Form <STATUS>
OMB# <XXXX-XXXX>
Exp. Date XX/XX/XXXX



## **Understanding Veterans' Health Care Needs**

This survey is about understanding the health care needs and utilization of military veterans. Please take a few minutes to answer the questions in this booklet.

### **Survey Instructions**

- ▶ Please answer each question by marking the answer boxes as indicated **☑**. If you are unsure about how to answer a question, please give the best answer you can.
- ➤ You are sometimes told to skip over some question in this form. When this happens, you will see arrows that tell you what question to go to next, like this:

Г	-	Yes
		No → GO TO Question 4
$\forall$		_

#### **Next Question**

- ► Your participation is voluntary and all of your answers will be kept confidential to the extent permitted by law. If you have any question about this booklet, please call <NAME> at <NUMBER>.
- ▶ When you have completed the survey, place it in the envelope provided and give it to your interviewer.

This Booklet
Should Be
Completed By →

REGION: RUID: PID:	
NAME:	
DOB: DOB:	)

This survey is authorized under 42 U.S.C. 299a. The confidentiality of your responses to this survey is protected by Sections 944(c) and 308(d) of Public Health Service Act [42 U.S.C. 299c-3(c) and 42 U.S.C. 242m(d)]. Information that could identify you will not be disclosed unless you have consented to that disclosure. Public reporting burden for this collection of information is estimated to average 7 minutes per response, he estimated time required to complete the survey. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimated or any other aspect of this collection of information, including suggestions for reducing this burden, to: AHRQ Reports Clearance Officer Attentions: PRA, Paperwork Reduction Project (0935-0118) AHRQ, 5600 Fishers Lane, Room #07W42, Rockville, MD 20857.

# **Start Here**

## **Military History**

1. Have	First section asks about your military history.  Let you ever served on active duty in the U.S. Armed Forces, Reserves, or Nation  No, never served in the military  Yes, but only on active duty for training in the Reserves or National Guard  Yes, and I am still on active duty  Yes, I was on active duty in the past, but not now  Yes and I was on active duty in the U.S. Armed Forces?	al Gua	rd?
i	Yes, but only on active duty for training the Reserves or National Guard Yes, and I am still on active duty Yes, I was on active duty in the past, but not now	al Gua	rd?
i	Yes, but only on active duty for training notice the Reserves or National Guard Yes, and I am still on active duty Yes, I was on active duty in the past, but not now		
i	result of the Reserves or National Guard  Yes, and I am still on active duty  Yes, I was on active duty in the past, but not now		
	Yes, I was on active duty in the past, but not now		
	en did you serve on active duty in the U.S. Armed Forces?		
<b>↓</b>	in the you serve on active duty in the 0.5. Affiled Forces:		
	se mark yes for each period in which you served, even if it was just for part of the	e perio	d. Mark n
if you	u did not serve any part of the period listed.	Vaa	Na
		Yes	No
a. 9	September 2001 or later		
ć	a1. IF YES to a, did you serve in a combat theater of operations during this time	eî	
b. <i>A</i>	August 1990 to August 2001, including the Persian Gulf War		
ł	o1. <b>IF YES to b</b> , did you serve in a combat theater of operations <u>after</u> November 11, 1998?		
ł	o2. <b>IF YES to b</b> , did you serve in southwest Asia between August 2, 1990 and November 11, 1998?		
c. J	lune 1975 to July 1990		
d. I	February 1961 to May 1975 (Vietnam era)		
e. F	February 1955 to January 1961		
f. J	uly 1950 to January 1955 (Korean War)		
g. J	anuary 1947 to June 1950		
h. [	December 1941 to December 1946 (World War II)		
i. 1	November 1941 or earlier		

3.	Do you have a VA service-connected disability rating?
	■ Yes
	No → GO TO Question 5
4.	What is your VA service-connected disability rating?
	0 percent
	10 or 20 percent
	30 or 40 percent
	50 or 60 percent
	70 percent or higher
	To poloonik of Highlet
5.	Were you discharged or retired from the military for a disability incurred in the line of duty?
	Yes
	No
6.	Are you a Purple Heart award recipient?
	Yes
	No
7.	Are you a former prisoner of war (POW)?
	Yes
	No
8.	What type of discharge did you receive when you were released from military service?
	Honorable Discharge
	General Discharge under Honorable Conditions
	Other than Honorable (OTH) Discharge
	Bad Conduct Discharge
	Dishonorable Discharge
	Administrative/entry-level separation

