

TRICARE Military Healthcare System Marketing Survey

Final Report (First Draft)

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TRICARE Marketing Survey

Executive Summary

Background

The purpose of this study is to gather information from five different TRICARE beneficiary groups about their TRICARE information needs, sources and preferences. The information gained will be used by TMA researchers to design and carry out effective communications to meet beneficiary needs.

Survey Method

The population of the TRICARE Marketing Study was defined as the universe of users of TRICARE services within the past year. This user population consisted of five beneficiary groups of interest:

1. Active duty members
2. Spouses of active duty members
3. Retirees under 65 years of age and their spouses
4. Retirees 65 years of age and over and their spouses
5. Spouses of activated Reservists.

The overall data collection goal for this project was 3,400 completed interviews from the total sample, with a goal of 750 completed interviews for each of the first four groups and 400 completed interviews for the fifth group. To meet these requirements, sample frames were constructed for each of these beneficiary groups and a probability sample drawn of sufficient size to meet data collection goals.

The TRICARE Marketing Survey was conducted using the computer-assisted telephone interviewing (CATI) methodology. The survey was fielded in two Westat Telephone Research Centers (TRCs) in Chambersburg, PA, and Greeley, CO. CATI interviewing was conducted between January 21 and February 13, 2004, and a total of 4,170 interviews were completed across the five beneficiary groups:

Beneficiary Group	Count
Active Duty Service Members	633
Spouses of Active Duty Service Members	1,089
Retirees 65 and Older and Spouses	850
Retirees under 65 and Spouses	796
Spouses of Activated Reservists	802
Total	4,170

General Findings

General Awareness of TRICARE Information Is High

About three fourths or more of TRICARE users are aware of at least one of the following TRICARE information sources:

- toll-free numbers **91.3%**
- printed materials **90.8%**
- staff to assist beneficiaries at service centers, hospitals, and clinics **86.9%**
- Internet sites **75.6%**

Awareness levels are also high within each beneficiary group. Moreover, about two thirds (67.4%) of users are aware of all four information sources.

Many TRICARE Users Look for Information

Overall, more than 81 percent of TRICARE users looked for TRICARE information in the past year. Percentages vary across beneficiary groups, ranging from a low of 65.8 percent for TRICARE users in the older retiree group to a high of 88.2 percent for spouses of activated Reservists. Additionally, beneficiary users who did not seek information during the past year may already possess the basic information they require about their TRICARE health plans.

TRICARE Users Seek Information About Many TRICARE Topics

TRICARE beneficiaries using TRICARE services look for many types of information. The top three types of information users overall look for include:

- Scheduling an appointment **43.6%**
- Phone numbers for healthcare providers or MTFs **41.6%**
- Referrals to specialists or other doctors **35.4%**

The percentages of spouses of active duty service members and activated Reservists looking for the three top types of TRICARE information are higher than the corresponding percentages of active duty members or retirees and their spouses. This may be a result of spouses in active duty households having primary responsibility for overseeing the healthcare needs of the household.

TRICARE-Managed Sources of Information Rank High in Use

Users of TRICARE services who look for TRICARE information rely on various sources for answers and assistance. Specific information sources selected by at least 45 percent of TRICARE users are:

- TRICARE beneficiary advisors at service centers and MTFs **52.5%**
- TRICARE letters, pamphlets, and brochures **46.5%**
- *TRICARE Handbook* **45.3%**

Four other sources are used by about 30 to 36 percent of all TRICARE service users who look for information: military newspapers or newsletters (36.1%); TRICARE doctors, nurses, or technicians (35.3%); TRICARE Internet sites (35.3%); and TRICARE toll-free numbers, excluding "Ask a Nurse" (31.3%). All but one of the top seven sources of information are managed (produced, sponsored, or trained) by TRICARE.

Except for the older retiree group, the source used by the highest percentage of TRICARE users in each beneficiary group is TRICARE beneficiary advisors at service centers, hospitals, or clinics. Among the older retiree group, the source used by the highest percentage of information seekers is military newspapers or newsletters (61.5%), a source *not* managed by TMA.

TMA-Managed Sources Rank High As Primary Sources

Overall, the top five primary information sources for beneficiaries using TRICARE services are:

- | | |
|---|--------------|
| 1. TRICARE beneficiary advisors at a service center, hospital, or clinic | 21.3% |
| 2. TRICARE Internet sites | 16.2% |
| 3. Other TRICARE toll-free numbers (other than “Ask a Nurse”) | 12.4% |
| 4. TRICARE doctors, nurses, or technicians at a military hospital or clinic | 11.5% |
| 5. TRICARE letters, pamphlets, or other brochures | 10.3% |

Except for TRICARE doctors, nurses, or technicians at MTFs, all of these sources are directly managed by TMA. Subject to resource constraints, TMA can therefore influence how effectively these sources meet the information needs of beneficiaries.

Primary Sources Are Good Sources of Needed Information

Many beneficiaries, both overall and across all five beneficiary groups, are receiving all or most of the information they seek from their primary sources. About one third (33.7%) of beneficiaries receive *all* the information they need from their primary sources, nearly one half (47.5%) receive *most* of the needed information, and about 20 percent (18.8%) receive *some* of the information they need about TRICARE.

Three primary sources stand out for providing *all* the information needed:

- | | |
|--|--------------|
| • TRICARE beneficiary advisors at a service center, hospital, or clinic | 51.1% |
| • TRICARE doctors, nurses, or technicians at a military hospital or clinic | 43.1% |
| • TRICARE toll-free numbers other than “Ask a Nurse” | 41.2% |

User Assessment – TRICARE Sources Are Accessible to Beneficiaries

Overall, the top five sources that beneficiaries rate as “easy to get” information from are:

- Briefings or orientations (about TRICARE) **65.8%**
- The “Ask a Nurse” toll-free number **64.3%**
- TRICARE doctors, nurses or technicians **64.0%**
- Military-sponsored town hall meetings on base **60.7%**
- TRICARE beneficiary advisors **60.5%**

About one half or more of all users found it easy to get information from any of the TRICARE-managed sources except for TRICARE toll-free numbers (other than “Ask a Nurse”). Only 38.7 percent of users of TRICARE toll-free numbers think it is easy to get information from that source.

User Assessment – TRICARE Sources Are Easy to Understand

More than one half of all users seeking information about TRICARE in the past year rate the information from TRICARE-managed sources as easy to understand. Overall percentage ratings of *easy to understand* are highest for the following five sources:

- The “Ask a Nurse” toll-free number **73.5%**
- TRICARE doctors, nurses, or technicians **70.1%**
- TRICARE provider directories **62.3%**
- TRICARE beneficiary advisors **61.0%**
- Briefings or orientations (about TRICARE) **59.7%**

User Assessment – TRICARE Sources Provide Useful Information to Beneficiaries

TRICARE users regard information from the TRICARE-managed sources as useful. The five sources with the highest overall percentages of TRICARE users rating them as providing useful information are:

- The "Ask a Nurse" toll-free number **75.4%**
- TRICARE doctors, nurses, or technicians **75.0%**
- TRICARE beneficiary advisors **74.8%**
- Briefings or orientations (about TRICARE) **68.3%**
- *TRICARE for Life* brochure **60.6%**

Ratings by the five beneficiary groups are similar to the overall ratings.

Some Sources Are Difficult to Use

TRICARE toll-free numbers are the most difficult source to use to get information about TRICARE, according to one third (29.1%) of TRICARE users. The next source considered most difficult varies among three sources across the beneficiary groups: TRICARE letters, pamphlets, or other brochures, TRICARE Internet sites, and the TRICARE Handbook.

Satisfaction Is High – Especially Among Older Retirees and Their Spouses

More than three of every four (78.7%) users of TRICARE services who look for information about TRICARE are satisfied (53.6%) or very satisfied (25.1%) with available information. Satisfaction levels range from 75.9 percent among active duty members to 87.9 percent of the older retiree group.

Beneficiary Groups Differ Regarding Preferences for Getting TRICARE Information

Overall, TRICARE users most prefer getting answers to their questions face to face. Next, similar numbers of them most prefer getting needed information by telephone or mail. Relatively few beneficiaries most prefer using the Internet to get TRICARE information. For the most part, beneficiaries preferring to use the telephone are thinking about talking to a live person—either by calling local TRICARE staff or by using menu-driven toll-free numbers leading to a TRICARE representative. Beneficiaries in the older retiree group are more likely than beneficiaries in the other four groups to think about entirely automated calls.

Findings on the three methods least preferred for getting answers to TRICARE questions reinforce the findings regarding most preferred methods.

Market Reach

Separate analysis was conducted to inform TMA about market reach on the TRICARE user population. The goal was to provide TMA with a prioritized list of the 12 TRICARE sources managed by TMA that could be used to reach an increasing percentage of the TRICARE user population. Results tell TRICARE officials that they can reach about 60 percent (62.8%) of the general TRICARE user population with three sources of information: TRICARE beneficiary advisors, the *TRICARE Handbook*, and the TRICARE Internet sites.

In addition, this information indicates that these three sources reach approximately 81 percent of the TRICARE user population who sought information about TRICARE in the past year.

