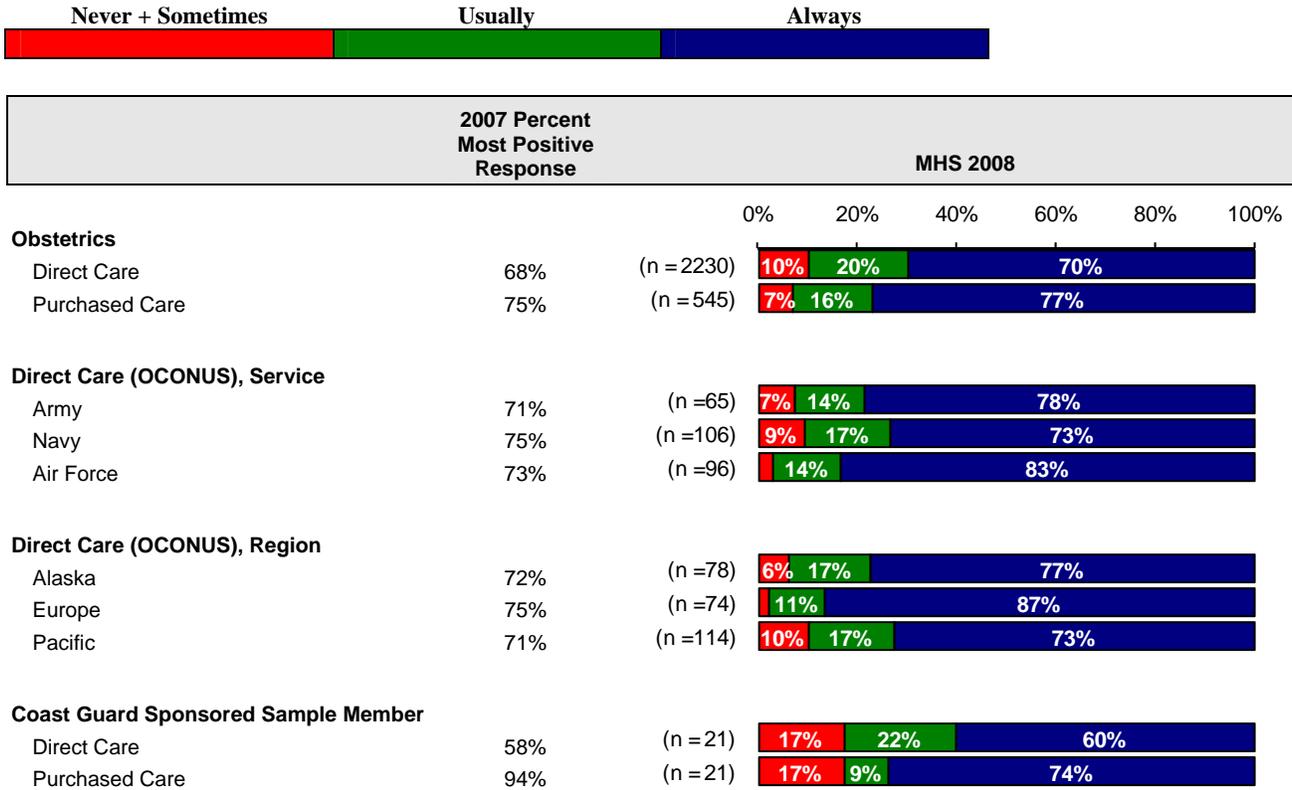
During this hospital stay, how often did doctors show care and sensitivity to worries and concerns you had about your baby?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that doctors always showed care and sensitivity to worries and concerns they had about their baby ($p < .05$).
2. Among Direct Care beneficiaries, those in Air Force facilities were significantly more likely than those in Army or Navy facilities to report that doctors always showed care and sensitivity to worries and concerns they had about their baby ($p < .05$).

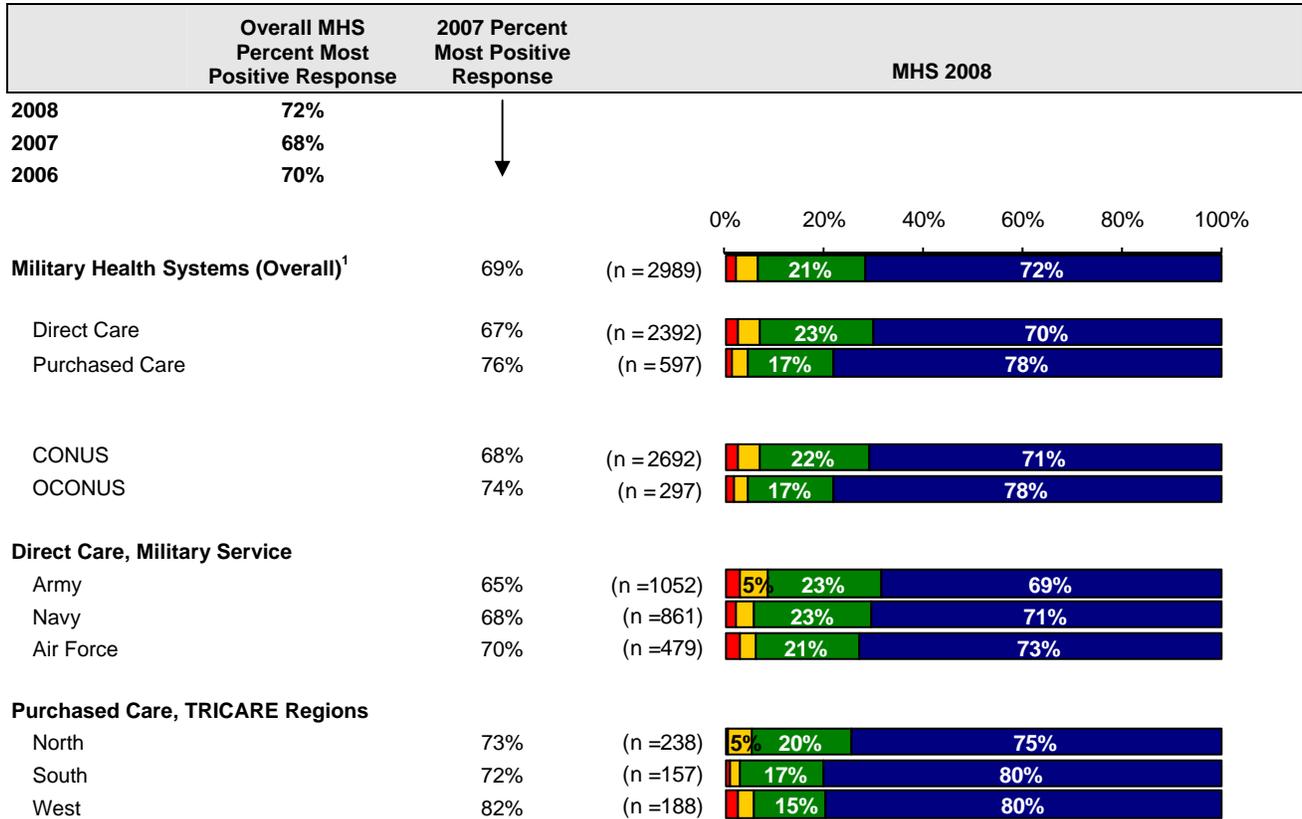
After Your Baby Was Born (Maternity Only)

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)

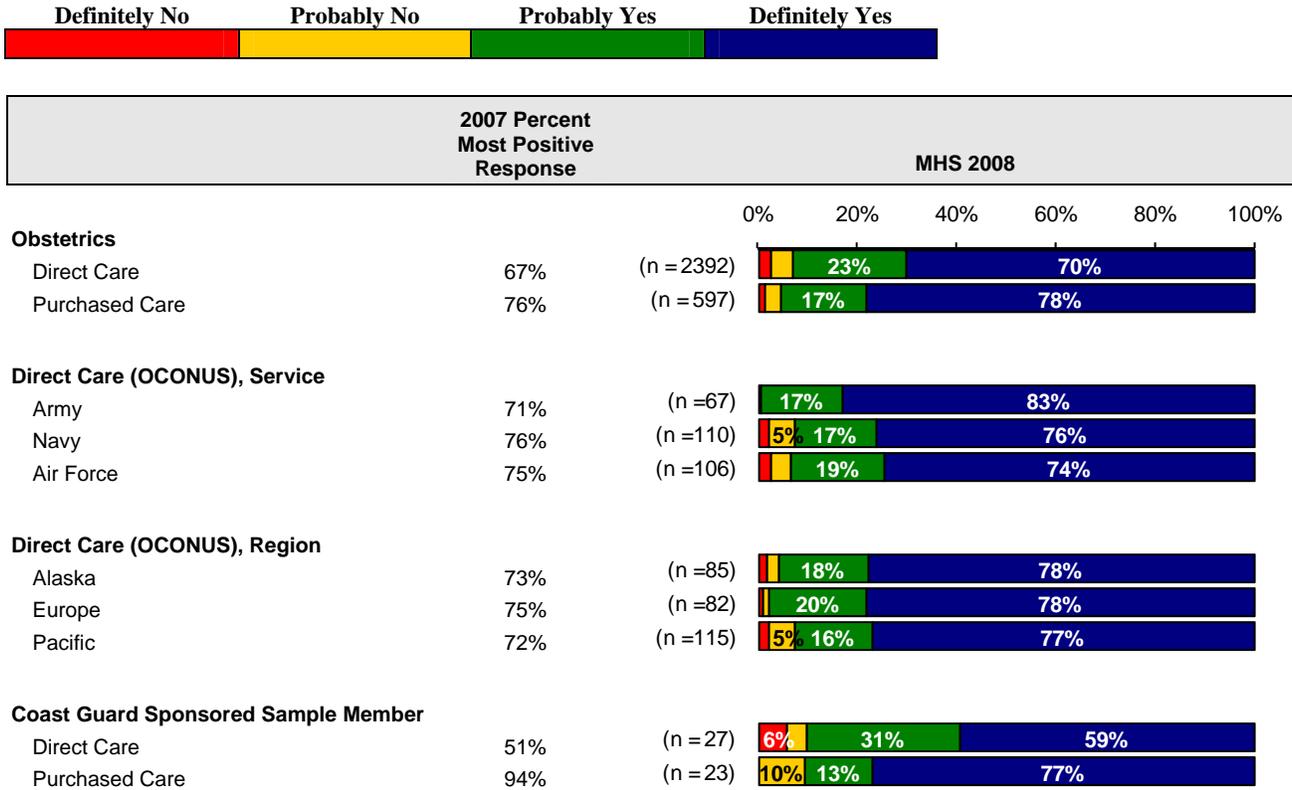
During this hospital stay, did you feel that there was at least one doctor who had a full understanding of your baby’s condition and treatment?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that they definitely felt that there was at least one doctor who had a full understanding of their baby’s condition and treatment ($p < .05$).

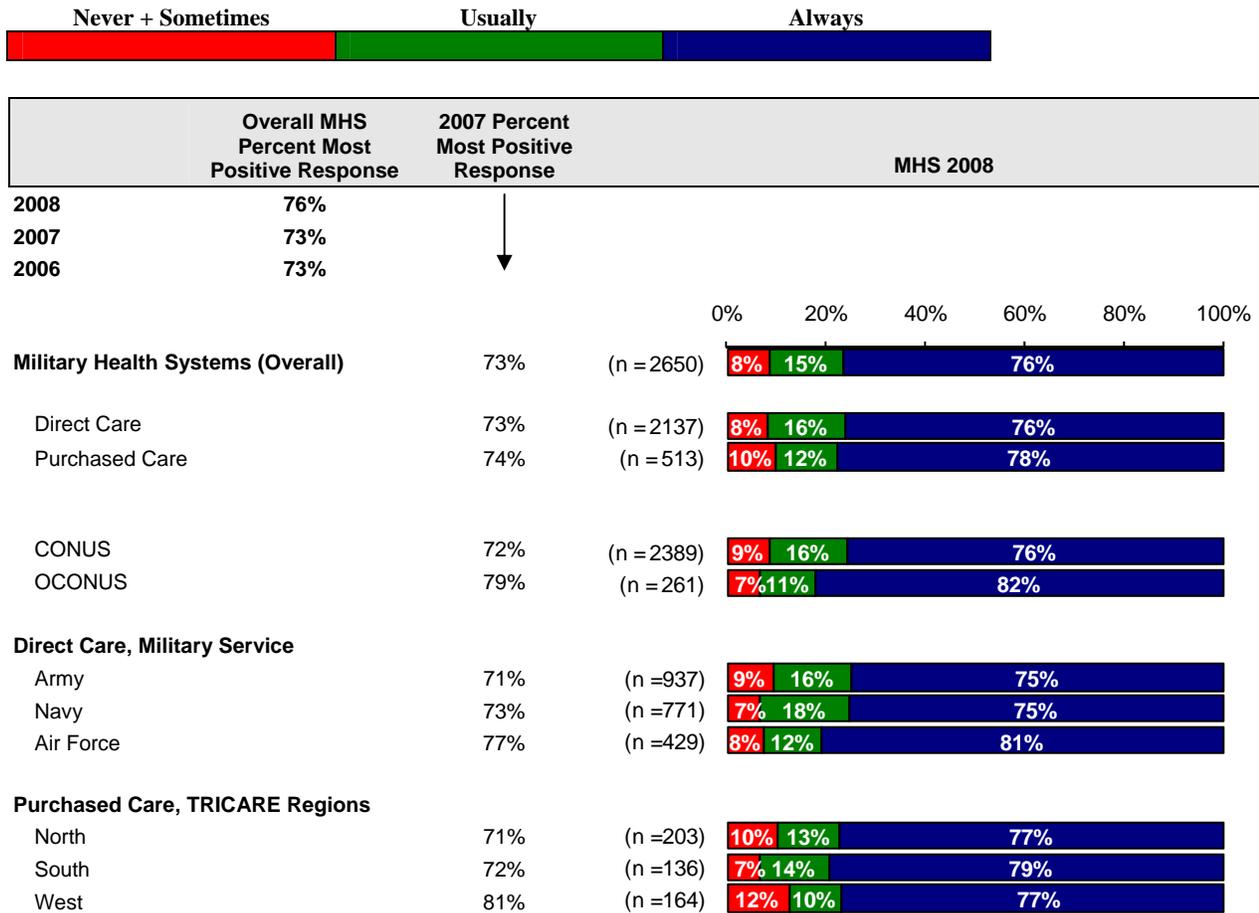
After Your Baby Was Born (Maternity Only)

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)



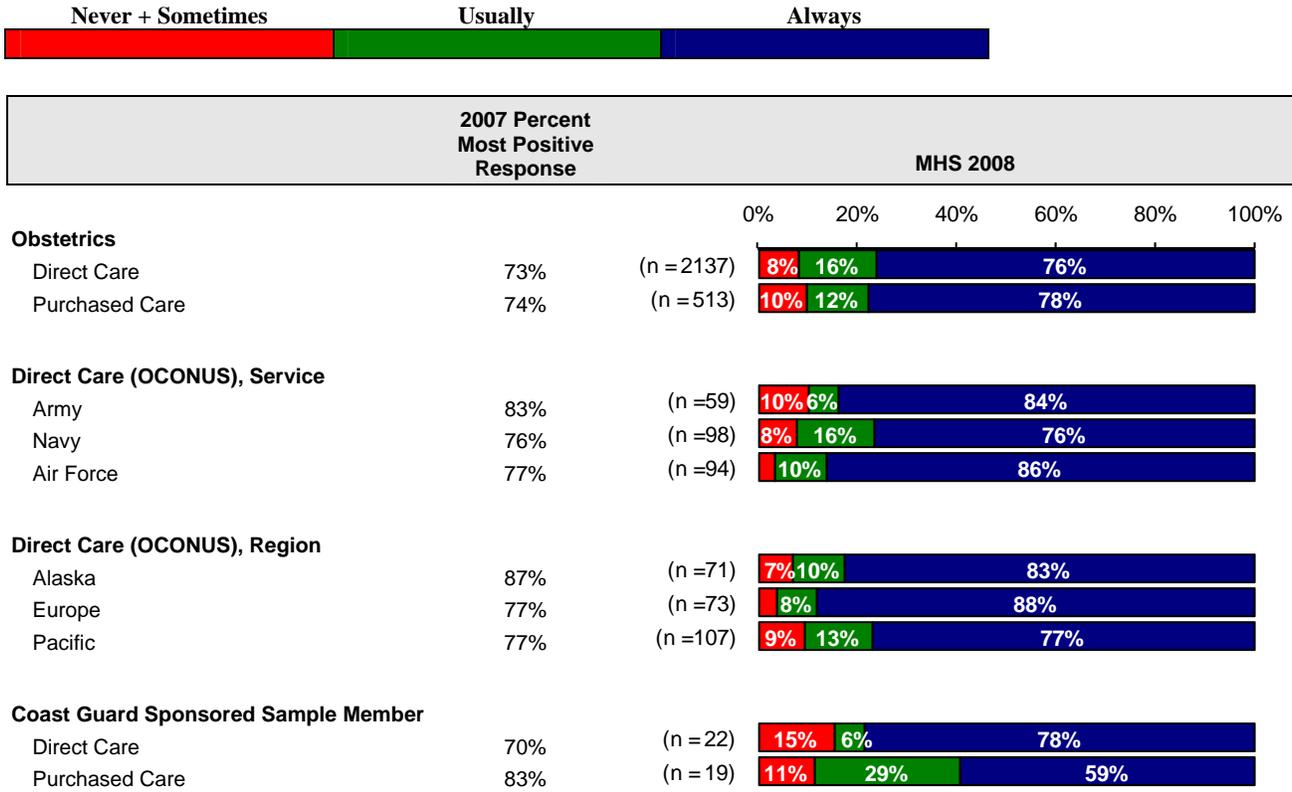
After Your Baby Was Born (Maternity Only)

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



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)

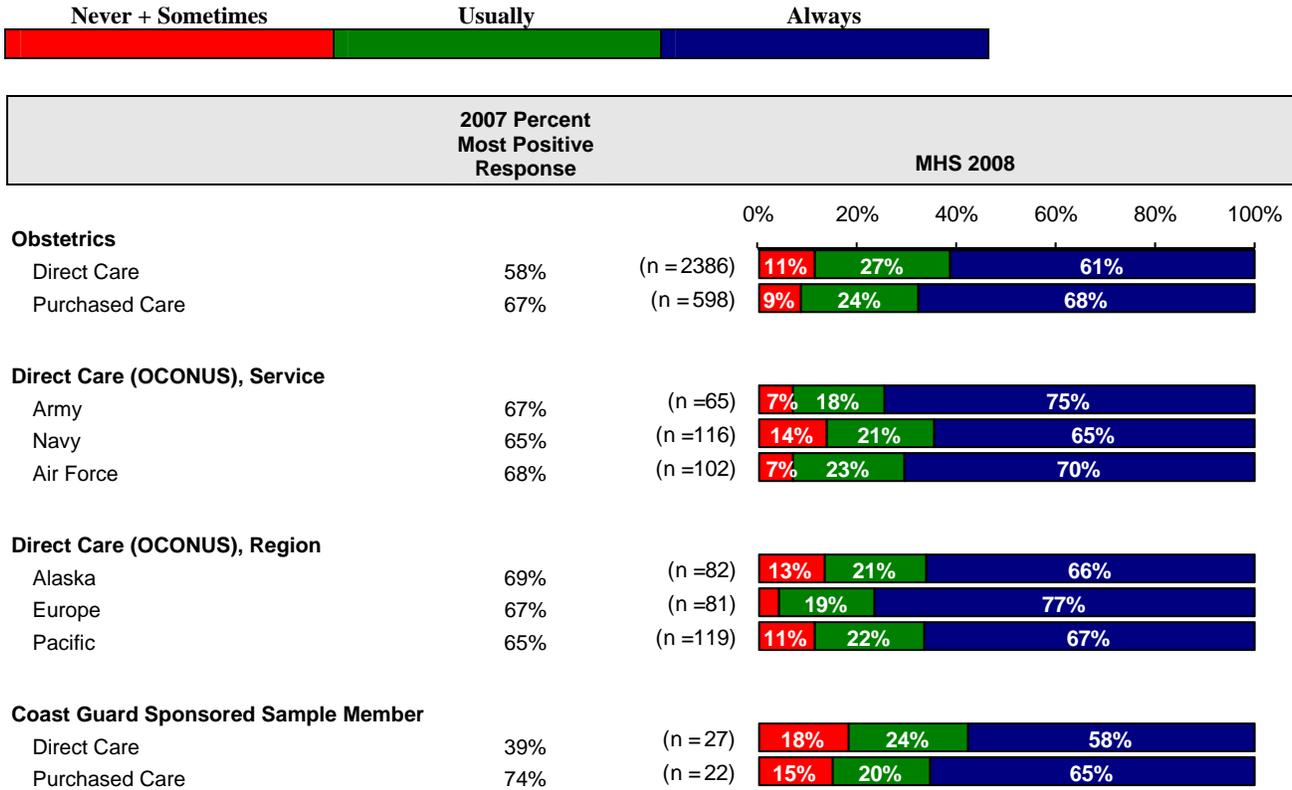
During this hospital stay, how often did the doctors and nurses seem informed and up-to-date about all the care your baby received?



	Overall MHS Percent Most Positive Response	2007 Percent Most Positive Response	MHS 2008
2008	63%		
2007	60%		
2006	60%		
		↓	
			0% 20% 40% 60% 80% 100%
Military Health Systems (Overall)	60%	(n = 2984)	11% 27% 63%
Direct Care	58%	(n = 2386)	11% 27% 61%
Purchased Care	67%	(n = 598)	9% 24% 68%
CONUS	59%	(n = 2687)	11% 27% 62%
OCONUS	67%	(n = 297)	9% 21% 70%
Direct Care, Military Service			
Army	56%	(n = 1048)	13% 28% 59%
Navy	60%	(n = 864)	11% 27% 62%
Air Force	62%	(n = 474)	9% 26% 65%
Purchased Care, TRICARE Regions			
North	66%	(n = 240)	10% 22% 68%
South	63%	(n = 156)	5% 27% 68%
West	74%	(n = 188)	11% 23% 66%

After Your Baby Was Born (Maternity Only)

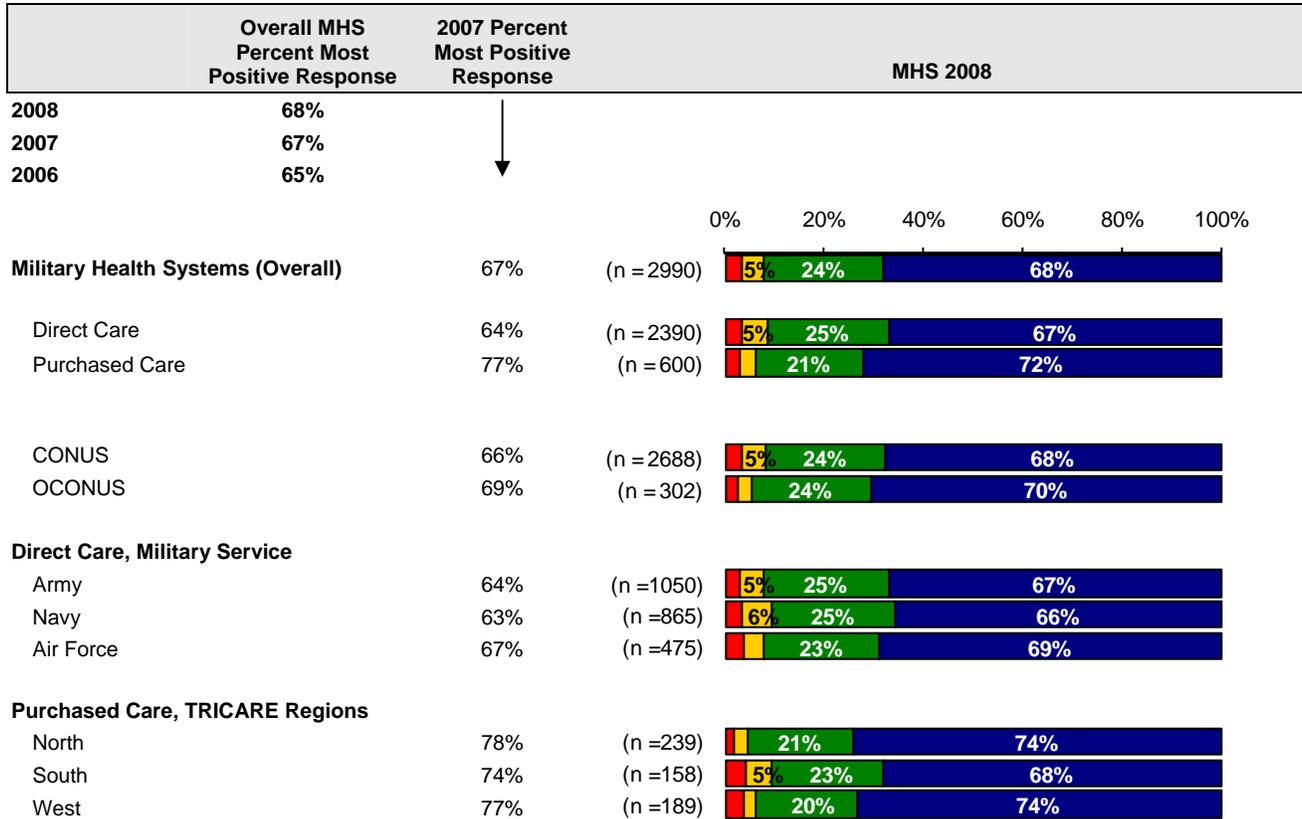
During this hospital stay, how often did the doctors and nurses seem informed and up-to-date about all the care your baby received? (continued)



TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

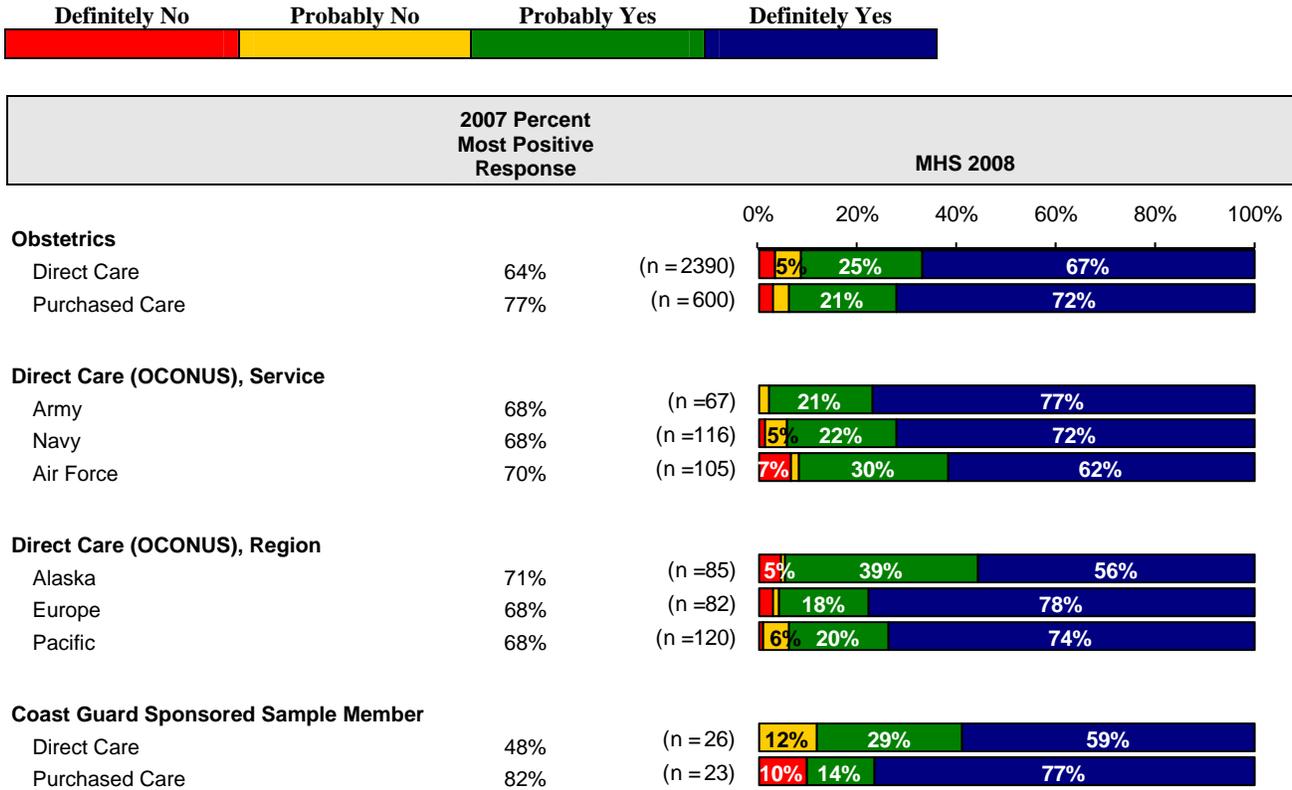
After Your Baby Was Born (Maternity Only)

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



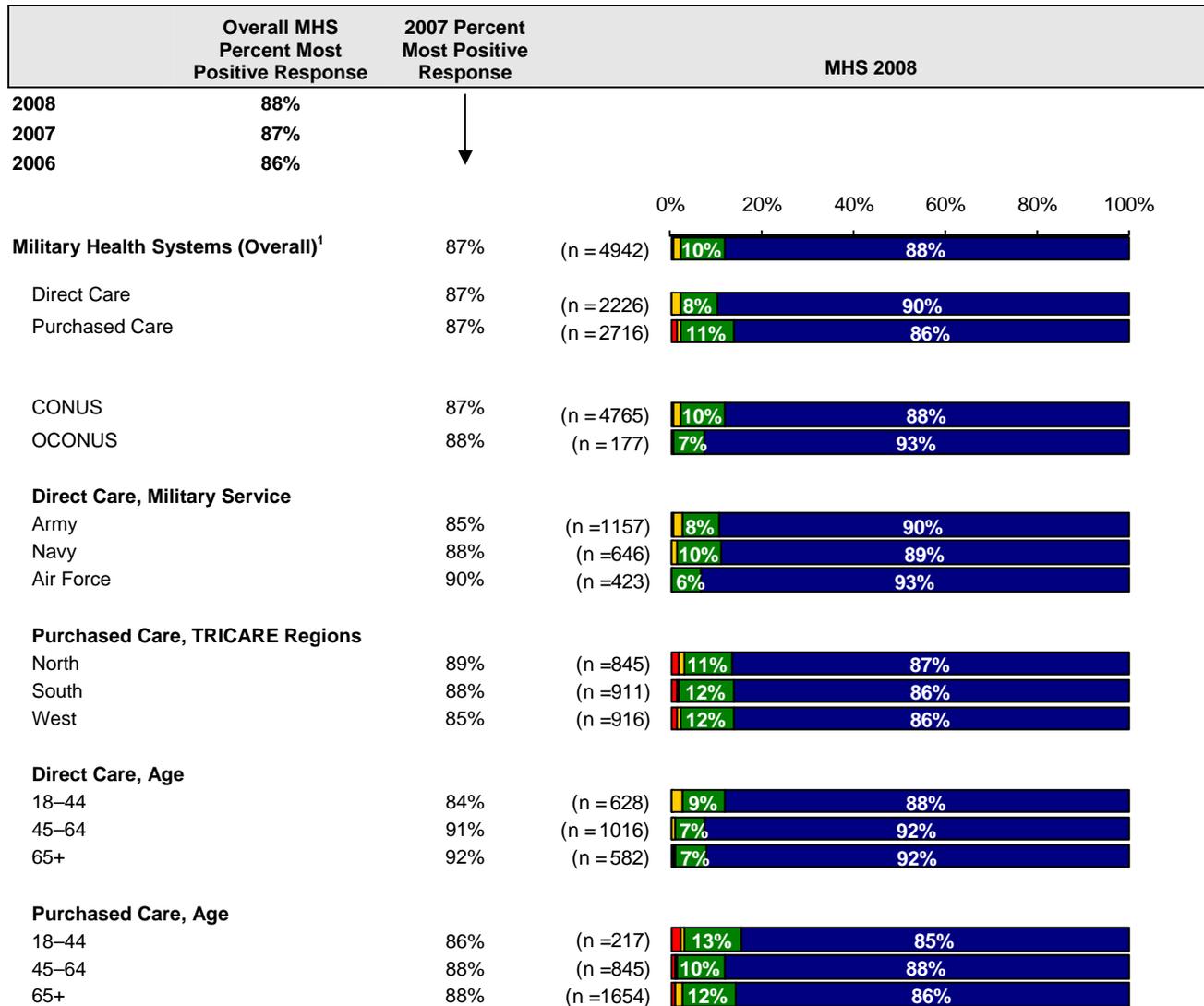
After Your Baby Was Born (Maternity Only)

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



About Your Care and Surgery (Surgical Questionnaire Only)

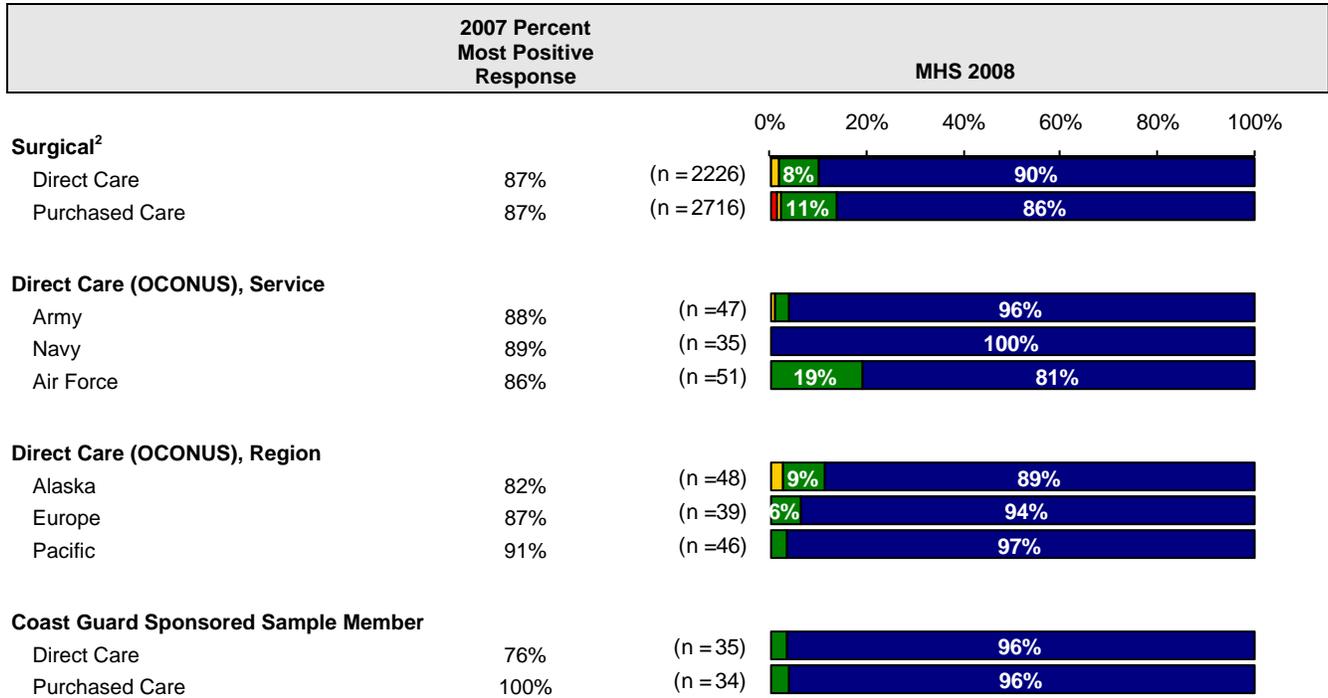
Did your surgeon or other doctors explain the risks and benefits of the surgery in a way you could understand?



1. Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that their surgeon or other doctors definitely explained the risks and benefits of the surgery in a way they could understand ($p < .05$).

About Your Care and Surgery (Surgical Questionnaire Only)

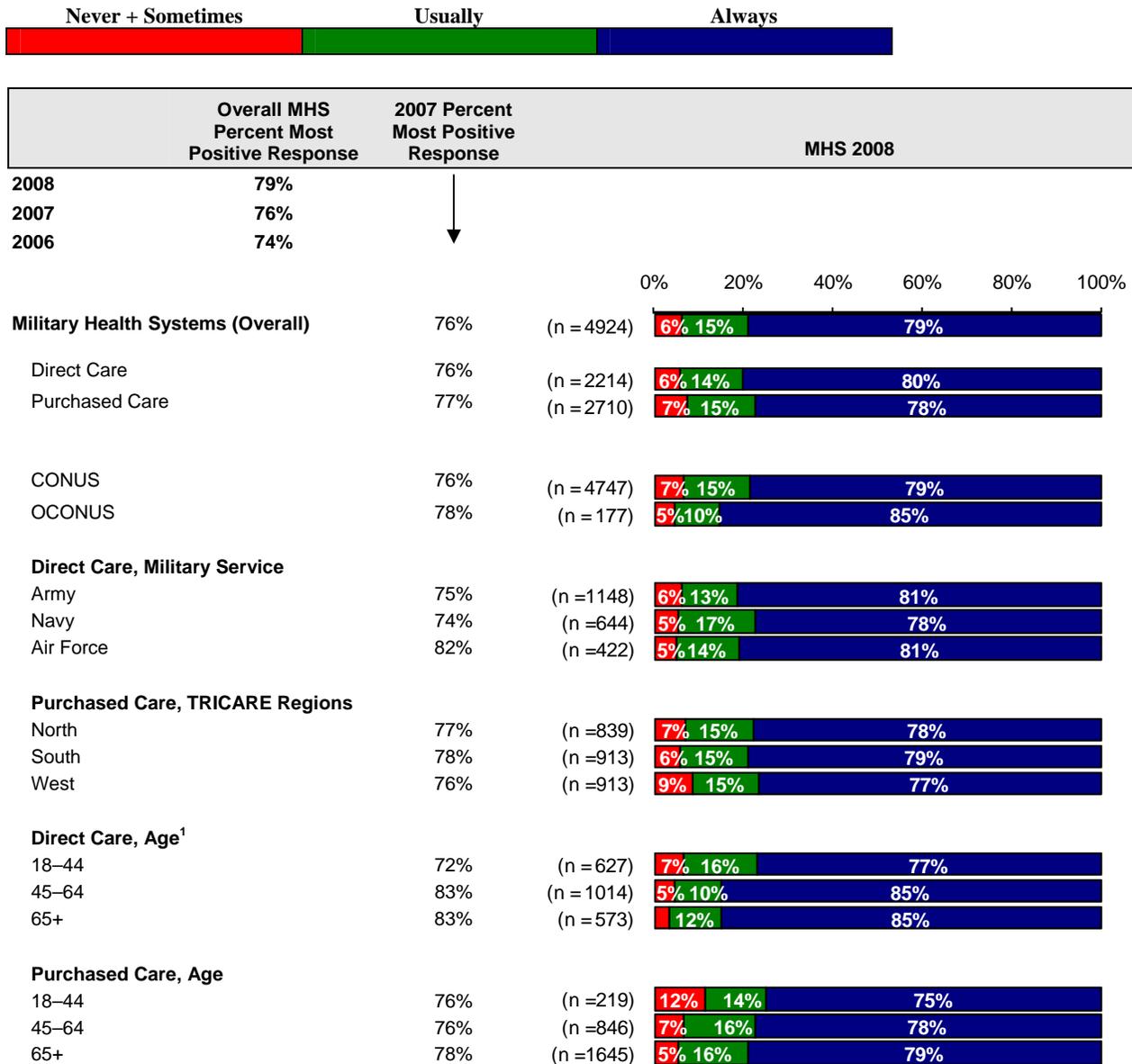
Did your surgeon or other doctors explain the risks and benefits of the surgery in a way you could understand? (continued)



2. Among beneficiaries receiving Surgical services, those in Direct Care were significantly more likely than those in Purchased Care to report that their surgeon or other doctors definitely explained the risks and benefits of the surgery in a way they could understand ($p < .05$).

About Your Care and Surgery (Surgical Questionnaire Only)

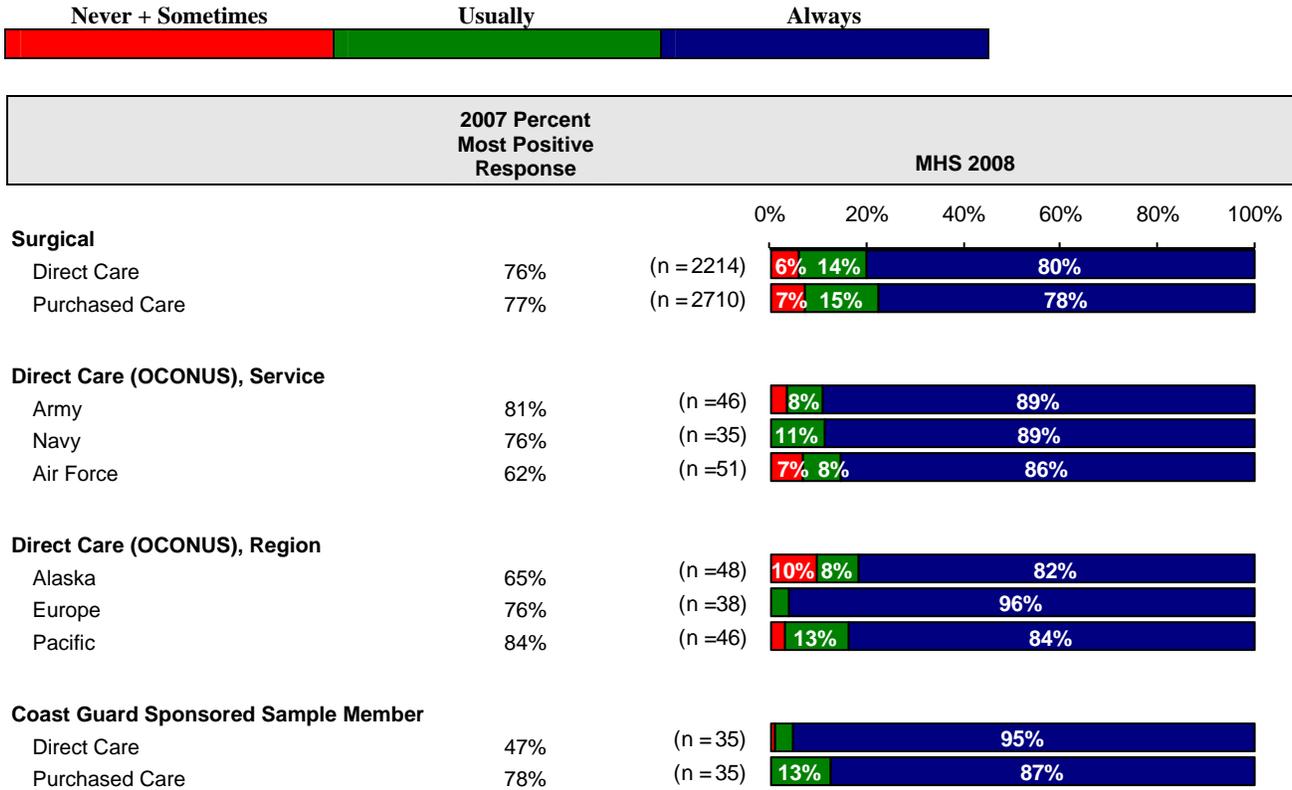
During this hospital stay, how often did doctors or surgeons show care and sensitivity to worries and concerns you had about your surgery?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that doctors or surgeons always showed care and sensitivity to worries and concerns they had about their surgery ($p < .05$).

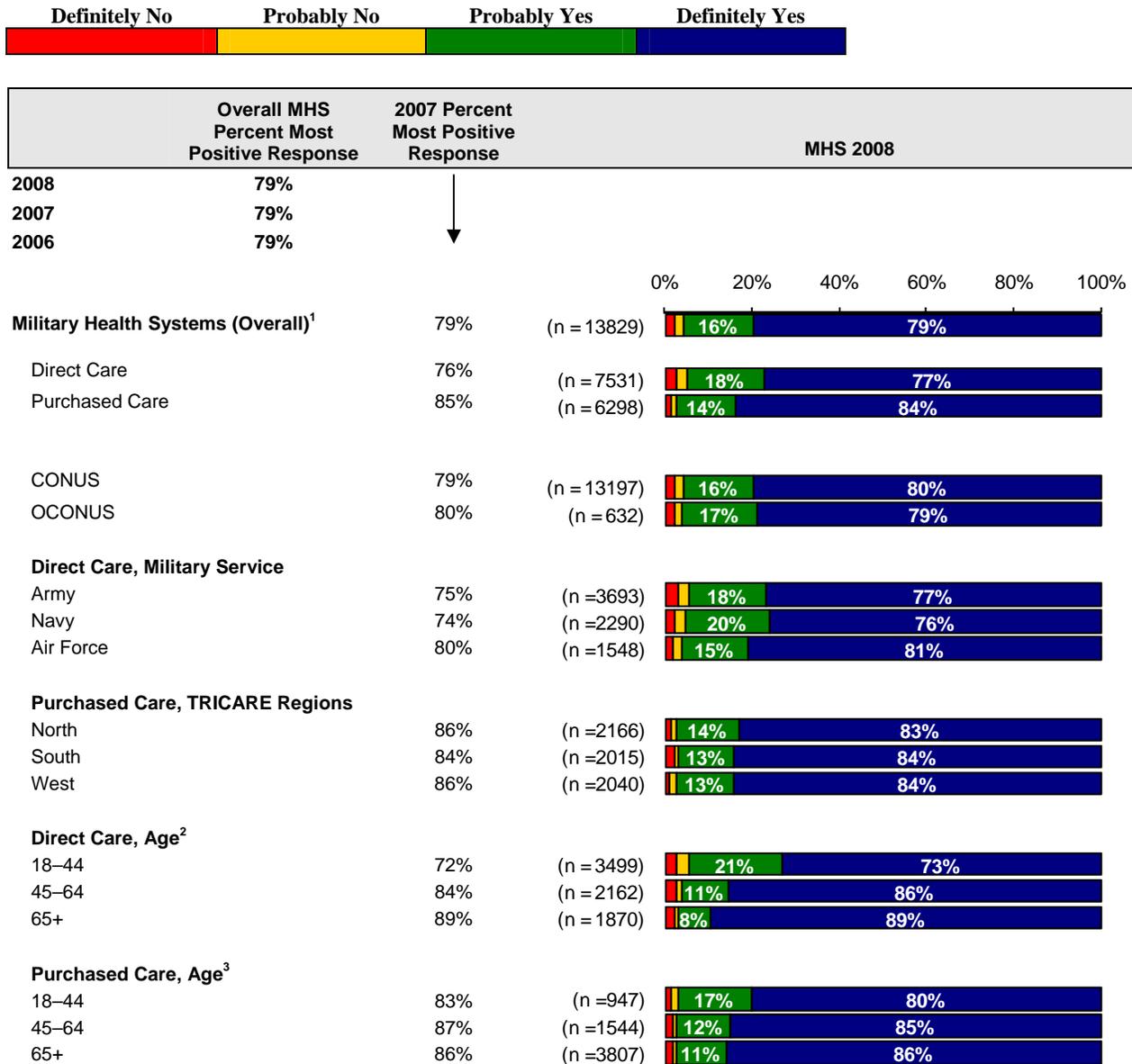
About Your Care and Surgery (Surgical Questionnaire Only)

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

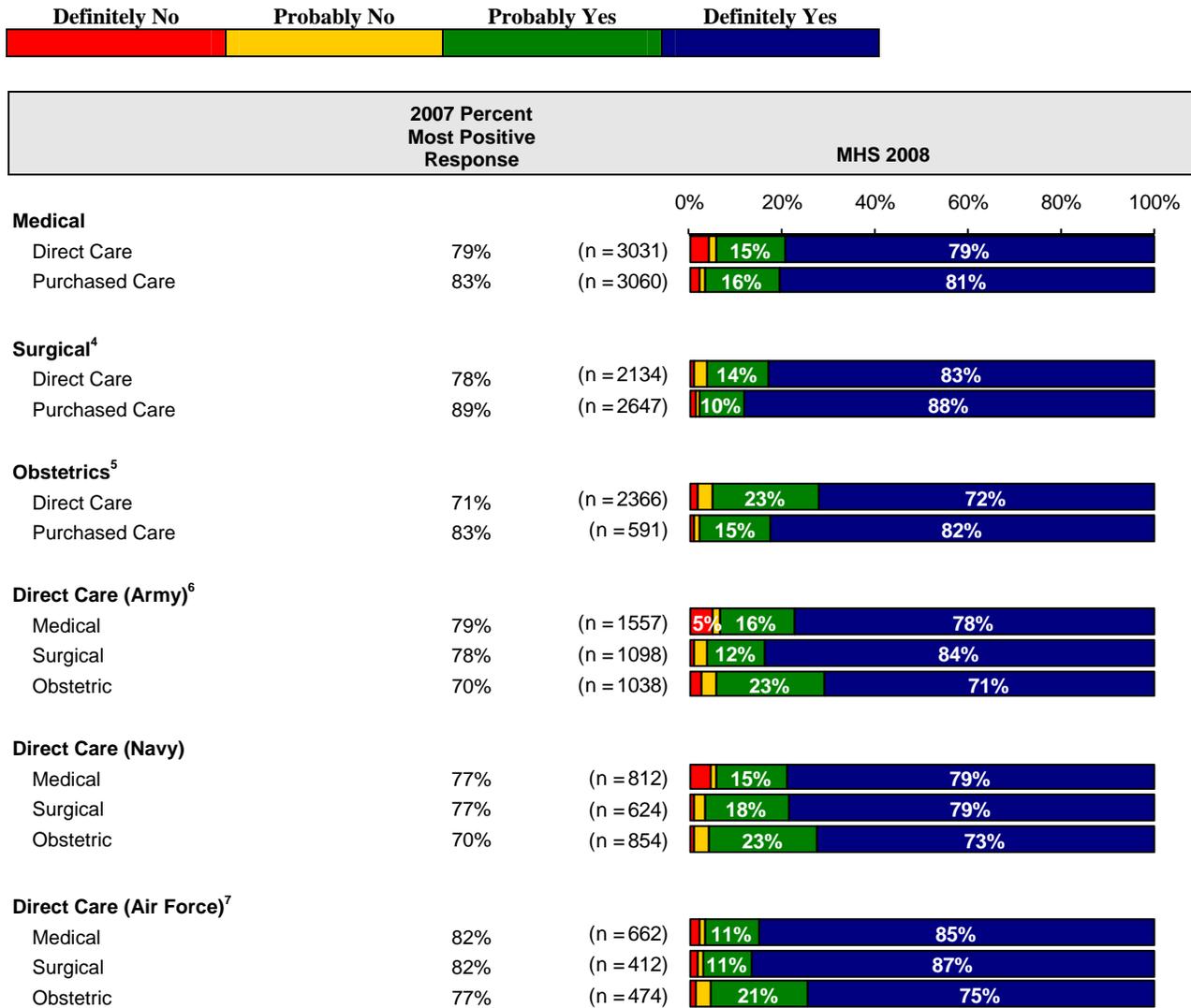
Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect?



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that staff that helped them fill out paperwork definitely 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 that helped them fill out paperwork definitely treated them with courtesy and respect ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to report that staff that helped them fill out paperwork definitely treated them 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 staff that helped them fill out paperwork definitely treated them with courtesy and respect ($p < .05$).

Experiences in this Hospital (continued)

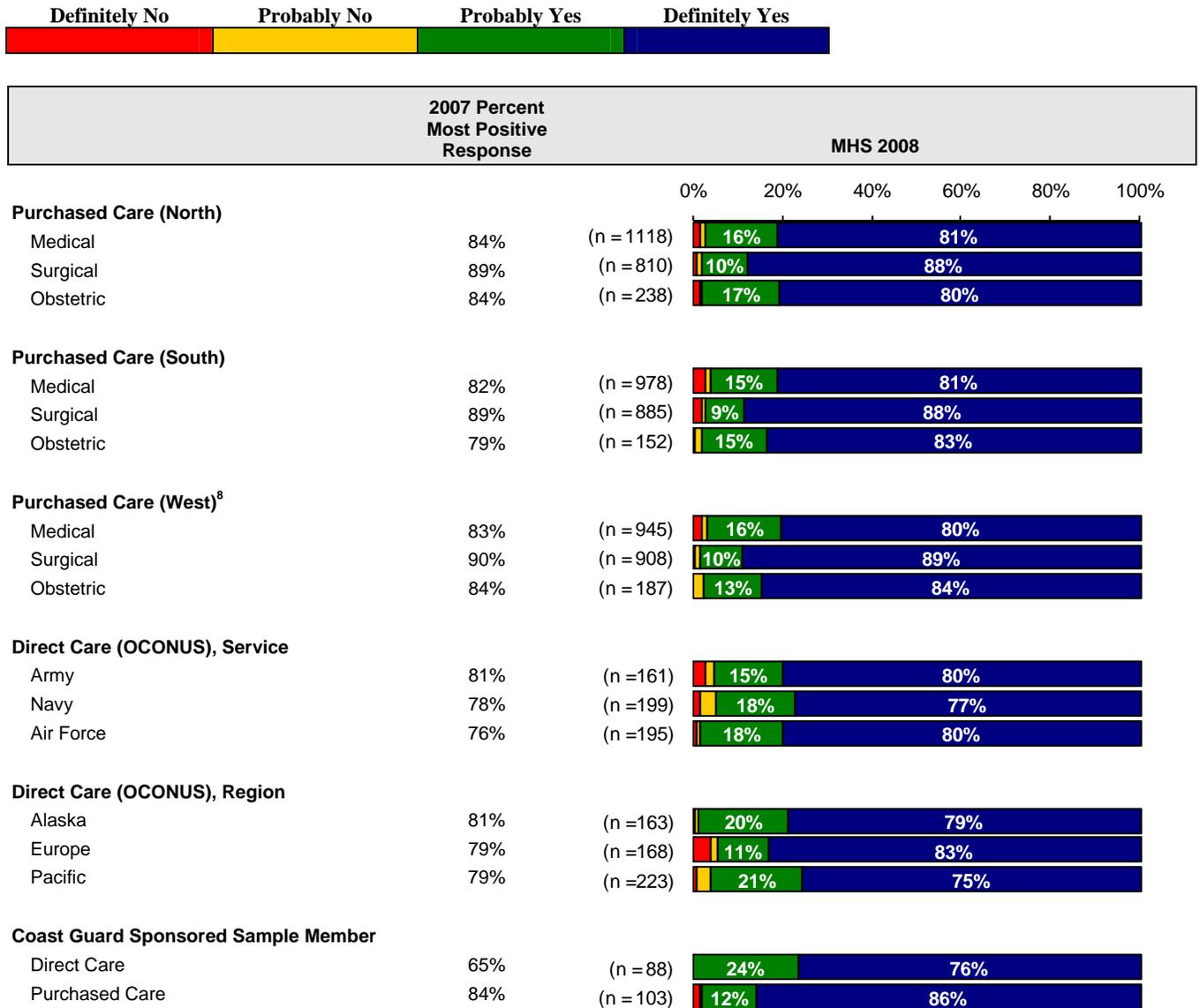
Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect? (continued)



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

Experiences in this Hospital (continued)

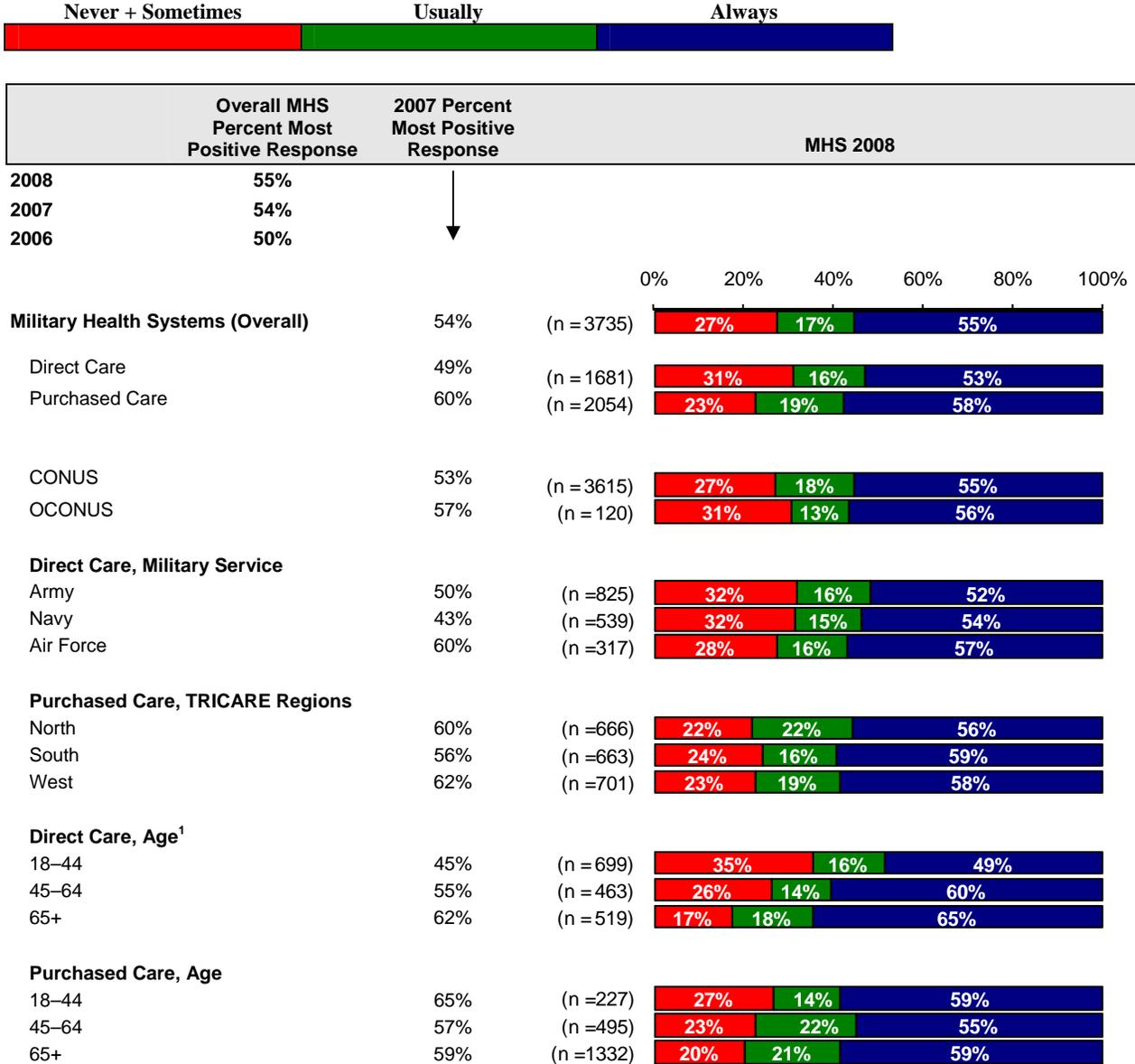
Did the staff who helped you fill out the paperwork for this hospital stay treat you with courtesy and respect? (continued)



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

Experiences in this Hospital

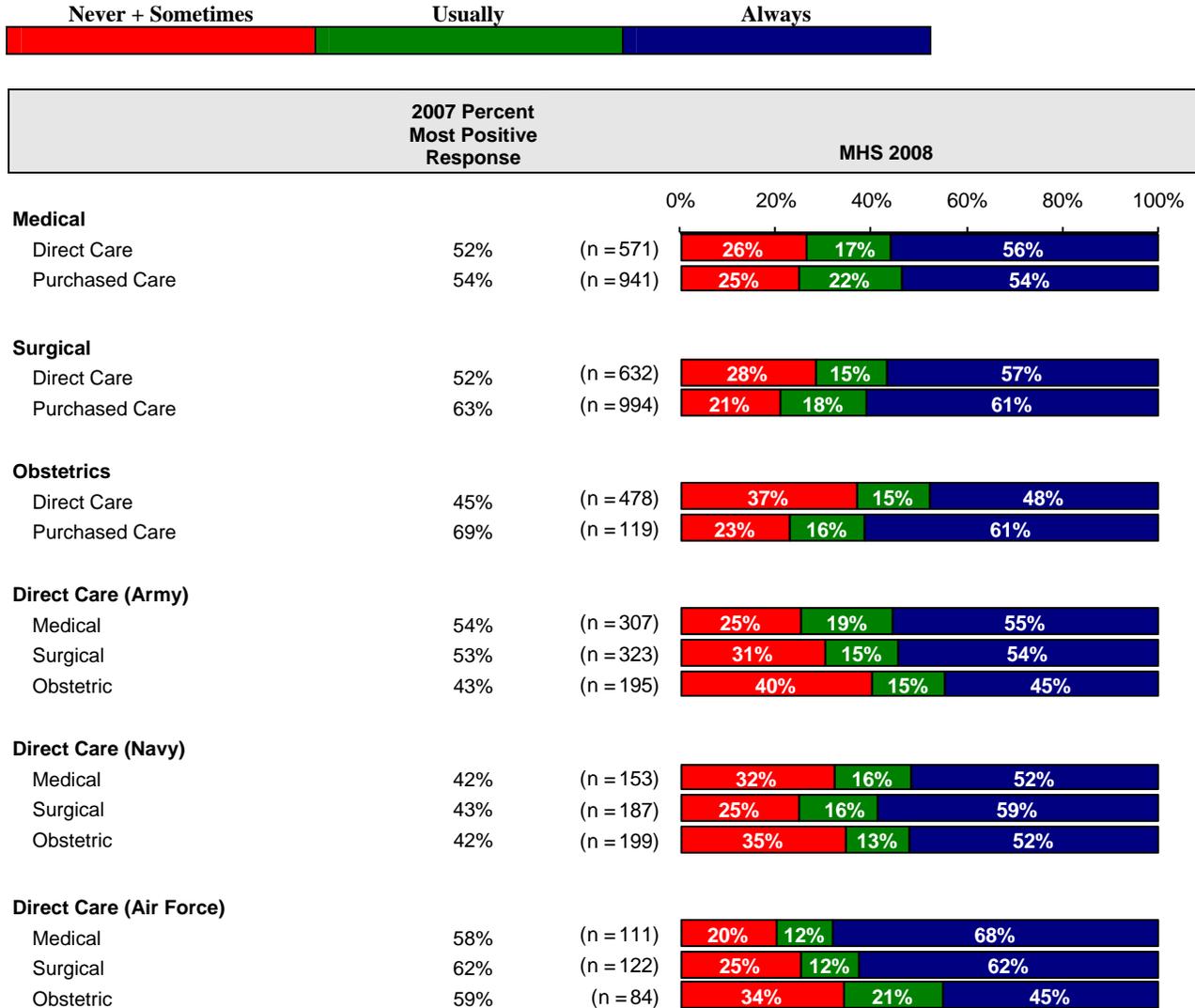
How often did you get the help you needed with bathing and keeping clean?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that staff always provided help with bathing and keeping clean, when needed ($p < .05$).

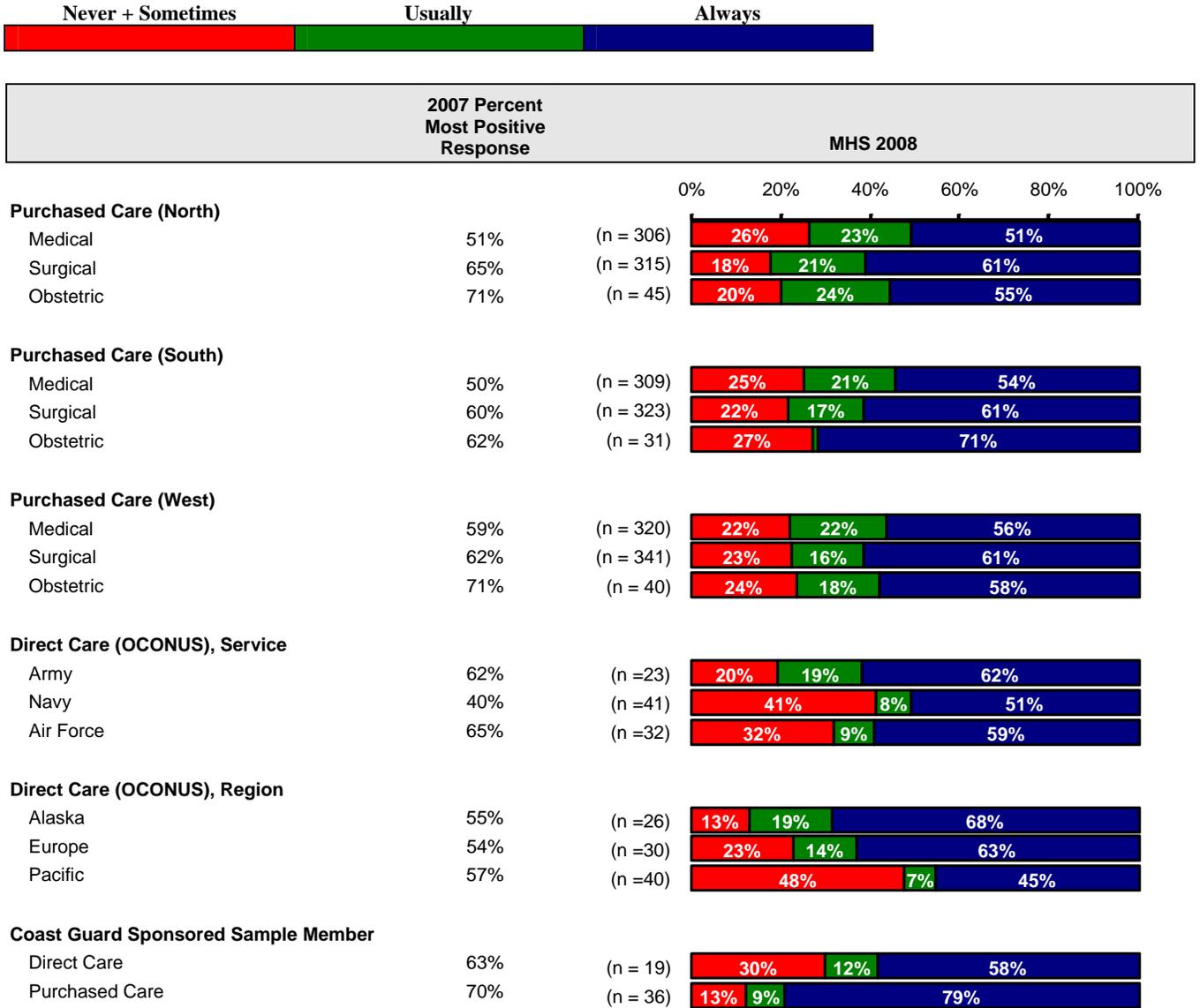
Experiences in this Hospital

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



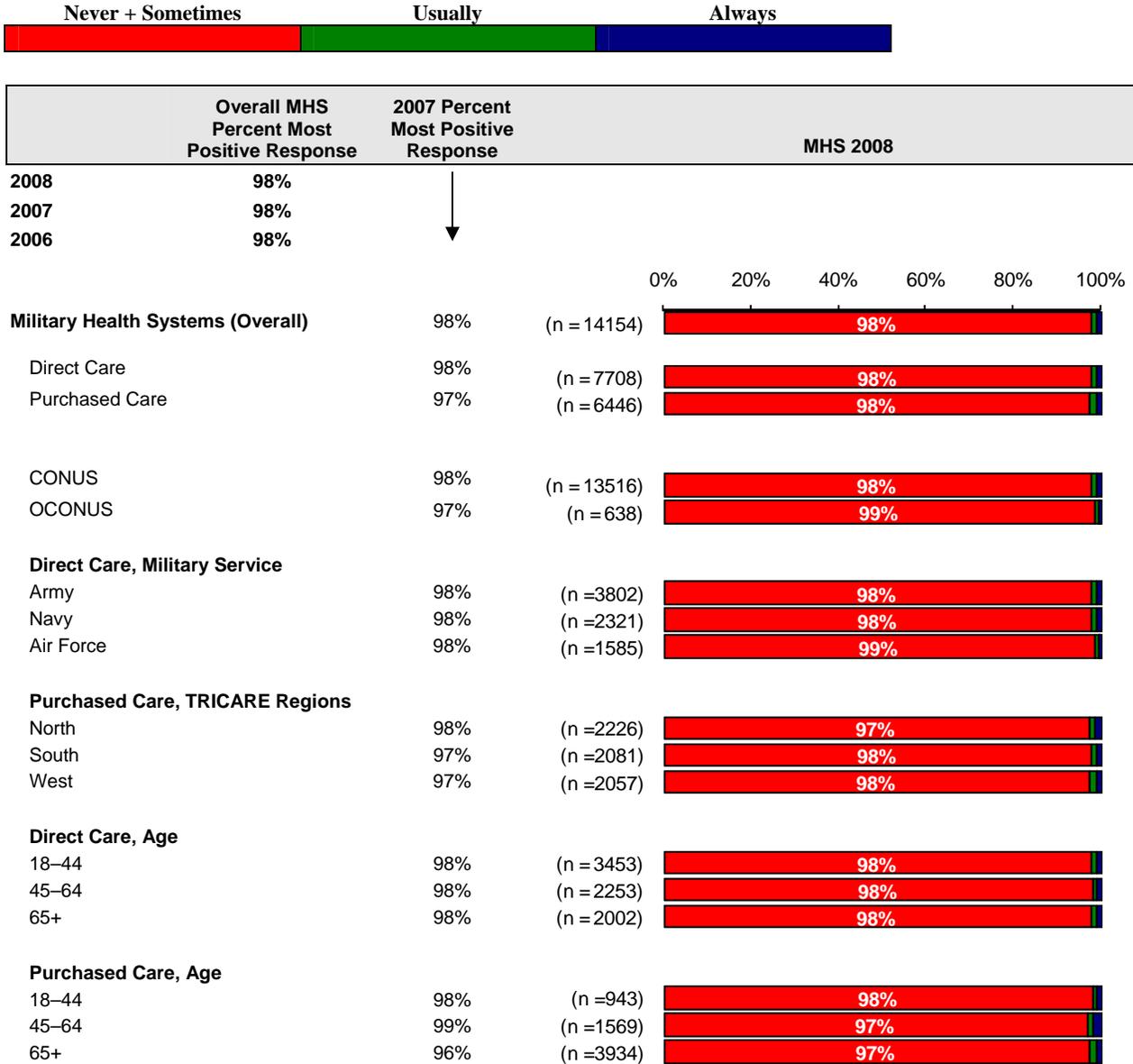
Experiences in this Hospital

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



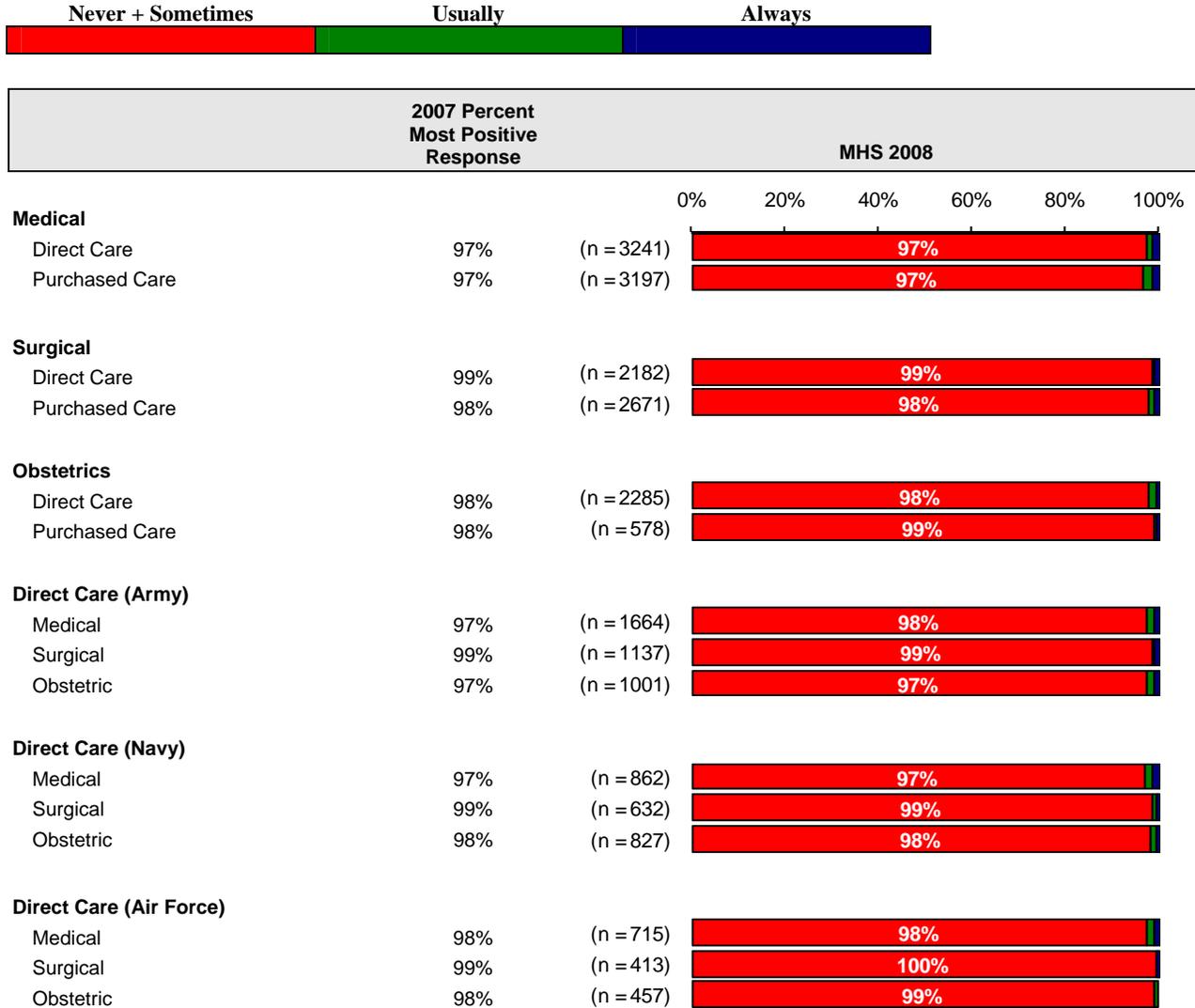
Experiences in this Hospital

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?



