



KnowledgePanel®

**Ipsos Public Affairs
Project Report for the
Public Agenda Patient–Physician Trust Study**

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Study Design & Documentation

Introduction

Ipsos Public Affairs (Ipsos) conducted the Patient–Physician Trust Study on behalf of Public Agenda. The study consisted of two surveys: one that examined the views of Medicaid beneficiaries and another that examined the views of primary care physicians of Medicaid patients, with the goal of better understanding how to build mutual trust and respect between the two groups.

Sample Definition

For the Medicaid patient survey, the target population consisted of Medicaid beneficiaries ages 18 and older in all 50 states and the District of Columbia, including both English and Spanish speakers. The Medicaid patient survey was conducted on KnowledgePanel®, a probability-based web panel designed to be representative of the United States, with a random sample of Medicaid beneficiaries.

For the Medicaid primary care physician survey, the target population consisted of English-speaking U.S. physicians who (a) listed their primary specialty as either Family Medicine, Family Practice, General Practice, Internal Medicine, or Internal Medicine – Family Practice, (b) provide primary care to patients over 18 years of age, and (c) treat at least some Medicaid patients. The Medicaid primary care physician survey was conducted using a random sampling of Family Medicine, Family Practice, General Practice, Internal Medicine, or Internal Medicine – Family Practice physicians from the Physicians Consulting Network (PCN), a double opt-in panel of AMA-licensed physicians.

Data Collection Field Period and Survey Length: Patient Survey

The data collection field periods were as follows:

Stage	Start Date	End Date
Patient soft launch	8/14/2019	8/16/2019
Physician soft launch	5/29/2019	6/17/2019
Patient main launch	8/20/2019	9/3/2019
Physician main launch	8/20/2019	9/3/2019

AAPOR Response Rate Summary Metrics for KnowledgePanel:

A. Number of Assigned Panelists	2,082
B. Study-Specific Average Panel Recruitment Rate (RECR)	11.2%
C. Study-Specific Average Household Profile Rate (PROR)	60.9%
D. Study-Specific Average Household Retention Rate (RETR)	26.6%
E. Number of Total Study Completes	1,346

F. Study Completion Rate (COMR)	64.6%
G. Number of Study Break-offs	43
H. Study Breakoff Rate (BOR)	3.1%
I. Cumulative Response Rate	4.4%

For the patient survey, Ipsos randomly sampled households with at least one eligible adult (i.e., an adult on KnowledgePanel® who had previously indicated having Medicaid insurance). For the physician survey, Ipsos randomly sampled physicians with a primary care specialty (Family Medicine, Family Practice, General Practice, Internal Medicine, or Internal Medicine – Family Practice on PCN). Selected panel members received an email invitation to complete the survey and were asked to do so at their earliest convenience.

The survey was fielded in English and Spanish. The survey sample release consisted of a soft launch followed by a full launch. The final programmed English and Spanish instruments are shown in Appendices A1 (English) and A2 (Spanish).

The median completion time of the main survey was 8 minutes. Upon completion, qualified respondents to the patient study received an entry into the KnowledgePanel sweepstakes, and qualified respondents from the physician study received \$25 through their PCN account.

Survey Cooperation Enhancements

As a standard, email reminders to non-responders were sent on Day 3 of the field period. Additional reminders were sent to non-responders on Days 6 and 9 of the field period.

Data File Deliverables and Descriptions

For each survey, Ipsos prepared and delivered fully-formatted SPSS datasets containing the survey and demographic data with the appropriate variable and value labels. The table below shows the final Pretest and Main survey files delivered:

Delivery Date	File Type	File Name	File Size	N Records
8/16/19	SPSS SAV	Public Agenda - Patient Survey - Soft Launch Data - 081619.sav	37kb	30
8/16/19	SPSS SAV	Public Agenda - Physician Survey - Soft Launch Data - 081619.sav	60kb	24
9/30/19	SPSS SAV	Public Agenda_Patient Trust Survey_weighted_FINAL.sav	42kb	1008
9/30/19	SPSS SAV	Public Agenda_Physician Trust Survey_weighted_FINAL.sav	20kb	402
9/30/19	SPSS SAV	Public Agenda_Patient-Physician Trust Survey_weighted_FINAL.sav	67kb	410

In addition, Ipsos prepared and delivered other deliverables as follows:

- Statistical weights for Medicaid patients
- Statistical weights for primary care physicians of Medicaid patients
- Demographic profile data for all qualified sample

In addition to the survey variables from the Main interview, Ipsos' KnowledgePanel standard profile variables, a set of additional profile variables for primary care physicians, and a series of data processing variables created by Ipsos were provided in the data file. The following table shows the name and description of all variables included in the Main survey dataset.