This analysis could also be used, along with the costs associated with producing and distributing the various TRICARE sources, in a cost-benefit model to determine how resources should be allocated to reach the largest percentage of the TRICARE user population. In addition, this analysis could be used to determine the market reach efficiency afforded by any combination of information sources decided on by TMA.

1. Background and Purpose of Study

In response to the challenge of maintaining medical combat readiness while providing the best health care for all eligible personnel, the U.S. Department of Defense (DOD) introduced TRICARE. TRICARE is a regionally managed health care program that provides military health care to 8.7 million beneficiaries - active duty Service members and their families, as well as retirees and their families, survivors, and activated Reserve component member who qualify. TRICARE brings together the health care resources of the Army, Navy, and Air Force and supplements them with networks of civilian health care professionals to provide better access and high-quality service while maintaining the capability to support military operations.

TRICARE offers eligible beneficiaries three choices for their health care: TRICARE Prime; TRICARE Extra; and TRICARE Standard. In general, all active duty personnel are required to be enrolled in TRICARE Prime. Active duty personnel pay no fees for TRICARE Prime. Active duty family members are eligible for all three TRICARE options and although they pay no enrollment fees they must choose an option (i.e., Prime, Standard, or Extra) and where necessary, apply for enrollment. Retirees under age 65 and their family members are also eligible for all three TRICARE options; however, there are applicable enrollment fees and enrollment requirements. Retirees age 65 and over and their family members are not eligible for any of the three TRICARE options, however, these retirees and their family members are eligible for coverage under the TRICARE for Life program. TRICARE for Life is a “medigap”-type wraparound coverage where TRICARE is the second payer and will pay remaining out-of-pocket expenses. To be eligible for this program, beneficiaries must be enrolled in Medicare Part B. Enrollment in TRICARE for Life is automatic with enrollment in Medicare Part B.

The purpose of this study is to gather information from TRICARE beneficiary groups – active duty members, military retirees and their family members – about their TRICARE information content needs, sources and strategies in order to identify differences among the various beneficiary groups. The information gained will be used by TMA researchers and the TMA Customer Research & Analysis Branch to design and carry out effective communications to meet the range of needs identified. Two primary tasks were used to gather information from beneficiaries: (1) focus groups with TRICARE user-beneficiaries and TRICARE Prime enrollees, and (2) a telephone survey with a larger sample of the same groups. The specific population groups of interest were identified as active duty members; spouses of active duty members; households of retirees under 65 years of age; households of retirees 65 years of age and older, and spouses of activated Reservists.

These population groups have been separated into groups because of the different benefits available to them. We will refer to them as population groups or beneficiary groups in this report.

The report describes the design, operations, and results of the TRICARE Marketing Study in five chapters:

1. Background and Purpose
2. Survey Methodology
3. Data Collection
4. Data Preparation
5. Study Findings

Several appendices contain supporting project materials including the survey questionnaire, data analysis tables and additional analytic tables.

2. Survey Methodology

2.1 Sample Design and Selection

The population of the TRICARE Marketing Study was defined as the universe of users of TRICARE services in the last calendar year. Specific population segments of interest in this study were:

- Active duty members
- Spouses of active duty members
- Retirees under 65 years of age and spouses
- Retirees 65 years of age and over and spouses
- Spouses of activated Reservists.

The overall data collection requirement for this project was to collect a total of 3,400 completed interviews from the population as a whole, with a target number of 750 completed interviews set for each of the first four groups and 400 completed interviews for the fifth group. To meet these requirements, sample frames were constructed for each of these beneficiary groups and a probability sample drawn of sufficient size to meet data collection goals. Sample frame construction and sample selection is described below.

Sample Frame Construction. Standard Technology, Inc., under the direction of TMA, supplied Westat with sample frame files. Files consisted of transaction records of eligible active duty members, spouses of active duty members, retirees and their spouses, and the spouses of activated Reservists. Eligibility was defined as beneficiaries who have used TRICARE within the past 12 months. Information from the following four files, provided by TMA, was used to identify the beneficiaries:

- Standard Inpatient Data Record (SIDR),
- Standard Ambulatory Data Record (SADR),
- Health Care Service Record – Institutional (HCSRI), and
- Health Care Service Record – Non-Institutional (HCSRN).

Table 2-1 summarizes the sample frame files supplied by Standard Technology, Inc.

Table 2-1. Population Files

Population Group	Record Count
Active Duty Service Members	1,557,448
Spouses of Active Duty Service Members	570,232
Retirees 65 and older	655,707
Spouses of Retirees 65 and older	422,464
Retirees under 65	639,698
Spouses of Retirees under 65	700,270
Spouses of Activated Reservists	51,445
Total	4,597,264

Files contained TRICARE user name, address, telephone number, gender, age, military rank, beneficiary category, identification number (ID), and DEERS Dependent Suffix (DDS). Initial file inspection checked the admissibility of telephone numbers¹ and identified duplicate records associated with a single ID.

Table 2-2 presents final sample frame counts after initial data processing. Approximately 15 percent of cases were dropped at this stage, the majority of which were duplicate cases. The number of duplicate records differed by population group, with the largest number of duplicate records found among spouses of active duty members. Nearly 30 percent of records in this file were removed, primarily multiple spouse listings associated with an active duty member. In these cases, the DEERS Dependent Suffix indicator was used to retain only the most recent spouse record. The fewest number of duplicate records was found among retirees less than 65 years of age, where only 3 percent of records were removed due to duplication.

¹ Admissible telephone numbers contained ten digits. Blank fields, zero-filled, or other constant-filled telephone numbers were evaluated as inadmissible and dropped from the frame file.

Table 2-2. TRICARE Marketing Survey Sample Frame

Population Group	Sample Frame Records Retained
Active Duty Service Members	1,245,073
Spouses of Active Duty Service Members	408,514
Retirees 65 and older	621,403
Spouses of Retirees 65 and older	370,100
Retirees under 65	623,108
Spouses of Retirees under 65	609,851
Spouses of Activated Reservists	48,642
Total	3,926,691

Sample Selection. Assumptions were made regarding expected sample yields. TMA estimated that approximately 25 percent of sample frame telephone numbers would be correct and current. Westat’s experience with surveying military members, family, and retiree populations led to an estimate of a 0.45 cooperation rate. Together, these assumptions indicated that a sample size of at least 30,222 ($3,400 \times 1/.25 \times 1/.45$) would be required to meet the objective of 3,400 completed interviews. (That is, approximately nine sample members would have to be called to yield one completed interview.) For each of the four sample groups requiring 750 completed interviews, a target sample size of 6,667 was calculated. A sample size of 3,556 was calculated to produce the 400 completed interviews with spouses of activated Reservists.

These sampling assumptions, however, were considered less than precise. Because of the lack of firm information regarding the incidence of correct and current telephone numbers and the expected cooperation rate, a larger sample was planned. A total sample of 69,867 cases was drawn from the sample frame. Table 2-3 presents the sample by population groups.

Table 2-3. Total TRICARE Marketing Survey Sample

Population Group	Sample Count
Active Duty Service Members	15,790
Spouses of Active Duty Service Members	15,008
Retirees 65 and older and Spouses	15,423
Retirees under 65 and Spouses	15,539
Spouses of Activated Reservists	8,107
Total	69,867

All samples were drawn using a systematic random method. Once the frame files were deduplicated and cases with inappropriate or missing phone numbers eliminated, the files were concatenated into a master frame file sorted by the original ID contained on the file. Each case was then assigned a new randomly generated eight-digit identification number and the old ID was stripped from the record. Once this operation was completed, the master frame was divided into subfiles for each of the five population groups. These files were then sorted by the new ID number, then systematically sampled in order to produce the number of cases required. Sampled cases from each beneficiary group were then concatenated and sorted by the random ID in order to thoroughly randomize the order of sampled cases.²

The randomly sorted sample was then further divided into replicate samples. The first 20,000 sample cases were designated as the initial release group and 10 replicate samples of 5,000 cases each were successively formed from the remaining sample (the last replicate sample had less than 5,000 cases). This formation of initial and replicate samples provided administrative flexibility in releasing and working the sample. If the initial sample is not likely to yield the required number of completed interviews, replicates can be released for work as needed. In the present study, yields greatly exceeded expectations and the replicate samples were not used.

2.2 Survey Development

Two activities were conducted as components of the development of the TRICARE Marketing questionnaire - a literature review and focus groups.

² This randomization assures that the composition of any part of the sample is the same as any other portion. This method is central to Westat's use of an adaptive sample release strategy.

Literature review. The literature review focused on similar studies investigating communication of health care marketing information to beneficiary populations. The literature review contributed models for viewing the communication project, but more specifically, it identified survey items that could be adopted or adapted for the TRICARE program structure and information needs.