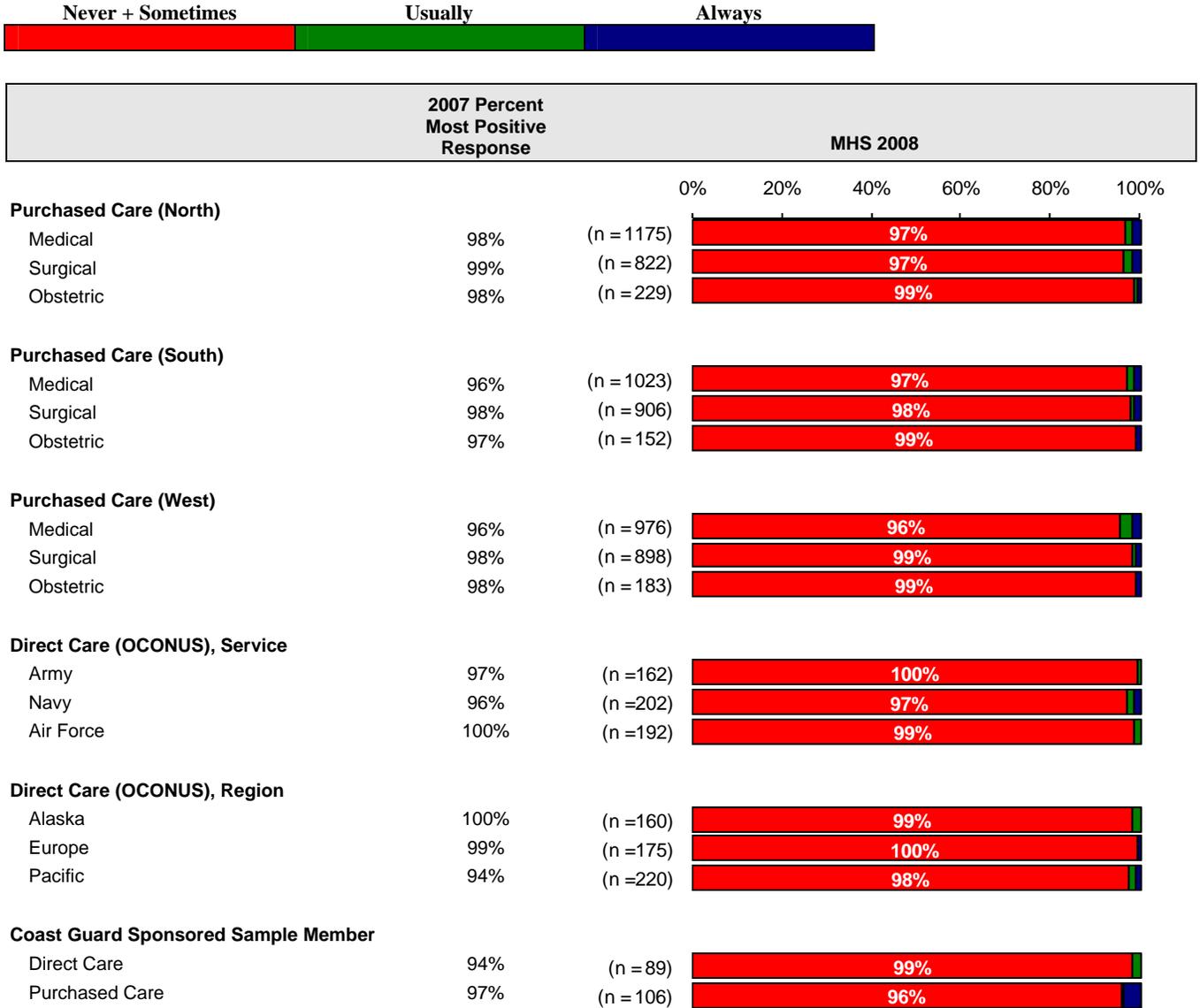
Experiences in this Hospital

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)



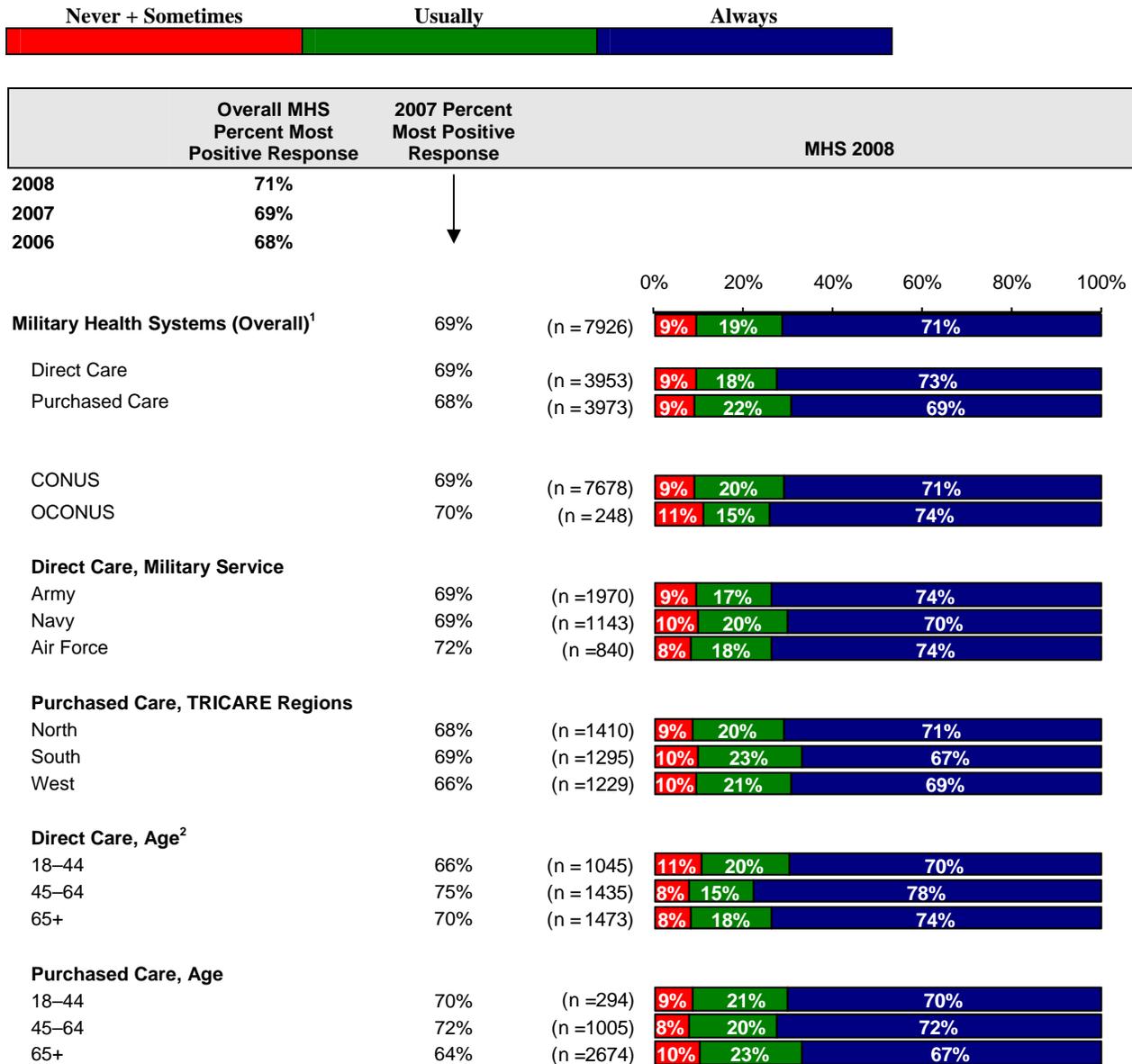
Experiences in this Hospital

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

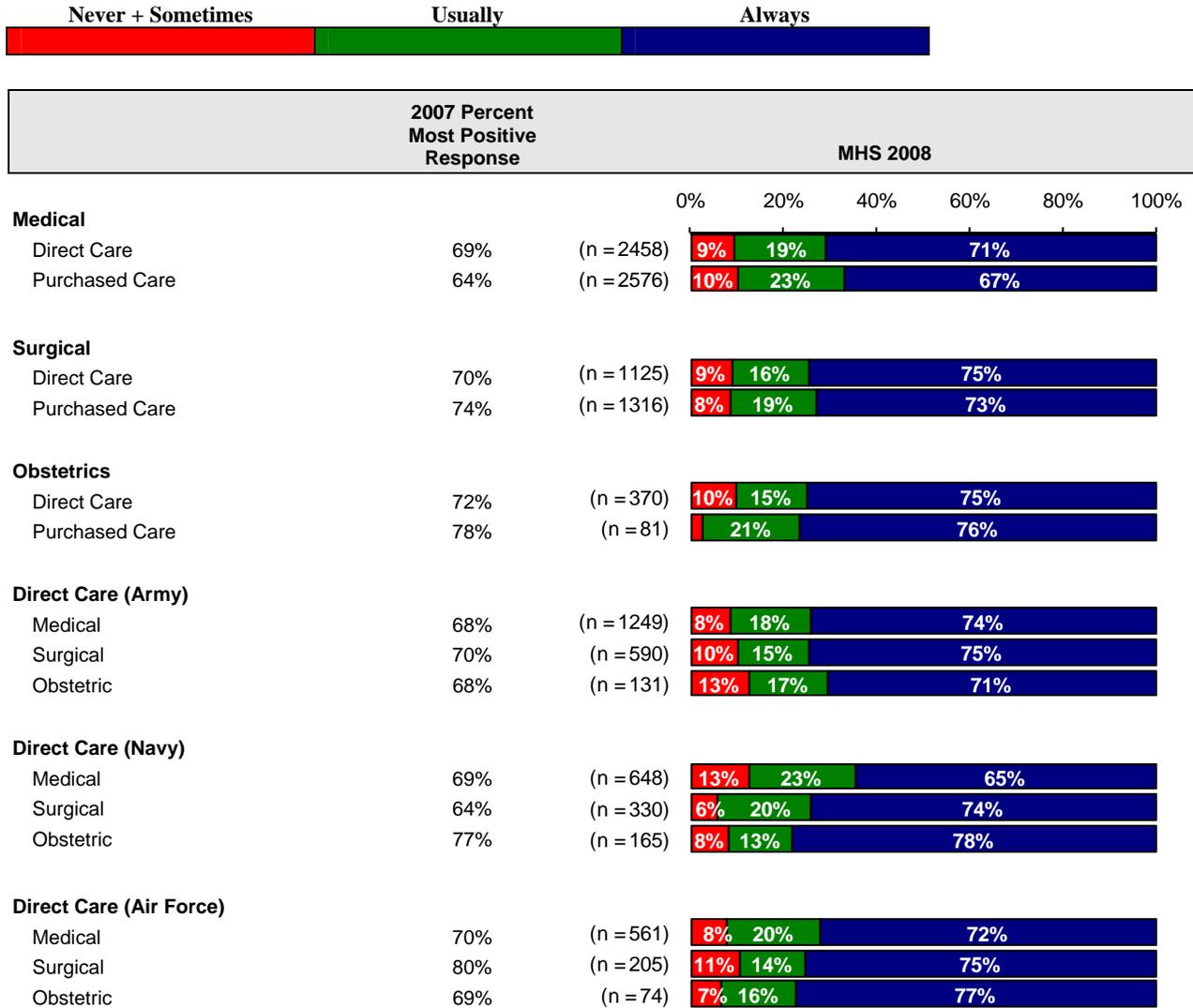
How often did the radiology staff explain your treatment or tests in a way that was easy to understand?



- Overall, those in Direct Care were significantly more likely than those in Purchased Care to report that radiology staff always explained treatment or tests in a way that was easy to understand ($p < .05$).
- Among Direct Care beneficiaries, those aged 45–65 were significantly more likely than those in other age groups to report that radiology staff always explained treatment or tests in a way that was easy to understand ($p < .05$).

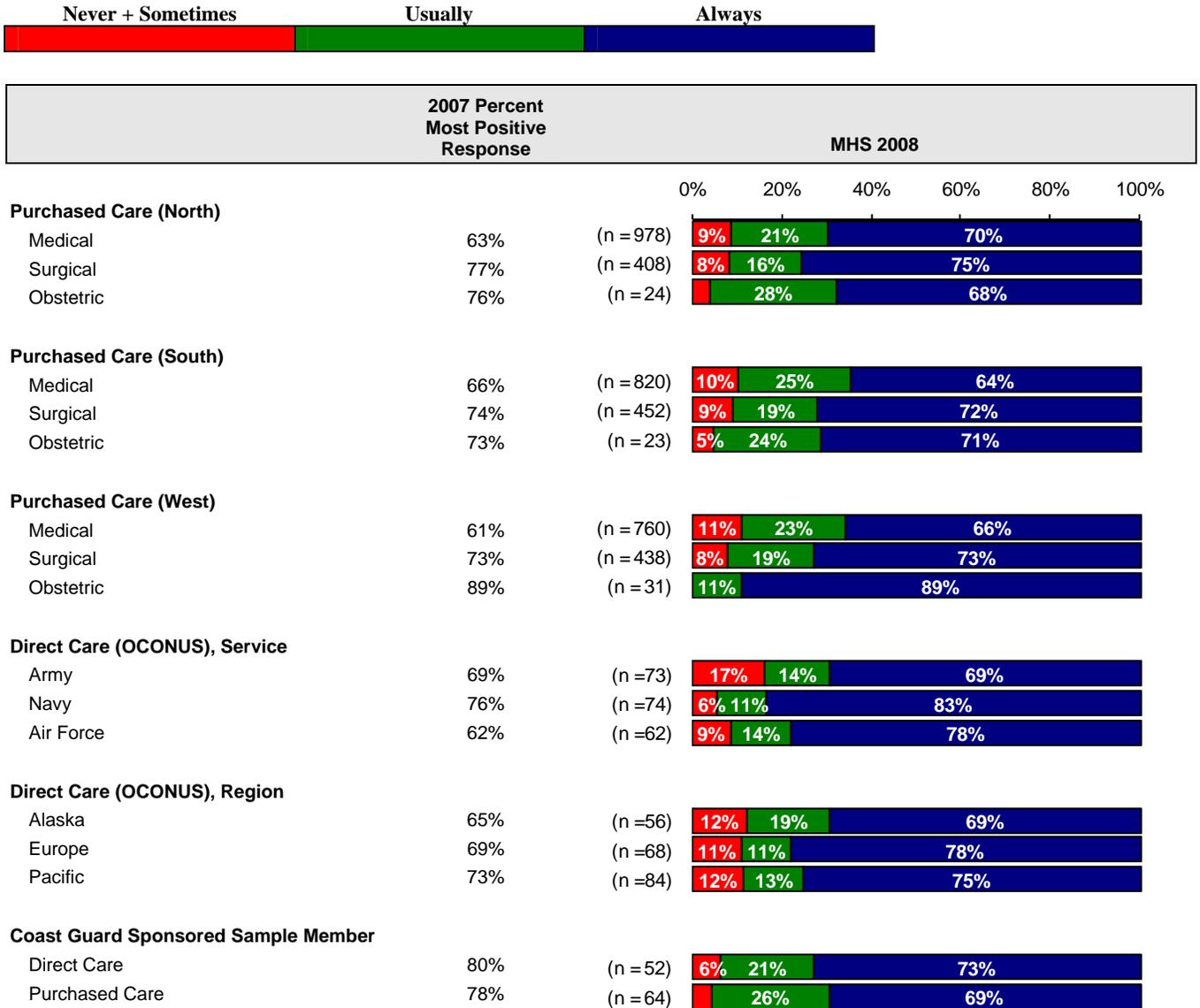
Interactions with Other Hospital Staff

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



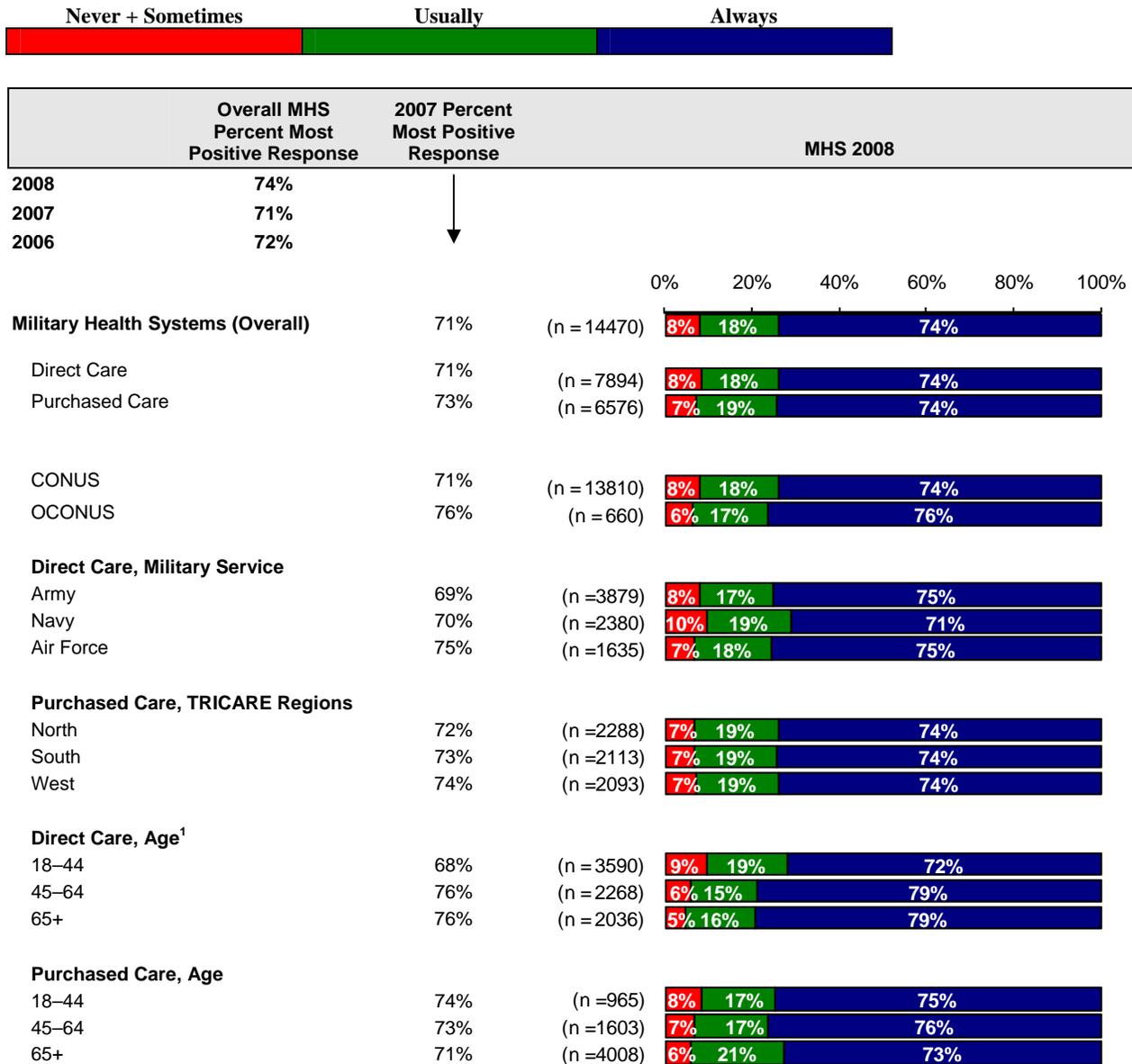
Interactions with Other Hospital Staff

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

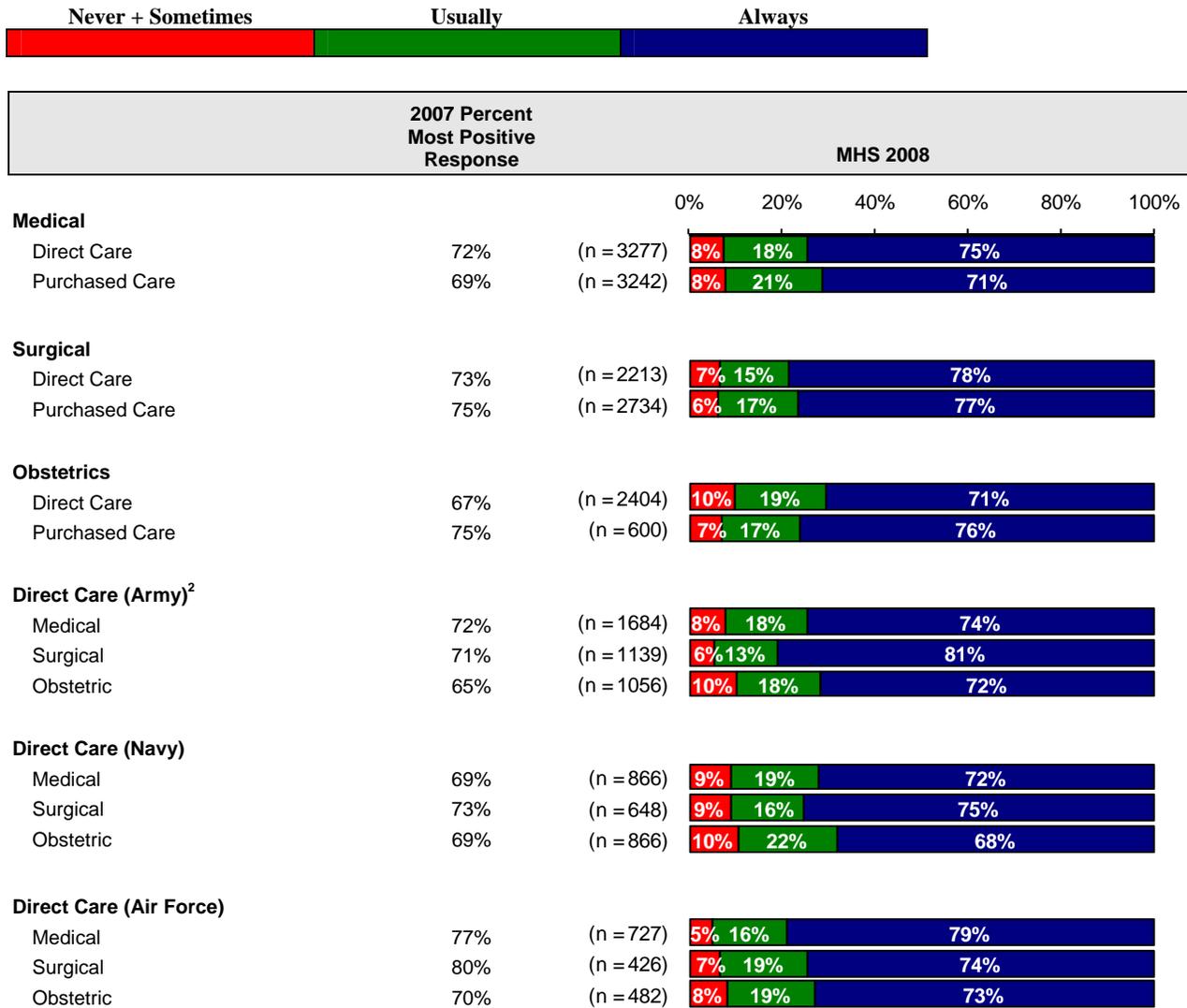
During this hospital stay, how often was the staff delivering your food courteous and helpful?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to report that the staff delivering the 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)

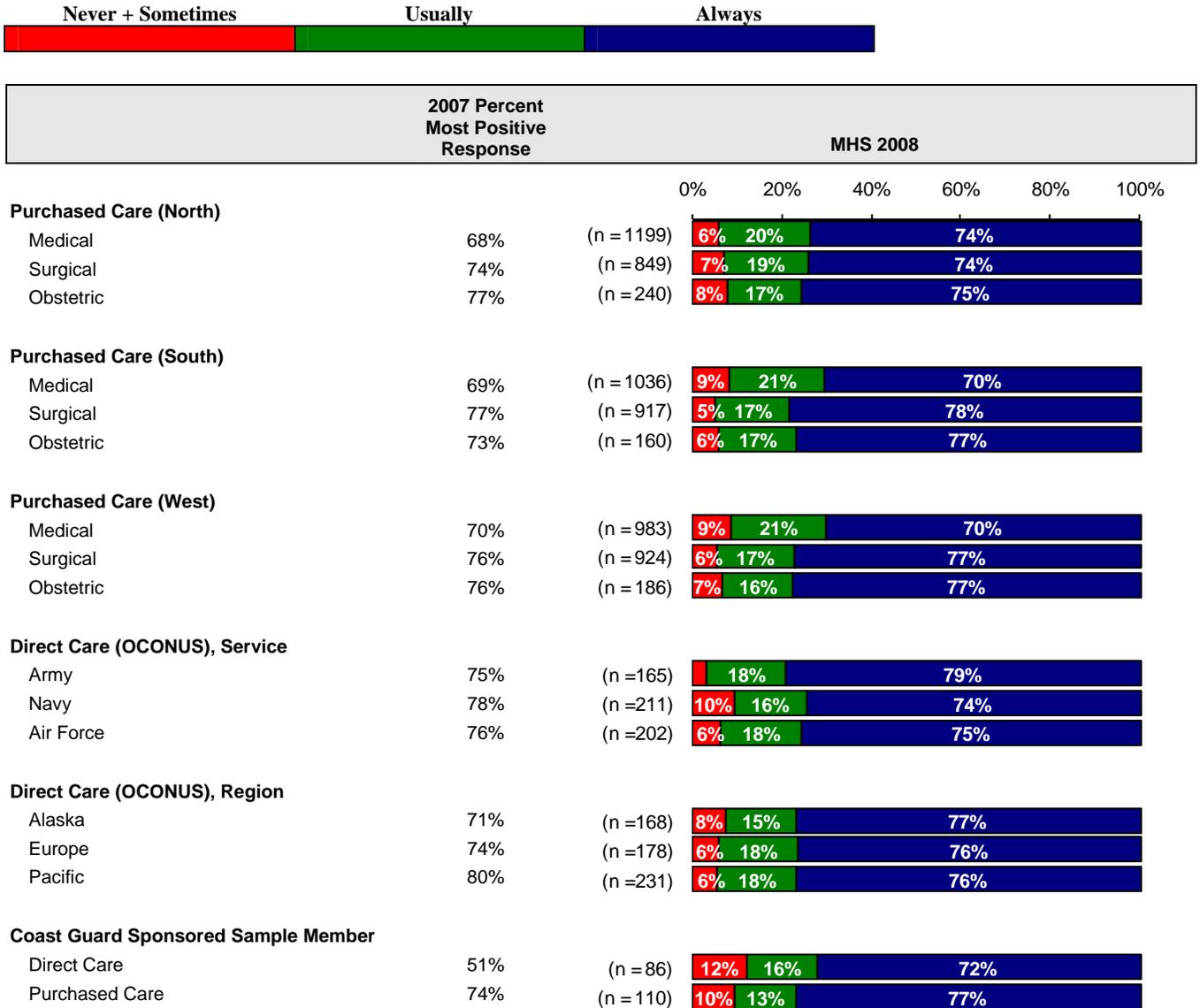


2. Among Direct Care beneficiaries receiving care in Army facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to report that the staff delivering the food was always courteous and helpful ($p < .05$).