Name	Label
RespondentID	Respondent ID
qflag	Qualification Flag
pweight	Weight - Patients
dweight	Weight - Physicians
PPAGE	Age
ppagecat	Age - 7 Categories
ppagect4	Age - 4 Categories
PPEDUC	Education (Highest Degree Received) - Patient only
PPEDUCAT	Education (Categorical) - Patient only
PPETHM	Race / Ethnicity
PPGENDER	Gender
PPHHHEAD	Household Head - Patient only
PPHHSIZE	Household Size - Patient only
PPHOUSE	Housing Type - Patient only
PPINCIMP	Household Income - Patient only
PPMARIT	Marital Status - Patient only
PPMSACAT	MSA Status - Patient only
PPREG4	Region 4 - Based on State of Residence - Patient only
ppreg9	Region 9 - Based on State of Residence - Patient only
PPRENT	Ownership Status of Living Quarters - Patient only
PPSTATEN	State - Patient only
PPT01	Presence of Household Members - Children 0-1 - Patient only
PPT25	Presence of Household Members - Children 2-5 - Patient only
PPT612	Presence of Household Members - Children 6-12 - Patient only
PPT1317	Presence of Household Members - Children 13-17 - Patient only
PPT18OV	Presence of Household Members - Adults 18+ - Patient only
PPWORK	Current Employment Status - Patient only
pph20030	Overall, how do you rate the quality of medical care received from your regular doctor in the past 12 months?
pph20031	Overall, how satisfied are you with your healthcare coverage?

Specialty	Specialty
PracticeState	State of Practice
PracticeRegion	Region of Practice
PracticeMSAcat	MSA Status of Practice
PracticeTypeID	PracticeTypeID
HealthCareProfTypeID	Medical professional type
xspanish	Survey language - Patient only
xacslang	Language proficiency - Patient only

Ipsos KnowledgePanel

Introduction

Ipsos is passionate about social science, health, and public policy research. We collaborate closely with client teams throughout the research process, while applying rigor in every step. We specialize in innovative online research that consistently gives leaders in academia, government, and business the confidence to make important decisions. Ipsos delivers affordable, statistically valid online research through KnowledgePanel® and leverages a variety of other assets, such as world-class advanced analytics, an industry-leading physician panel, an innovative platform for measuring online ad effectiveness, and a research-ready behavioral database of frequent supermarket and drug store shoppers.

Ipsos has recruited the first online research panel that is representative of the entire U.S. population. Panel members are randomly recruited through probability-based sampling, and households are provided with access to the Internet and hardware if needed.

Ipsos recruits panel members by using address-based sampling (ABS) methods (previously Ipsos relied on random-digit dialing [RDD] methods). Once household members are recruited for the panel and assigned to a study sample, they are notified by email for survey taking, or panelists can visit their online member page for survey taking (instead of being contacted by telephone or postal mail). This allows surveys to be fielded quickly and economically. In addition, this approach reduces the burden placed on respondents, since email notification is less intrusive than telephone calls and most respondents find answering online questionnaires more interesting and engaging than being questioned by a telephone interviewer. Furthermore, respondents have the convenience to choose what day and time to complete their assigned survey.

Ipsos Public Affairs

Ipsos Public Affairs has a strong tradition in working with sophisticated academic, government, and commercial researchers to provide high quality research, samples, and analyses. The larger Ipsos offers the fundamental knowledge for governmental agencies, academics, industries, industry, retailers, services companies and the media need to provide exceptional quality in research to make effective decisions. It delivers a comprehensive range of information and consultancy services. Ipsos is one of the leading survey research organizations worldwide, operating in 90 countries with over 16,000 employees.

For further information, visit our website: www.ipsos.com.

KnowledgePanel Methodology Information

KnowledgePanel is the largest online panel that relies on probability-based sampling techniques for recruitment; hence, it is the largest national sampling frame from which fully representative samples can be generated to produce statistically valid inferences for study populations. Our panel provides samples with the highest level of representativeness available in online research for measurement of public opinions, attitudes, and behaviors. The panel was first developed in

1999 by Knowledge Networks, an Ipsos company. Panel members are randomly selected so that survey results can properly represent the U.S. population with a measurable level of accuracy, features that are not obtainable from nonprobability panels (for comparisons of results from probability versus nonprobability methods, see Yeager et al., 2011¹).