Studies reviewed included:

- National Medicare Education Program Community Survey (NMEP), conducted for the Centers for Medicare and Medicaid Services by Westat (2003). This program was designed to educate beneficiaries about their Medicare program benefits and health plan choices, among other topics. NMEP used a variety of communication methods including print, toll-free telephone services, Internet sites and direct information provision by program staff. The NMEP Community Survey collected data for evaluation of the NMEP. The survey also collected data about beneficiaries' use of different information sources and variables that affected the use of different sources.
- Quality Improvement Organizations Customer Satisfaction Survey, conducted for the Centers for Medicare & Medicaid Services by Westat (2002). This project assessed customer satisfaction with Quality Improvement Organizations (QIOs) by provider groups (physicians hospitals, home health agencies, nursing homes, and Medicare+Choice organizations). Modes of information investigated included site visits, training workshops, telephone calls, (conference and one-on-one), and e-mails (broadcast and one-to-one).
- Medicare Physician Communication Survey, conducted for the Health Care Financing Administration by Barents Group, Project HOPE, and Westat (1999). As part of Health Care Financing Administration's (HCFA) effort to develop effective approaches for information dissemination, this survey asked physicians and office staff what types of information they needed about Medicare and what strategies they thought were most effective for its dissemination. Types of information included materials from HCFA, Medicare carriers and Medical/Specialty Dissemination Associations, Strategies included mailed materials, e-mail and Internet, telephone and workshops. Other findings indicated that physician practices are sources for beneficiaries.
- HCFA On-Line: Market Research for Beneficiaries, conducted for the Health Care Financing Administration (HCFA) by Barents Group and Westat (1996). To help HCFA gain an understanding of the information needs of Medicare beneficiaries, an inventory of information dissemination sources was assembled. The inventory identified sources such as print media, toll-free telephone sources, e-mail and Internet seminars and information fairs, and volunteer organizations.

- TalkingQuality.gov website. Sponsored by the Agency for Healthcare Research and Quality, Centers for Medicare & Medicaid Services and the Office for Personnel Management, this website provides information about ways to communicate information on health care quality to consumers. A section of the site, Reaching People Where They Are, guides information providers to assess effective settings, channels and media for providing information to their audiences.
- CAHPS-SUN.org website. Sponsored by the Agency for Healthcare Research and Quality and the Centers for Medicare & Medicaid Services, the website reviews the Consumer Assessment of Health Plans Study (CAHPS) questionnaire sections. CAHPS includes a section of survey items on consumer access to health plan information and problems acquiring information.

Focus groups. Focus groups with members of the beneficiary groups were also conducted to inform the design of the TRICARE Marketing Study questionnaire. Westat recruited representatives from the following beneficiary groups to meet and talk about TRICARE benefit information:

- Active duty members and adult family members of active duty members
- Military retirees younger than 65 and adult family members of retirees under 65
- Retirees 65 years and older and adult family members of retirees 65 and older

Westat mailed advance letters to a sample of 600 eligible beneficiaries in the Tidewater area of Virginia informing them about the focus groups and encouraging them to participate if called by a Westat recruiter. Twelve or 14 representatives from each beneficiary group agreed to attend the discussions. The focus groups were held on October 28 and 29, 2003, at a facility in Newport News, Virginia. Attendance was high for the retiree groups (9 for the under-65 age group and 13 for the 65- and –over age group). However, only 3 of 14 recruited representatives from the active duty group attended their session, despite receiving reminder calls or e-mail messages 1 to 3 days before the group met. The Army, Navy, Air Force, Marine Corps, and Coast Guard were represented among group participants.

During each of the three focus groups, the Westat moderator encouraged the participating beneficiaries to talk about the types of health plan information they need and their recent experiences in getting such information. They discussed the various methods they have used to locate TRICARE benefit information (e.g., telephone, Internet, printed materials, through face-to-face meetings or word of mouth) and how easy or hard it was to understand the information. They also described how

they would prefer to get benefit information. Each of the sessions was audiotaped, transcribed, and a Westat team member took notes.

Focus group findings. The focus group discussions were analyzed to determine if the questionnaire content domains identified during the literature review were appropriate. For example, the analysis revealed that beneficiaries have a variety of information needs as well as a broad range of experiences in getting benefit information. Also, they differed in their opinions about the information sources they had used and about how they would prefer to get TRICARE benefit information. Thus, the analysis indicated that a survey on these topics would likely yield useful information for developing a long-term TRICARE marketing strategy.

The discussion group findings were also helpful in developing appropriate response categories. A challenge was collapsing numerous possible responses into a reasonable number of response options for questions asking about TRICARE information beneficiaries have looked for and the sources they used to get information during the past year.

The findings also indicated that not all beneficiaries are up-to-date about their current plan membership and might be confused about why they were being asked to participate in the survey (e.g., some thought they were still members of CHAMPUS). That information was useful in developing help text for interviewers to use during the introduction to the survey and while administering the questionnaire.

A detailed presentation of the focus group findings, as well as demographic characteristics of the participants, can be found in the November 24, 2003, report *TRICARE Marketing Study: Focus Group Report*.

2.3 Questionnaire Development

The TRICARE Marketing Survey questionnaire was designed to collect information that would help TMA improve the marketing of benefit information to TRICARE beneficiaries. More specifically, the objective was to collect data to answer the following research questions:

- What types of benefit information do TRICARE beneficiaries need and look for?
- What sources of information do they use?
- How do they assess those information sources? Are they easy to access and understand? Do they provide useful information? Are they difficult to use?
- Overall, how satisfied are beneficiaries with TRICARE information sources?
- How do beneficiaries prefer to get TRICARE information?

A major consideration in designing the questionnaire was the relatively short administration time (10 minutes) allotted for the survey. Demographic items were excluded from the survey because of the need to keep the questionnaire short and because this information, if needed, was available in other files such as the TRICARE user file used for sample selection and Service personnel files.

Developing the questionnaire was an iterative process. Using both the results of the literature review and the focus group findings, Westat initially drafted a large set of items for possible inclusion in the questionnaire. Team members then reduced the number of items to those deemed most likely to produce analytically useful answers to the research questions listed earlier. Response options were chosen for each item, and a survey introduction written.

Next, the draft instrument was pretested to identify possible problems in understanding or answering questions, to establish administration time, and to test for any difficulties with the items and flow of the questionnaire. Also, a health communications consultant to the project reviewed the draft. As a result of those activities, Westat revised the survey introduction, reworded the items on preferences, added a middle response option to each of the assessment questions about TRICARE sources, and added items to collect more detailed information about telephone calls regarding TRICARE information. Administration time during the pretest was within the allotted 10 minutes. The revised draft was then sent to TMA for review.

TMA clarified response options regarding providers and TRICARE staff in military treatment facilities and clinics, suggested additional response options for information sources, provided an example of another survey introduction, and asked that an additional question be included that asked respondents to identify the health plan they had used most during the last 12

months. Those suggestions were finalized and changes made to the instrument. The revised draft was used in the pilot study.

2.4 Computer Assisted Telephone Interviewing (CATI) Instrument Development

CATI programming of the revised draft instrument was conducted next. CATI programming of the survey instrument follows several steps, beginning with conversion of the questionnaire into CATI specifications, then into programming language. In addition to programming questionnaire items, project-specific procedures are also programmed into the CATI system. For example, in this study a verbal message about the survey was to be left on answering machines, so a message was developed, a specification written, and then the specification was translated into programming language. The final step in CATI development is testing the completed programmed instrument. The purpose of testing is to verify that the CATI screens, data handling, instrument flow patterns, and database contents are programmed accurately based on specifications. CATI testing was performed by data preparation and project staff and did not uncover any major changes necessary for the TRICARE Marketing questionnaire.

2.5 Pilot Test

Prior to initiating data collection, a pilot test of the TRICARE Marketing Survey was conducted at Westat's Rockville Telephone Research Center (TRC) on January 13, 2004. The pilot test sample was developed from two sources: personal contacts and the TRICARE eligibility sample file received from TMA. Eighteen sample members were assembled for the pilot test. Eight sample members were recruited by Westat project staff and consisted of family, friends, and spouses of Service members. The remaining 10 cases were drawn from the TRICARE eligibility sample file.

Four telephone interviewers were trained to conduct the interviews and calls were made from 7-8:30 p.m. EST. The interviews were monitored by Westat project staff members. The short pilot test period yielded eight completed interview, with representation from active duty members, active duty spouses, retirees under age 65, spouses of retirees over age 65, and spouses of activated Reservists³. Services represented in the pilot test data by the completed interviews included Army, Navy, and Marine Corps (active and Reserve).

³ Survey data collected during the pilot test were not included as part of the final survey dataset.

During the pilot test, the length of survey administration ranged from 9.0 minutes to 21.8 minutes. The average interview length was 13.3 minutes, longer than the earlier pretest administration length. The difference was attributed to the “real life” conditions of a range of actual TRICARE users. Additional feedback gathered from the telephone interviewers in a debriefing resulted in recommendations to TMA to revise and shorten several questions (items 9a, 12, 13 and 14) and to shorten the survey introduction. TMA staff reviewed and provided input to the revised survey questionnaire. A synopsis of the final instrument appears in Table 2-4. Appendix A includes a copy of the final TRICARE Marketing Survey instrument.