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

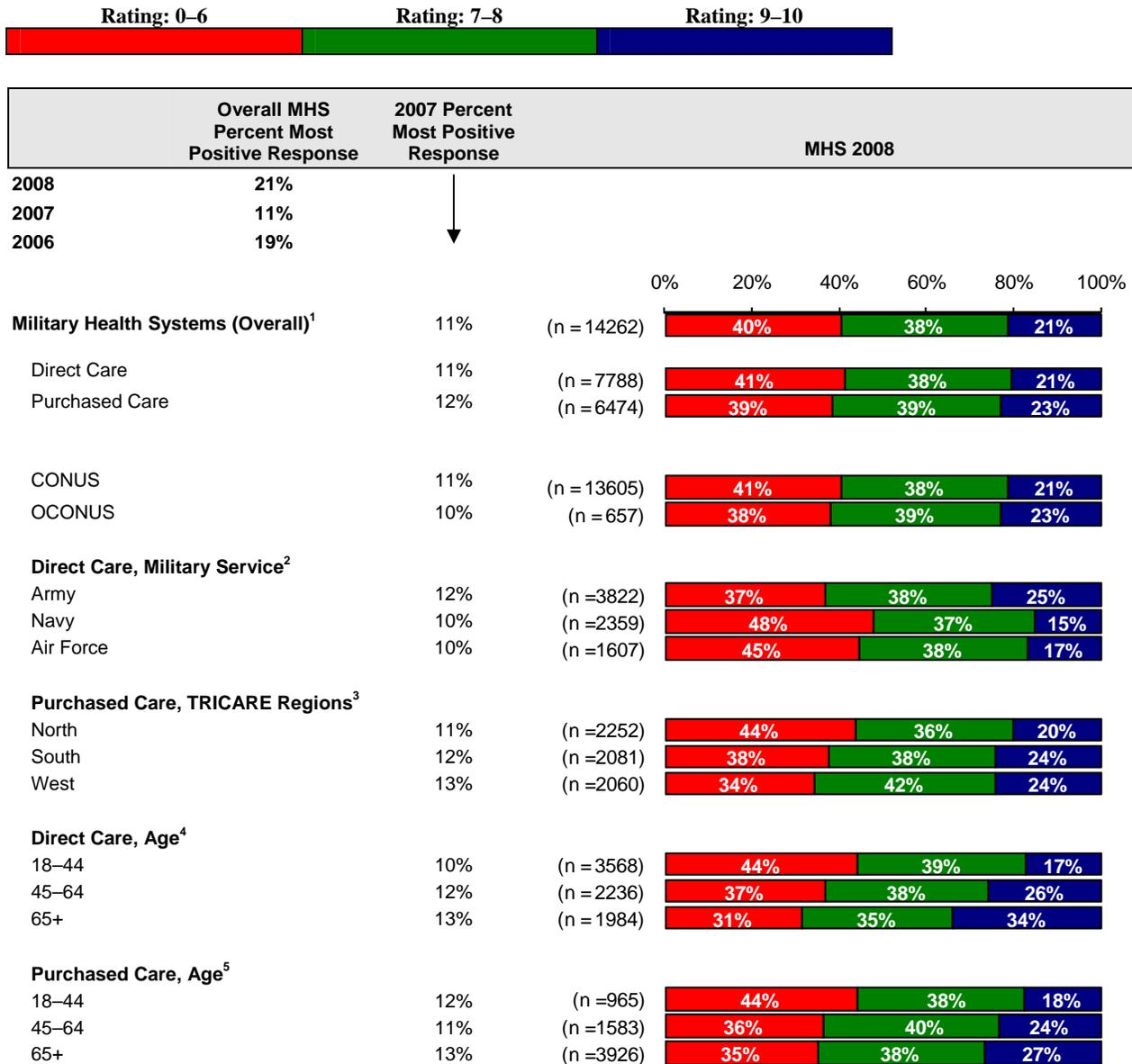
Interactions with Other Hospital Staff

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



Interactions with Other Hospital Staff

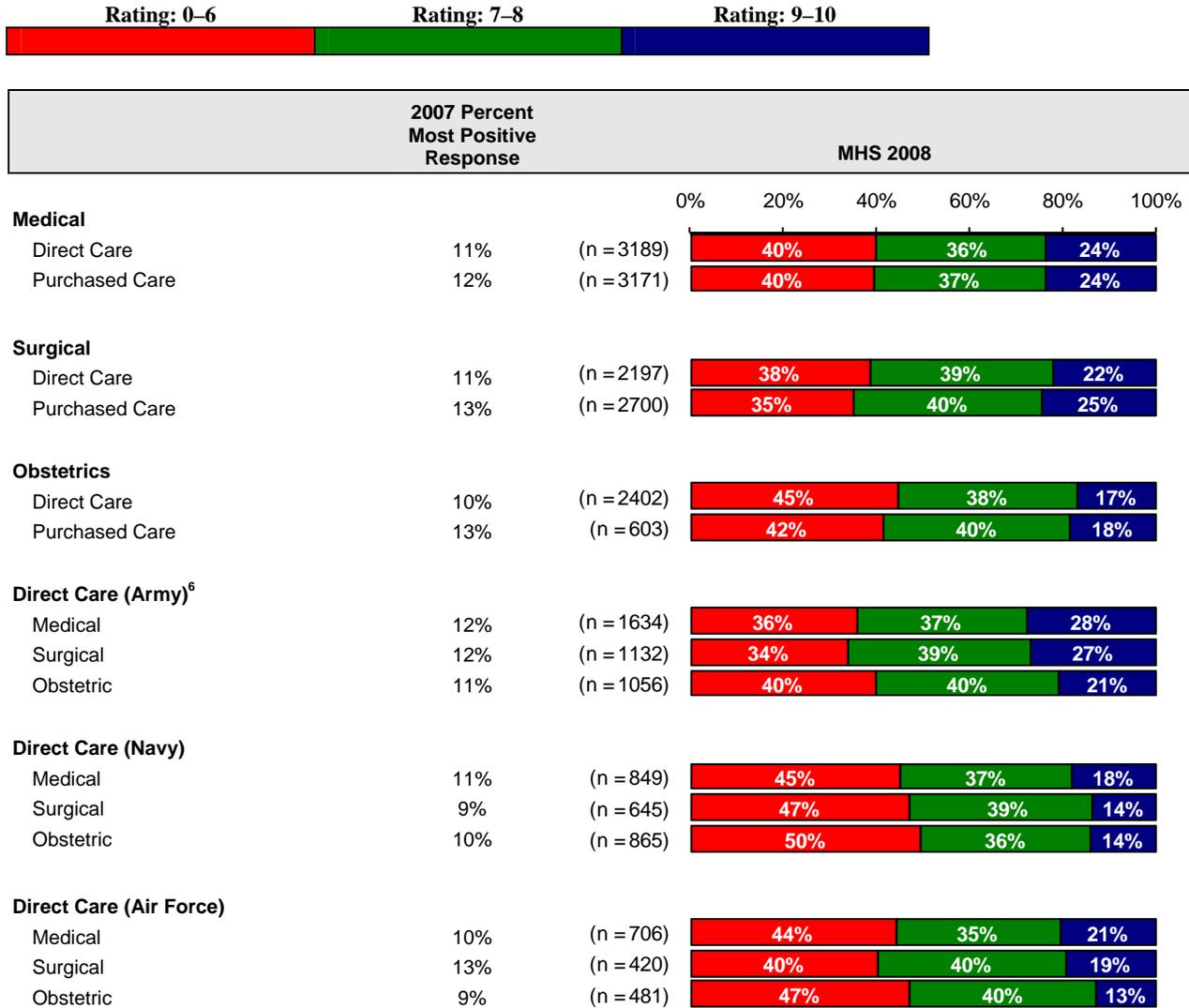
On a scale of 0 to 10 where 0 is the worst tasting food and 10 is the best tasting food, how would you rate the food you received during this hospital stay?



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

Interactions with Other Hospital Staff

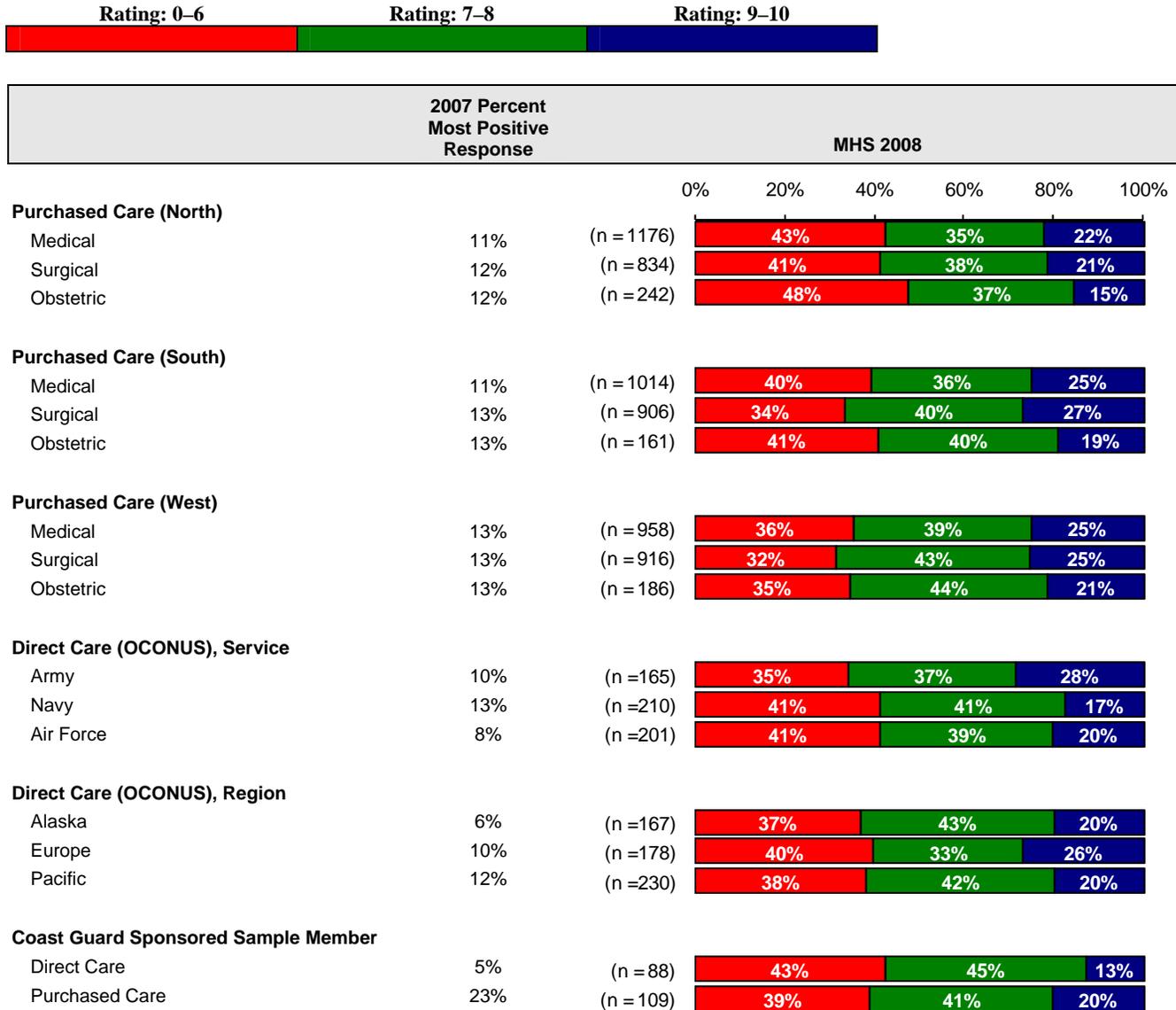
On a scale of 0 to 10 where 0 is the worst tasting food and 10 is the best tasting food, how would you rate the food you received during this hospital stay? (continued)



6. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving either Medical or Surgical services to rate their food a 9 or 10 during their hospital stay ($p < .05$).

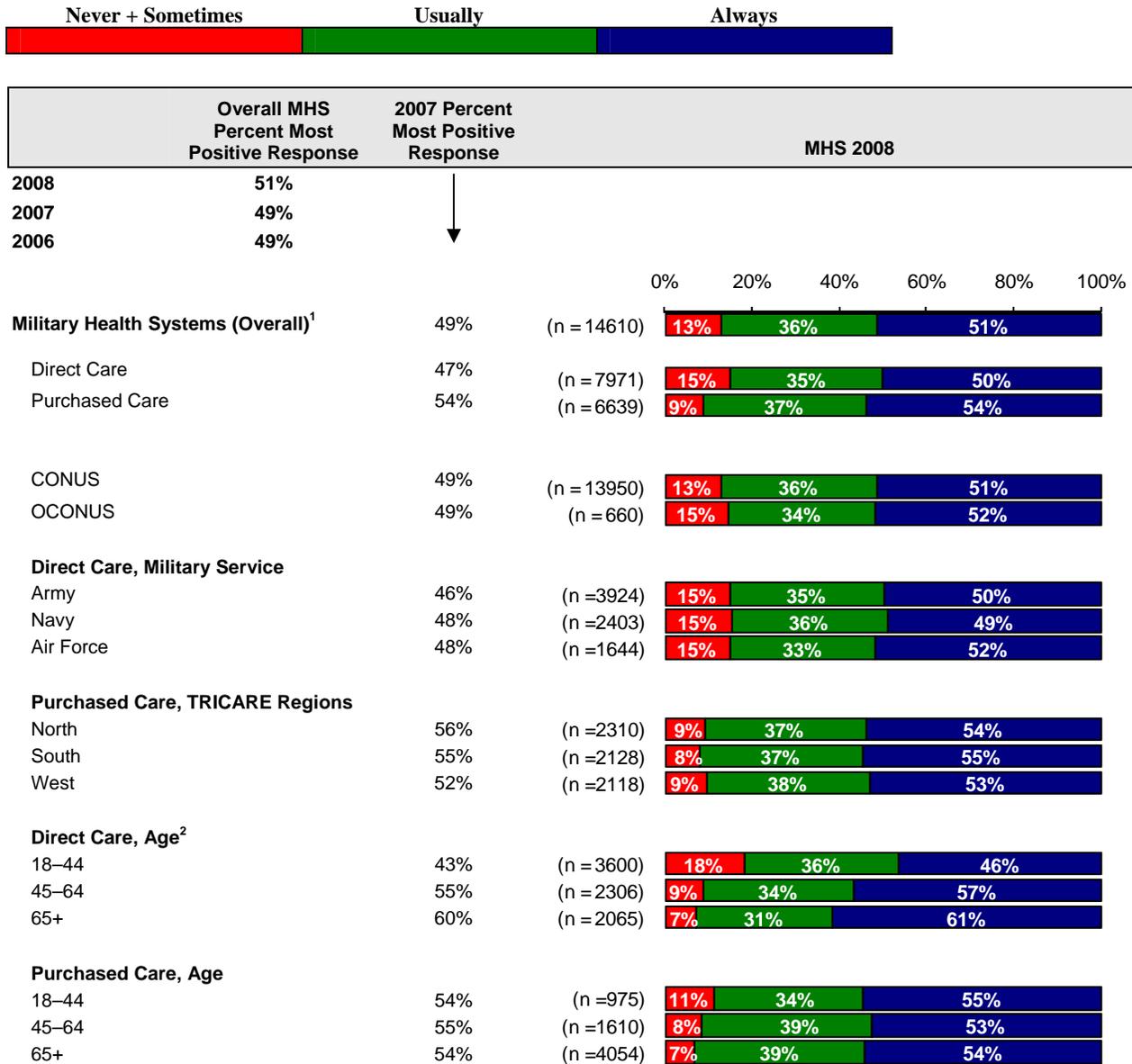
Interactions with Other Hospital Staff

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

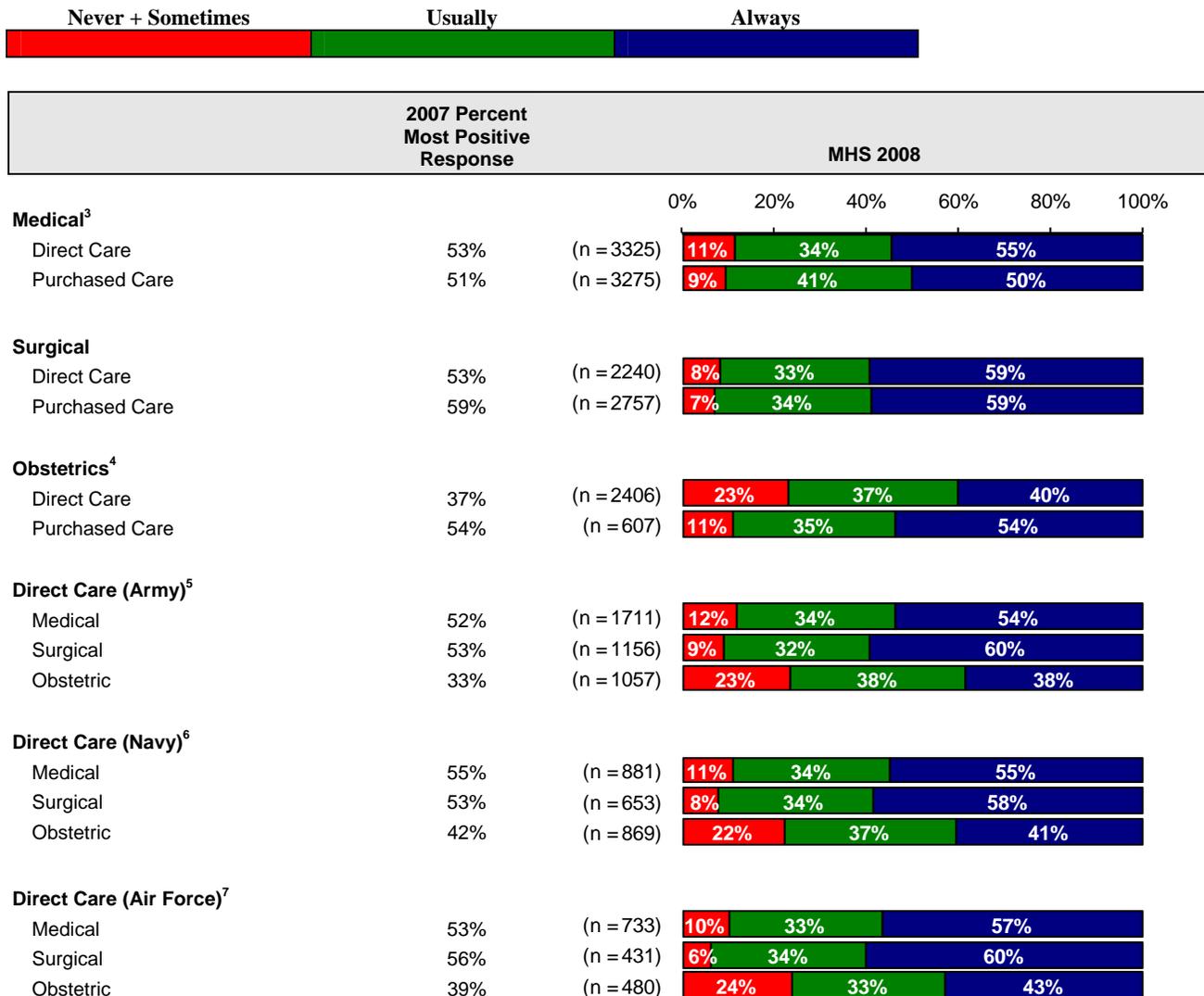
How often was the temperature in your room comfortable?



1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to say that the temperature in their room was always comfortable ($p < .05$).
2. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to say that the temperature in their room was always comfortable ($p < .05$). Also, those aged 65+ were significantly more likely than those in other age groups to say that the temperature in their room was always comfortable ($p < .05$).

The Hospital Environment

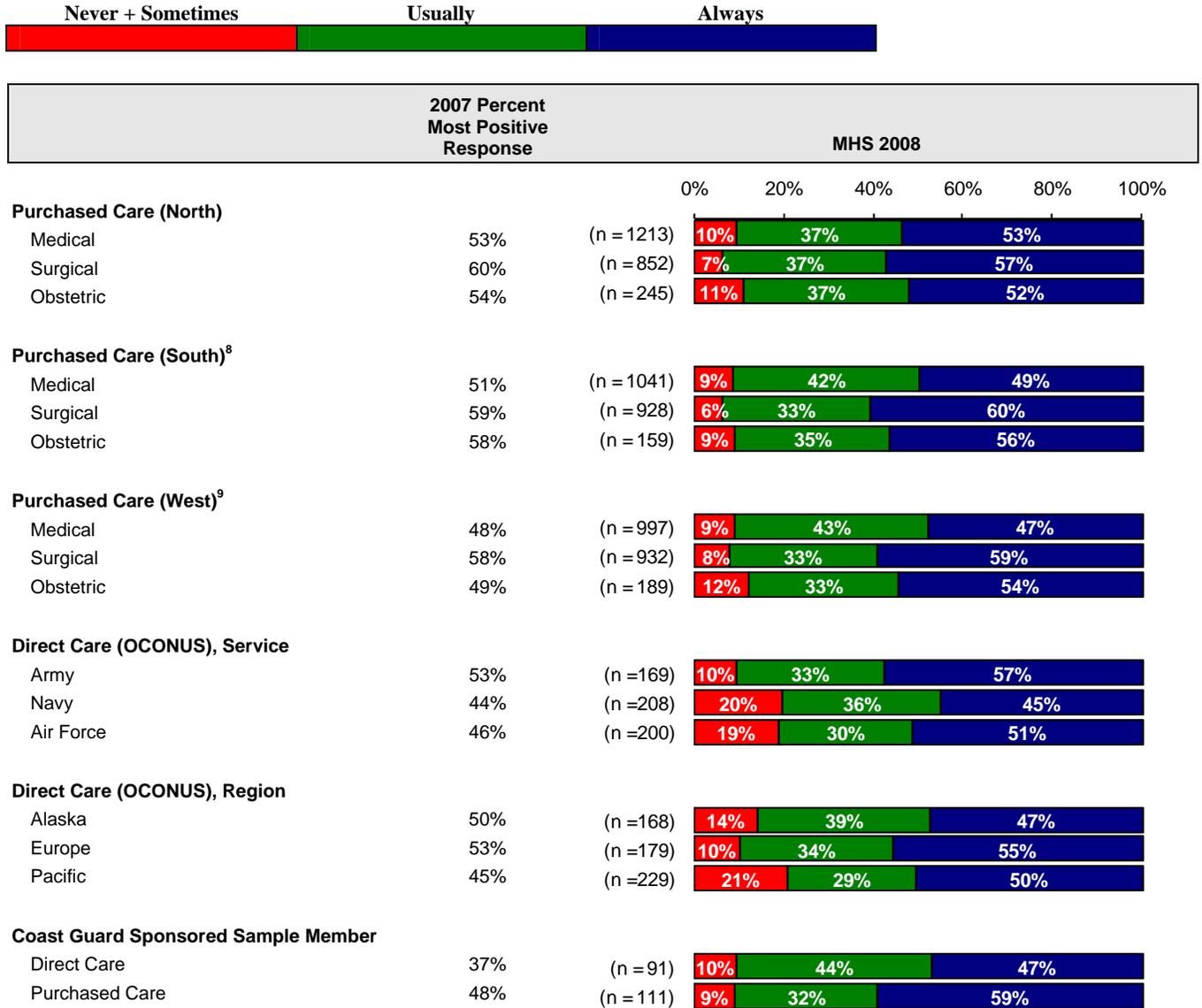
How often was the temperature in your room comfortable? (continued)



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

The Hospital Environment

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

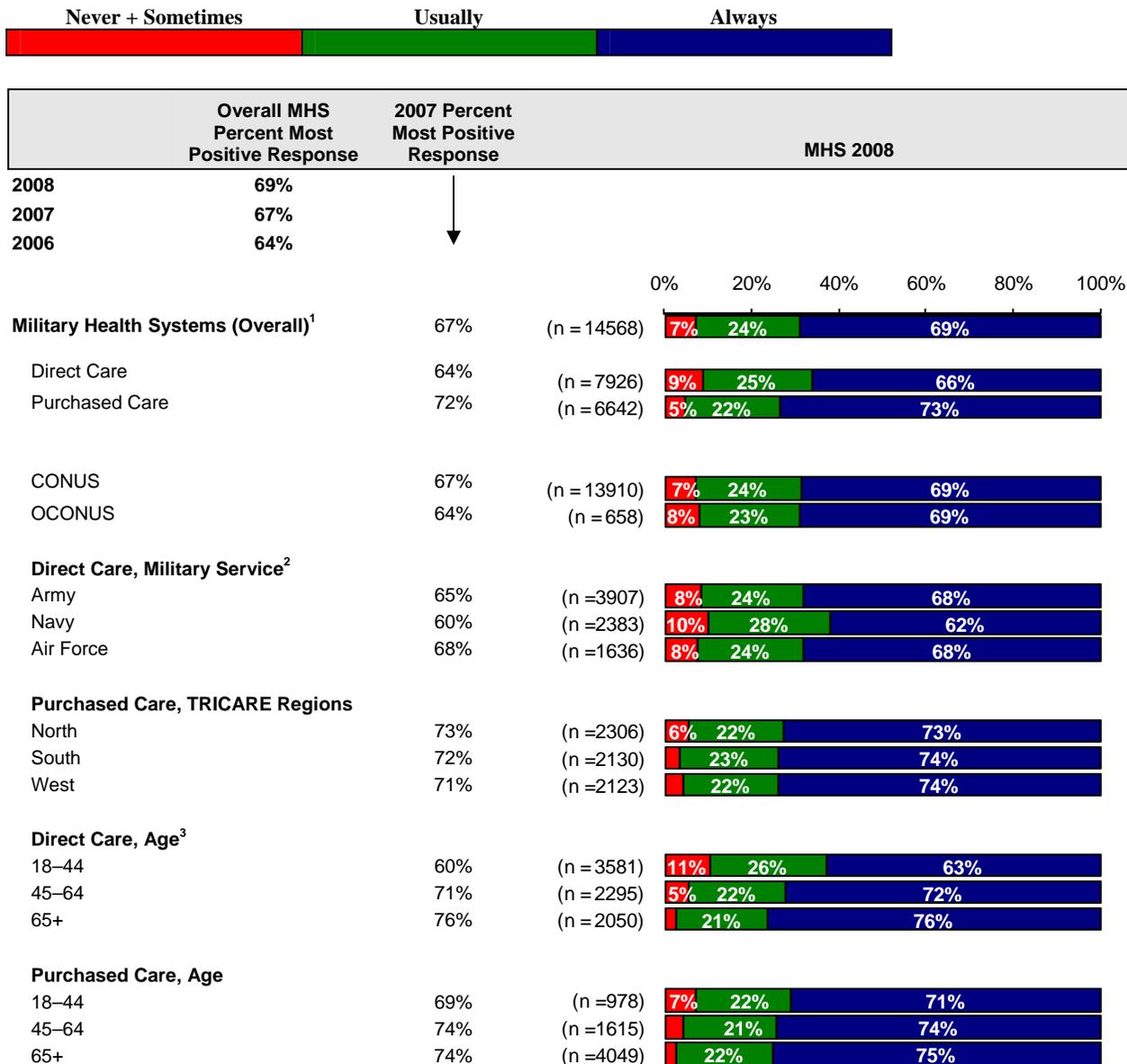


8. Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical services to say that the temperature in their room was always comfortable ($p < .05$).

9. Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving Medical services to say that the temperature in their room was always comfortable ($p < .05$).

The Hospital Environment

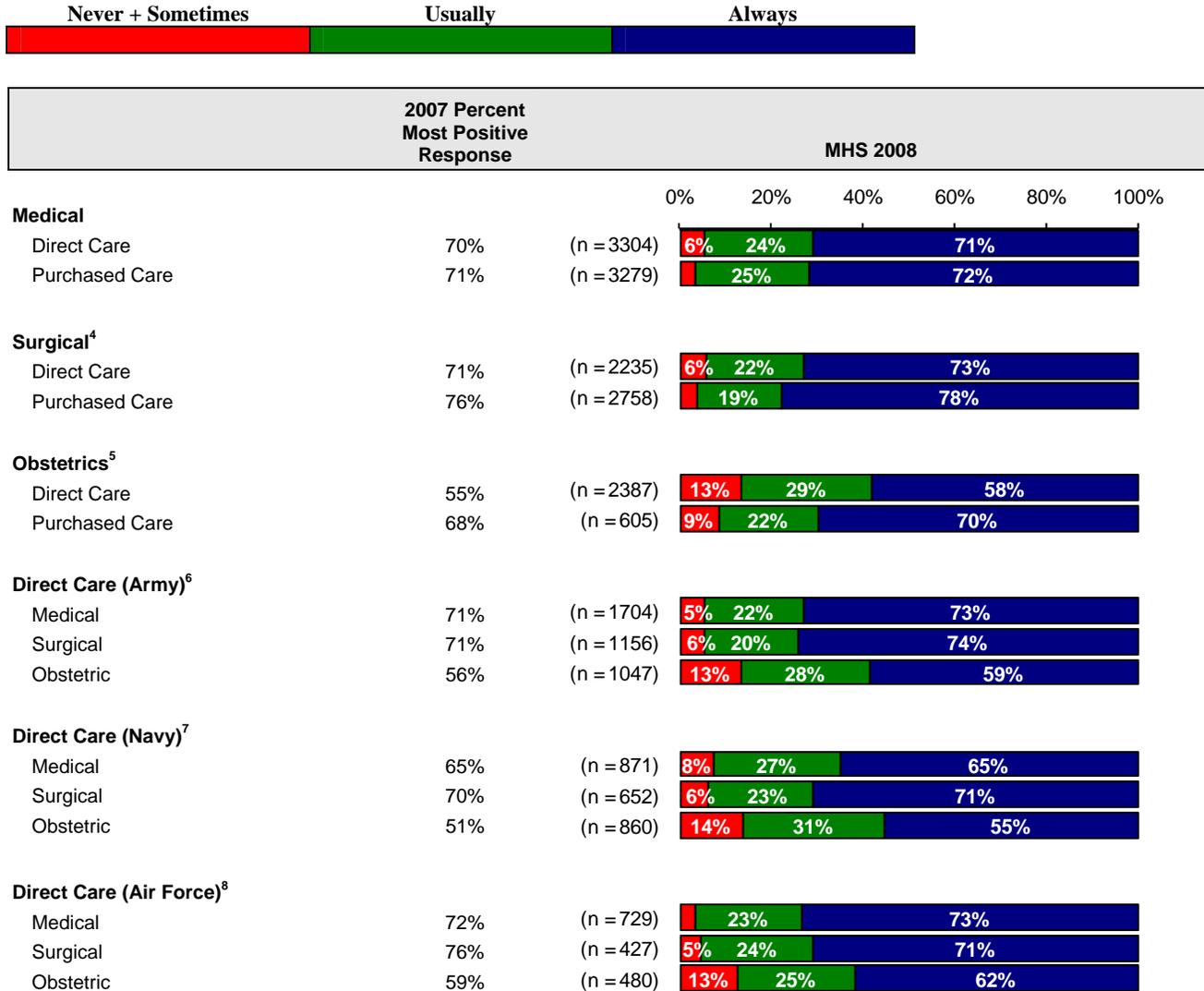
How often did the equipment in your room work properly?



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

The Hospital Environment

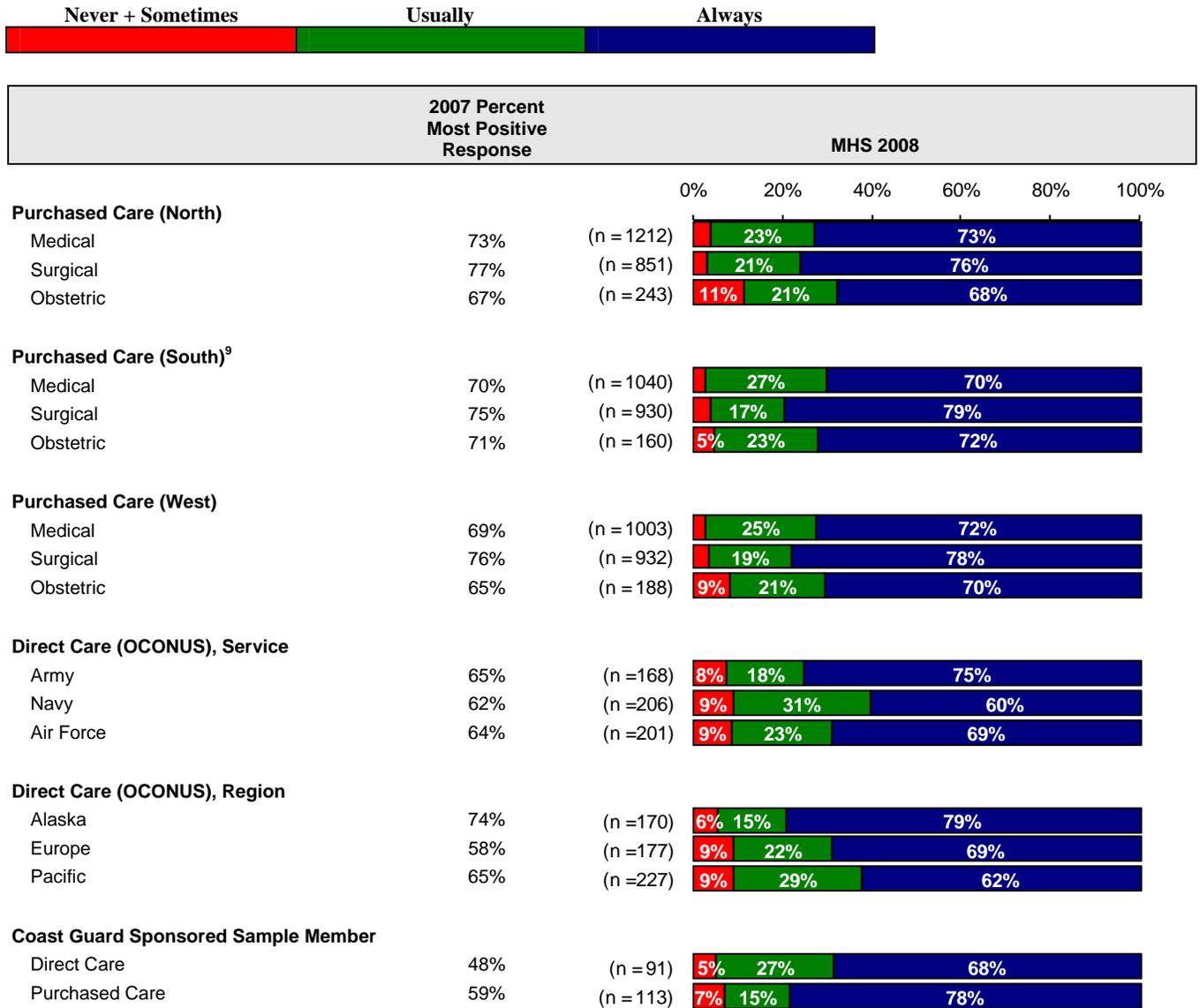
How often did the equipment in your room work properly? (continued)



4. Among beneficiaries receiving Surgical services, those in Purchased Care were significantly more likely than those in Direct Care to say that the equipment in their room always worked properly ($p < .05$).
5. Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to say that the equipment in their room always worked properly ($p < .05$).
6. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to say that the equipment in their room always worked properly ($p < .05$).
7. Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to say that the equipment in their room always worked properly ($p < .05$).
8. Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to say that the equipment in their room always worked properly ($p < .05$).