KnowledgePanel's recruitment process was originally based exclusively on a national RDD sampling methodology. In 2009, in light of the growing proportion of cellphone-only households, Ipsos migrated to an ABS recruitment methodology via the U.S. Postal Service's Delivery Sequence File (DSF). ABS not only improves population coverage, but also provides a more effective means for recruiting hard-to-reach individuals, such as young adults and minorities. Households without Internet connection are provided with a web-enabled device and free Internet service.

After initially accepting the invitation to join the panel, participants are asked to complete a short demographic survey (the initial Core Profile Survey); answers to this survey allow efficient panel sampling and weighting for future surveys. Upon completing the Core Profile Survey, participants become active panel members. All panel members are provided privacy and confidentiality protections.

ABS Recruitment

To enhance the DSF-based sampling frame used for address selection, we have various ancillary data appended to each household address, thus facilitating complex stratification plans.² Taking advantage of such refinements, quarterly samples are selected using a disproportionate stratified sampling methodology across four strata to address differential attrition rates:

1. Hispanic households with at least one 18 to 24 year-old
2. Remaining Hispanic households
3. Remaining households with at least one 18 to 24 year-old
4. All remaining households

Adults from sampled households are invited to join KnowledgePanel through a series of mailings, including an initial invitation letter, a reminder postcard, and a subsequent follow-up letter. Moreover, telephone refusal-conversion calls are made to nonresponding households for which a telephone number could be matched to a physical address. Invited households can join the panel by:

- Completing and mailing back a paper form in a postage-paid envelope
- Calling a toll-free hotline phone number maintained by Ipsos

¹ Yeager, D., Krosnick, J., Chang, L., Javitz, H., Levendusky, M., Simper, A. and R. Wang (2011). "Comparing the Accuracy of RDD Telephone Surveys and Internet Surveys Conducted With Probability and Non-Probability Samples." *Public Opinion Quarterly*, Winter 2011.

² Fahimi, M. and D. Kulp (2009). "Address-Based Sampling – Alternatives for Surveys That Require Contacts with Representative Samples of Households." *Quirk's Marketing Research Review*, May 2009.

- Going to a designated Ipsos website and completing the recruitment form online

KnowledgePanel LatinoSM Recruitment

In 2008, KnowledgePanel LatinoSM was developed to provide researchers with the capability to conduct representative online surveys with United States Hispanics. With the advent of KnowledgePanel Latino, the first United States online panel representative of Hispanics was established to include those without Internet access and those who only speak Spanish. Members for KnowledgePanel Latino are recruited using a custom dual-frame RDD sampling methodology targeting telephone exchanges associated with census blocks that have a 65% or greater Latino population density (this density level covers just over 50% of the United States Hispanic population). Moreover, cellular numbers from rates centers with high concentration of Hispanics are also used to improve the representation of samples. Households are screened in the Spanish language to only recruit those homes where Spanish is spoken at least half the time. This sample supplements the Latino households (English and Spanish) that are recruited through the KnowledgePanel's general ABS recruitment sample.

Household Member Recruitment

During the initial recruitment survey, all household members are enumerated. Following enumeration, attempts are made to recruit every household member who is at least 13 years old to participate in KnowledgePanel surveys. For household members aged 13 to 17, consent is collected from the parents or the legal guardian during the initial recruitment interview. No direct communication with teenagers is attempted before obtaining parental consent. While surveys can be conducted with these teens directly, in most instances teen surveys are conducted by first selecting a sample of active members who are parents. This parent route alternative makes it possible to reach a larger sample of teens.

Survey Sampling from KnowledgePanel

Once panel members are recruited and profiled by completing our Core Profile Survey, they become eligible for selection for client surveys. Typically, specific survey samples are based on the equal probability selection method (EPSEM) for general population surveys. Customized stratified random sampling based on "profile" data can also be implemented as required by the study design. Profile data can also be used when a survey calls for pre-screening—that is, members are drawn from a subsample of the panel, such as females, Republicans, grocery shoppers, etc. (This can reduce screening costs, particularly for rare subgroups.) In such cases, we take care to ensure that all subsequent survey samples drawn that week are selected in such a way as to result in a sample that remains representative of the panel distributions.