Table 2-4. Structure of Draft TRICARE Marketing Survey Questionnaire

Research Questions	Questionnaire Items
What TRICARE sources do beneficiaries know about?	1
What information have beneficiaries looked for?	2–3a
What sources of information have beneficiaries used? What was their primary source? How comprehensive was the information from the primary source?	4–8
How do beneficiaries assess the information sources?	
“TRICARE-sponsored” sources:	
Was the information easy to get?	9a
Was the information easy to understand?	9b
Was the information useful in answering the beneficiaries’ questions?	9c
What information source was the most difficult to use?	10
Overall, are beneficiaries satisfied or dissatisfied with available TRICARE information?	11
How do beneficiaries prefer to get TRICARE information?	
How do they <i>most</i> prefer to get information?	12 and 12a
How do they <i>least</i> prefer to get information?	13 and 13a

3. Data Collection

3.1 Interviewer Training

Two Westat Telephone Research Centers (TRCs), in Chambersburg, PA, and Greeley, CO, were assigned to conduct the TRICARE Marketing Survey interviews. Interviewer training was conducted on January 17, 2004 at Chambersburg, PA and on January 18, 2004 at Greeley, CO, and 41 interviewers completed the 8-hour training course.

Training materials that were developed for interviewer training included an introduction to the project, Questions and Answers (Q&As), a handout on TRICARE basics, interactive scenarios, and help text. Q&As provide information to interviewers that prepare them in answering questions they may receive during interviews. The TRICARE basics handout provided interviewers with a general background on the various TRICARE options available to beneficiaries (e.g., Prime, Prime Remote, Extra, Standard, TRICARE for Life, etc.). The help text was information that was programmed into the CATI instrument and was accessible to interviewers during an interview by pressing a help key. The help text included information such as definitions of terms, instructions to interviewers, and clarifications on survey item intent.

Interviewer training included sessions that covered voice quality, contact procedures, refusal avoidance, as well as interactives and role plays. Interactive sessions involved the lead trainer acting as respondent and selecting interviewers from the training class to read survey questions and record them appropriately on the computer. The primary use of interactives in training is to introduce the interviewers to the survey instrument, response categories, and general flow of the survey instrument. Role play training involves pairing up interviewers and having one act as interviewer while the other acts as respondent in order to become familiar with the survey instrument, response categories, probing techniques, etc. Role plays also give interviewers practice in voice dictation and recording skills and are normally the last training session mastered before interviewers “go live” on the project.

Trainers and supervisors monitored all interviewer actions during the training classes to determine the correct pace for training and to identify interviewers that required additional training or reinforcement.

3.2 Data Collection Period

Final approval was given to begin data collection after assignment of the Report Control Symbol (RCS)⁴ for the survey from TMA. CATI interviewing was conducted between January 21 and February 13, 2004. A total of 4,170 interviews were completed during the three-week field period. Interviewing was not conducted on Super Bowl Sunday, February 1, 2004.

3.3 Data Collection Management

Data collection progress was monitored throughout the field period by tracking results of all calls made to sample cases within the five population groups. Each of the five groups had targets of 750 completed interviews except for the spouses of activated Reserve members, who had a target of 400 completed interviews, for an overall goal of 3,400 interviews.

A higher proportion of telephone numbers than expected were correct and cooperation rates from sample members were quite high. Because of these fortunate occurrences, we were able to conduct additional interviews beyond the targets with all groups except active duty Service members. The additional interviews also served to increase the analytic power within population groups. The shortfall of completed interviews with active duty Service members did not significantly affect analytic power. Table 3-1 presents the number of completed interviews by population group.

⁴ The RCS for this study is **DD-HA (OT) 2173**.

Table 3-1. Completed Interviews by Population Group

Population Group	Count
Active Duty Service Members	633
Spouses of Active Duty Service Members	1,089
Retirees 65 and Older and Spouses	850
Retirees under 65 and Spouses	796
Spouses of Activated Reservists	802
Total	4,170

4. Data Preparation

4.1 Data Cleaning and Coding

These activities are conducted at the close of data collection and include reviewing, editing, and cleaning the survey data and the administrative variables used to track all sample cases within the CATI environment.

First, interim result codes were finalized for each sampled case released for calling. This procedure is done to account for each sampled case, whether it results in a completed interview or not. The final result code is assigned based on the call history and interviewer comments associated with the interim cases. Next, “other specify” responses to survey items 3a, 6a, 7, and 10 were analyzed and back coded into existing response categories if possible. A one-way frequency review was then conducted for each survey variable on the CATI database. The primary goal of this review is to check the subpopulations receiving each survey item to determine if responses were stored correctly in the survey database and verify that questionnaire skip patterns were followed correctly. The final closeout activity was to convert the CATI dataset into a SAS dataset to be used for survey analysis.

Additional variables were recoded for analytic purposes. Values assigned to the response options, “don’t know” and “refused,” were set to missing and thus later excluded from data analysis.

4.2 Variable Construction

Several variables were constructed for data analysis. A recoded beneficiary group variable was constructed with five values:

1. Active duty Service members;
2. Spouses of active duty Service members;
3. Retirees under 65 and spouses;
4. Retirees 65 and older and spouses; and
5. Spouses of activated Reservists.

An additional analytic variable was constructed to recode values of pay grade to a value of “low” for pay grades E-1 to E-4 and “high” for all other pay grades. Two additional count variables were constructed, the first to provide a count of how many different types of information a respondent sought in the past year, and the second to provide a count of different sources of information a respondent consulted in the past year.

4.3 Sample Weighting

The analysis of survey data from complex sample designs requires the use of weights to compensate for variable probabilities of selection and to adjust for differential response rates. To develop weights for the TRICARE Marketing Survey data, the following steps were taken. First, base weights, equal to the reciprocal of the probability of selection, were assigned to each case selected for the sample. Next, the base weights were adjusted for nonresponse within each sampling stratum, then poststratified to reflect population frame counts.

Base Weights. The TRICARE Marketing sample was a systematic random sample, selected without replacement, from a stratified sampling frame. The strata were the five population groups of interest. As such, the overall probability of selection varied by sample stratum. The frame was portioned into these H non-overlapping groups consisting of N_h units in each stratum so that

$$N = \sum_{h=1}^H N_h$$

where N is the total frame count.

Within each stratum a systematic random sample was selected. Given this design, the base weight for i^{th} sample member in stratum h was calculated as:

$$w_{hi} = \frac{N_h}{n_n}$$

where n_h is the sample size for h^{th} stratum and N_h is the frame count.

Survey Nonresponse Adjustment. The adjustment for survey nonresponse mirrors very closely the method of calculating the base weights presented above. For the H^{th} stratum a ratio is formed between the total sample and the number of respondents. Symbolically, the adjustment for the i^{th} respondent in the n_h stratum is:

$$wnr_{hi} = \frac{n_{sh}}{n_{rh}}$$

where n_{sh} is the sample size and n_{rh} is the number of respondents in the H^{th} stratum.

Poststratification Adjustment. To increase the precision of weighted survey estimates, the weights were further adjusted to reflect known population values. The adjustment was constructed as:

$$wps_{hi} = \frac{N_h}{w_{hi} * wnr_{hi}}$$

where N_h is the frame count for the H^{th} stratum and w_{hi} and wnr_{hi} are the respective base and nonresponse adjustments.⁵

Following the completion of weighting, the weighted survey distribution of males and females by population group was checked against the distribution on the sample frame. This was done as a check to see whether the weighted sample reasonably reproduced the frame distribution on a variable not used for sampling or weighting. Table 4 presents the results of this comparison. In no case do frame and survey estimates differ by more than 5 percentage points.

⁵ The final adjustment weight contained on the survey file is named *LARGEWGT*.

Table 4-1. Frame and Respondent Distributions by Gender

Population Group	Frame		Respondents	
	Male %	Female %	Male %	Female %
Active Duty Service Members	78	22	83	17
Spouses of Active Duty Service Members	2	98	5	96
Retirees 65 and older and Spouses	67	33	62	38
Retirees under 65 and Spouses	46	54	48	52
Spouses of Activated Reservists	4	96	5	95

5. Study Findings

The target population for the TRICARE Marketing Survey was eligible members who have used the TRICARE system within the last 12 months. This TRICARE user population included approximately 3.25 million beneficiaries, or about 37 percent of the eligible population. This group formed the sample frame for the survey (see Table 5-1).

Table 5-1. TRICARE Sample Frame

Beneficiary Group	Count	Percent
Active duty members	1,245,073	38.3
Spouses of active duty members	408,514	12.6
Households of retirees < 65 and spouses	870,208	26.8
Households of retirees >= 65 and spouses	678,635	20.9
Spouses of activated Reservists	48,642	1.5
Total	3,251,072	100.0

Note. The count presented in this table does not match the count in Table 2-2. When retirees and their spouses live in the same household, they receive a count of one, thus the total in this table is lower than the total in Table 2-1, where retirees and spouses were counted individually.

As indicated in the table, approximately 51 percent of the TRICARE user population is made up of active duty families that include the active duty member (38.3%) and their spouses (12.6%). Retirees and their spouses constitute an additional 47.7 percent. The user population also includes Reserve component families who are now eligible for TRICARE because of the mobilization or call-up of the sponsor. The weighted responses from the survey represent this TRICARE population of beneficiaries who have used TRICARE within the past 12 months.

We present the survey findings in the order the questions appeared in the questionnaire. In each item section we describe the item, then present the results for the overall population and the five beneficiary groups. When appropriate, we highlight differences by gender and paygrade and present the results of special analyses.