The Hospital Environment

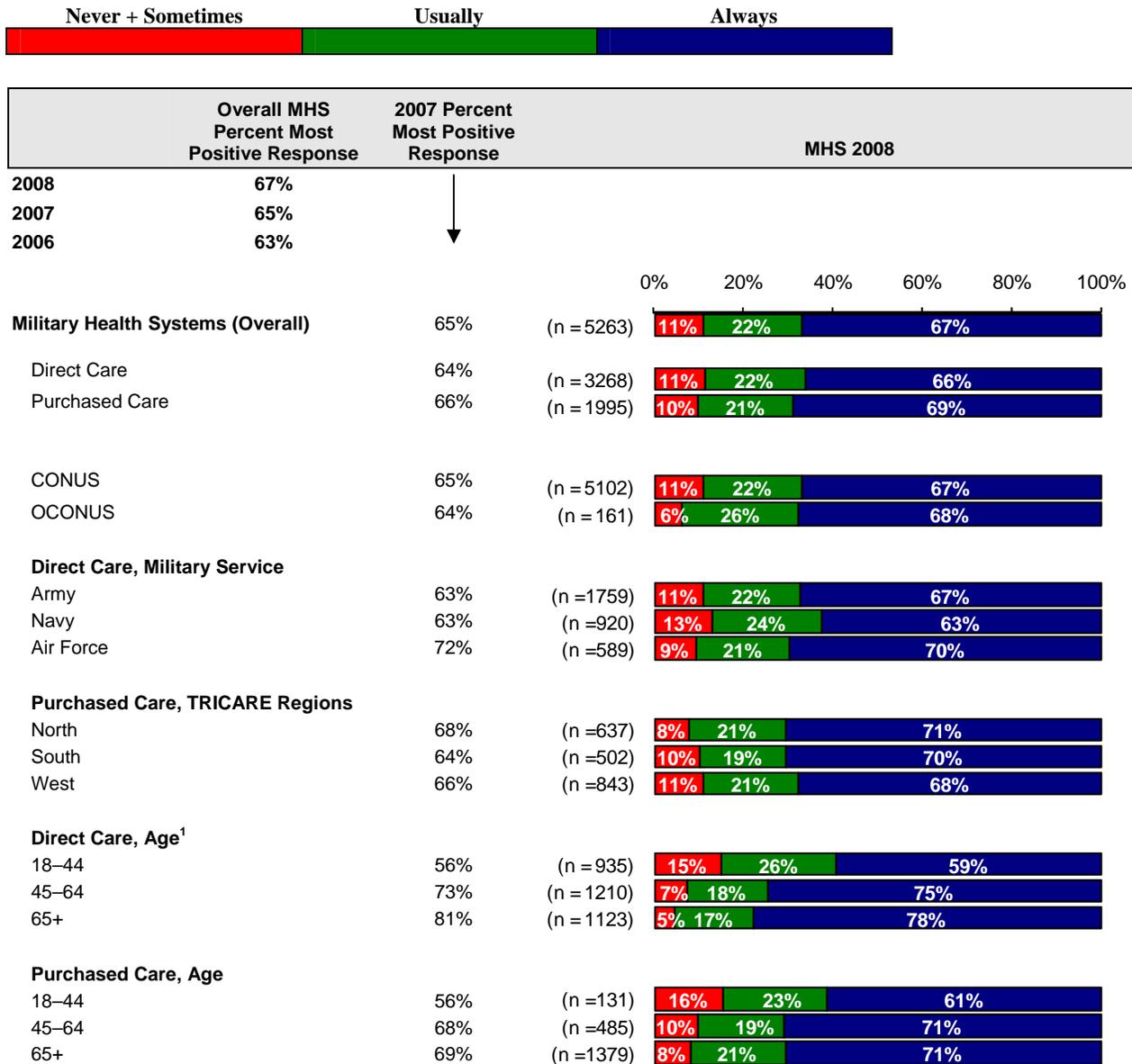
How often did the equipment in your room work properly? (continued)



9. Among Purchased Care beneficiaries in the South, those receiving Surgical services were significantly more likely than those receiving Medical services to say that the equipment in their room always worked properly ($p < .05$).

The Hospital Environment

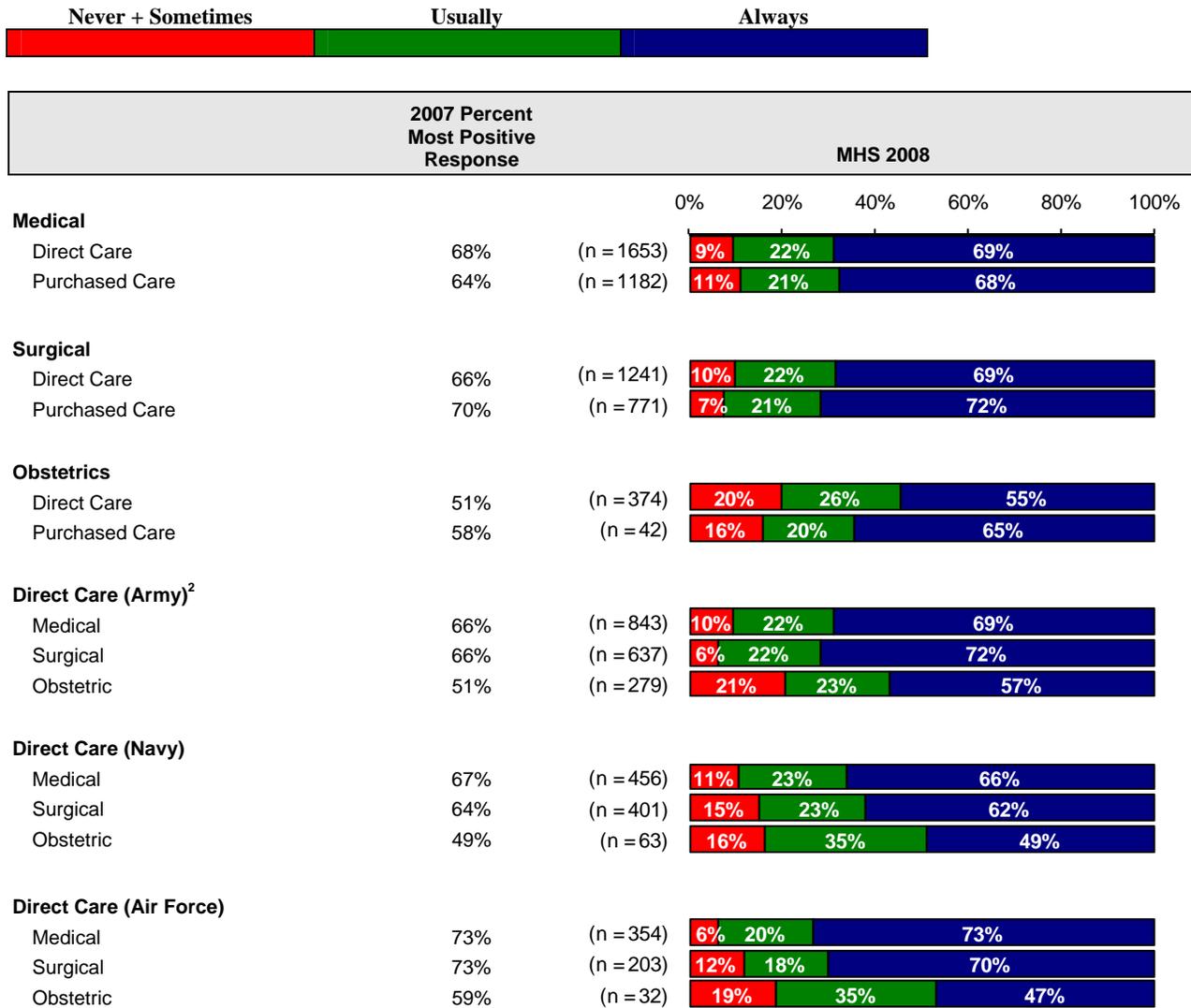
How often did doctors, nurses and other hospital staff make sure that you had privacy when they took care of you or talked to you?



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to say that doctors, nurses, and other hospital staff always made sure that they had privacy when they took care of them or talked to them ($p < .05$).

The Hospital Environment

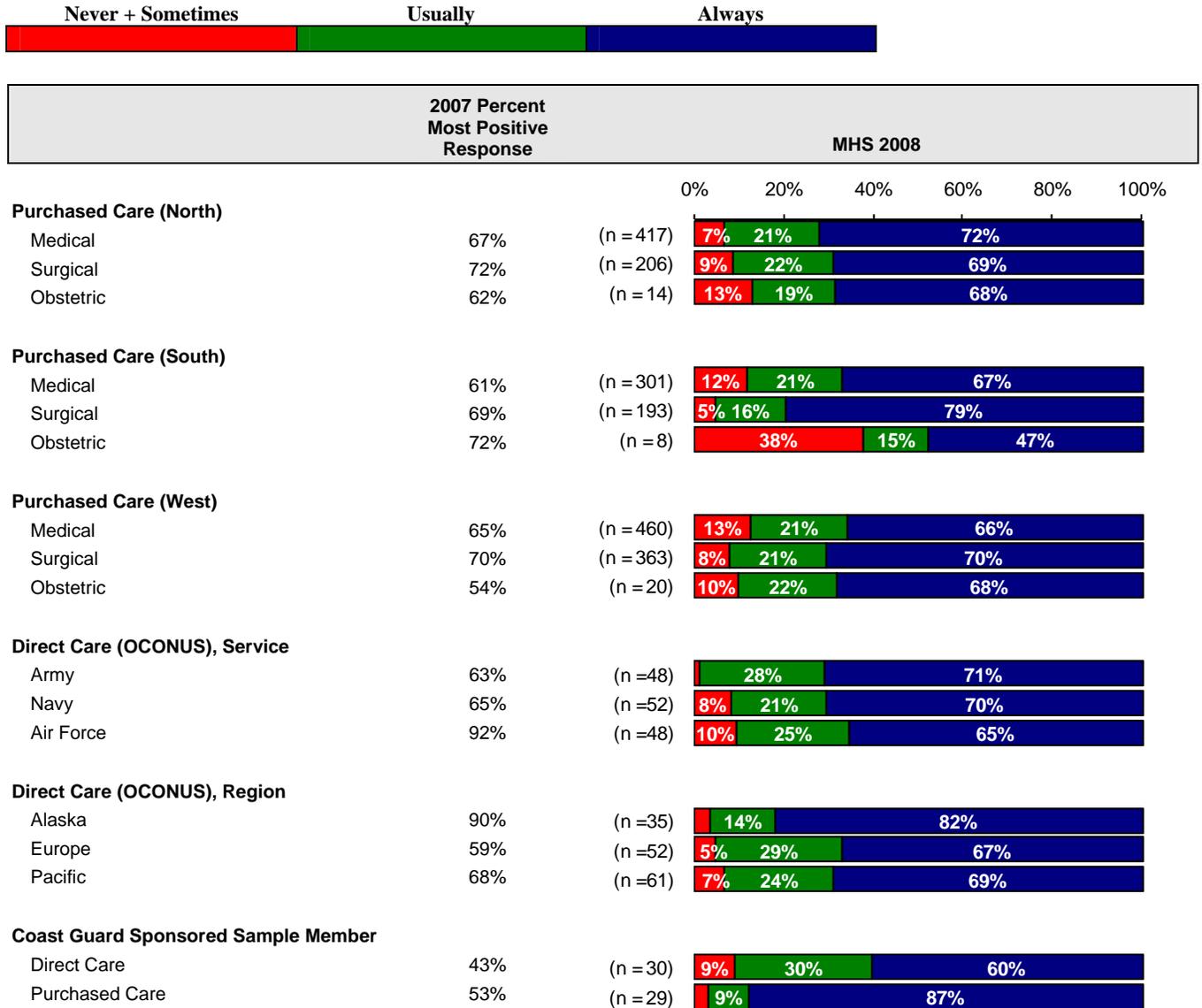
How often did doctors, nurses and other hospital staff make sure that you had privacy when they took care of you or talked to you? (continued)



2. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to say that doctors, nurses, and other hospital staff always made sure that they had privacy when they took care of them or talked to them ($p < .05$).

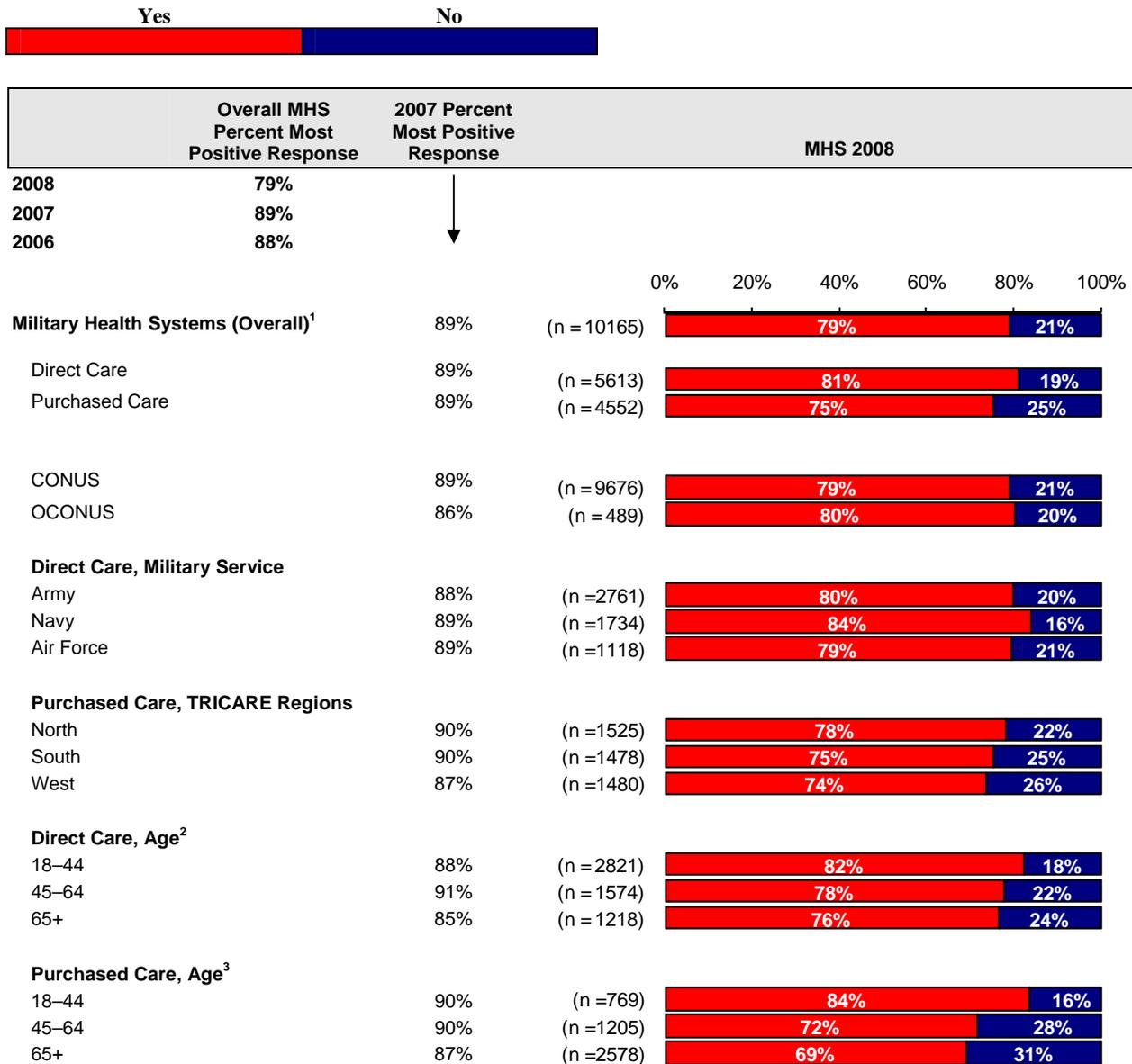
The Hospital Environment

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

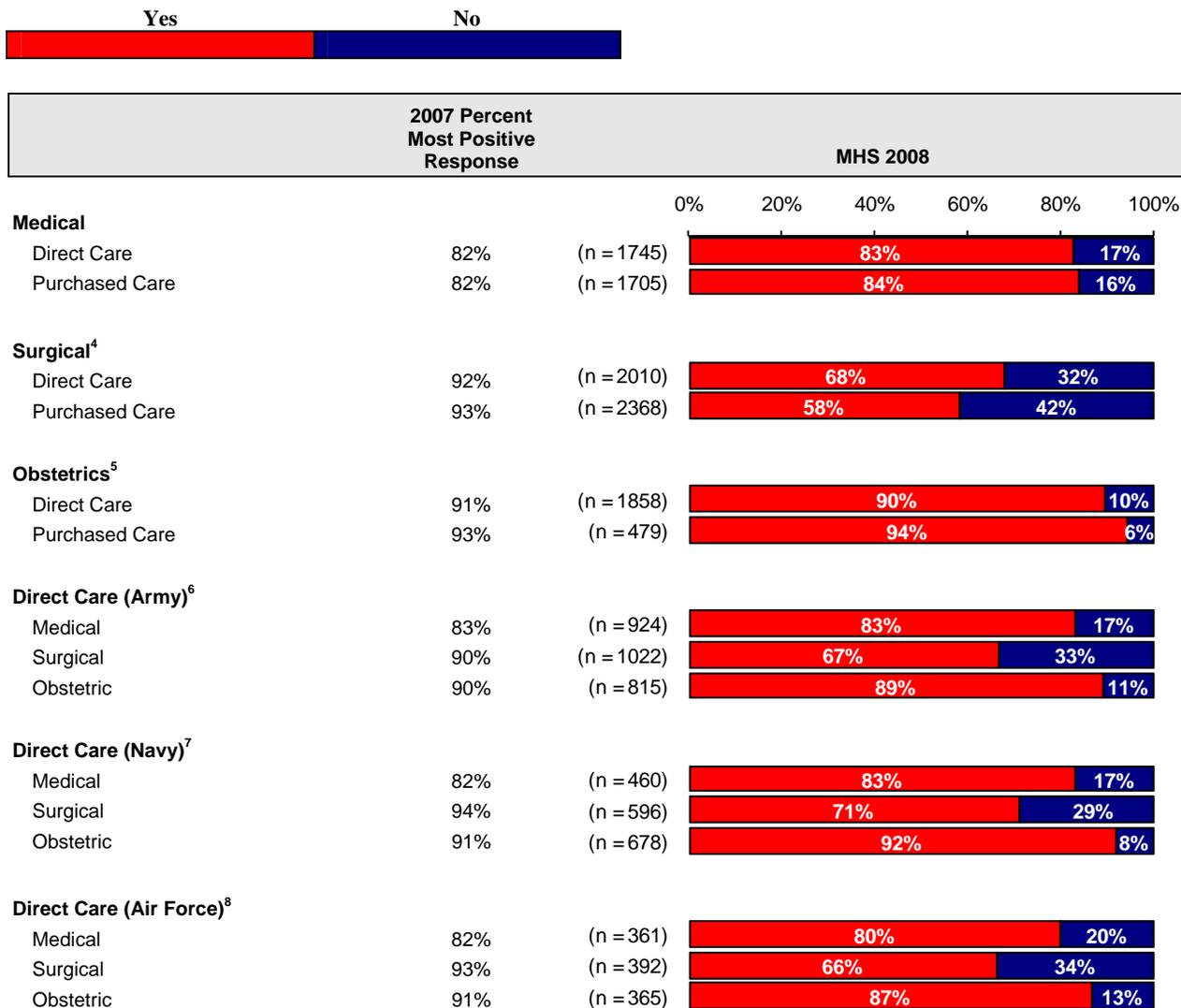
Before you left the hospital, did you receive information in writing about what activities you could and could not do?



- 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 ($p < .05$).
- 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 ($p < .05$).

When you Left the Hospital

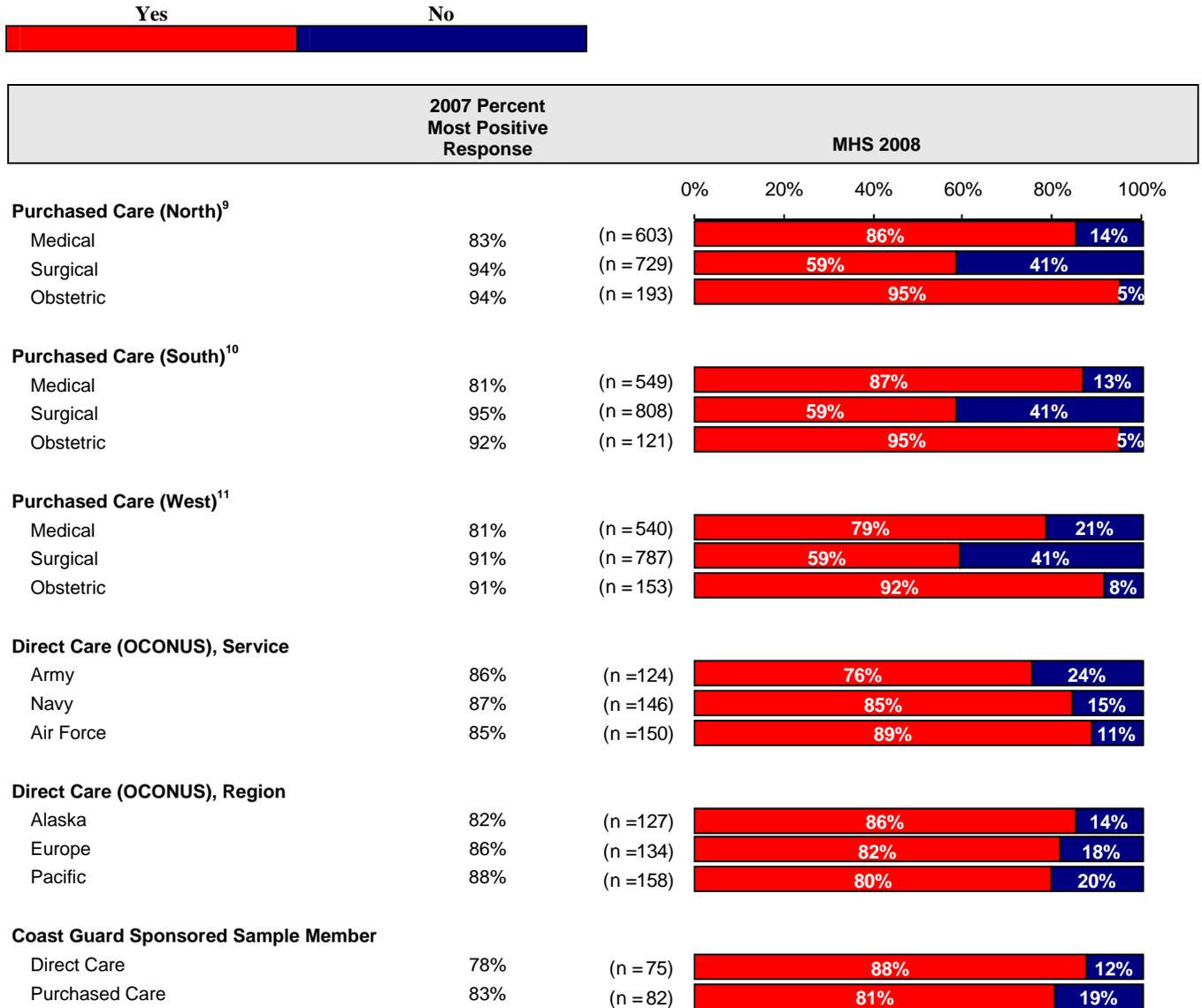
Before you left the hospital, did you receive information in writing about what activities you could and could not do? (continued)



- Among those receiving Surgical services, beneficiaries in Direct Care were significantly more likely than beneficiaries in Purchased Care to report that they received information in writing about what activities they could and could not do ($p < .05$).
- Among those receiving Obstetrics services, beneficiaries in Direct Care were significantly less likely than beneficiaries in Purchased Care 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 facilities, those receiving Surgical services were significantly less likely than those receiving Medical or Obstetrics services to report that they received information in writing about what activities they could and could not do ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical 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 facilities, those receiving Surgical services were significantly less likely than those receiving Medical or Obstetrics services to report that they received information in writing about what activities they could and could not do ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical 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 facilities, those receiving Surgical services were significantly less likely than those receiving Medical or Obstetrics 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

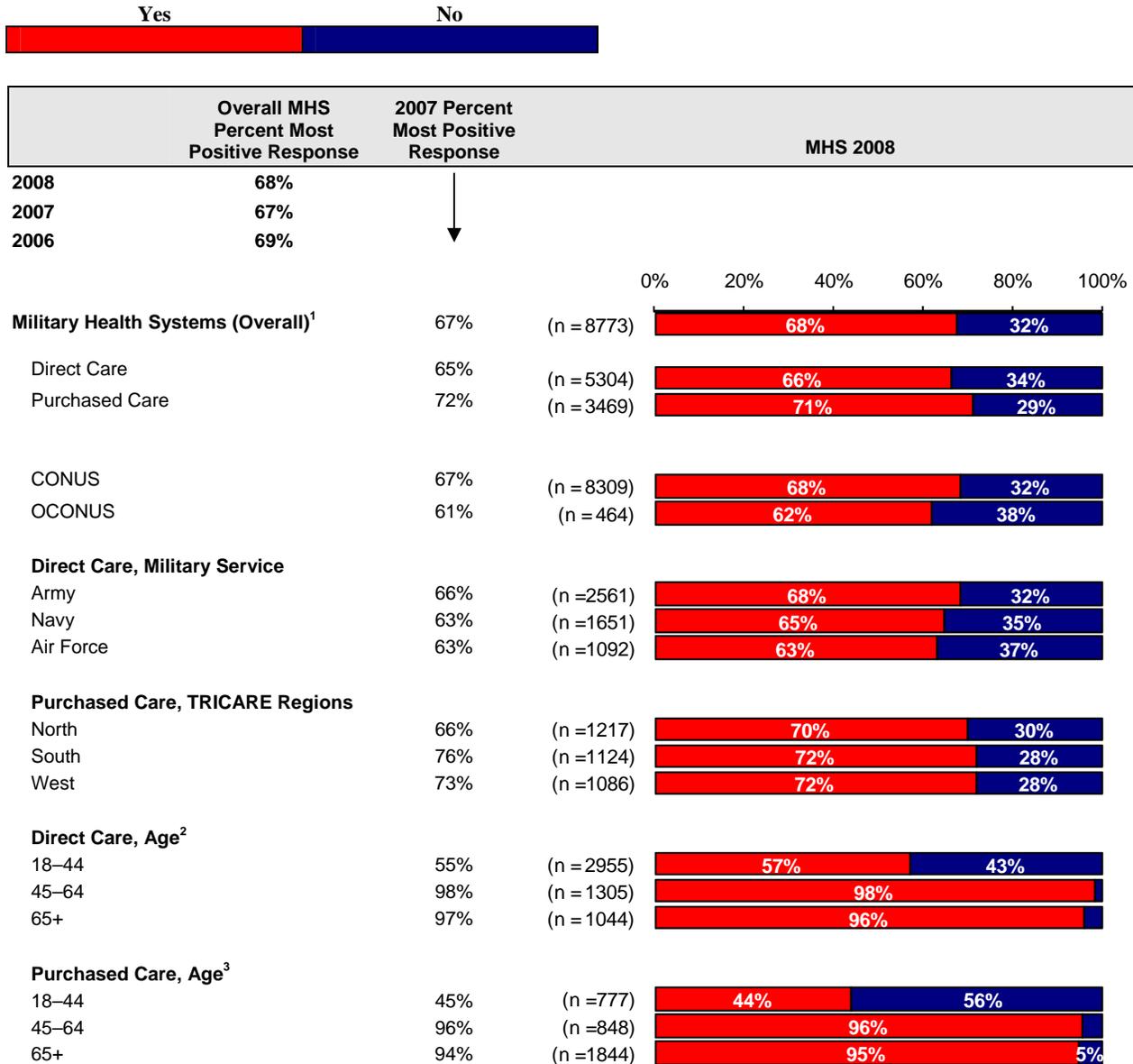
Before you left the hospital, did you receive information in writing about what activities you could and could not do? (continued)



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

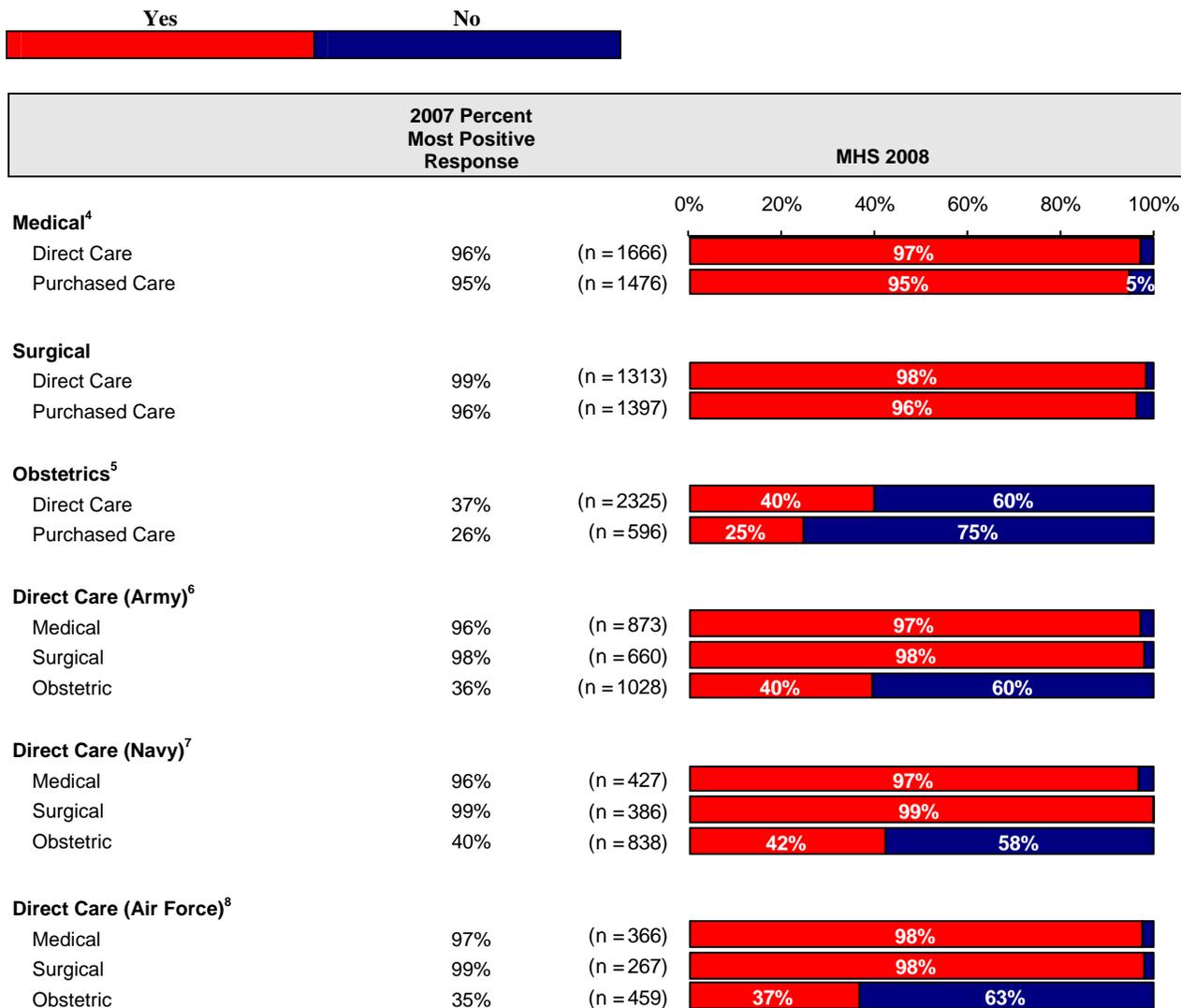
Before you left the hospital, did you receive information in writing about how to take this medicine at home?