Survey Administration

Once assigned to a survey, members receive a notification email letting them know there is a new survey available for them to complete. This email notification contains a link that sends them to the survey. No login name or password is required. The field period depends on the client's needs and can range anywhere from a few hours to several weeks.

After three days, automatic email reminders are sent to all non-responding panel members in the sample. Additional email reminders are sent as needed. To assist panel members with their survey taking, each individual has a personalized member portal listing all assigned surveys that have yet to be completed.

Ipsos also operates an ongoing modest incentive program to encourage participation and create member loyalty. The incentive program includes special raffles and sweepstakes with both cash rewards and other prizes to be won. Typically, we assign panel members no more than one survey per week. On average, panel members complete two to three surveys per month with durations of 10 to 15 minutes per survey. An additional incentive is usually provided for longer surveys.

Response Rates

As a member of the American Association of Public Opinion Research (AAPOR), Ipsos follows the AAPOR standards for response rate reporting. While the AAPOR standards were established for single survey administrations and not for multi-stage panel surveys, we use the Callegaro-DiSogra (2008)³ algorithms for calculating KnowledgePanel survey response rates. Generally, the KnowledgePanel survey completion rate is about 60%, with minor variations due to survey length, topic, sample specifications, and other fielding characteristics. In contrast, virtually all surveys that employ nonprobability online panels typically achieve survey completion rates in the low single digits. This means that – aside from the fact that nonprobability panels are inherently not representative of any known populations – the effective size of KnowledgePanel (55,000 panel members × 0.60 completion rate = 33,000 respondents) would be equivalent to a nonprobability panel with 1,650,000 members that on average secures completion rates close to 2% (1,650,000 panel members × 0.02 = 33,000 respondents).

Ipsos KnowledgePanel Weighting Methodology

Sample Weighting

As detailed above, significant resources and infrastructure are devoted to the recruitment process for KnowledgePanel so that our active panel members can properly represent the adult population of the U.S. This representation is achieved not only with respect to a broad set of geodemographic indicators, but also for hard-to-reach adults (such as those without Internet access or Spanish-language-dominant Hispanics) who are recruited in proper proportions. Consequently, the raw distribution of KnowledgePanel mirrors that of the U.S. adults fairly closely, barring occasional disparities that may emerge for certain subgroups due to differential attrition.

For selection of general population samples from KnowledgePanel, a patented methodology has been developed that ensures all samples behave as EPSEM samples. Briefly, this

³ Callegaro, M. and C. DiSogra (2008). "Computing Response Metrics for Online Panels." *Public Opinion Quarterly*, Vol. 72, No. 5.

methodology starts by weighting the pool of active members to the geodemographic benchmarks secured from the latest March supplement of the U.S. Census Bureau's Current Population Survey (CPS) along several dimensions. Using the resulting weights as measures of size, a probability-proportional-to-size (PPS) procedure is used to select study specific samples. It is the application of this PPS methodology with the imposed size measures that produces fully self-weighting samples from KnowledgePanel, for which each sample member can carry a design weight of unity. Moreover, in instances where a study design requires any form of oversampling of certain subgroups, such departures from an EPSEM design are accounted for by adjusting the design weights in reference to the CPS benchmarks for the population of interest.

The geodemographic benchmarks used to weight the active panel members for computation of size measures include:

- Gender (Male/Female)
- Age (18–29, 30–44, 45–59, and 60+)
- Race/Hispanic ethnicity (White/Non-Hispanic, Black/Non-Hispanic, Other/Non-Hispanic, 2+ Races/Non-Hispanic, Hispanic)
- Education (Less than High School, High School, Some College, Bachelor and beyond)
- Census Region (Northeast, Midwest, South, West)
- Household income (under \$10k, \$10k to <\$25k, \$25k to <\$50k, \$50k to <\$75k, \$75k to <\$100k, \$100k to <\$150k, and \$150k+)
- Home ownership status (Own, Rent/Other)
- Metropolitan Area (Yes, No)

Study-Specific Post-Stratification Weights

Once all survey data have been collected and processed, design weights are adjusted to account for any differential nonresponse that may have occurred. Depending on the specific target population for a given study, geodemographic distributions for the corresponding population are obtained from the CPS, the U.S. Census Bureau's American Community Survey (ACS), or in certain instances from the weighted KnowledgePanel profile data. For this purpose an iterative proportional fitting (raking) procedure is used to produce the final weights. In the final step, calculated weights are examined to identify and, if necessary, trim outliers at the extreme upper and lower tails of the weight distribution. The resulting weights are then scaled to aggregate to the total sample size of all eligible respondents.