The following guidelines apply regarding reports in chapter 5 of differences between groups. When we say two groups differ or one group is “more likely” or “less likely” than other groups to, say, rate, use, or prefer a source of information, those “difference” statements are statistically significant at an alpha level of .05. When we rank information sources by some criterion (e.g., top

five sources used, top three preferences), we are not implying that one source is used more than another or that the ranking has any statistical significance.

Throughout this chapter, some survey findings are presented in tables that are extracts of larger tables with complete results for all response options for the survey items. Those larger tables are included in the Appendixes of this report. Appendix B is the survey data by beneficiary group, Appendix C presents data from special analyses and Appendix D presents survey data by gender and paygrade.

5.1 Awareness of TRICARE Information Sources

Awareness of four different types of TRICARE information sources was measured in the TRICARE Marketing Survey to gain some sense of how many beneficiaries know about typical TMA-sponsored information sources.

General Awareness of TRICARE Information Is High

About three fourths or more of TRICARE users are aware of at least one of the following TRICARE information sources:

- | | |
|--|--------------|
| • toll-free numbers | 91.3% |
| • printed materials | 90.8% |
| • staff to assist beneficiaries at service centers, hospitals, and clinics | 86.9% |
| • Internet sites | 75.6% |

Moreover, about two thirds (67.4%) of users are aware of all four information sources (Table C-1 in Appendix C).

Awareness levels are also high within each beneficiary group (see Table 5-2). However, when compared with the other groups, retirees 65 years and older and their spouses (“older retiree group”) appear to be less aware of TRICARE printed materials (81.8%), TRICARE staff (76.2%), and TRICARE Internet sites (64.7%) as sources of information about TRICARE. Across beneficiary

groups, awareness of all four sources varies from a high of 73.4 percent among spouses of activated Reservists to a low of 51.3 percent among the older retiree group (Table C-1).

Table 5-2. Awareness of TRICARE information sources, by beneficiary group

Information Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
TRICARE toll-free numbers	91.3	91.2	95.7	92.0	87.7	93.5
Printed materials from TRICARE	90.8	93.7	93.8	92.0	81.8	94.0
TRICARE staff	86.9	90.2	93.5	87.1	76.2	91.9
TRICARE Internet sites	75.6	78.2	80.2	77.7	64.7	80.0

Some Awareness Findings Vary by Gender and Paygrade

The lower awareness levels for TRICARE Internet sites and staff among the older retiree group are attributable to female beneficiaries. Women in the older retiree group are less aware than the men are of TRICARE Internet sites (53.1% vs. 70.5%) and TRICARE staff (69.4% vs. 79.6%). Awareness of TRICARE Internet sites also varies by paygrade among active duty members. A smaller percentage of E-4s and below (65.8%) know about TRICARE web sites than do all others (83.5%) .

5.2 Information Seekers and Types of Information They Look For

To serve TRICARE beneficiaries' information needs effectively, TMA needs to know something about who is looking for information and what types of information they need. The questionnaire asked whether users looked for 12 specific types of information in the past year. Also, an open-ended question addressed other information TRICARE users looked for.

Many TRICARE Users Look for Information

Overall, more than 81 percent of TRICARE users did look for TRICARE information in the past year. Percentages vary somewhat across beneficiary groups, ranging from a low of 65.8 percent for TRICARE users in the older retiree group to a high of 88.2 percent for spouses of activated

Reservists (Table 5-3). It would be incorrect to assume that those who did not seek information during the past year lack needed information. They may already know all they currently need to know about their TRICARE health plans as a result of seeking information more than a year ago.

Table 5-3. TRICARE users who look for TRICARE information, by beneficiary group

Beneficiary Group	Percent
Active duty members	83.8
Spouses of active duty members	83.2
Retirees < 65 years old and their spouses	79.0
Retirees 65 years and older and their spouses	65.8
Spouses of activated Reservists	88.2
Total	81.1

TRICARE Users Seek Information About Many TRICARE Topics

TRICARE beneficiaries using TRICARE services look for many types of information. The top three types of information users look for include:

- Scheduling an appointment **43.6%**
- Phone numbers for healthcare providers or MTFs **41.6%**
- Referrals to specialists or other doctors **35.4%**

Table 5-4 includes findings on all information topics addressed in the survey.

Table 5-4. Types of health plan information TRICARE users look for, by beneficiary group

Type of Information	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Scheduling an appointment	43.6	54.4	64.9	38.4	16.2	63.0
Phone numbers for healthcare providers or military treatment facilities	41.6	47.2	60.3	39.6	21.3	55.8
Referrals to specialists or other doctors	35.4	39.7	49.0	35.0	18.7	51.2
Benefit coverage for current beneficiaries	34.8	34.4	35.6	41.0	26.7	39.0
Billing or claims	33.9	32.1	33.8	40.3	28.9	34.4
Military treatment facilities in the area	29.9	35.8	38.4	24.9	19.6	39.9
Prescription benefits	29.6	26.2	25.8	34.3	32.6	24.3
Local pharmacies participating with TRICARE	29.2	24.8	26.7	30.7	36.9	25.2
Finding a primary care provider	28.9	34.5	40.2	26.2	14.5	37.8
Enrollment or disenrollment in TRICARE	28.4	35.4	34.3	26.5	14.1	34.7
Benefit coverage for new family members	15.4	22.3	19.4	9.3	8.0	21.2
Switching from one military treatment facility to another	13.8	18.6	26.1	8.1	4.3	23.3
Other ^a	1.2	1.1	1.6	1.3	1.1	1.7

^aOther types of information beneficiaries search for include the Ask a Nurse service, filing a complaint, and changing a name or address.

Some Information Needs Vary by Beneficiary Group and Paygrade

The top three ranking for users overall also applies to active duty service members, spouses of active duty service members, and spouses of activated Reservists, but not to the two retiree groups. The top three topics for retirees less than 65 years old and their spouses (“younger retiree group”) are:

- benefit coverage for current beneficiaries **41.0%**
- billing or claims **40.3%**
- phone numbers for health care providers or MTFs **39.6%**

The top three types of information the older retiree group looks for are:

- information on local pharmacies participating with TRICARE **36.9%**
- prescription benefits **32.6%**
- billing or claims **28.9%**

The percentages of spouses of active duty service members and activated Reservists looking for the three top types of TRICARE information are higher than the corresponding percentages of active duty members or retirees and their spouses. This may be a result of spouses in active duty households having primary responsibility for overseeing the healthcare needs of the household.

Also, differences exist by paygrade regarding information on scheduling appointments, with a higher percentage of beneficiaries who are E-4 and below (57.2%) looking for such information, compared with all others (41.2%).

Another notable finding regarding the types of information TRICARE users seek pertains to spouses of activated Reservists. These spouses appear to be interested in all types of TRICARE information. More than 21 percent of them look for all 12 types of information addressed in the TRICARE Marketing Survey Questionnaire. Their need for information may result from their new eligibility status under TRICARE—many of them probably transfer from a civilian health care plan

to TRICARE when their spouses are activated. As new members, their need for information about the TRICARE health care program is understandably strong.

5.3 Sources of Information for TRICARE Users

Data were collected from TRICARE users who look for information about their health plans regarding two broad groups of sources. Item 4 of the questionnaire asked if these information seekers use 12 sources that are managed (produced, sponsored, or trained) by TMA. Item 5 addressed 9 other sources that are not under the direct influence of TMA. An open-ended question about other sources was also asked during data collection.

TRICARE-Managed Sources of Information Rank High in Use

Users of TRICARE services who look for TRICARE information rely on various sources for answers and assistance. Specific information sources selected by at least 45 percent of TRICARE users are:

- TRICARE beneficiary advisors at service centers and MTFs **52.5%**
- TRICARE letters, pamphlets, and brochures **46.5%**
- TRICARE Handbook **45.3%**

Four other sources are used by about 30 to 36 percent of all TRICARE service users who look for information: military newspapers or newsletters (36.1%); TRICARE doctors, nurses, or technicians (35.3%); TRICARE Internet sites (35.3%); and TRICARE toll-free numbers, excluding "Ask a Nurse" (31.3%). All but one of the top seven sources of information are managed by TRICARE.

Seekers of TRICARE information most commonly use three sources during a year.

Use of Sources Differs Across Beneficiary Groups

Except for the older retiree group, the source used by the highest percentage of TRICARE users in each beneficiary group is TRICARE beneficiary advisors at service centers, hospitals, or

clinics. Among the older retiree group, the source used by the highest percentage of information seekers is military newspapers or newsletters (61.5%), a source *not* managed by TMA.

There is more variation regarding the sources used by the second and third highest percentages of information seekers in each beneficiary group. For example, for active duty members, the source used by the second highest percentage of information seekers is TRICARE letters, pamphlets, or other brochures (46.3%) and the source used by the third highest percentage is TRICARE doctors, nurses, or technicians at a military hospital or clinic (44.4%). Table 5-5 contains similar rankings and percentages for each beneficiary group.

