**CSER HARMONIZED MEASURE REPOSITORY: Access to Care (adult/pediatric)**

| **Template topic** | **Definition/Note**  |
| --- | --- |
| **Measure name and acronym** | Access to care  |
| **Source citation for original measure** | Medicare Expenditure Panel Survey (MEPS)-Household Component (HC), Access to Care Section (P18R5/P19R3/P20R1), Variable: Recommended Family Testing & Monitoring |
| **Category of assessment (construct/ CSER framework location)** | Contextual factor/Healthcare system factors |
| **Description of measure** | MEPS-HC: Access to health care information is collected in the Access to Care (AC) section of the MEPS-HC questionnaire. Topics include family members' origin and preferred languages, family members' usual source of care, characteristics of the usual source of health care providers, satisfaction with and access to the usual source of health care provider, and access to medical treatment, dental treatment, and prescription medicines in the past 12 months. Survey data are primarily demographic, characteristics or fact-based and there are limited psychometric data available.  |
| **Operational definition of construct** | Measures whether participants have experienced any issues with or barriers to accessing medical care in the past year.  |
| **Summary of changes made to measure for CSER (“CSER-adapted scale”), if any** | We adapted a question stem and response options from the MEPS-HC, Access to Care section to create two items: (1) asks whether there have been barriers to access to medical care in the previous 12 months (Yes/No), and (2) if Yes selected, options for 8 reasons for barriers to access to care, including an open ended Other, are provided as checkboxes for selection. Changes were made to simplify language, clarify/add reasons, and allow for selection of multiple reasons rather than the main reason as in the MEPS-HC.  |
| **Time to administer** | Patient Baseline /// 00:00:15 |
| **Target Respondent(s)** | Adult Patient or Parent/Guardian of Pediatric Patient |
| **Age range(s) or respondents**  | Entire population  |
| **Number of items**  | Original scale 51 items – pertains only to Access to Care section of MEPS-HC  |
| CSER adapted 1 + 1 contingent |
| **Subscales and items per subscale**  | Original scale n/a |
| CSER adapted n/a |
| **Response scale (including anchor labels)** | Original scale – Item 1 – binary, yes/no; Item 2 contingent on item 1 yes; 8 nominal options. See measure for details. |
| CSER adapted - same as original, binary, yes/no for item 1; Item 2 contingent on item 1 yes with 8 non-exclusive nominal options |
| **Scoring instructions**  | Original Scale - If Yes to 1st item, having experienced issues with accessing care in the previous 12 months, main barrier provided to 2nd item. |
| CSER adapted - If Yes to 1st item, having experienced issues with accessing care in the previous 12 months, specific barriers are provided to assess potential issues. |
| **Validated cutoff scores, if any** | n/a |
| **Norms (if available)** | n/a |
| **Contact for permission to use/adapt (associated cost)** | n/a |
| **Validated administration modes** | Paper, Phone, In-person |
|  **Original measure languages available**  | English and Spanish |
| **Evidence for reliability (provide type and values)** | n/a |
| **Evidence for validity (provide type and values if available)** | n/a |
| **Evidence for sensitivity to change** | n/a |
| **Relevant references in genetics or genomics** | n/a  |

**Paste original scale below**

The full Medicare Expenditure Panel Survey, Access to Care Section is 57 pages long; pasted below are the specific questions upon which the CSER Adaptation was based:

In the last 12 months, was anyone in the family unable to obtain medical care, tests, or treatments they or a doctor believed necessary?

o Yes

o No

[PRG: If “Yes”] Who was that?

[PRG: If “Yes”] Which of these best describes the main reason {you/{PERSON}} {were/was} unable to get medical care, tests, or treatments {you/he/she} or a doctor believed necessary?

o Couldn’t afford care

o Insurance company wouldn’t approve, cover, or pay for care

o Doctor refused to accept family’s insurance plan

o Problems getting to doctor’s office

o Different language

o Couldn’t get time off work

o Didn’t know where to go to get care

o Was refused services

o Couldn’t get child care

o Didn’t have time or took too long

o Other [PRG: FREE TEXT]

**Paste CSER adaptation below**

1. Has there been any time in the last 12 months when you wanted or needed [your child] to see a doctor or health care professional and did not?

    □ Yes.

    □ No

    if yes:

   2. Why did you [your child] not see a doctor or health care professional when you wanted or needed [them] to in the last year?  Select all that apply.

    □ I could not afford it.

    □ It was too difficult to get there.

    □ I do not like doctors and avoid going.

    □ I did not want to get bad news.

    □ I did not have time.

    □ I decided to take care of it on my own.

    □ I decided to wait and see if the problem would go away on its own.

    □ The doctor was not available to see me.

**Paste or list CSER site-specific adaptation/deviation below**

**Adult surveys are not on google drive**