For this study, the following benchmark distributions of U.S. adults age 18 and over from the most recent (March 2018) Current Population Survey (CPS) data were used for the raking adjustment of weights.

- Gender (Male, Female) by Age (18-29, 30-44, 45-59, 60+)
- Race/Ethnicity (White/Non-Hispanic, Black/Non-Hispanic, Other/Non-Hispanic, Hispanic, 2+ Races/Non-Hispanic)

- Census Region (Northeast, Midwest, South, West) by Metropolitan Status (Metro, Non-Metro)
- Education (Less than High School, High School, Some College, Bachelor or higher)
- Household Income (under \$10,000; \$10,000-\$24,999; \$25,000-\$49,999; \$50,000-\$74,999; \$75,000 and over)
- Language Proficiency (English Proficient Hispanic, Bilingual Hispanic, Spanish Proficient Hispanic, Non-Hispanic)

Weights were trimmed and scaled to sum to the sample size of respondents. This is pweight; n=1,008.

Trimming:

pweight: (1.09%, 99.01%)

Design Effect:

pweight: 2.0130

Margin of Error:

±4.38% at the 95% confidence interval

Range on Weights:

Variable	N	Minimum	Maximum	Mean	Median	Coeff of Variation	1st Pctl	99th Pctl	Sum
pweight	1,008	0.101	6.090	1.00	0.674	100.650	0.101	6.090	1008.000

Detailed information on the demographic distributions of the benchmarks can be found in Appendix B.

Ipsos PCN Methodology

Introduction

Ipsos is passionate about social science, health, and public policy research. We collaborate closely with client teams throughout the research process, while applying rigor in every step. We specialize in innovative online research that consistently gives leaders in academia, government, and business the confidence to make important decisions. Ipsos maintains a physician panel called the Physicians Consulting Network which includes physicians that are not covered by more general physician panels. When combined with other panels, the result is a broader reach of physicians. Ipsos also delivers affordable, statistically valid online research through KnowledgePanel® and leverages a variety of other assets, such as world-class advanced analytics, an innovative platform for measuring online ad effectiveness, and a research-ready behavioral database of frequent supermarket and drug store shoppers.

Physicians Consulting Network (PCN®) Methodology Information

The Physicians Consulting Network (PCN®) is a physician-only panel that specializes in recruiting physicians who are not members of other mainstream physician panels. The combination of mainstream physician panels with the PCN yields a comprehensive source for accessing physicians and other healthcare professionals for research needs.

PCN® started out as a general purpose physician panel, but as other general-purpose physician panels became available, its focus shifted to recruiting those physicians who are not willing to become members of general purpose panels. All members are vetted based on their AMA or NPI numbers, and personally invited to join. The PCN does not advertise generally. Since its inception, PCN® has completed approximately 1,000 online studies.

PCN® Panel Operations

The PCN® is maintained by a management team that:

- Continually updates the panel by recruiting additional physicians
- Ensures email and mail addresses are current and up to date
- Develops and refines recruitment policies and procedures.

The PCN® Cooperation Rate

To ensure high cooperation rates, physicians are offered a \$10 cash incentive for participating in this survey.

Ipsos Weighting Methodology for Physicians Consulting Network

Study-Specific Post-Stratification Weights

For this study, final survey weights were computed in two steps. In the first step, the distributions of all responding physician prior to any screening were adjusted to the geodemographic distributions of those participating as:

1. Family Medicine
2. Family Practice
3. General Practice
4. Internal Medicine (Family Practice)
5. Internal Medicine physicians

The needed benchmarks for the above adjustments were secured from the most recent American Medical Association’s Masterfile (September 2019). Variables used for weight adjustments included:

1. Gender
2. Region of practice: Northeast, Midwest, South, and West
3. Specialty:
 - Family Medicine or Family Practice
 - General Practice or Internal Medicine (Family Practice)
 - Internal Medicine

The above weights were examined and extreme values were trimmed at both the lower and upper tails of the weight distribution. The resulting weights were then scaled to produce two sets of weights:

1. Weight1 – for all screened physicians, with their weights aggregating to the number of such respondents (513)
2. dweight – final weight for all qualified physicians, with their weights aggregating to the number of such respondents (402). Qualified respondents are physicians who provide primary care to 18 and over adults and accept Medicaid patients.