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

When you Left the Hospital

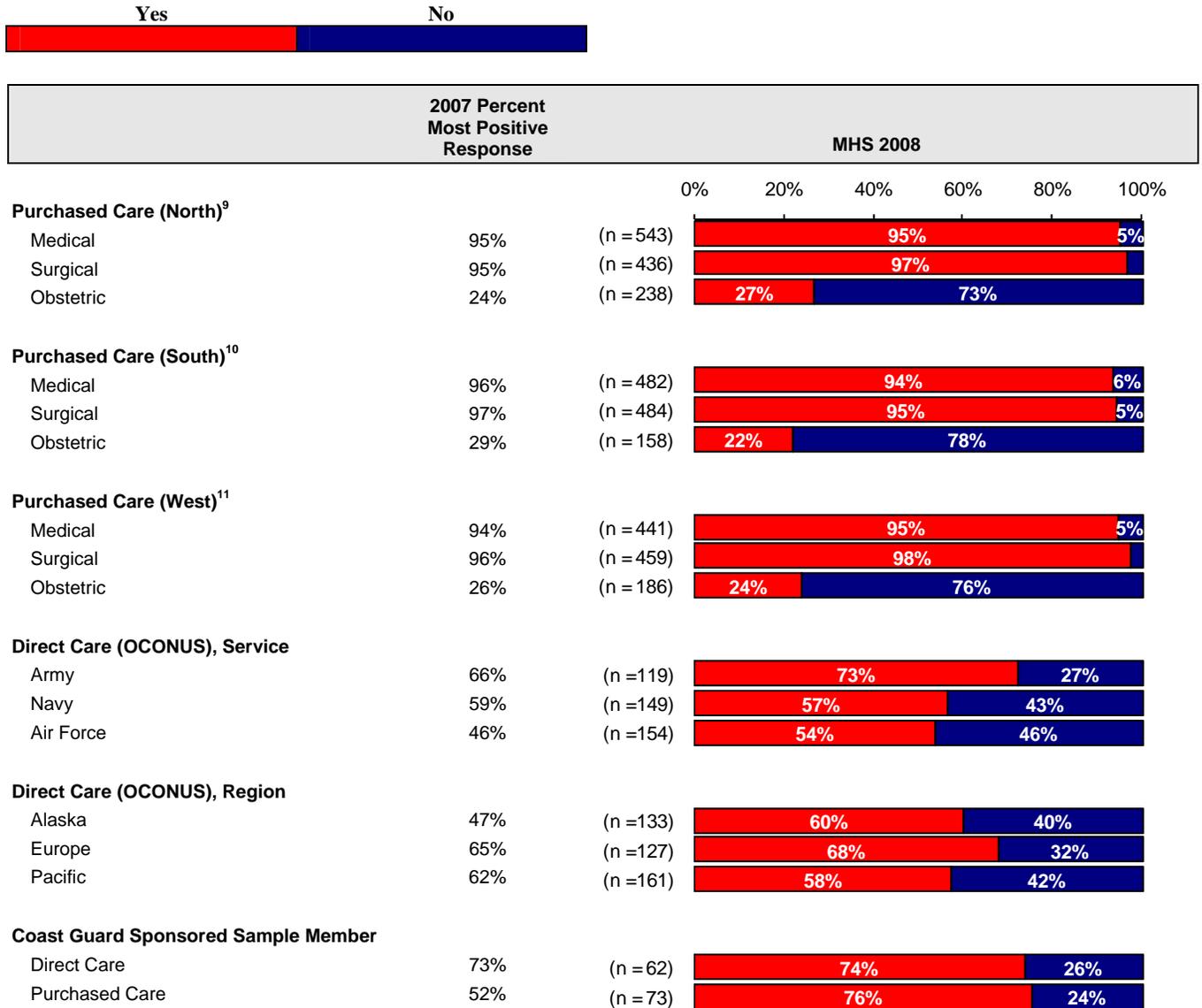
Before you left the hospital, did you receive information in writing about how to take this medicine at home?(continued)



- 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 facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical 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 facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they received information in writing about how to take their medicine at home ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics 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 facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical 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)



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

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

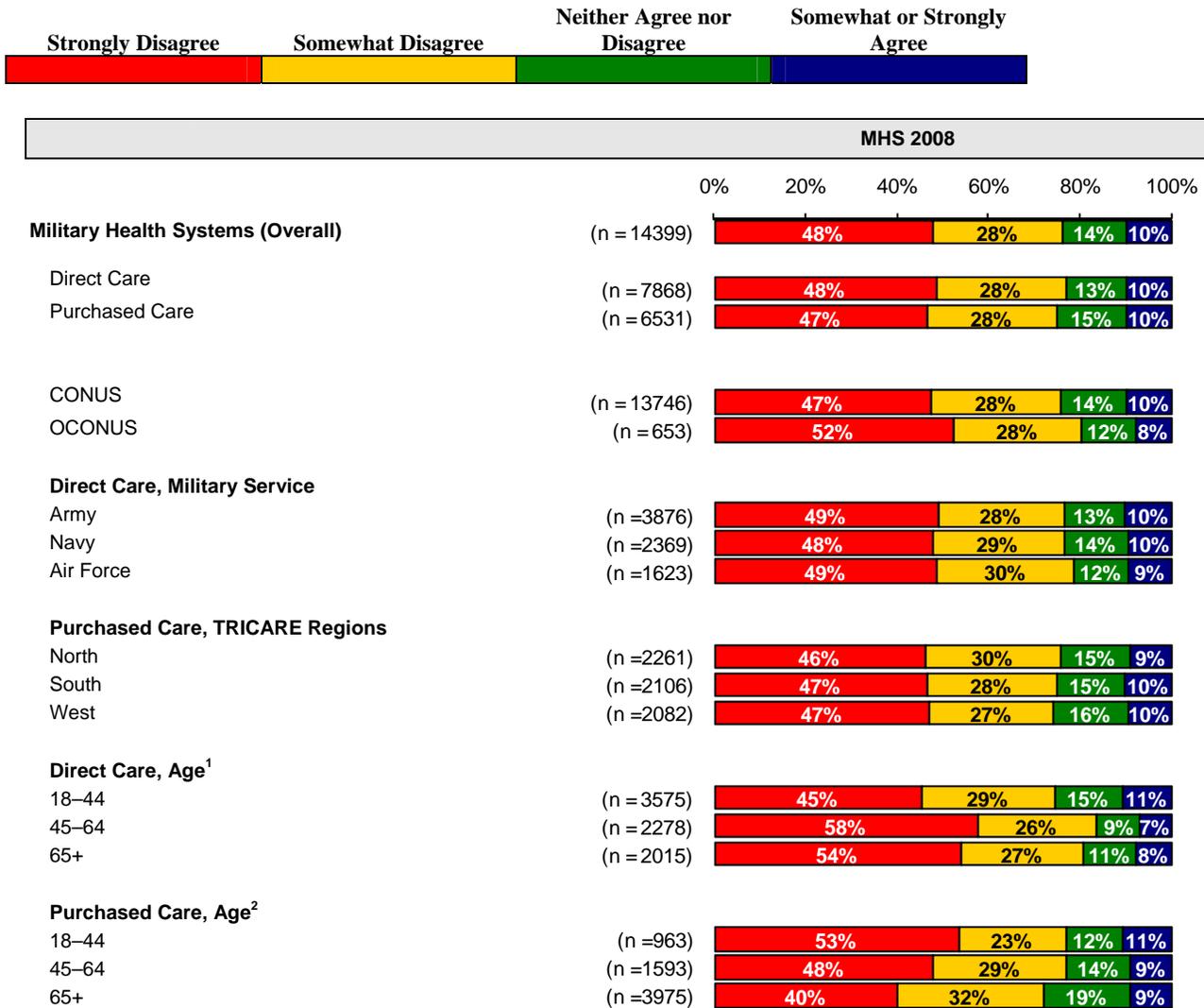
11. Among Purchased Care beneficiaries in the West, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they received information in writing about how to take their medicine at home ($p < .05$). Also, those receiving Surgical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

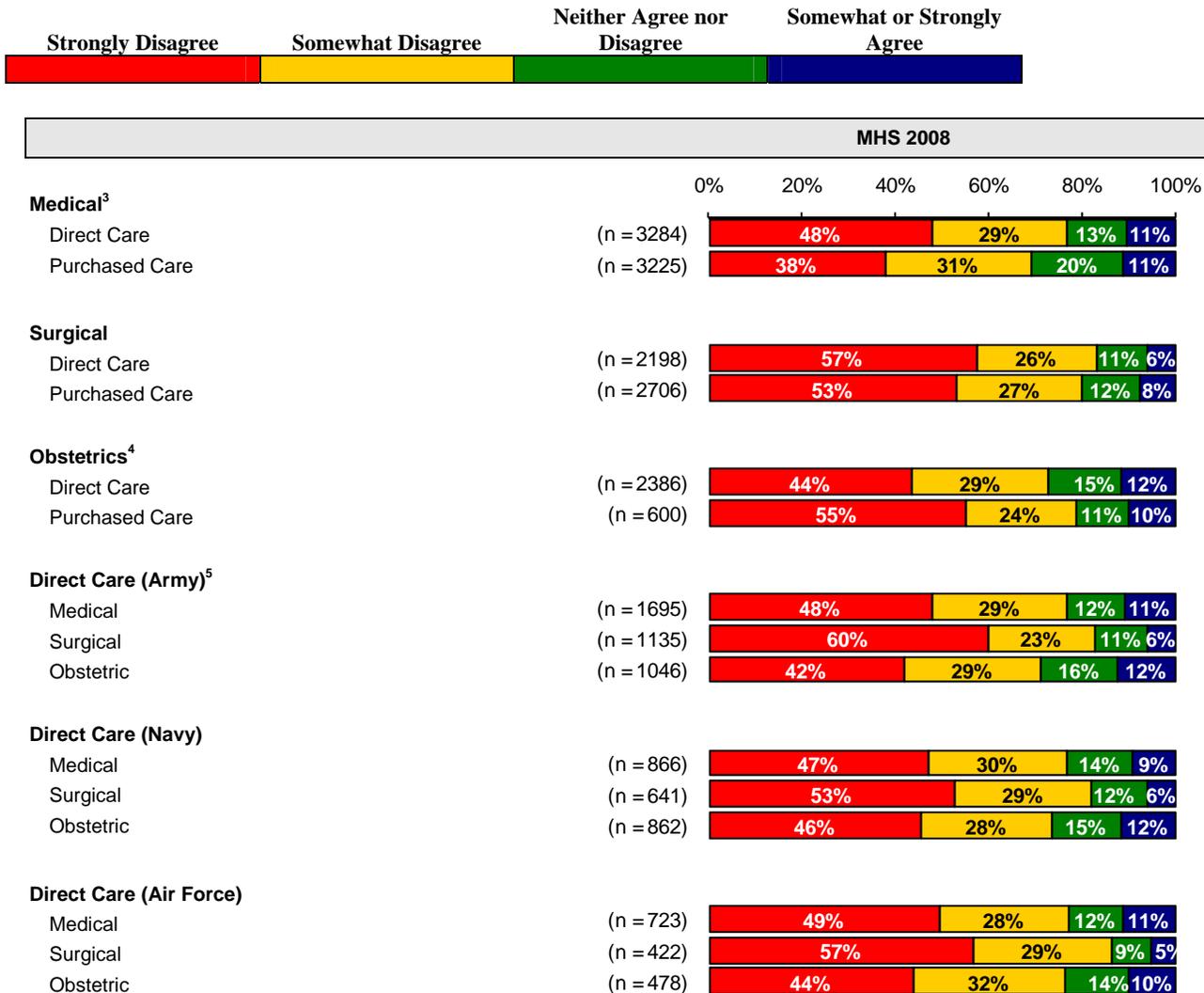
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs.



1. Among Direct Care beneficiaries, those aged 18-44 were significantly less likely than those in other age groups to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$). Furthermore, those aged 45-64 were significantly more likely than those in other age groups to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).
2. Among Purchased Care beneficiaries, those aged 18-44 were significantly more likely than those in other age groups to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$). Furthermore, those aged 65+ were significantly less likely than those in other age groups to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).

Trust Question

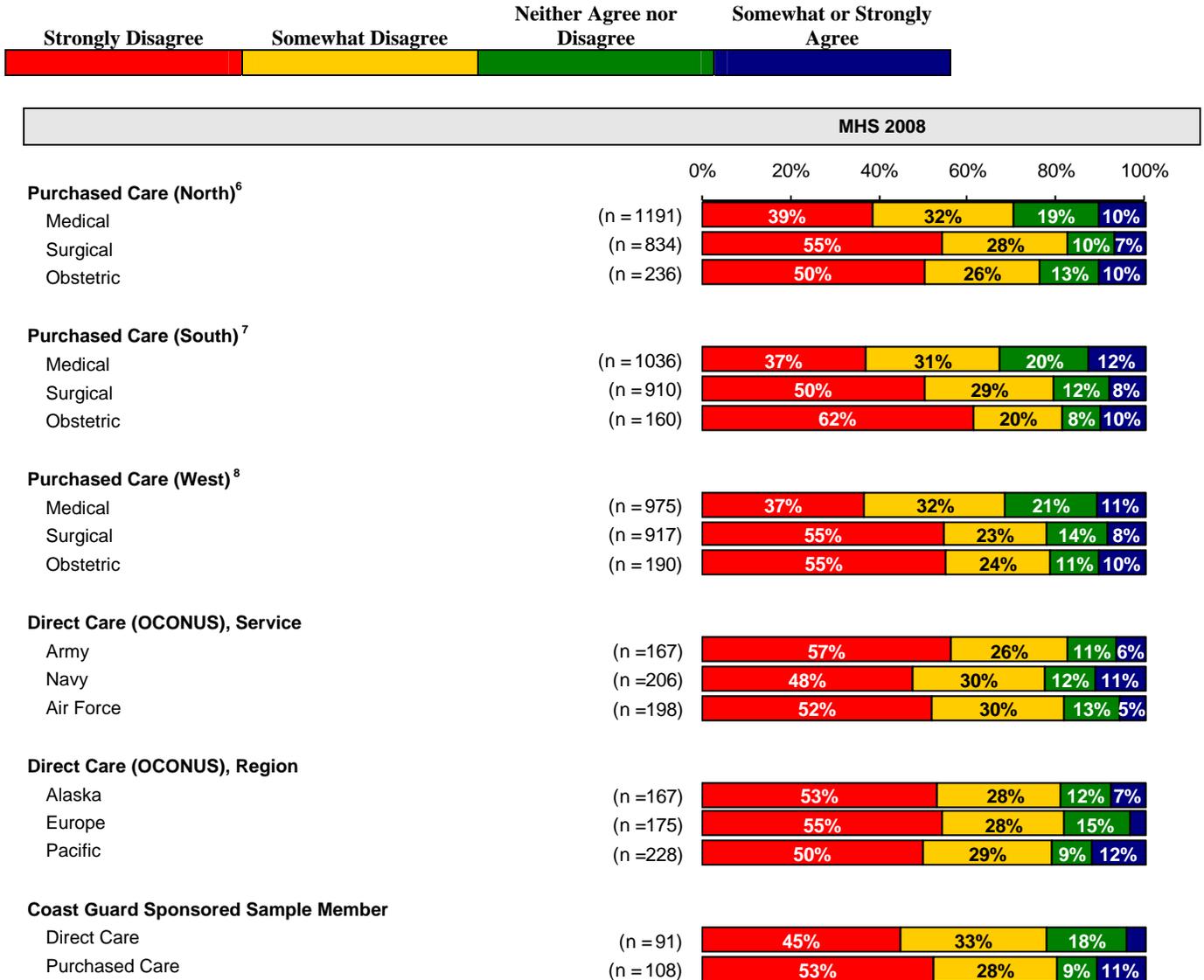
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs (continued)



- Among those receiving Medical services, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).
- Among those receiving Obstetrics services, Direct Care beneficiaries were significantly less likely than Purchased Care beneficiaries to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$). Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).

Trust Question

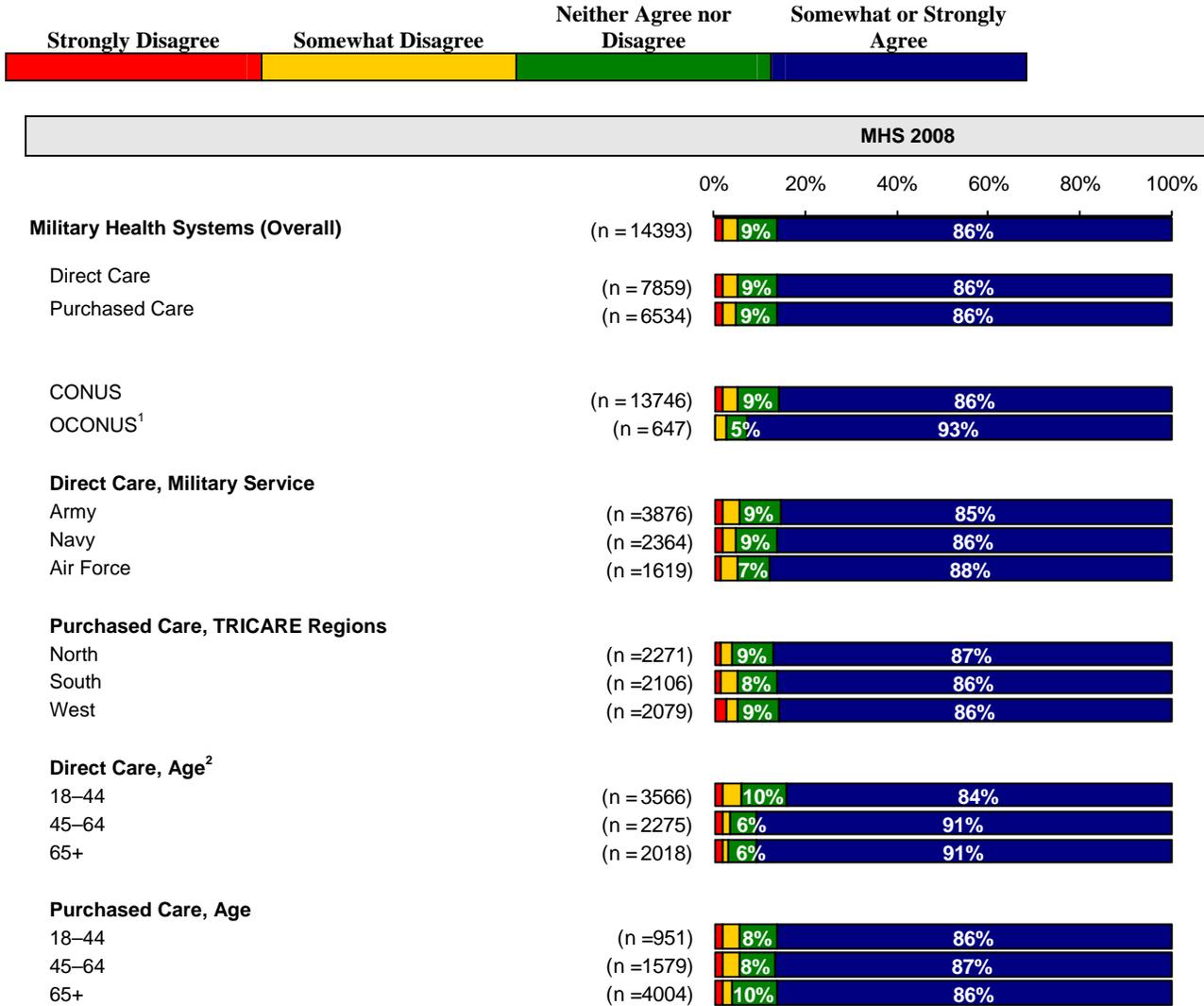
Sometimes your health care provider cared more about what was convenient for him or her than about your medical needs (continued)



- Among Purchased Care beneficiaries in the North, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).
- Among Purchased Care beneficiaries in the South, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$). Also, those receiving Obstetrics services were significantly more likely than those receiving Medical or Surgical services to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).
- Among Purchased Care beneficiaries in the West, those receiving Medical services were significantly less likely than those receiving Obstetrics or Surgical services to report that they strongly disagreed that their health care provider cared more about what was convenient for him or her than about their medical needs ($p < .05$).

Trust Question

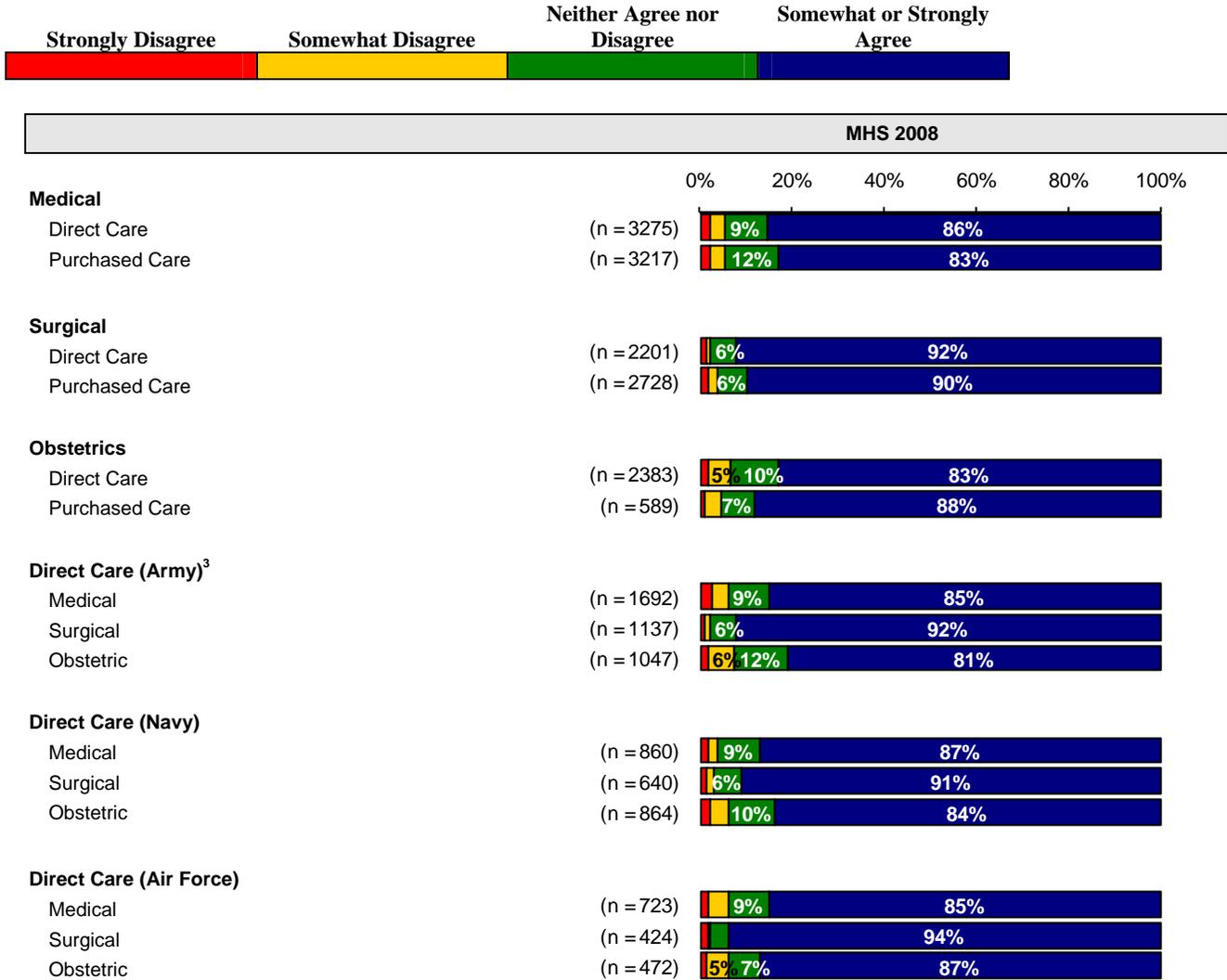
Your health care provider was always thoughtful and thorough



- Overall, MHS beneficiaries receiving care OCONUS were significantly more likely than beneficiaries receiving care in CONUS to agree that their health care provider was always thoughtful and thorough ($p < .05$).
- Among Direct Care beneficiaries, those age 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

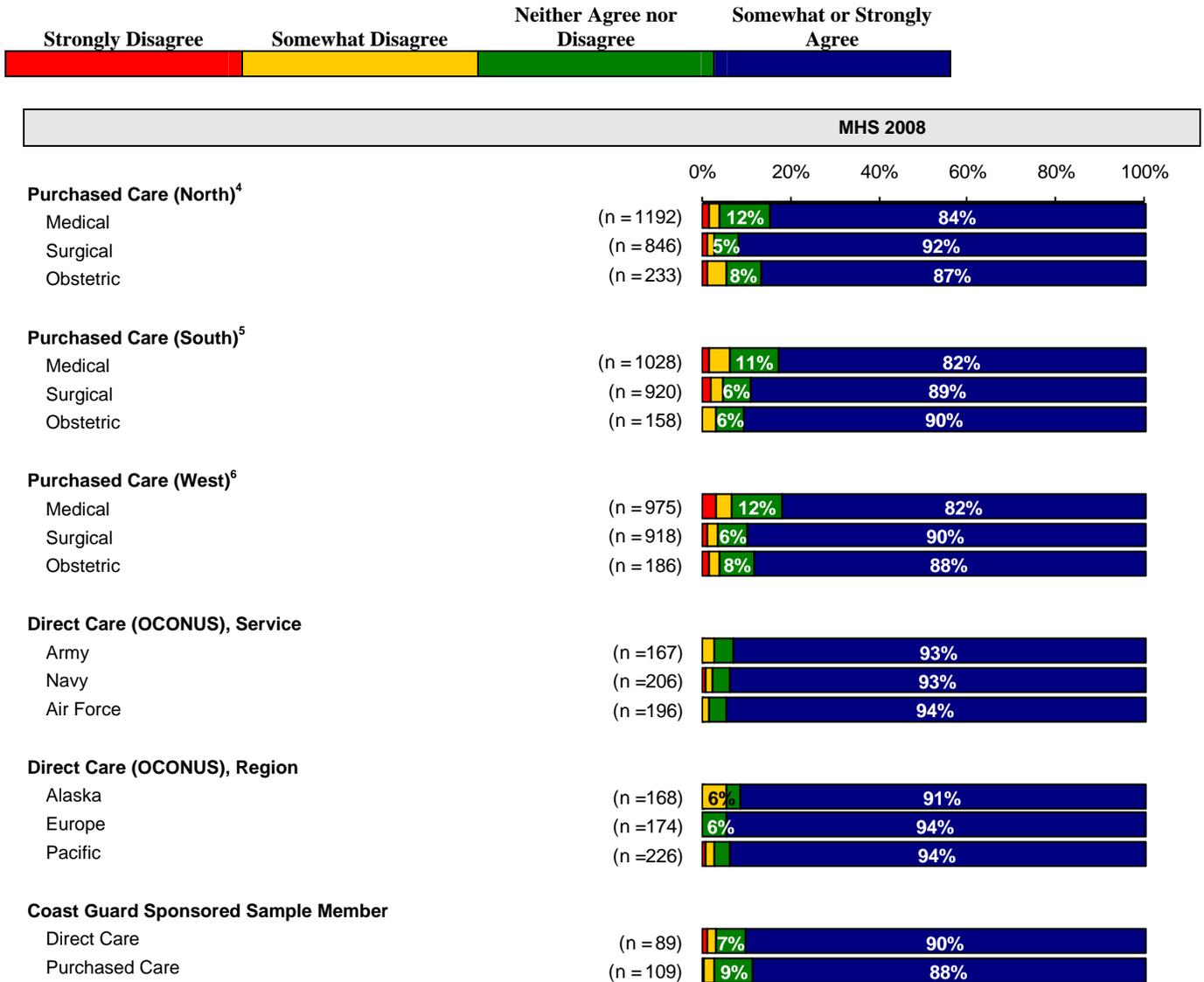
Your health care provider was always thoughtful and thorough (continued)



3. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving either Obstetrics or Medical services to agree that their health care provider was always thoughtful and thorough ($p < .05$). Also, those receiving Obstetrics services were significantly less likely than those receiving either Surgical or Medical services to agree that their health care provider was always thoughtful and thorough ($p < .05$).

Trust Question

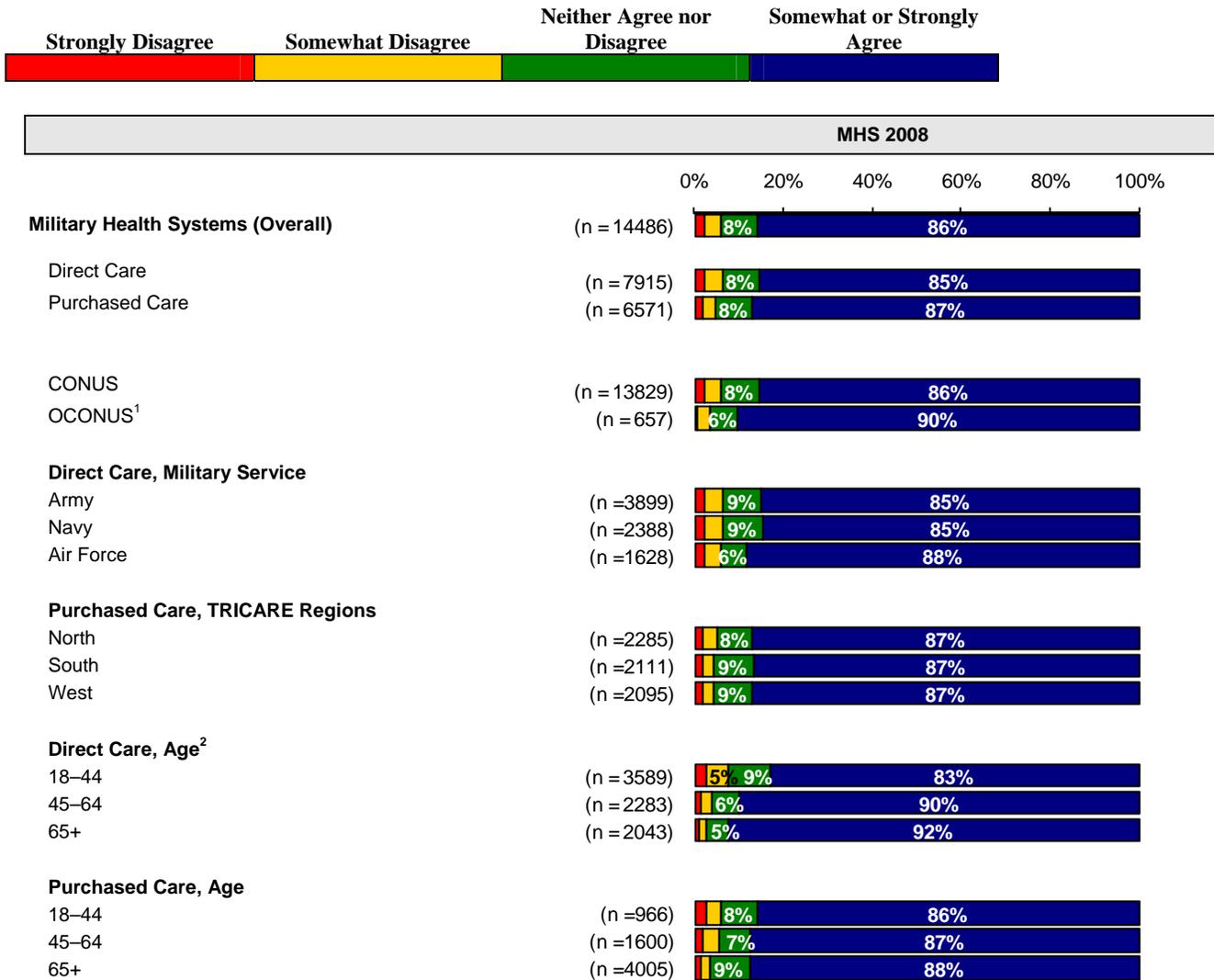
Your health care provider was always thoughtful and thorough (continued)



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

Trust Question

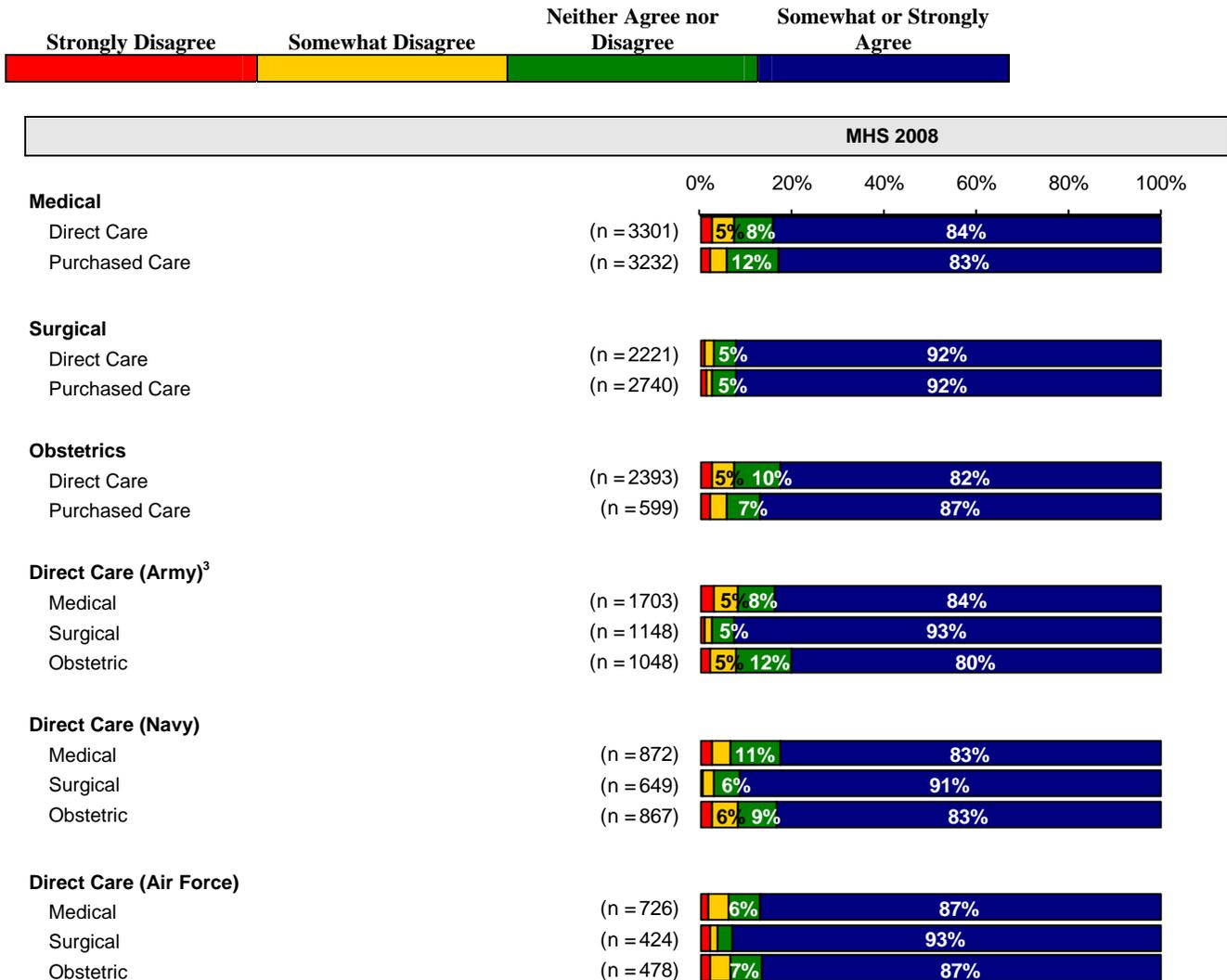
You completely trusted your health care providers decisions about which medical treatments were best for you



- Overall, MHS beneficiaries receiving care OCONUS were significantly more likely than beneficiaries receiving care in CONUS to agree that they completely trusted their health care provider's decisions about which medical treatment was best ($p < .05$).
- Among Direct Care, those age 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 treatment was best ($p < .05$). Also, those age 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 treatment was best ($p < .05$).

Trust Question

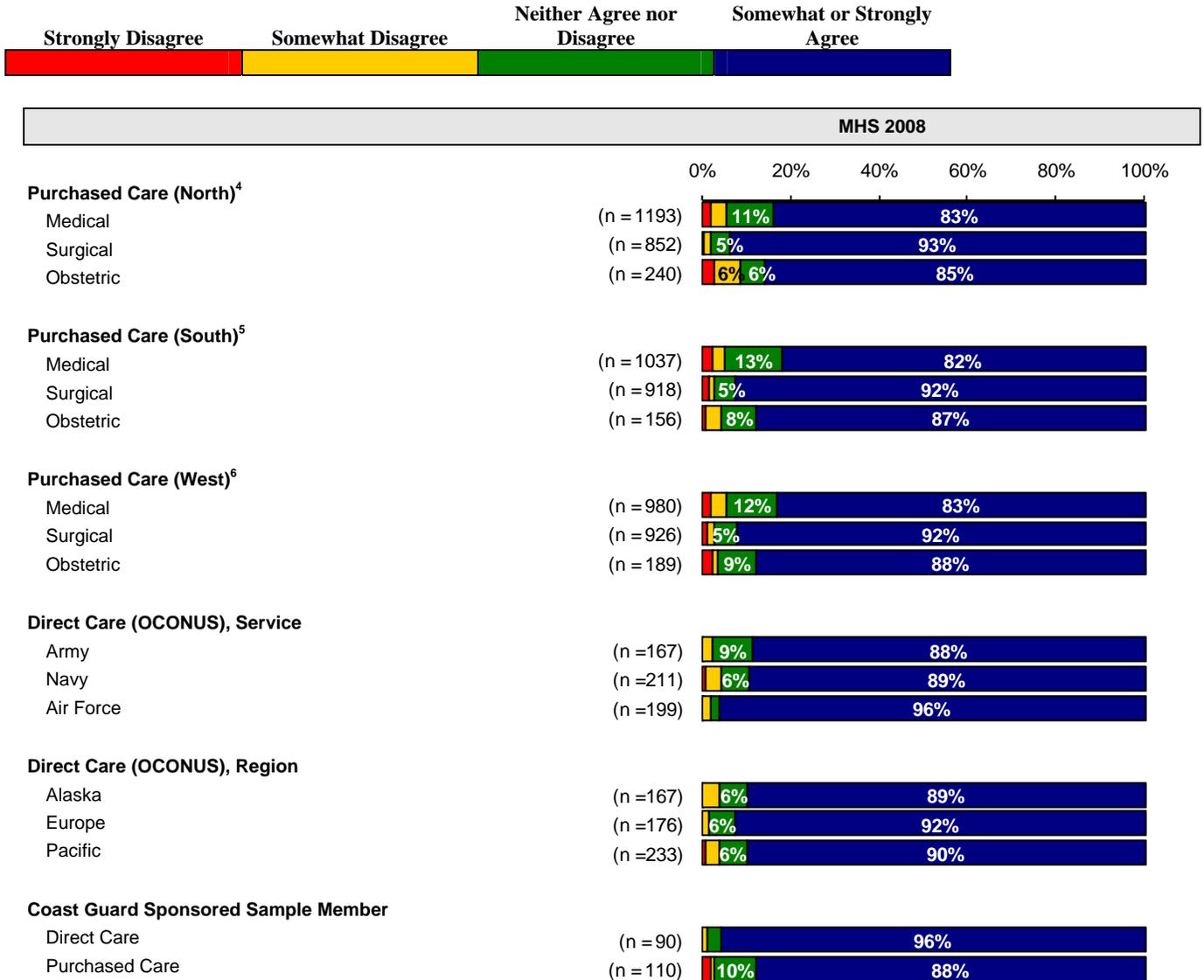
You completely trusted your health care providers decisions about which medical treatments were best for you (continued)



3. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were more likely than those receiving Medical or Obstetrics services to agree that they completely trusted their health care provider's decisions about which medical treatment was best ($p < .05$). Also, those receiving Obstetrics services were less likely than those receiving Medical or Surgical services to agree that they completely trusted their health care provider's decisions about which medical treatment was best ($p < .05$).