Table 5-5. Sources of information about TRICARE used in the past year, by beneficiary group, ranked by usage

Information Source	Total		Active Duty Service Members		Spouses of Active Duty Service Members		Retirees Under 65 and Spouses		Retirees 65 and Older and Spouses		Spouses of Activated Reservists	
	Rank	% Using	Rank	% Using	Rank	% Using	Rank	% Using	Rank	% Using	Rank	% Using
TRICARE beneficiary advisors at a service center, hospital, or clinic	1	52.5	1	61.0	1	54.9	1	48.7			1	57.3
TRICARE letters, pamphlets, or other brochures	2	46.5	2	46.3			3	47.0				
The TRICARE Handbook	3	45.3					2	48.6	3	53.3		
TRICARE doctors, nurses, or technicians at a military hospital or clinic			3	44.4	2	48.1					3	44.8
The "Ask a Nurse" toll-free number					3	43.4					2	47.0
Military newspapers or newsletters									1	61.5		
The TRICARE for Life brochure									2	57.0		

Table 5-6 contains more details (by total and beneficiary group) on 12 sources that are used by at least 20 percent of all TRICARE users who seek information about their health plans. In Appendix B, Table B-x, contains findings on all 22 sources asked about, including sources other than those specifically asked about.

Table 5-6. Sources used to get information about TRICARE, by beneficiary group

Information Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
TRICARE beneficiary advisors at a service center, hospital, or clinic	52.5	61.0	54.9	48.7	37.2	57.3
TRICARE letters, pamphlets, or other brochures	46.5	46.3	42.7	47.0	49.9	40.5
The <i>TRICARE Handbook</i>	45.3	40.5	43.3	48.6	53.3	36.6
Military newspapers or newsletters	36.1	25.7	20.7	43.3	61.5	23.3
TRICARE doctors, nurses, or technicians at a military hospital or clinic	35.3	44.4	48.1	27.1	16.8	44.8
TRICARE Internet sites	35.3	40.0	34.5	37.3	22.1	38.5
Other TRICARE toll-free numbers (other than "Ask a Nurse")	31.3	31.6	40.8	30.5	23.4	41.0
The TRICARE for Life brochure ^a	28.0	19.2	15.6	29.2	57.0	13.8
The "Ask a Nurse" toll-free number	28.0	31.3	43.4	22.6	14.7	47.0
TRICARE provider directories	26.6	24.2	28.4	29.4	26.0	30.1
Relatives, friends, or co-workers	25.3	33.3	25.5	18.0	19.0	25.0
Veterans' organizations or military associations	23.2	14.9	7.9	30.1	44.4	7.5

^aIt is possible that the percentages for the nonretiree groups, and even perhaps for the younger retiree group, reflect respondent error during data collection. Interviewers asked about use of the *TRICARE for Life* brochure but did not describe its content or purpose. Respondents may have been thinking about other TRICARE brochures or the *TRICARE Handbook*.

5.4 Primary Sources of TRICARE Information

Identifying all the sources beneficiaries use to get information about their health plans is clearly important in developing a TRICARE marketing strategy. But it also helps to know what sources beneficiaries rely on most and how effective those sources are in providing them with the information they need. To address this issue, we included two items in the questionnaire about primary sources. The first item was open ended and asked respondents to identify their primary source of information about TRICARE benefits. They could name only one source. The second item asked whether the primary source provided *all of the information, most of the information, or some of the information* that was needed.

TMA-Managed Sources Rank High As Primary Sources

Overall, the top five primary information sources for beneficiaries using TRICARE services are:

- TRICARE beneficiary advisors at a service center, hospital, or clinic **21.3%**
- TRICARE Internet sites **16.2%**
- Other TRICARE toll-free numbers (other than “Ask a Nurse”) **12.4%**
- TRICARE doctors, nurses, or technicians at a military hospital or clinic **11.5%**
- TRICARE letters, pamphlets, or other brochures **10.3%**

Except for TRICARE doctors, nurses, or technicians at MTFs, all of these sources are directly managed by TMA. Subject to resource constraints, TMA can therefore influence how effectively these sources meet the information needs of beneficiaries.

Primary Information Sources of Older Retirees Differ the Most

The top five primary information sources vary slightly from the overall findings for four of the beneficiary groups. They least reflect primary sources for the fifth group, the older retiree group. The top five primary sources for the older retiree group in 2003 were:

- TRICARE beneficiary advisors at a service center, hospital, or clinic **17.2%**
- TRICARE letters, pamphlets, or other brochures **15.1%**
- Military newspapers or newsletters **13.0%**
- *TRICARE Handbook* **10.2%**
- TRICARE Internet sites **8.9%**

Table 5-7 contains details on seven sources that include the top five primary sources for each beneficiary group. Of particular note is that the *TRICARE Handbook* ranks in the top five primary information sources for only three of the five beneficiary groups. Table B-4 in Appendix B contains additional information on primary sources.

Table 5-7. Primary source of information about TRICARE, by beneficiary group

Primary Information Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
TRICARE beneficiary advisors at a service center, hospital, or clinic	21.3	24.0	19.6	20.8	17.2	18.9
TRICARE Internet sites	16.2	19.7	14.0	16.6	8.9	17.9
Other TRICARE toll-free numbers (other than "Ask a Nurse")	12.4	10.1	20.0	13.9	8.1	19.9
TRICARE doctors, nurses, or technicians at a military hospital or clinic	11.5	12.4	16.4	9.9	7.2	15.6
TRICARE letters, pamphlets, or other brochures	10.3	9.7	5.6	11.1	15.1	4.6
TRICARE Handbook	6.9	3.5	7.0	9.6	10.2	8.0
Military newspapers or newsletters	3.8	0.6	0.8	4.7	13.0	0.4

Primary Sources for Men and Women Differ Somewhat

Women (16.8%) are more likely than men (8.8%) to use TRICARE toll-free phone numbers as their primary source of information. Also, among active duty members, women are more likely than men to use beneficiary advisors at a service center, hospital, or clinic as their primary source of TRICARE information (35.1% vs. 20.6%).

Primary sources for E4s and below are similar to those for all others.

Primary Sources Are Good Sources of Needed Information

Many beneficiaries, both overall and across all five beneficiary groups, are receiving all or most of the information they seek from their primary sources (Table 5-8). About one third (33.7%) of beneficiaries receive all the information they need from their primary sources, nearly one half (47.5%) receive most of the needed information, and about 20 percent (18.8%) receive some of the information they need about TRICARE. These overall findings reflect both men and women's assessments of the adequacy of primary sources as well as the assessments of E4s and below and all others.

Table 5-8. Amount of information provided by primary information source, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
All the information	33.7	31.7	31.7	35.5	37.2	33.2
Most of the information	47.5	51.0	50.2	44.5	41.1	50.6
Some of the information	18.8	17.2	18.1	20.0	21.7	16.2

Three primary sources stand out for providing *all* the information needed:

- TRICARE beneficiary advisors at a service center, hospital, or clinic **51.1%**
- TRICARE doctors, nurses, or technicians at a military hospital or clinic **43.1%**
- TRICARE toll-free numbers other than “Ask a Nurse” **41.2%**

Beneficiaries in the older retiree group have particularly positive results in getting *all* the information they need from TRICARE toll-free numbers (60.5%) and TRICARE doctors, nurses, or technicians at MTFs (48.5%).

Implications Regarding Sources That Provide Only Some of the Information Beneficiaries Need

Among the top five primary sources, the source with the highest overall percentage (26.9%) of users receiving *some* of the information they needed is TRICARE letters, pamphlets, or brochures (this category does not include the *TRICARE for Life* brochure). Supplementing the survey findings with findings from other investigations (existing or new) may help to explain why some sources of information do not adequately supply answers to beneficiaries’ questions. Current plans to distribute the *TRICARE Handbook* to beneficiaries may help to address the need for more information than beneficiaries find in brochures. Holding focus groups on the strengths and weaknesses of the *Handbook* may be productive in the next year or so. Also, comments from the focus groups held in October 2003 suggest that the *TRICARE for Life* brochure is not as comprehensive as retirees would like. In addition, some participants in the focus groups said that TRICARE representatives answering toll-free numbers were not always able to answer their questions (see November 24, 2003, report *TRICARE Marketing Study: Focus Group Report*) Additional investigations about these issues may be productive.

Tables containing findings on the amount of information provided by eight specific primary information sources are included in Appendix B (Tables B-5a through B-5h).

5.5 User Assessment of TRICARE-Managed Information Sources

TMA’s efforts to improve the marketing of TRICARE health plan information include making sure that the information is easy to access and understand and useful in addressing beneficiaries’ questions and concerns. We included additional assessment items for all sources of information managed by TRICARE (those sources appearing in item 4 in the questionnaire). The findings from the assessment items for the various sources apply only to TRICARE beneficiaries who used the particular sources in the past year to look for information about TRICARE. Findings are discussed in the following order: How easy was it to get information from [the source]? How easy was it to understand information from [the source]? How useful was [source] in answering your questions? Response options included *easy*, *fairly easy*, and *not easy at all* or *not useful at all*.

Ratings Are Mostly Easy/Useful or Fairly Easy/Fairly Useful

Very few beneficiaries rate TRICARE-managed sources of information as *not easy/useful at all*. Except for toll-free numbers (other than “Ask a Nurse”), the percentages of beneficiaries overall using that rating was less than 10 percent. About 20 percent (19.8%) of all users of the toll-free numbers indicate that getting information from that source is not easy at all. The findings across beneficiary groups are similar to the overall findings. Given these high ratings, we focus in this report on the *easy* and *useful* ratings for the three categories of items: ease of access and understanding and usefulness of the information.