Trimming:

dweight: (1.75%, 98.44%)

Design Effect:

dweight: 2.2389

Margin of Error:

± 7.31% at the 95% confidence interval

Variable	N	Minimum	Maximum	Mean	Median	Coeff of Variation	1st Pctl	99th Pctl	Sum
pweight	402	0.318	3.960	1.00	0.506	111.304	0.318	3.960	402.000

Detailed information on the demographic distributions of the benchmarks can be found in Appendix B.

Appendix A: KnowledgePanel® Response Rate Report

KnowledgePanel® is a probability-based panel. By definition, all members of KnowledgePanel® have a known probability of selection. As a result, it is mathematically possible to calculate a proper response rate that takes into account all sources of nonresponse. Below are the components of the response rate calculation and the actual calculations. An extended description of how to compute response metrics for online panels can be found in:

Callegaro, Mario & DiSogra, Charles (2008). Computing response metrics for online panels. *Public Opinion Quarterly* 72(5). pp. 1008-1032.⁴

A. Number of Assigned Panelists	2,082
B. Study-Specific Average Panel Recruitment Rate (RECR)	11.2%
C. Study-Specific Average Household Profile Rate (PROR)	60.9%
D. Study-Specific Average Household Retention Rate (RETR)	26.6%
E. Number of Total Study Completes	1,346
F. Study Completion Rate (COMR)	64.6%
G. Number of Study Break-offs	43
H. Study Breakoff Rate (BOR)	3.1%
I. Cumulative Response Rate	4.4%

Comparison of Response Rates

It is important to note the differences between a Random Digit Dial (RDD) telephone or mail sample and KnowledgePanel®. RDD telephone and mail samples can be compared because they are one-time surveys. However, an online panel such as KnowledgePanel® is composed of people recruited at different times and, more importantly, committed to answering multiple surveys for a period of time and not just a single survey. Further, with KnowledgePanel®, Panelists must also complete profile surveys in order to become members of the Panel. These differences are reflected in the recruitment and profile rates reported above. These differences make directly comparing response rates between one-time surveys and Panel surveys difficult and perhaps not illuminating.

⁴ The full text of the paper is available on the Public Opinion Quarterly – Special issue webpage: http://www.oxfordjournals.org/our_journals/pog/special.html

Opt-in web panels do not permit the calculation of a response rate since the probabilities of selection are unknown. Consequently, opt-in panels are only mathematically capable of computing the survey completion rate, which represents the final stage of gaining the cooperation of survey research subjects and excludes the nonresponse resulting from panel recruitment, connection, and panel retention. In addition, studies relying on opt-in intercept, sometimes called “river,” samples where respondents are recruited for a particular survey using various banner or pop-up ads placed on numerous websites rather than from a panel, also have no known selection probabilities and are therefore unable to report response rates. Further, such opt-in online intercept studies are unable to compute completion rates since a sample is not selected and can only report survey breakoff rates.

Practical Advice for Reporting Response Rates

Many journals ask for the final stage completion rate that can be easily reported. Breakoff rates are also another indicator of quality.

An example of reporting response metrics is the following:

A random sample of 1,234 panel members was drawn from Ipsos’ KnowledgePanel®. 850 (excluding breakoffs) responded to the invitation and 850 qualified for the survey, yielding a final stage completion rate of 68.9% and a qualification rate of 100.0% percent. The recruitment rate for this study, reported by Ipsos, was 13.3% and the profile rate was 63.7%, for a cumulative response rate of 5.8%.

Formulas Used for Calculations

The formulas, from Callegaro & DiSogra (2008), used to calculate the response summary metrics reported above are presented in below. Respondent-level cohort recruitment, profile, and retention rates are calculated for each study respondent and averaged across all study respondents to yield the study-specific rates reported on the previous page.