## **Your Health and Health Care Services**

	ck Yes or No for each row.	Yes	No
Gen	eral Conditions		
a.	COPD (Chronic Obstructive Pulmonary Disease)		
b.	Dermatological conditions		
c.	GERD (Gastroesophageal reflux disease)		
d.	Hearing loss		
Mus	sculoskeletal Conditions		
e.	Back pain		
f.	Joint pain		
g.	Osteoarthritis		
h.	Gout		
i.	Neck pain		
j.	Fibromyalgia		
k.	TMD (Temporomandibular Joint Dysfunction)		
l.	Lupus		
Mer	ntal Health Conditions		
m.	PTSD (Post-traumatic Stress Disorder)		
n.	Alcohol abuse		
ο.	Drug abuse		
p.	Schizophrenia		
q.	Bipolar disorder		
r.	Depression		
s.	Other mood disorder		

			Yes, from the VA	Yes, outside the VA	No
a.	Prosthesis		•		
b.	Rehabilitation services				
c.	Individual mental health care				
d.	Group counseling for mental health care				
e.	Prescription medications				
f.	Caregiver support				
~	Assistive mobility devices				
g.		1			
A į	(e.g., wheelchairs, scooters, walkers, canes) or imary care provider is the health provider uch of a factor are each of the following to yeck one response for each row.	you see mos	t often and w	•	
A I mu	orimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	best. Ho
A p mu	orimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.  The cost of care	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	
A I mu Ch	orimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.  The cost of care	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	
A p mu	orimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.  The cost of care	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	
A I mu Ch	orimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.  The cost of care	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	
A mu Ch	orimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.  The cost of care	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	
A I mic Ch	crimary care provider is the health provider uch of a factor are each of the following to y eck one response for each row.  The cost of care	you see mos ou in <u>choosi</u> i	t often and w ng a primary c	are provider?	

## **Health Care From Outside the VA**

•	This section is about health care you received from outside of the VA. This includes any visit to a doctor, hospital, or clinic for health care that was not at a VA facility.  Do not include dental care.
12.	Did you visit any health care provider outside of the VA in the last 12 months?
Г	• Yes
	No → GO TO Question 19 on page 7
<b>*</b>	For these next questions, please only think about the non-VA health care provider you saw most often in the last 12 months.
13.	In the last 12 months, how often did your non-VA health care provider know about your past health problems or past treatments?
	Never
	Sometimes
	Usually
	Always
14.	In the last 12 months, how often did your non-VA provider's office keep health information about you complete and up-to-date?
	Never
	Sometimes
	Usually
	Always
15.	In the last 12 months, did you ask someone in your non-VA provider's office for your medical records?
Г	• Yes
	No → GO TO Question 17 on page 7
16.	In the last 12 months, when you asked someone at your non-VA provider's office for your medical records, how often did you get them as soon as you needed?
	Never
	Sometimes
	Usually
	Always

	receive any health care services A In the last 12 months	Please stop. Thank you for your time. This survey is complete
Yes →	GO TO Question 19	time. This survey is complete
<b>┌</b> No		
coordinate	•	are of services you receive from others to as it that your non-VA provider was not aware of
Not a pr	oblem	
A small	problem	
A big pr	oblem	
	Health Care	at the VA
► This section		ived at a VA facility. This includes visits to a VA
	oital, or clinic for health care.	vea at a virjacinty. This includes visits to a vir
	2 months, have you received any car d at a VA facility. Do not include dent	e from a VA provider? This includes any health care all visits.
Yes		
No →	Please stop. Thank you for your time. This survey is complete	
	e a primary care provider or Patient A e last 12 months?	Aligned Care Team (PACT) at the VA who you have
	igned Care Team, or PACT, includes yo ciate, and administrative clerk.	our primary care provider, nurse care manager,
Yes		
	O TO Question 31 on page 10	
No <b>→</b> 6		ith your VA primary care provider/PACT.
No $\rightarrow$ G  These next of  21. In the last 1	questions are about your experience w	with your VA primary care provider/PACT.  mary care provider/PACT know about your past
No $\rightarrow$ G  These next of  21. In the last 1	questions are about your experience w  2 months, how often did your VA pri	
No → G  These next of the last 1 health prob	questions are about your experience w  2 months, how often did your VA pri lems or past treatments?	
No → G  These next of the last 1 health prob	questions are about your experience w  2 months, how often did your VA pri lems or past treatments?	