Trust Question

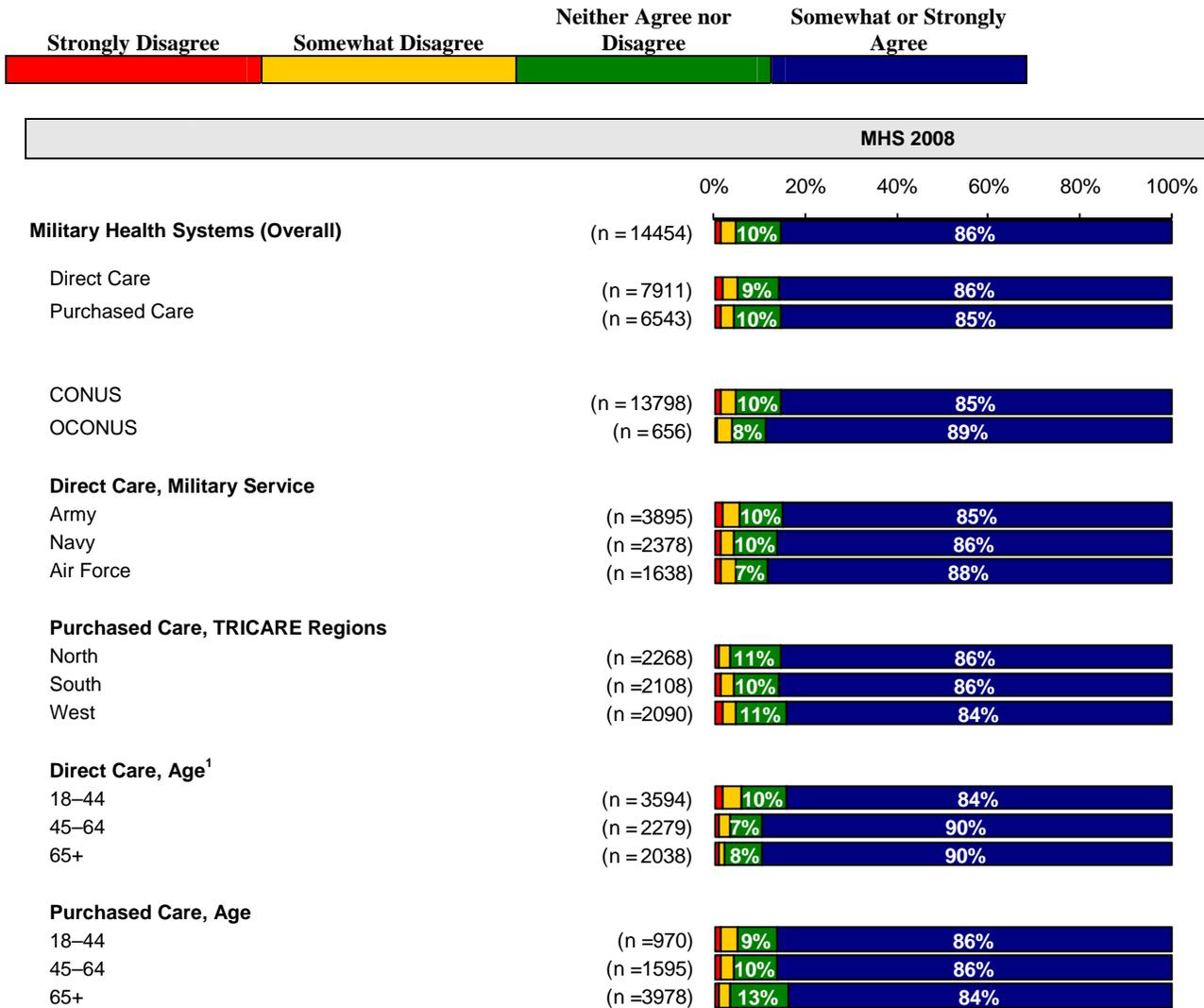
You completely trusted your health care providers decisions about which medical treatments were best for you (continued)



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

Trust Question

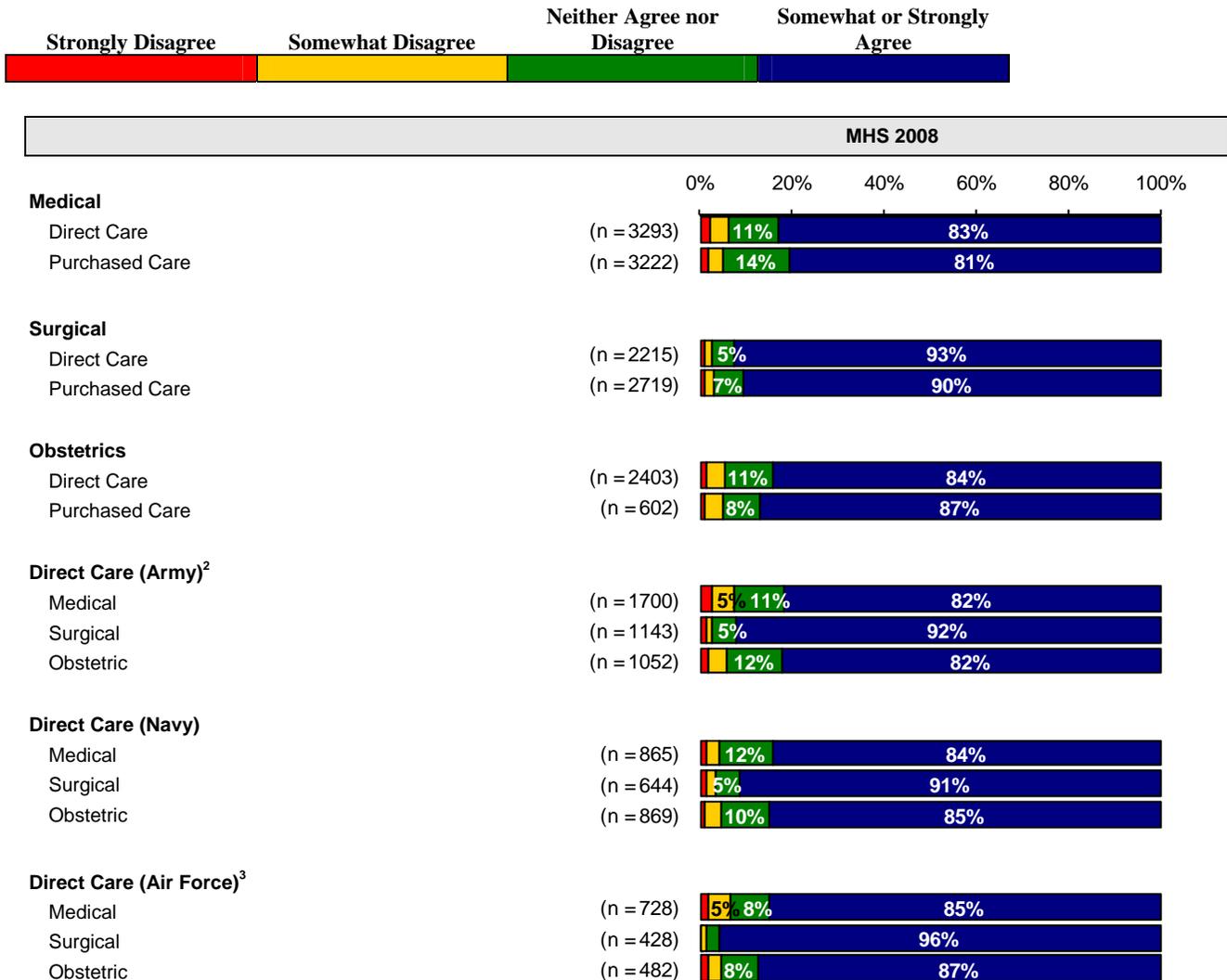
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition



1. Among Direct Care beneficiaries, those aged 18–44 were significantly less likely than those in other age groups to agree that their provider was completely honest about all of 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)

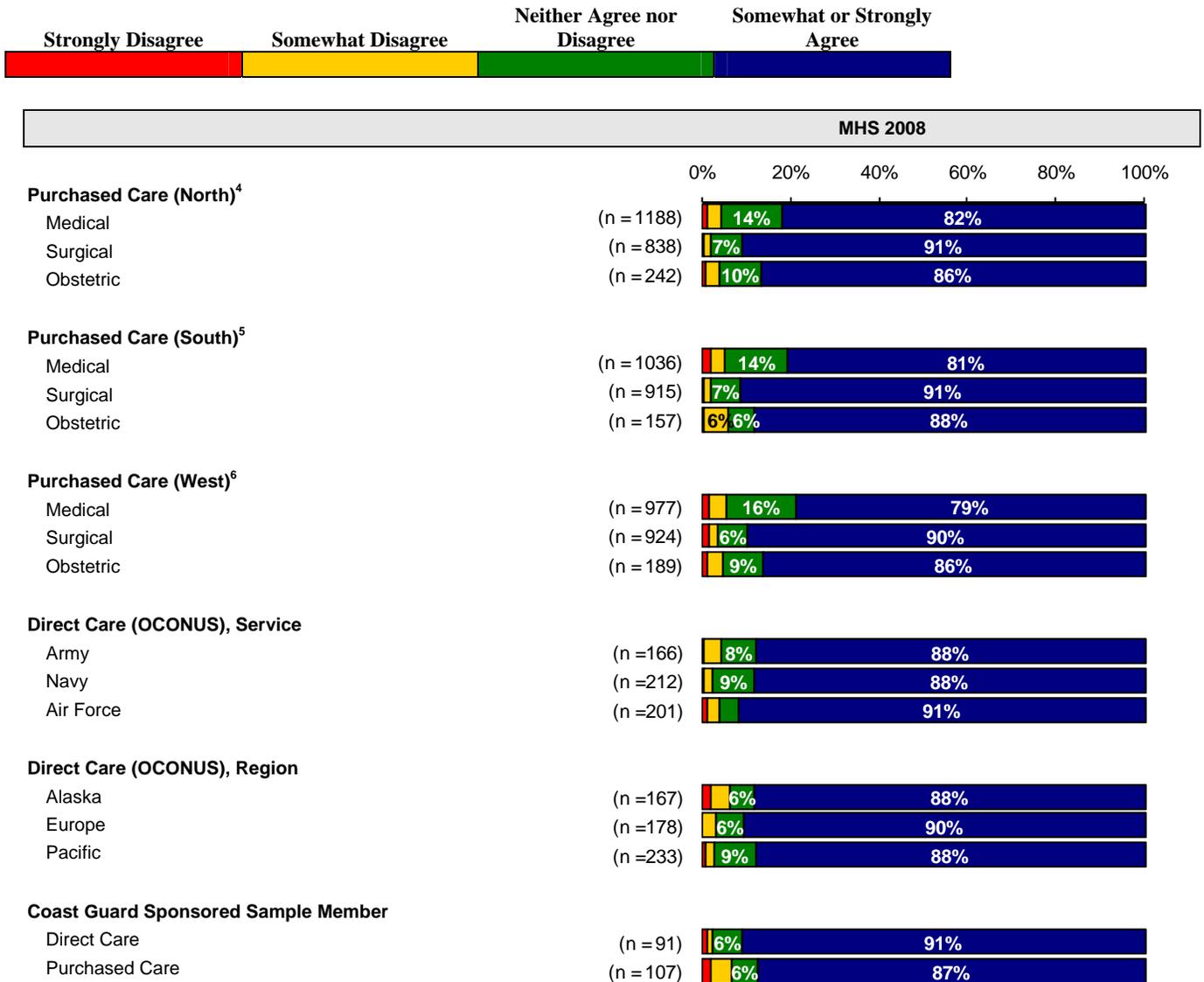


2. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to agree that their provider was completely honest about all of the different treatment options available ($p < .05$).

3. Among Direct Care beneficiaries in Air Force facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to agree that their provider was completely honest about all of the different treatment options available ($p < .05$).

Trust Question

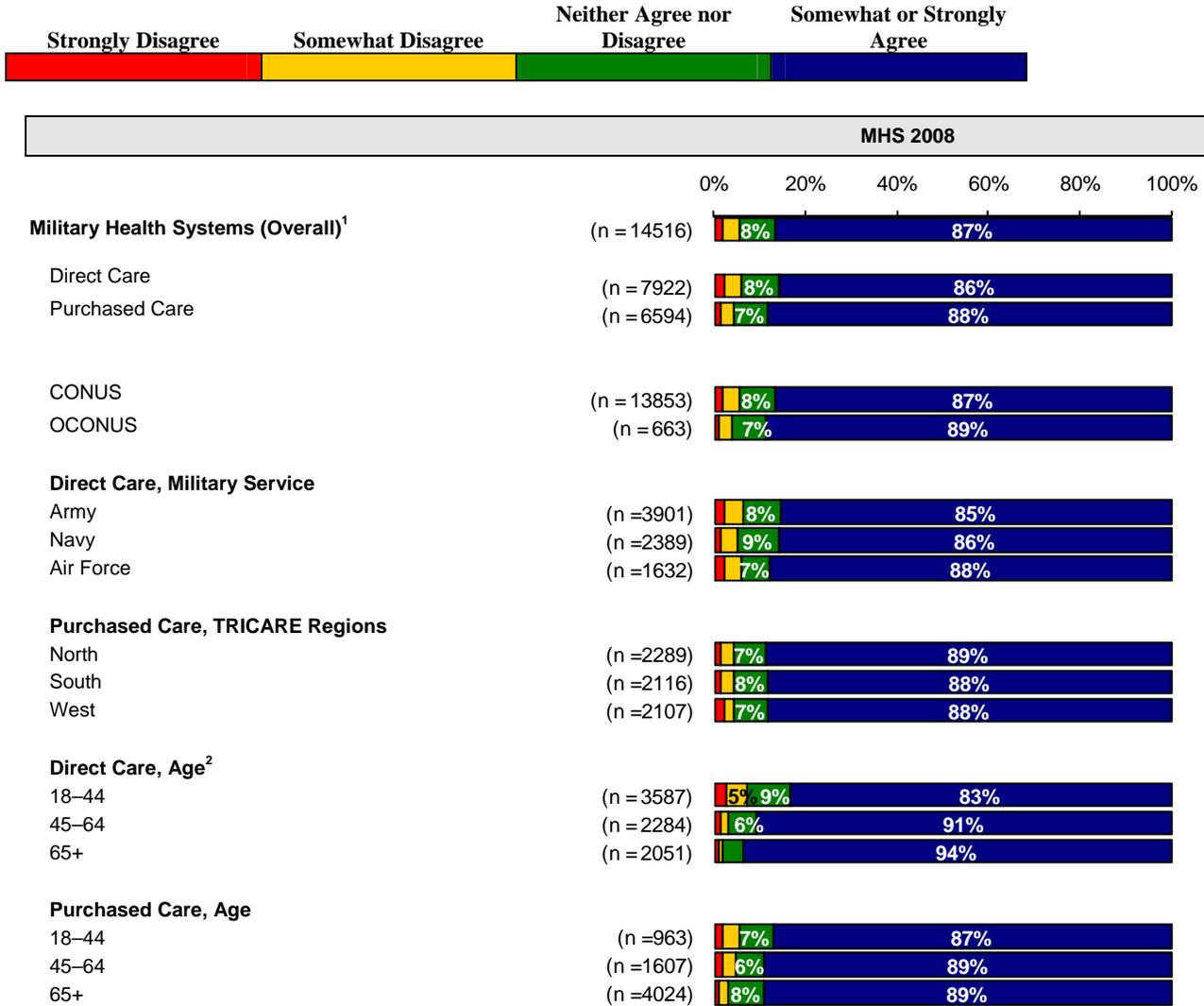
Your health care provider was completely honest in telling you about all of the different treatment options available for your condition (continued)



- Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Medical services to agree that their provider was completely honest about all of 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 either Obstetrics or Surgical services to agree that their provider was completely honest about all of 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 either Obstetrics or Surgical services to agree that their provider was completely honest about all of the different treatment options available ($p < .05$).

Trust Question

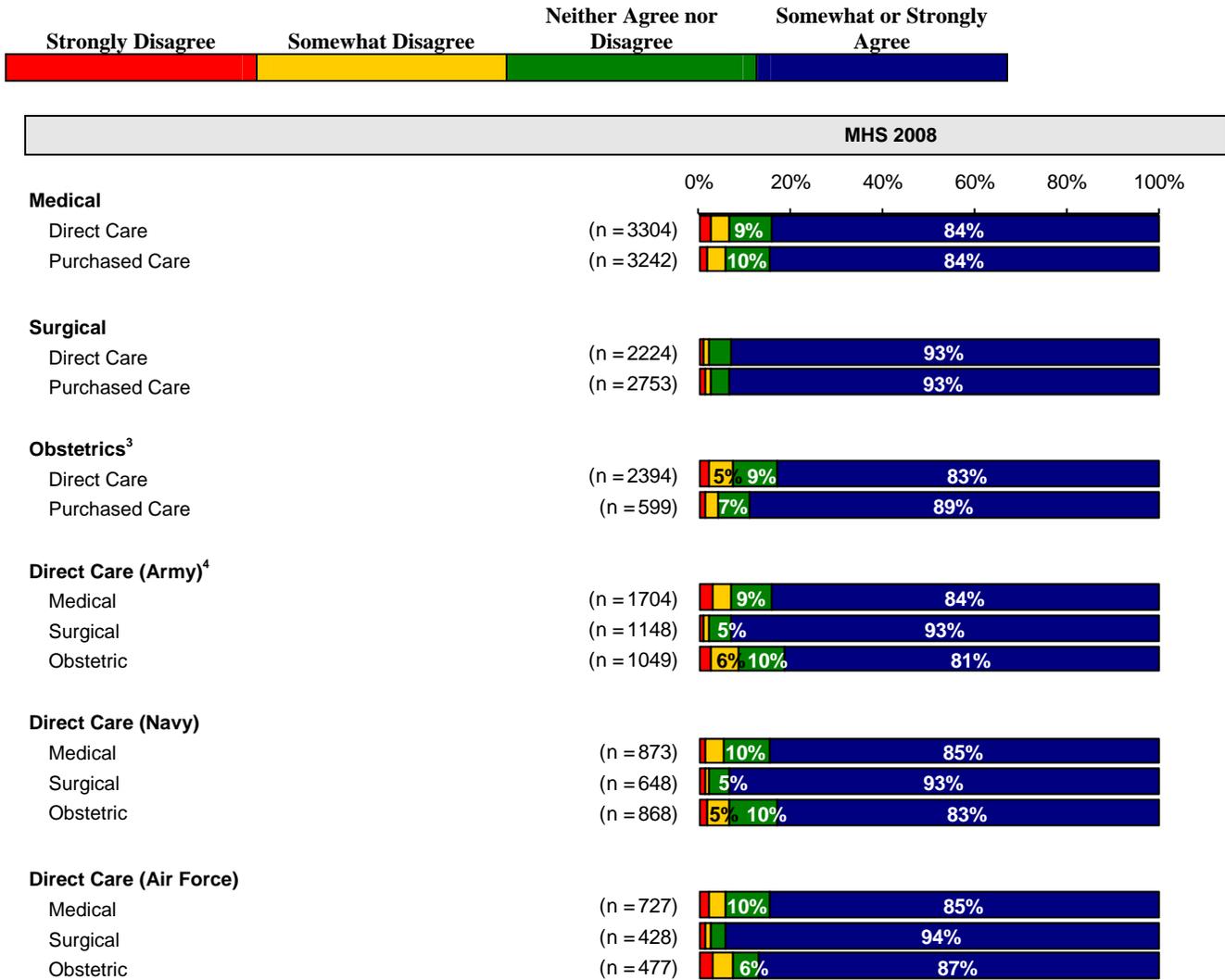
All in all, you had complete trust in your health care provider



- Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to agree that they had complete trust in their health care provider ($p < .05$).
- Among Direct Care beneficiaries, those age 18–44 were significantly less likely than those in other age groups to agree that they had complete trust in their health care provider ($p < .05$). Also, those age 65+ were significantly more likely than those in other age groups to agree that they had complete trust in their health care provider ($p < .05$).

Trust Question

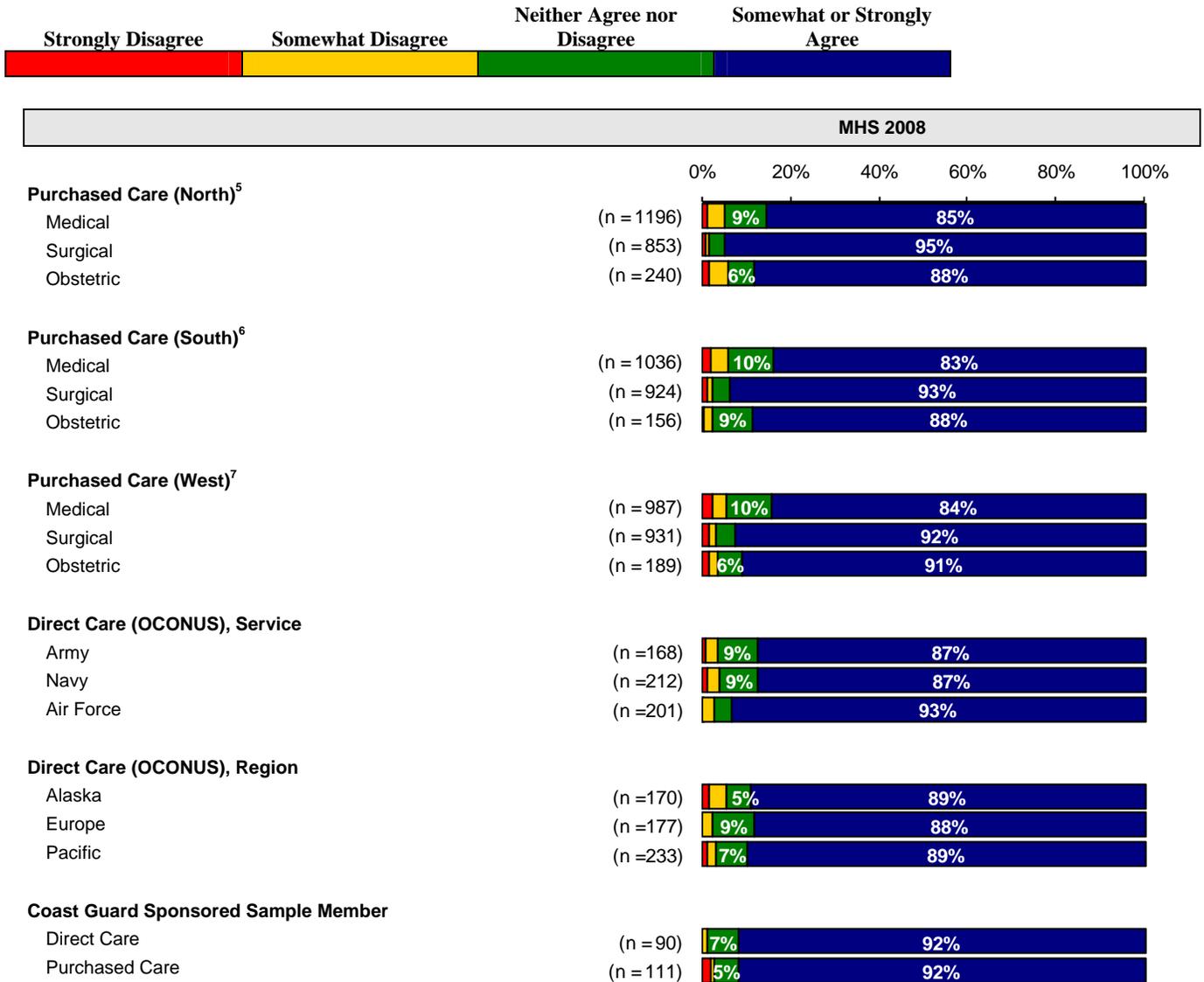
All in all, you had complete trust in your health care provider (continued)



- Among beneficiaries receiving Obstetrics services, those in Purchased Care were significantly more likely than those in Direct Care to agree that they had complete trust in their health care provider ($p < .05$).
- Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving either Medical or Obstetrics services to agree that they had complete trust in their health care provider ($p < .05$).

Trust Question

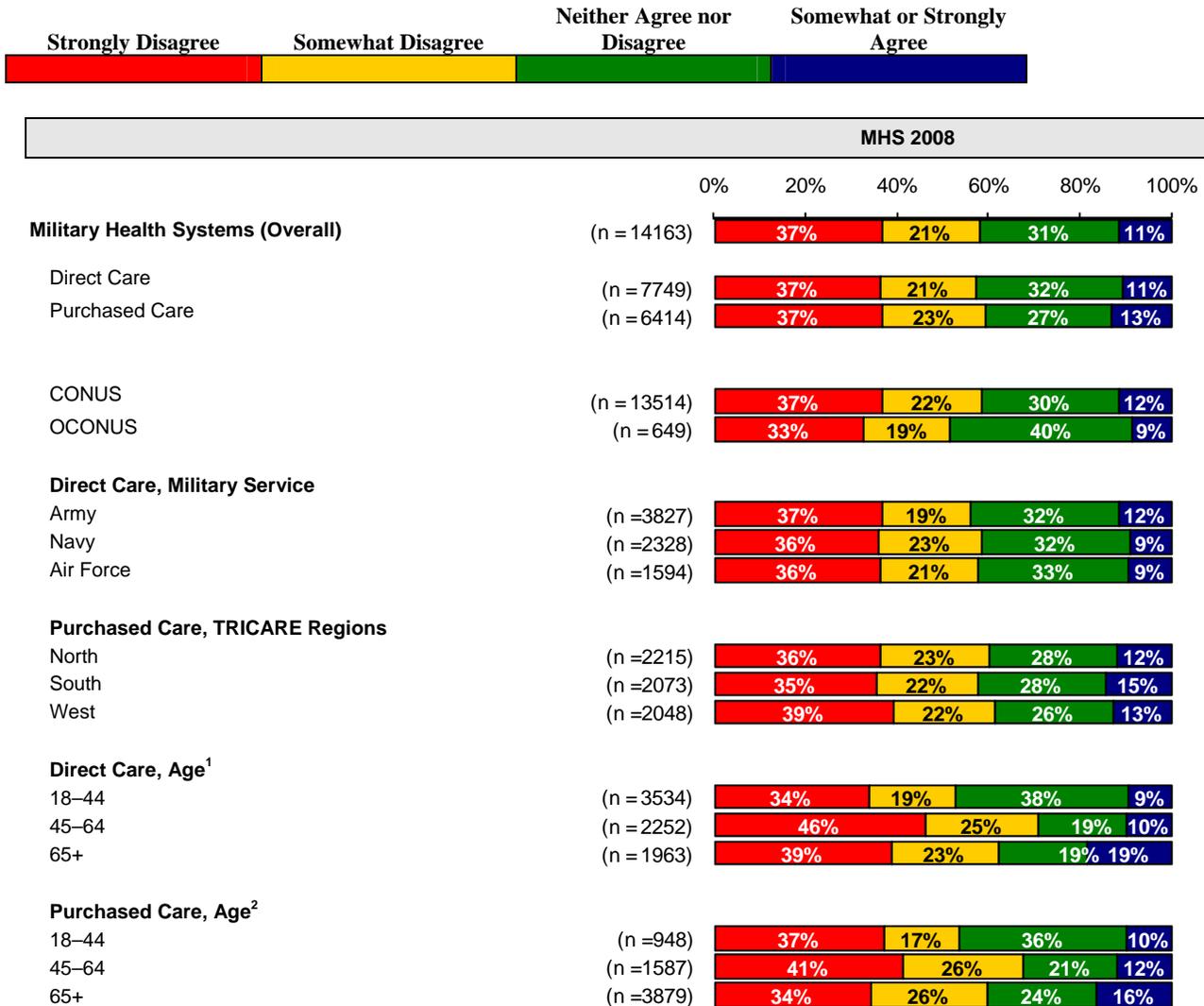
All in all, you had complete trust in your health care provider (continued)



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

Trust Question

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

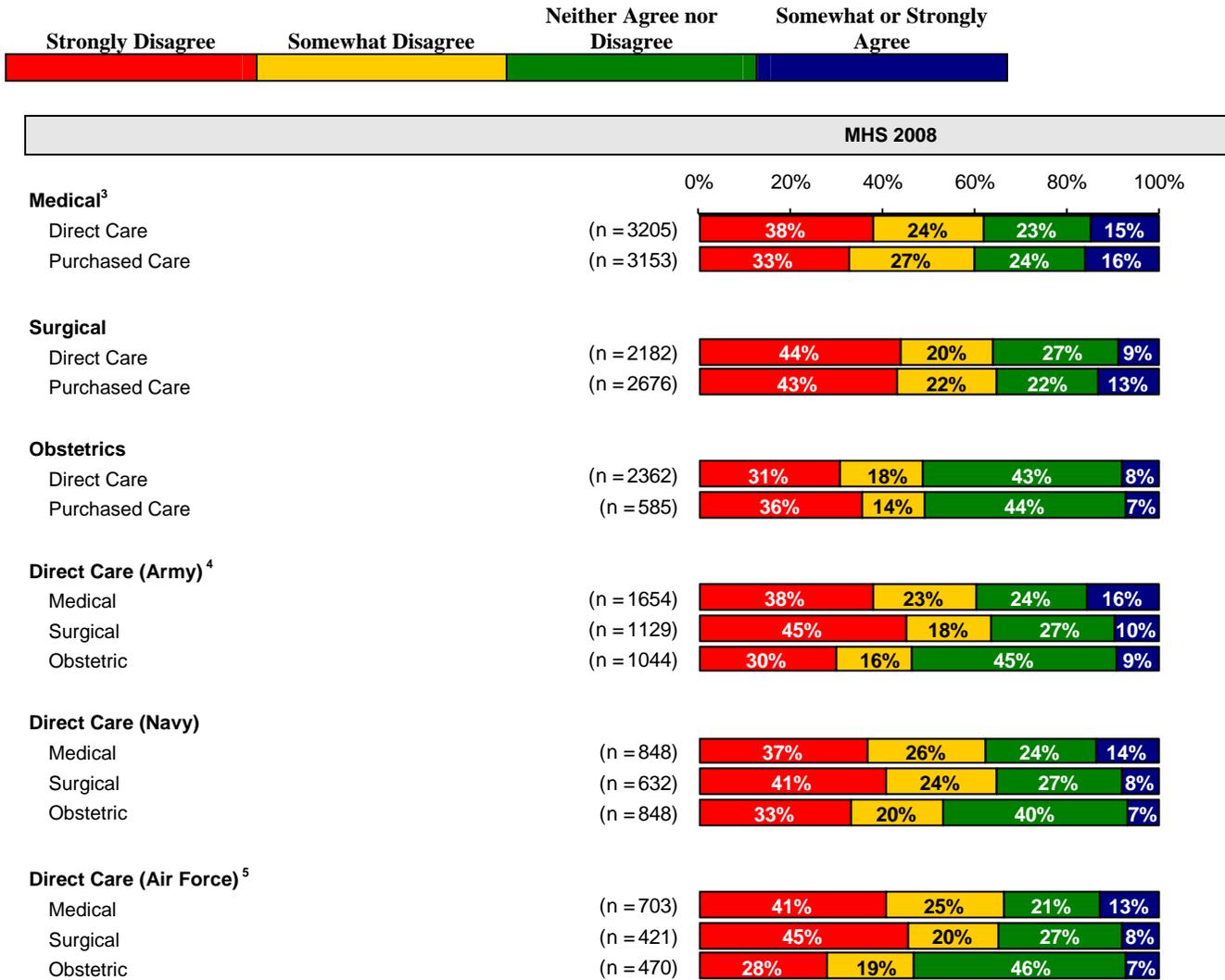


1. Among Direct Care beneficiaries, those aged 18-44 were significantly less likely than those in other age groups to report that they strongly disagreed with the statement “Your health care provider did not refer you to a specialist when needed.” Also, those aged 45-64 were significantly more likely than those in other age groups to report that they strongly disagreed with the statement “Your health care provider did not refer you to a specialist when needed.”

2. Among Purchased Care beneficiaries, those aged 45-64 were significantly more likely than those aged 65+ to report that they strongly disagreed with the statement “Your health care provider did not refer you to a specialist when needed.”