Formulas Used for Response Summary Metric Calculations

Respondent-level Panel Recruitment Rate (RECR):

$$= \frac{\text{Initial Consent}}{\text{Initial Consents} + (\text{Refusals} + \text{Noncontacts} + \text{Other Cases}) + e(\text{Unknown if Household Occupied} + \text{Unknown Other})}$$

Respondent-level Profile Rate (PROR):

$$= \frac{(\text{Profile Completes})}{(\text{Profile Complete} + \text{Partial Profile Complete}) + (\text{Profile Refusals} + \text{Profile Noncontacts} + \text{Other Profile Cases})}$$

Respondent-level Retention Rate (RETR):

$$= \frac{\text{Profile Completes Present at Time of Study}}{\text{Profile Complete}}$$

Study Completion Rate (COMR):

$$= \frac{(\text{Study Completes})}{(\text{Study Completes} + \text{Study Partial Completes}) + (\text{Study Refusals} + \text{Study Noncontacts} + \text{Other Study Cases})}$$

Breakoff Rate (BOR):

$$= \frac{\text{Break-offs}}{\text{Study Completes} + \text{Study Partial Completes} + \text{Break-offs}}$$

Qualification Rate (QUALR):

$$= \frac{\text{Qualified Study Complete}}{\text{Qualified Study Complete} + \text{Not-qualified Study Complete}}$$

Cumulative Response Rate (CUMRR):

$$= \text{RECR} * \text{PROR} * \text{COMR}$$

Appendix B1: Patient Benchmark Distributions

18+ Medicaid Population Benchmarks

Source: ACS 2017 Data

v1	Frequency	Percent
Age 18-29 Male	3887588	10.69
Age 18-29 Female	5357434	14.73
Age 30-44 Male	3737003	10.27
Age 30-44 Female	5514586	15.16
Age 45-59 Male	3741348	10.28
Age 45-59 Female	4590363	12.62
Age 60+ Male	3854552	10.6
Age 60+ Female	5697242	15.66

ppethm	Frequency	Percent
White, Non-Hispanic	17603726	48.39
Black, Non-Hispanic	6811392	18.72
Other, Non-Hispanic	2811860	7.73
Hispanic	8336676	22.92
2+ Race, Non-Hispanic	816462	2.24

ppreg4	Frequency	Percent
Northeast	7675270	21.1
Midwest	6944665	19.09
South	11157861	30.67
West	10602320	29.14

ppeducat	Frequency	Percent
Less than HS	9337608	25.67
HS	12831328	35.27
Some college	10309537	28.34
Bachelor or higher	3901643	10.72

income5	Frequency	Percent
Under \$10,000	4541490	12.48
\$10,000-\$24,999	8835676	24.29
\$25,000-\$49,999	9800732	26.94
\$50,000-\$74,999	5508967	15.14
\$75,000 and over	7693251	21.15

HI_Medicaid_Flag	Frequency	Percent
1	36380116	100

acslang	percent
English Proficient Hispanic	4.95
Bilingual Hispanic	11.66
Spanish Proficient Hispanic	6.31
Non-Hispanic	77.08
	100

**Patient Survey - Total Qualified Respondents
Trimmed and Scaled: Weighted by pweight**

v1	Frequency	Percent
Age 18-29 Male	102.2903	10.15
Age 18-29 Female	147.118	14.6
Age 30-44 Male	109.3546	10.85
Age 30-44 Female	161.3887	16.01
Age 45-59 Male	109.5356	10.87
Age 45-59 Female	134.36	13.33
Age 60+ Male	104.463	10.36
Age 60+ Female	139.4898	13.84

ppethm	Frequency	Percent
White, Non-Hispanic	509.5284	50.55
Black, Non-Hispanic	193.7093	19.22
Other, Non-Hispanic	51.33554	5.09
Hispanic	229.5259	22.77
2+ Race, Non-Hispanic	23.90089	2.37

ppreg4	Frequency	Percent
Northeast	215.3919	21.37
Midwest	203.2231	20.16
South	307.016	30.46
West	282.369	28.01

ppeducat	Frequency	Percent
Less than HS	230.436	22.86
HS	369.9179	36.7
Some college	293.4178	29.11
Bachelor or higher	114.2283	11.33

income5	Frequency	Percent
Under \$10,000	133.011	13.2
\$10,000-\$24,999	258.5553	25.65
\$25,000-\$49,999	286.7954	28.45
\$50,000-\$74,999	138.9466	13.78
\$75,000 and over	190.6917	18.92

complete_status	Frequency	Percent
qualified	1008	100

acslang	Frequency	Percent
English Proficient Hispanic	52.79422	5.24
Bilingual Hispanic	117.8936	11.7
Spanish Proficient Hispanic	58.83803	5.84
Non-Hispanic	778.4741	77.23