TRICARE Sources Are Accessible to Beneficiaries

Overall, the top five sources that beneficiaries rate as “easy to get” information from are:

- Briefings or orientations (about TRICARE) **65.8%**
- The “Ask a Nurse” toll-free number **64.3%**
- TRICARE doctors, nurses or technicians **64.0%**
- Military-sponsored town hall meetings on base **60.7%**
- TRICARE beneficiary advisors **60.5%**

About one half or more of all users found it easy to get information from any of the TRICARE-managed sources except for TRICARE toll-free numbers (other than “Ask a Nurse”). Only 38.7 percent of users of TRICARE toll-free numbers think it is easy to get information from that source. These findings are presented in Table B-6d in Appendix B. Table 5-9 presents findings only for the top five sources with an overall rating of easy to get.

Table 5-9. Assessment of how easy it is to get information from the source, by beneficiary group

Source	Total (%)	Active Duty Members (%)	Spouses of Active Duty Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)	
Percent who used source	17.5	32.5	11.0	4.5	10.3	11.6	
Briefings or orientations (about TRICARE)	Easy	65.8	65.2	70.5	N/R	66.7	69.5
	Fairly easy	31.6	31.7	27.6	N/R	31.5	24.4
	Not easy at all	2.7	3.1	1.9	N/R	1.9	6.1
Percent who used source	28.0	31.3	43.4	22.6	14.7	47.0	
The "Ask a Nurse" toll-free number	Easy	64.3	64.7	67.8	62.8	54.1	72.7
	Fairly easy	28.5	28.8	25.9	27.7	37.8	21.6
	Not easy at all	7.2	6.4	6.3	9.5	8.1	5.7
Percent who used source	35.3	44.4	48.1	27.1	16.8	44.8	
TRICARE doctors, nurses or technicians	Easy	64.0	64.1	65.7	62.5	64.4	61.4
	Fairly easy	31.6	32.3	29.0	33.2	28.7	33.9
	Not easy at all	4.4	3.6	5.3	4.3	6.9	4.7
Percent who used source	7.2	9.1	5.6	4.5	8.6	5.9	
Military-sponsored town hall meetings on base	Easy	60.7	56.5	69.8	45.2	79.5	57.1
	Fairly easy	33.4	37.0	28.3	41.9	20.5	33.3
	Not easy at all	5.8	6.5	1.9	12.9	0.0	9.5
Percent who used source	52.5	61.0	54.9	48.7	37.2	57.3	
TRICARE beneficiary advisors at a service center, hospital, or clinic	Easy	60.5	64.9	51.5	55.5	66.7	52.7
	Fairly easy	32.6	30.2	40.8	33.7	28.6	38.8
	Not easy at all	6.8	4.9	7.7	10.7	4.7	8.5

Note: N/R indicates that data are not reported because of small cell size.

TRICARE Sources Are Easy to Understand

More than one half of all users seeking information about TRICARE in the past year rate the information from TRICARE-managed sources as easy to understand. Overall percentage ratings of *easy to understand* are highest for the following five sources:

- The “Ask a Nurse” toll-free number **73.5%**
- TRICARE doctors, nurses, or technicians **70.1%**
- TRICARE provider directories **62.3%**
- TRICARE beneficiary advisors **61.0%**
- Briefings or orientations (about TRICARE) **59.7%**

This list is similar to the list of sources that are easy to get information from, except that military town hall meetings has been replaced by TRICARE provider directories. The “easy to get list” is shown again here:

- Briefings or orientations (about TRICARE) **65.8%**
- The “Ask a Nurse” toll-free number **64.3%**
- TRICARE doctors, nurses or technicians **64.0%**
- Military-sponsored town hall meetings on base **60.7%**
- TRICARE beneficiary advisors **60.5%**

Ratings by Beneficiaries in All Five Groups Are Similar

Beneficiaries in all five groups are mostly consistent in their ratings regarding the top five sources that are considered easy to understand. In four of the five groups, the source receiving the highest percentage of easy-to-understand ratings was the “Ask a Nurse” toll-free number. In the older retiree group, the source receiving the highest percentage of easy-to-understand ratings was TRICARE doctors, nurses, or technicians.

Men and women’s ratings differ regarding the “Ask a Nurse” toll-free number. Women are more likely than men to rate the information from this source as being easy to understand (82.8% vs.

63.3%). Similarly, female active duty members are more likely than male active duty members to rate information from this source as easy to understand (92.5% vs. 62.5%).

Table 5-10 presents complete findings for the five sources with the highest percentage ratings of *easy to understand*. A full table of assessment appears for each source in Tables B-6a through B-6l in Appendix B.

Table 5-10. Assessment of how easy it is to understand information from the source, by beneficiary group

Source		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		28.0	31.3	43.4	22.6	14.7	47.0
The "Ask a Nurse" toll-free number	Easy	73.5	71.4	79.0	73.3	67.6	84.0
	Fairly easy	23.5	26.0	18.8	22.0	29.7	13.9
	Not easy at all	3.0	2.6	2.2	4.7	2.7	2.1
Percent who used source		35.3	44.4	48.1	27.1	16.8	44.8
TRICARE doctors, nurses, or technicians	Easy	70.1	70.0	69.2	70.7	72.4	69.1
	Fairly easy	27.4	28.3	27.0	26.6	25.3	27.4
	Not easy at all	2.4	1.8	3.7	2.7	2.3	3.5
Percent who used source		26.6	24.2	28.4	29.4	26.0	30.1
TRICARE provider directories	Easy	62.3	59.0	67.0	63.6	61.2	71.8
	Fairly easy	34.2	37.7	30.0	31.8	35.7	26.3
	Not easy at all	3.6	3.3	3.0	4.5	3.1	1.9
Percent who used source		52.5	61.0	54.9	48.7	37.2	57.3
TRICARE beneficiary advisors at a service center, hospital, or clinic	Easy	61.0	60.0	62.0	59.1	67.2	60.1
	Fairly easy	35.7	37.0	32.8	37.2	31.3	34.9
	Not easy at all	3.3	3.0	5.2	3.7	1.6	5.0
Percent who used source		17.5	32.5	11.0	4.5	10.3	11.6
Briefings or orientations (about TRICARE)	Easy	59.7	59.0	70.5	N/R	68.5	62.2
	Fairly easy	36.1	36.0	28.6	N/R	29.6	34.1
	Not easy at all	4.2	5.0	1.0	N/R	1.9	3.7

Note: N/R indicates that data are not reported because of small cell size.

TRICARE Sources Provide Useful Information to Beneficiaries

TRICARE users regard information from the TRICARE-managed sources as useful. The five sources with the highest overall percentages of TRICARE users rating them as providing useful information are:

- The "Ask a Nurse" toll-free number **75.4%**
- TRICARE doctors, nurses, or technicians **75.0%**
- TRICARE beneficiary advisors **74.8%**
- Briefings or orientations (about TRICARE) **68.3%**
- *TRICARE for Life* brochure **60.6%**

Ratings by the five beneficiary groups are similar to the overall ratings. About 70 percent or more of TRICARE users in each beneficiary group rate the "Ask a Nurse" toll-free number, TRICARE doctors, nurses, or technicians, and TRICARE beneficiary advisors at a service center, hospital, or clinic as useful sources of information.

Table 5-11 contains more details about the five highly rated sources of information. Tables B-6a through B-6l contains findings for all assessed TRICARE-managed sources of information.

Table 5-11. Assessment of how useful the source is in answering questions, by beneficiary group

Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)	
Percent who used source	17.5	32.5	11.0	4.5	10.3	11.6	
Briefings or orientations (about TRICARE)	Very useful	68.3	66.9	67.6	N/R	71.7	64.6
	Fairly useful	25.9	26.3	28.6	N/R	24.5	28.0
	Not useful at all	5.8	6.9	3.8	N/R	3.8	7.3
Percent who used source	28.0	31.3	43.4	22.6	14.7	47.0	
The "Ask a Nurse" toll-free number	Very useful	75.4	75.0	78.3	75.3	71.2	74.2
	Fairly useful	18.9	18.6	16.6	18.7	26.0	20.0
	Not useful at all	5.7	6.4	5.1	6.0	2.7	5.8
Percent who used source	35.3	44.4	48.1	27.1	16.8	44.8	
TRICARE doctors, nurses or technicians	Very useful	75.0	74.9	74.0	73.9	81.4	71.5
	Fairly useful	22.1	22.4	23.1	21.7	17.4	26.3
	Not useful at all	2.9	2.7	2.9	4.3	1.2	2.2
Percent who used source	28.0	19.2	15.6	29.2	57.0	13.8	
TRICARE for Life Brochure	Very useful	60.6	50.0	62.5	56.3	71.5	64.9
	Fairly useful	35.2	44.7	31.9	39.1	25.8	33.0
	Not useful at all	4.2	5.3	5.6	4.7	2.7	2.1
Percent who used source	52.5	61.0	54.9	48.7	37.2	57.3	
TRICARE beneficiary advisors at a service center, hospital or clinic	Very useful	74.8	75.7	73.4	70.6	82.4	69.3
	Fairly useful	20.6	19.0	22.2	25.4	14.4	23.5
	Not useful at all	4.6	5.2	4.4	4.0	3.2	7.3

Note: N/R indicates that data are not reported because of small cell size.