	Yes
	No → GO TO Question 24
	the last 12 months, how often did your VA primary care provider/PACT know about any tests oults from visits to other VA health care providers?
	Never
	Sometimes
	Usually
	Always
	the last 12 months, how often did your VA primary care provider/PACT keep health information out you complete and up-to-date?
	Never
	Sometimes
	Usually
	Usually Always
i. In 1	
5. In t	Always
i. In 1	Always the last 12 months, did you ask your VA primary care provider/PACT for your medical records?
_ 5. In t	Always the last 12 months, did you ask your VA primary care provider/PACT for your medical records? Yes
_ 5. In t	Always  the last 12 months, did you ask your VA primary care provider/PACT for your medical records?  Yes  No → GO TO Question 27 on page 9  the last 12 months, when you asked your VA primary care provider/PACT for your medical
_ 5. In t	Always  the last 12 months, did you ask your VA primary care provider/PACT for your medical records?  Yes  No → GO TO Question 27 on page 9  the last 12 months, when you asked your VA primary care provider/PACT for your medical cords, how often did you get them as soon as you needed?
_ 5. In t	Always  the last 12 months, did you ask your VA primary care provider/PACT for your medical records?  Yes  No → GO TO Question 27 on page 9  the last 12 months, when you asked your VA primary care provider/PACT for your medical cords, how often did you get them as soon as you needed?  Never

27. In the last 12 months, did you need a referral from your VA primary care provider/PACT to see a
non-VA health provider?
Yes
No → GO TO Question 29
28. In the last 12 months, when you needed a referral from your VA primary care provider/PACT to see a <u>non-VA</u> health care provider, how often did you get a referral as soon as you needed it?
Never
Sometimes
Usually
Always
29. Is your VA primary care provider/PACT aware of the health care services you received outside the VA in the last 12 months?  I did not receive any health care services
outside the VA in the last 12 months  GO TO Question 31 on page 10
Yes ————————————————————————————————————
No
30. Sometimes, health care providers need to be aware of services you receive from others to coordinate your care. How much of a problem was it that your VA primary care provider/PACT was not aware of services you received outside the VA?
Not a problem
A small problem
A big problem

		<b>C</b>	From	C	
TEI (B) AI	т п	ı are			alligic
		Cuic		JUCCI	TIPLE

Health Care From Specialists
► This section is about health care services you received from a specialist.
Specialists are doctors like surgeons, heart doctors, psychiatrists, allergy doctors, skin doctors, and other doctors who specialize in one area of health care.
31. In the last 12 months, did you receive care from any VA specialist other than you VA primary care provider/PACT?
Yes
No → Please stop. Thank you for your time. This survey is complete
The following questions ask about care you received from the VA specialist you saw most often in the <u>last 12 months</u> other than your VA primary care provider/PACT.
32. When you saw this VA health care specialist, did he or she have enough information about your medical history?
Yes
No
33. Was this VA specialist aware of the health care services you received outside the VA in the last 12 months?  I did not get any health services from non-VA providers in the last 12 months  Yes  No  No  34. Sometimes, health care providers need to be aware of treatments you receive from others to coordinate your care. How much of a problem was it that your VA specialist was not aware of services you received outside the VA.
Not a problem
A small problem
A big problem

Thank you for completing this survey!

Please place this completed survey in the envelope provided to you and give it to your interviewer.

If the interviewer is no longer available, place the survey in the return envelope provided to you by the interviewer. If the envelope is missing, mail the survey to:

MEPS

c/o Westat

1600 Research Blvd, Room GA51

Rockville, MD 20850