xspanish	Frequency	Percent
English	914.0955	90.68
Spanish	93.90449	9.32

**Patient Survey - Total Qualified Respondents
Un-Weighted %**

v1	Frequency	Percent
Age 18-29 Male	54	5.36
Age 18-29 Female	142	14.09
Age 30-44 Male	104	10.32
Age 30-44 Female	215	21.33
Age 45-59 Male	140	13.89
Age 45-59 Female	184	18.25
Age 60+ Male	75	7.44
Age 60+ Female	94	9.33

ppethm	Frequency	Percent
White, Non-Hispanic	570	56.55
Black, Non-Hispanic	150	14.88
Other, Non-Hispanic	22	2.18
Hispanic	228	22.62
2+ Race, Non-Hispanic	38	3.77

ppreg4	Frequency	Percent
Northeast	227	22.52
Midwest	246	24.4
South	226	22.42
West	309	30.65

ppeducat	Frequency	Percent
Less than HS	120	11.9
HS	370	36.71
Some college	359	35.62
Bachelor or higher	159	15.77

income5	Frequency	Percent
Under \$10,000	297	29.46
\$10,000-\$24,999	308	30.56
\$25,000-\$49,999	244	24.21
\$50,000-\$74,999	83	8.23
\$75,000 and over	76	7.54

complete_status	Frequency	Percent
qualified	1008	100

acslang	Frequency	Percent
English Proficient Hispanic	91	9.03
Bilingual Hispanic	104	10.32

Spanish Proficient Hispanic	33	3.27
Non-Hispanic	780	77.38

xspanish	Frequency	Percent
English	931	92.36
Spanish	77	7.64

Appendix B2: Physician Benchmark Distributions

18+ Physician Population Benchmarks

Source: AMA

GENDER	Frequency	Percent
Male	65042	42.32
Female	88650	57.68

Region	Frequency	Percent
Northeast	29919	19.47
Midwest	34628	22.53
South	51293	33.37
West	37852	24.63

specialty3	Frequency	Percent
Family Medicine	72512	47.18
General Practice/Internal Medicine - Family Practice	553	0.36
Internal Medicine	80627	52.46

Physician Survey - Total Respondents

Un-Weighted %

GENDER	Frequency	Percent
Male	425	82.85
Female	88	17.15

REGION	Frequency	Percent
Northeast	135	26.32
Midwest	92	17.93
South	169	32.94
West	117	22.81

specialty3	Frequency	Percent
Family Medicine	195	38.01
General Practice/Internal Medicine - Family Practice	11	2.14
Internal Medicine	307	59.84

QFLAG		
QFLAG	Frequency	Percent
1	402	78.36
2	111	21.64

Physician Survey - Total Respondents
Trimmed and Scaled: Weighted by weight1

GENDER	Frequency	Percent
Male	219.5449	42.8
Female	293.4551	57.2

REGION	Frequency	Percent
Northeast	100.4283	19.58
Midwest	112.857	22
South	172.7417	33.67
West	126.973	24.75

specialty3	Frequency	Percent
Family Medicine	239.4303	46.67
General Practice/Internal Medicine - Family Practice	3.656339	0.71
Internal Medicine	269.9134	52.61

QFLAG		
QFLAG	Frequency	Percent
1	401.0437	78.18
2	111.9563	21.82

**Physician Survey - Total Qualified
Respondents**
Un-Weighted %

GENDER	Frequency	Percent
Male	334	83.08
Female	68	16.92

REGION	Frequency	Percent
Northeast	107	26.62

Midwest	79	19.65
South	131	32.59
West	85	21.14

specialty3	Frequency	Percent
Family Medicine	160	39.8
General Practice/Internal Medicine - Family Practice	7	1.74
Internal Medicine	235	58.46

QFLAG		
QFLAG	Frequency	Percent
1	402	100

Physician Survey - Total Qualified Respondents

Trimmed and Scaled: Weighted by dweight

GENDER	Frequency	Percent
Male	173.8351	43.24
Female	228.1649	56.76

REGION	Frequency	Percent
Northeast	79.95758	19.89
Midwest	95.81912	23.84
South	131.2568	32.65
West	94.96655	23.62

specialty3	Frequency	Percent
Family Medicine	193.0536	48.02
General Practice/Internal Medicine - Family Practice	2.391715	0.59
Internal Medicine	206.5546	51.38

QFLAG		
QFLAG	Frequency	Percent
1	402	100