Trust Question

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



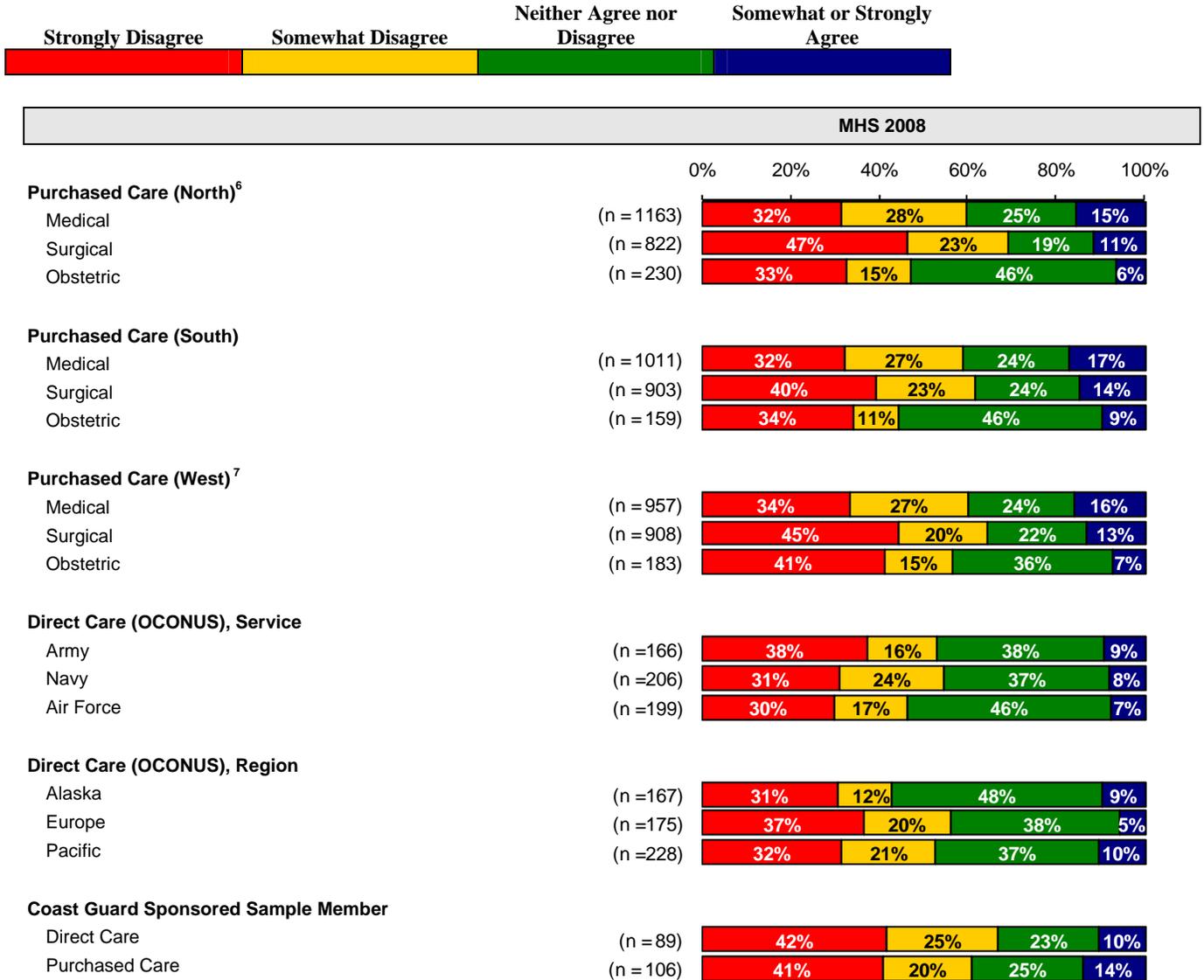
3. Among those receiving Medical services, Direct Care beneficiaries were significantly more likely than Purchased Care beneficiaries to report that they strongly disagreed with the statement "Your health care provider did not refer you to a specialist when needed."

4. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that they strongly disagreed with the statement "Your health care provider did not refer you to a specialist when needed." Also, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they strongly disagreed with the statement "Your health care provider did not refer you to a specialist when needed."

5. Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Surgical or Medical services to report that they strongly disagreed with the statement "Your health care provider did not refer you to a specialist when needed."

Trust Question

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

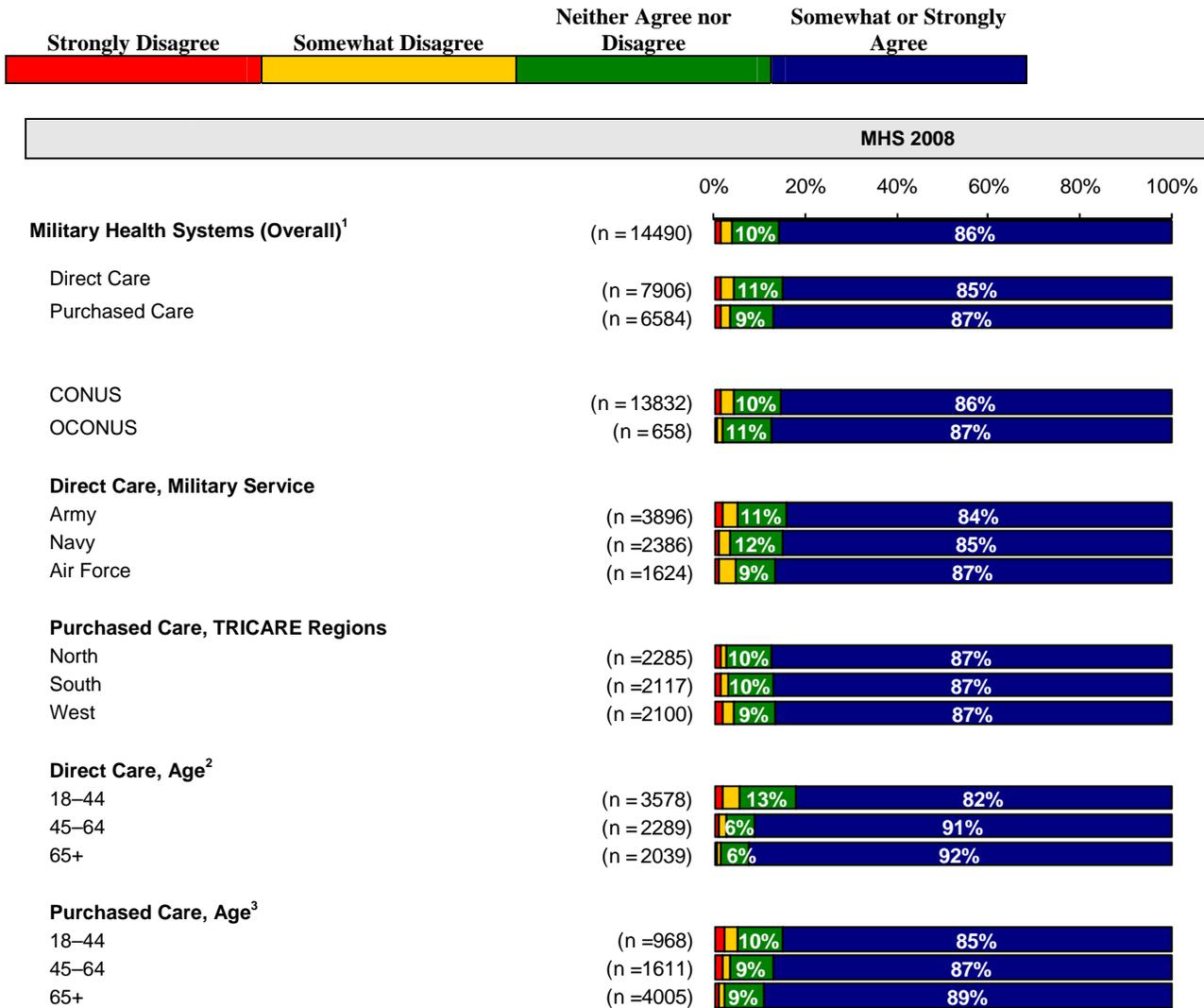


6. Among Purchased Care beneficiaries in the North, those receiving Surgical services were significantly more likely than those receiving Obstetrics or Medical services to report that they strongly disagreed with the statement “Your health care provider did not refer you to a specialist when needed.”

7. Among Purchased Care beneficiaries in the West, those receiving Surgical services were significantly more likely than those receiving Medical services to report that they strongly disagreed with the statement “Your health care provider did not refer you to a specialist when needed.”

Trust Question

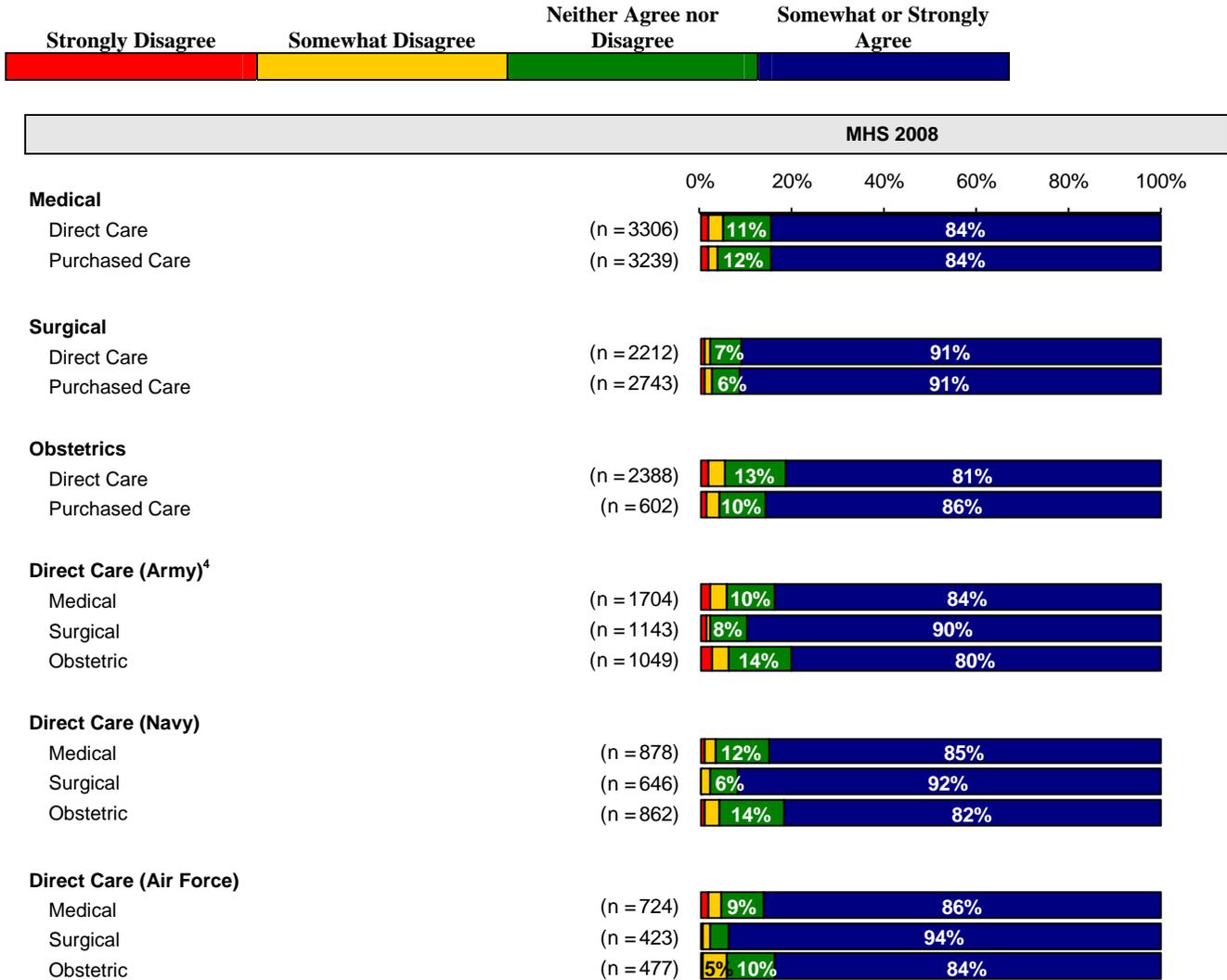
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems



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

Trust Question

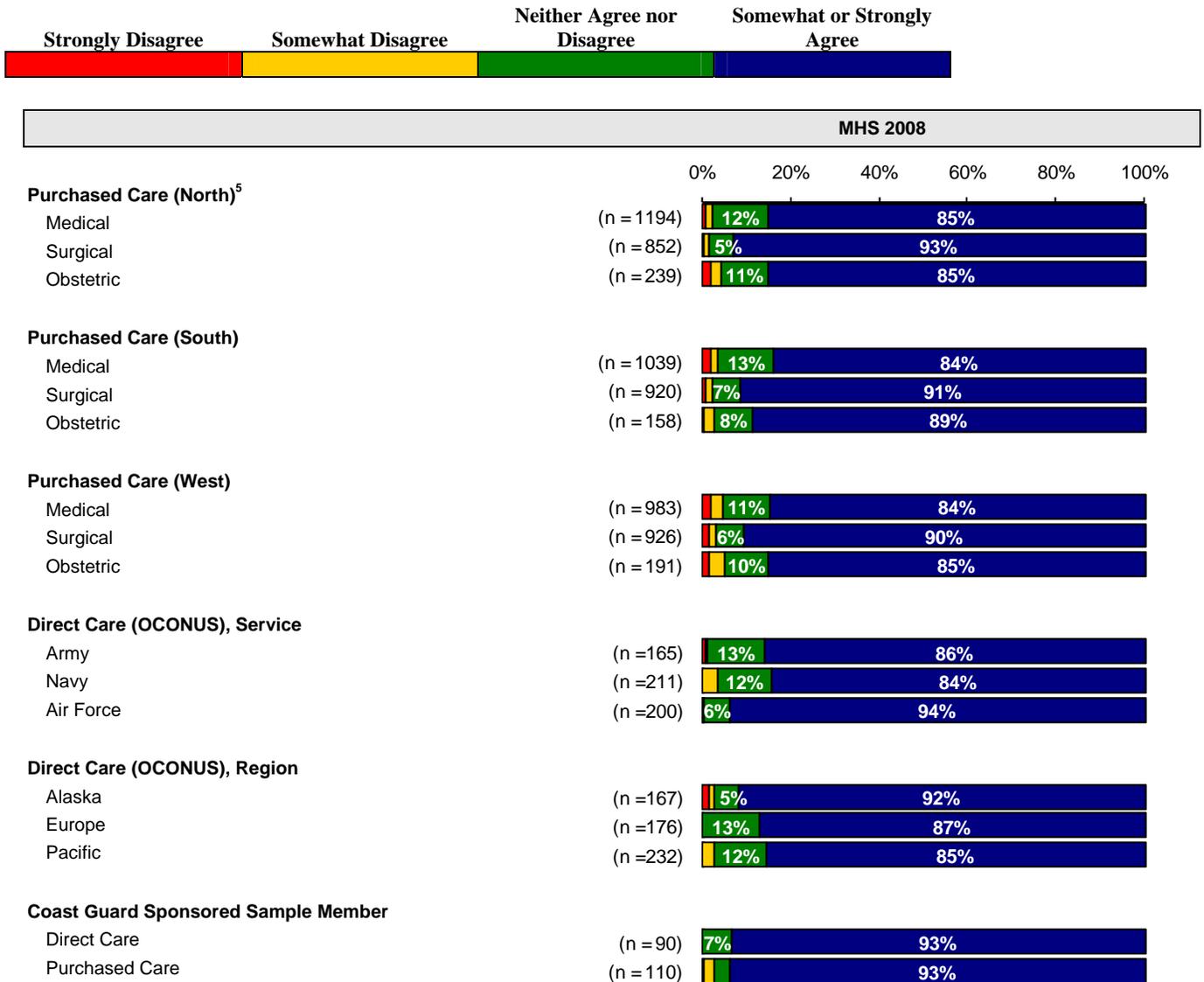
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems (continued)



4. Among Direct Care beneficiaries in Army facilities, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to agree that they trusted their health care provider to put their medical needs above all other considerations when treating their medical problems ($p < .05$).

Trust Question

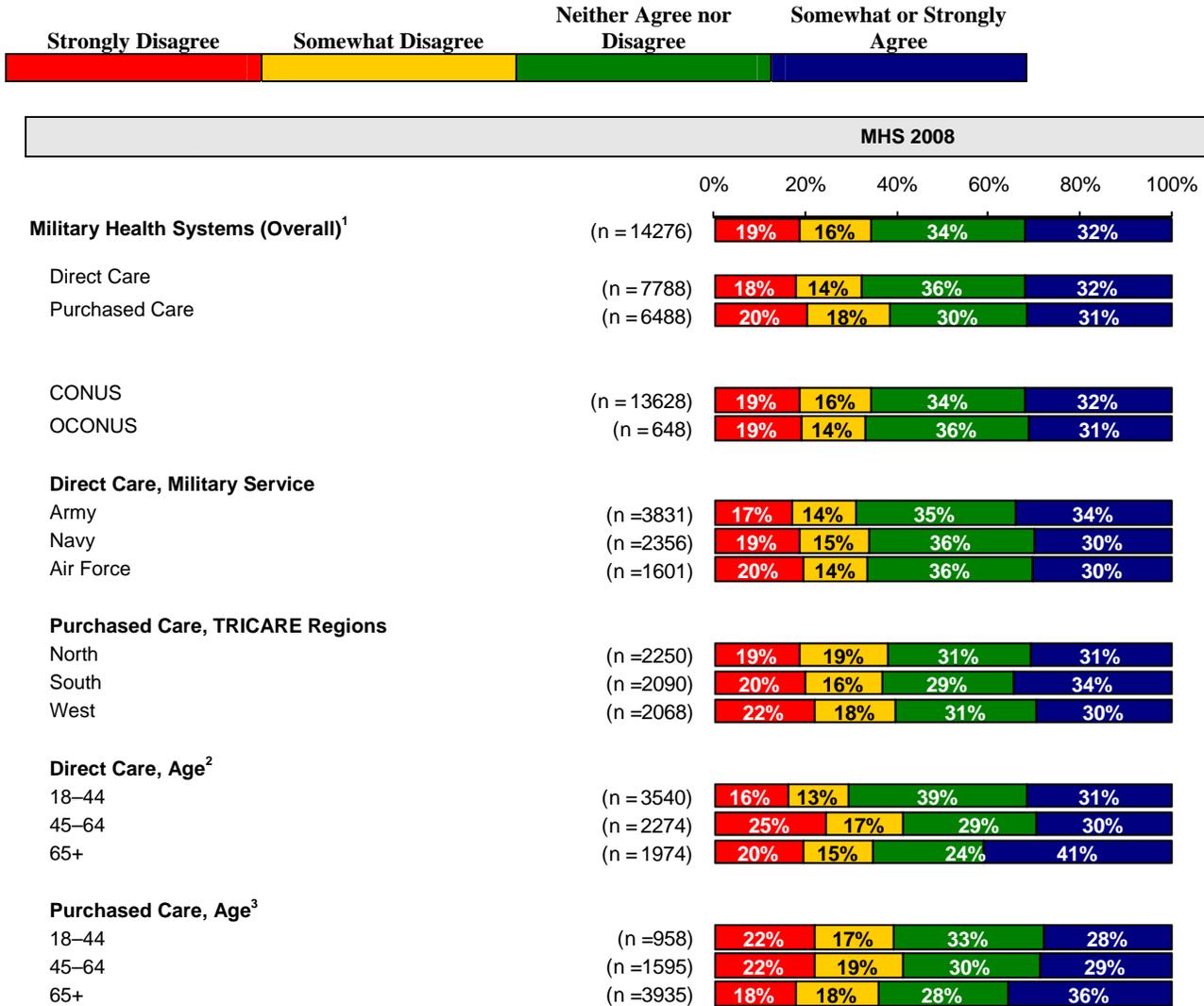
You trusted your health care provider to put your medical needs above all other considerations when treating your medical problems (continued)



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

Trust Question

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



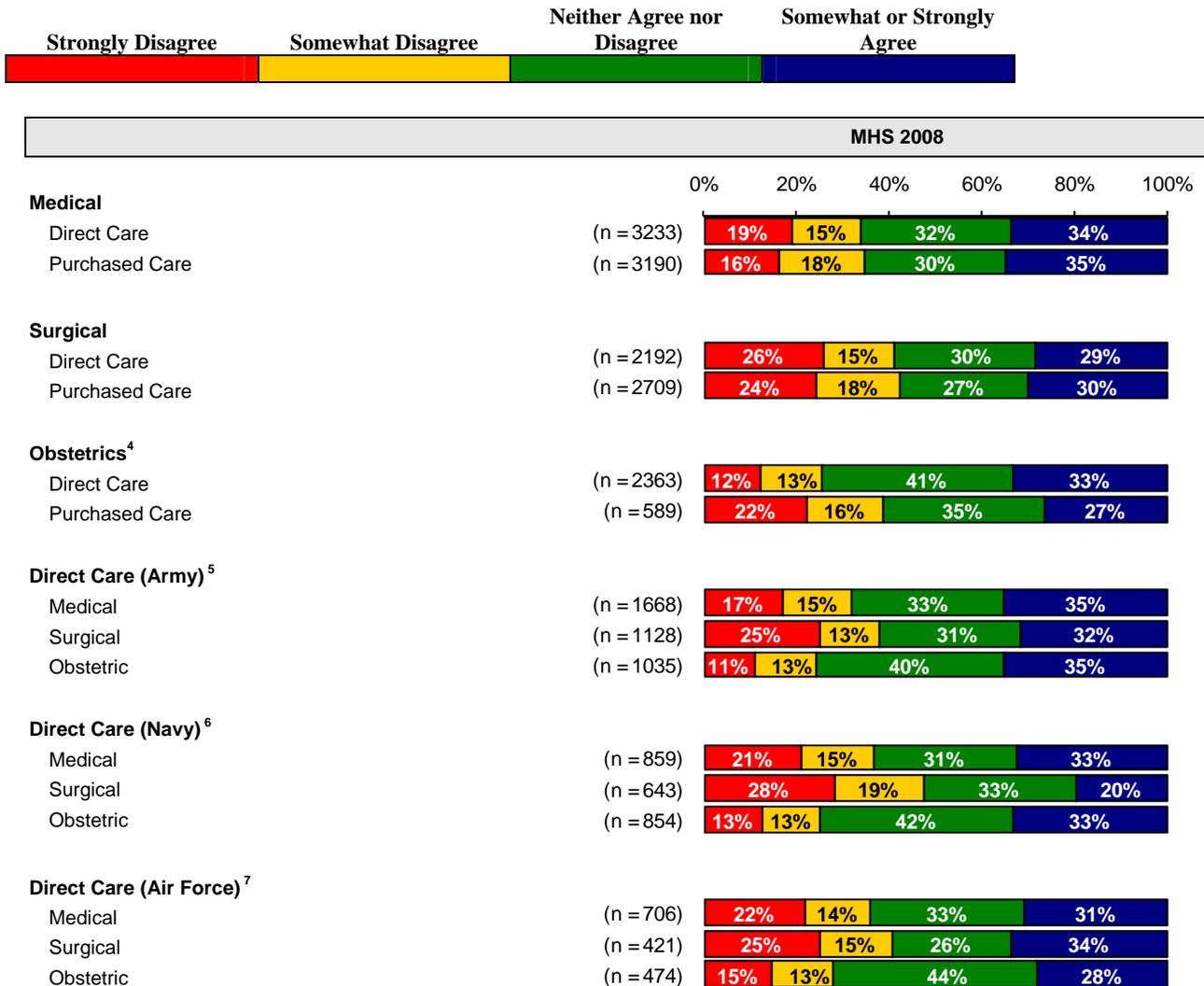
1. Overall, Purchased Care beneficiaries were significantly more likely than Direct Care beneficiaries to report that they strongly disagreed with the statement “You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.”

2. Among Direct Care beneficiaries, those aged 18-44 were significantly less likely than those in other age groups to report that they strongly disagreed with the statement “You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.” Also, those aged 45-64 were significantly more likely than those in other age groups to report that they strongly disagreed with the statement “You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.”

3. Among Purchased Care beneficiaries, those aged 65+ were significantly less likely than those in other age groups to report that they strongly disagreed with the statement “You think your health care provider was strongly influenced by health plan rules when making decisions about your medical care.”

Trust Question

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



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

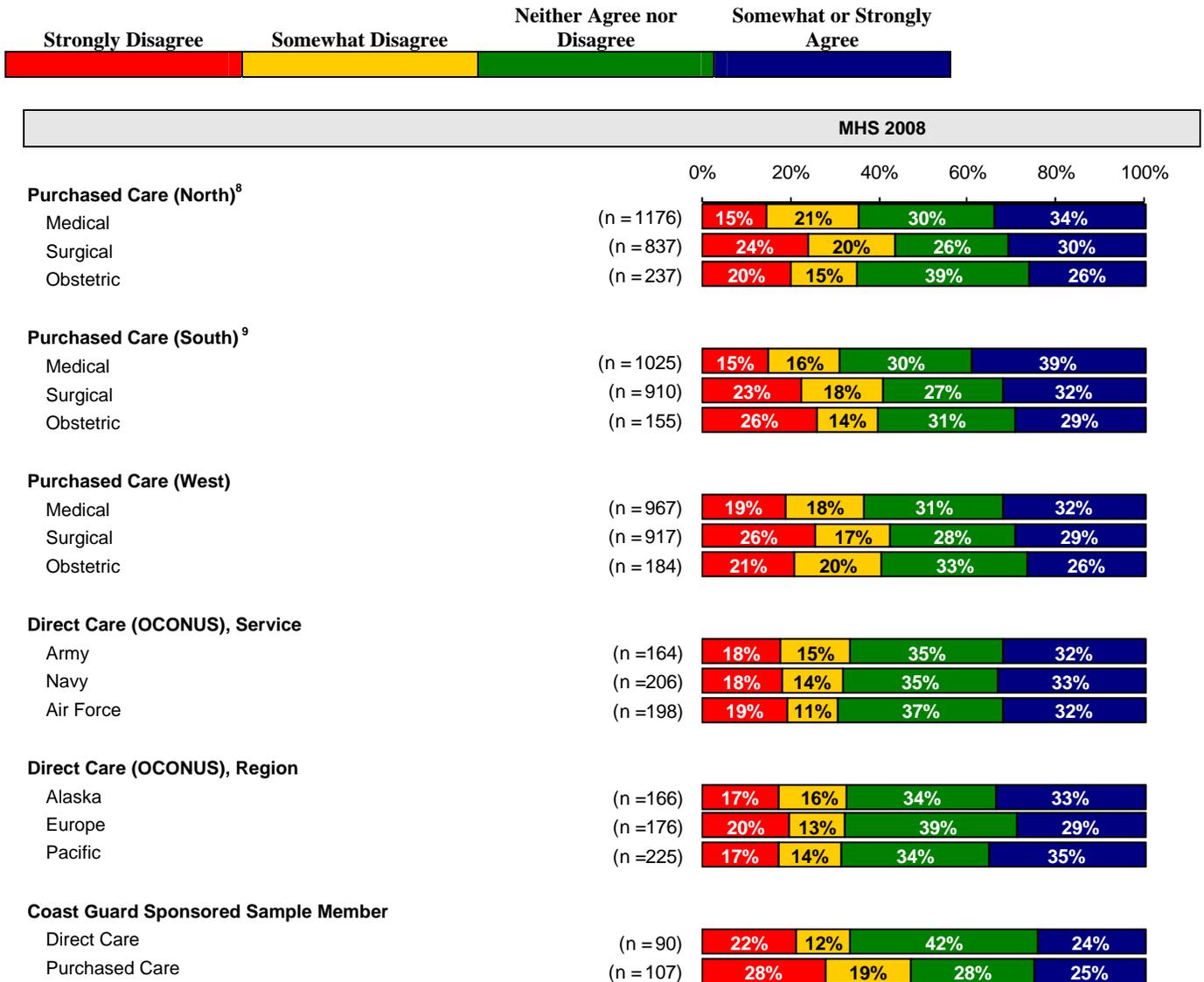
5. Among Direct Care beneficiaries in Army facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.” Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.”

6. Among Direct Care beneficiaries in Navy facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.” Also, those receiving Surgical services were significantly more likely than those receiving Medical or Obstetrics services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.”

7. Among Direct Care beneficiaries in Air Force facilities, those receiving Obstetrics services were significantly less likely than those receiving Medical or Surgical services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.”

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 Surgical services were significantly more likely than those receiving Medical services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.”

9. Among Purchased Care beneficiaries in the South region, those receiving Medical services were significantly less likely than those receiving Surgical or Obstetrics services to report that they strongly disagreed with the statement “You think your HC provider was strongly influenced by health plan rules when making decisions about your medical care.”

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

Survey Methodology and Results for the 2008 TRISS Mail Survey

TRISS Mail Survey Sample

The survey population for the 2008 TRICARE Inpatient Satisfaction Survey (TRISS) consisted of TRICARE beneficiaries who received inpatient hospital care from July 1, 2008, through September 30, 2008, 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 2008. 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 41,254 beneficiaries included in the Mail Survey sample, of whom 27,167 (65.9%) were DC beneficiaries and 14,087 (34.1%) 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 2008 Inpatients

Table A1. Sample Distribution for July–September 2008 Direct Care Mail Survey

	July	August	Sept	Total
Age Group				
18–44	5,934	6,359	6,653	18,946
45–64	1,582	1,571	1,792	4,945
65+	916	924	1,436	3,276
Total	8,432	8,854	9,881	27,167
Product Type				
Medical	3,033	3,148	3,690	9,871
Surgical	2,094	2,194	2,334	6,622
Childbirth	3,305	3,512	3,857	10,674
Total	8,432	8,854	9,881	27,167
Military Service				
Army	4,401	4,715	5,134	14,250
Navy	2,615	2,673	3,027	8,315
Air Force	1,416	1,466	1,720	4,602
Total	8,432	8,854	9,881	27,167
TRICARE Region				
North	2,570	2,655	3,011	8,236
South	2,197	2,280	2,473	6,950
West	2,722	2,890	3,327	8,939
OCONUS	943	1,029	1,070	3,042
Total	8,432	8,854	9,881	27,167

Table A2. Sample Distribution for July–September 2008 Purchased Care Mail Survey

	July	August	Sept	Total
Age Group				
18–44	1,609	1,632	1,481	4,722
45–64	1,216	1,137	849	3,202
65+	2,201	2,165	1,797	6,363
Total	5,026	4,934	4,127	14,087
Product Type				
Medical	2,398	2,279	1,892	6,569
Surgical	1,758	1,749	1,324	4,831
Childbirth	870	906	911	2,687
Total	5,026	4,934	4,127	14,087
TRICARE Region				
North	1,803	1,775	1,438	5,016
South	1,572	1,550	1,305	4,427
West	1,574	1,537	1,311	4,422
OCONUS	77	72	73	222
Total	5,026	4,934	4,127	14,087

Mail Survey Data Collection

Data collection for the 2008 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 2008 TRISS Mail Survey

Discharge Month	First Questionnaire	Second Questionnaire
Direct Care Sample		
July 2008	November 3, 2008	November 24, 2008
August 2008	December 1, 2008	December 29, 2008
September 2008	January 5, 2009	January 23, 2009
Purchased Care Sample		
July–September 2008	January 5, 2009	January 23, 2009

Data Collection Results

Data collection resulted in obtaining a response rate of 29.9% with the DC sample, 48.5% with the PC sample, and an overall response rate of 36.2%. 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 DC and PC 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 2008 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 for females (43.6%).
- **Response Rates, by Product Type.** For direct care, the response rate was identical for sample members who received medical services and surgical care (34.6% and 34.2 respectively) and lowest for obstetrics patients (22.9%). For purchased care, the response rate was highest for sample members who received surgical care (58.4%), followed by those who received medical (51.9%) and obstetrics (22.8%) services.
- **Response Rates, by Military Service.** For direct care, the response rate was highest for Air Force (36.4%), followed by the Navy (29.5%) and Army (28.1%).
- **Response Rates, by TRICARE Region.** For purchased care, the response rate was highest from sample members in the West Region (51.1%) followed closely by the South Region (49.5%). The response rate for OCONUS was the lowest at 38.0%.
- **Response Rates, by Beneficiary Category.** For both direct care and purchased care, the response rate was highest among retired military personnel at 56.5% and 63.8%, respectively.
- **Response Rates, by Discharge Month.** For both direct care and purchased care, the response rate for sample members discharged in July was highest at 33.1% for direct care and 49.2% for purchased care. Similarly, the lowest response rates by discharge month was August for both direct care (26.7%) and purchased care (47.7%).

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Table A4. Response Rates for the Direct Care Sample

Category	Number Eligible	Number Responded	Response Rate (%)
Total	27,099	8,104	29.91
Age Group			
18–34	15,239	2,692	17.67*
35–44	3,705	959	25.88*
45–64	4,938	2,330	47.19*
65+	3,217	2,123	65.99*
Gender			
Male	9,309	2,857	30.69
Female	17,790	5,247	29.49
Tricare Region			
North	8,221	2,625	31.93*
South	6,926	2,182	31.50*
West	8,913	2,712	30.43
OCONUS	3,039	585	19.25*
Product Line			
Medical	9,815	3,400	34.64*
Surgical	6,610	2,265	34.27*
Obstetrics	10,674	2,439	22.85*
Military Service Type			
Army	14,216	3,993	28.09*
Navy	8,301	2,445	29.45
Air Force	4,582	1,666	36.36*
Beneficiary Category			
Active Duty	8,531	1,098	12.87*
Retired	3,972	2,243	56.47*
Dependent of Active Duty	10,098	2,534	25.09*
Dependent of Retired	3,357	1,744	51.95*
Dependent of Survivor	747	401	53.68*
Others	394	84	21.32*
Month			
July	8,409	2,784	33.11*
August	8,843	2,270	25.67*
September	9,847	3,050	30.97*

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

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

Table A5. Response Rates for the Purchased Care Sample

Category	Number Eligible Sampled	Number Responded	Response Rate
Total	13,980	6,785	48.53
Age Group			
18–34	3,492	667	19.10*
35–44	1,228	324	26.38*
45–64	3,192	1,645	51.54*
65+	6,068	4,149	68.38*
Gender			
Male	5,119	2,918	57.00*
Female	8,861	3,867	43.64*
Tricare Region			
North	4,977	2,365	47.52
South	4,399	2,174	49.42
West	4,382	2,163	49.36
OCONUS	222	83	37.39*
Product Type			
Medical	6,479	3,363	51.91*
Surgical	4,814	2,809	58.35*
Obstetrics	2,687	613	22.81*
Beneficiary Category			
Active Duty	890	127	14.27*
Retired	4,497	2,867	63.75*
Dependent of Active Duty	3,207	739	23.04*
Dependent of Retired	3,643	2,118	58.14*
Dependent of Survivor	1,598	908	56.82*
Others	145	26	17.93*
Discharge Month			
July	4,994	2,457	49.20
August	4,891	2,333	47.70
September	4,095	1,995	48.72

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

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

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

Category	Number Eligible	Number Responded	Response Rate (%)
Total	41,079	14,889	36.24
Age Group			
18–34	18,731	3,359	17.93*
35–44	4,933	1,283	26.01*
45–64	8,130	3,975	48.89*
65+	9,285	6,272	67.55*
Gender			
Male	14,428	5,775	40.03*
Female	26,651	9,114	34.20*
Tricare Region			
North	13,198	4,990	37.81*
South	11,325	4,356	38.46*
West	13,295	4,875	36.67
OCONUS	3,261	668	20.48*
Product Line			
Medical	16,294	6,763	41.51*
Surgical	11,424	5,074	44.42*
Obstetrics	13,361	3,052	22.84*
Military Service Type			
Army	14,216	3,993	28.09*
Navy	8,301	2,445	29.45
Air Force	4,582	1,666	36.36*
Beneficiary Category			
Active Duty	9,421	1,225	13.00*
Retired	8,469	5,110	60.34*
Dependent of Active Duty	13,305	3,273	24.60*
Dependent of Retired	7,000	3,862	55.17*
Dependent of Survivor	2,345	1,309	55.82*
Others	539	110	20.41*
Month			
July	13,403	5,241	39.10*
August	13,734	4,603	33.52*
September	13,942	5,045	36.19

* 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 2008
TRICARE Inpatient Satisfaction Survey**

TRICARE Inpatient Satisfaction Survey, Mail Survey of July–September 2008 Inpatients

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.