5.6 Difficulty in Using Source

As part of the assessment of sources of information about TRICARE, an item was included in the questionnaire asking which source was the most difficult to use.

Some Sources Are Difficult to Use

TRICARE toll-free numbers are the most difficult source to use to get information about TRICARE, according to about one third (29.1%) of TRICARE users overall and each of the beneficiary groups. As indicated in Table 5-12, the next source considered most difficult varies among three sources across the beneficiary groups: TRICARE letters, pamphlets, or other brochures, TRICARE Internet sites, and the TRICARE Handbook. Table 5- includes only sources rated as most difficult by more than 5 percent of users. A full table with difficulty ratings for all sources appears in Table B-7 in Appendix B.

Table 5-12. Most difficult source of information to use, by beneficiary group

Most Difficult Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Other TRICARE toll-free numbers (other than "Ask a Nurse")	29.1	30.9	31.8	26.6	22.4	32.2
TRICARE letters, pamphlets, or other brochures	15.2	17.3	10.5	14.3	16.8	11.1
TRICARE Internet sites	12.8	10.4	12.7	17.9	9.3	17.2
TRICARE Handbook	11.8	8.8	12.7	14.3	17.4	11.1
TRICARE beneficiary advisors at a service center, hospital, or clinic	7.0	5.2	9.5	7.6	9.3	7.5

5.7 Satisfaction With Available Information About TRICARE

The survey included an item to assess overall satisfaction with information about TRICARE. The item appeared after other items that cued TRICARE users about TRICARE information sources and asked them to assess possible problems with the sources.

Satisfaction Is High

More than three of every four (78.7%) users of TRICARE services who look for information about TRICARE are satisfied (53.6%) or very satisfied (25.1%) with available information. Only 7.4 percent of the beneficiaries are either dissatisfied or very dissatisfied with TRICARE information sources.

All Beneficiary Groups Are Satisfied, Especially Older Retirees and Their Spouses

The high levels of satisfaction exist across all five beneficiary groups, particularly the older retiree group—levels of satisfied/very satisfied TRICARE users range from 75.9 percent among active duty members to 87.9 percent of the older retiree group. About 40 percent of the beneficiaries in the older retiree group are very satisfied, compared with about 20 percent of beneficiaries in each of the other four groups. Dissatisfaction levels (i.e., dissatisfied/very dissatisfied) across beneficiary groups range from about 4 percent of the older retiree group to about 9 percent of the younger retiree group (Table 5-13).

Table 5-13. Overall satisfaction/dissatisfaction with available information about TRICARE, by beneficiary group

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Very satisfied	25.1	21	21.6	23.1	40.7	19.2
Satisfied	53.6	54.9	57.0	53.8	47.2	59.1
Neither satisfied nor dissatisfied	14.0	16.0	15.4	14.0	8.5	14.5
Dissatisfied	5.5	5.9	4.5	6.9	2.9	5.2
Very dissatisfied	1.9	2.2	1.6	2.2	0.8	2.0

Satisfaction levels do not differ by gender or pay grade. Neither do they vary by the number of topics searched for or the number of information sources used (see Figures C-5a and C-5b in Appendix C).

Satisfaction/Dissatisfactions Levels and Primary Sources

Satisfaction levels (satisfied/very dissatisfied) are particularly high among beneficiaries using any of the following three sources as a primary source:

- TRICARE beneficiary advisors **87.0%**
- TRICARE doctors, nurses, and technicians **83.6%**
- TRICARE Handbook **83.2%**

Of those using the Internet as a primary source, only 9.3 percent are in the older retiree group. Notably, however, 95.2 percent of those retiree group Internet users are very satisfied or satisfied with available TRICARE information.

As mentioned earlier, only 7.4 percent of beneficiaries overall are dissatisfied or very dissatisfied with available TRICARE information. Among those beneficiaries, the percentages who are dissatisfied or very dissatisfied are highest for those using any of the following three sources as a primary source:

- TRICARE toll-free numbers (other than “Ask a Nurse”) **21.4%**
- TRICARE beneficiary advisors **14.1%**
- TRICARE Internet sites **13.7%**

5.8 Communication Strategies

Communication strategies need to take into account not only what sources of information beneficiaries use but also how they prefer to get needed information. Before addressing strategies that target sources beneficiaries actually use, we discuss the methods beneficiaries most and least prefer for getting answers to their TRICARE questions. The information on preferences applies to all beneficiaries who use TRICARE services, not just to those saying they looked for TRICARE information in the past year.

Beneficiary Groups Differ Regarding Preferences for Getting TRICARE Information

Overall, TRICARE users most prefer getting answers to their questions face to face. Next, similar numbers of them most prefer getting needed information by telephone or mail. Those findings, however, mask important differences across the beneficiary groups that have implications for marketing strategies.

Most Preferred Method: Overall Findings and Group Differences

Face to face – 30.8%

Highest for the active duty group (41.2%), which differs from the other four groups, and lowest for the older retiree group (19.5%).

Telephone – 23.2%

Lowest for the active duty group (17.5%), which differs from spouses of active duty members (29.1%) and spouses of activated Reservists (33.3%).

Mail – 22.1%

Highest for the older retiree group (44.8%), which differs from the other four groups, and lowest for the active duty member group (10.4%).

Internet less popular. Relatively few beneficiaries most prefer using the Internet to get TRICARE information. At the high end, about 21 percent of active duty members most prefer it. In contrast, about 7 percent of beneficiaries in the 65 years and older retiree group and about 15 percent in the other three groups most prefer finding answers on the Internet.

Telephone calls: Live person versus automated responses. For the most part, beneficiaries preferring to use the telephone are thinking about talking to a live person—either by calling local TRICARE staff or by using menu-driven toll-free numbers leading to a TRICARE representative. About 80 percent of the beneficiaries within each of the five groups are thinking about toll-free calls to representatives of TRICARE. The groups differ, however, regarding local calls, with older retiree group members (46.8%) less likely than members of the other four groups (about 68% to 86%) to be thinking about local calls. Also, active duty members (85.6%) are more likely than members of the younger (67.9%) retiree group to be thinking about local calls.

Beneficiaries in the older retiree group are more likely than beneficiaries in the other four groups to think about entirely automated calls (about 39%, compared with about 20% in the other

four groups). During the TRICARE Marketing focus groups held last October, some of the participants in the older retiree group said they consider the information provided in automated calls to be more reliable than that provided by a “live” person. They said they prefer fewer menu options, however, to reduce the length of the calls (see November 24, 2003, report *TRICARE Marketing Study: Focus Group Report*).

For more details on most preferred methods among all TRICARE users in 2003, see Table 5-14.

Table 5-14. Most preferred method to get answers to TRICARE questions, by beneficiary group

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Face to face	30.8	41.2	28.3	26.1	19.5	26.3
Telephone	23.2	17.5	29.1	27.5	23.6	33.3
Menu-driven toll-free numbers leading to a TRICARE representative	<i>80.5</i>	<i>80.2</i>	<i>81.4</i>	<i>81.2</i>	<i>79.3</i>	<i>81.6</i>
Local calls to TRICARE staff	<i>70.2</i>	<i>85.6</i>	<i>76.7</i>	<i>67.9</i>	<i>46.8</i>	<i>78.3</i>
Entirely automated TRICARE toll-free numbers	<i>25.8</i>	<i>21.6</i>	<i>21.5</i>	<i>23.5</i>	<i>38.8</i>	<i>16.9</i>
Mail	22.1	10.4	18.7	23.1	44.8	16.2
Internet site	16.1	21.3	17.0	15.6	6.8	15.1
E-mail	7.6	9.5	6.5	7.5	4.6	8.7

Note: Italicized percentages apply only to beneficiaries indicating telephone as the most preferred way to get answers to their TRICARE questions. Among that subset of beneficiaries, they indicate the percentage thinking about the type of call described in the row.

Men and Women Differ in Their Preferred Methods for Getting Answers

Overall, men are more likely than women to most prefer getting answers to their TRICARE questions face to face, and women are more likely than men to most prefer using the telephone. Men are also more likely than women to most prefer using the Internet.

Most Preferred Method	Men	Women
Face to face	34.4%	26.2%
Telephone	19.3%	28.1%
Internet sites	18.0%	13.7%

Face-to-face preferences are particularly high among male active duty beneficiaries (42.2%). Among women, the only group most preferring to get answers face to face is female active duty members (37.7%). The telephone preference is relatively high among female spouses of active duty members (29.5%) and activated Reservists (33.5%) and female retirees/female spouses in the under 65 age group (31.8%).

Most preferred methods for getting TRICARE information did not vary by paygrade.

Seekers of Information Differ From Nonseekers

TRICARE users who look for TRICARE information and TRICARE users who do not look for information differ somewhat regarding their most preferred way to get answers to TRICARE questions. The preferences of “seekers” are quite similar to the overall findings. “Nonseekers” differ in that they have a lower preference for getting answers face to face and a higher preference for getting answers by mail.

Most Preferred Method	Seekers of Information	Nonseekers of Information
Face to face	32.8%	23.8%
Telephone	23.4%	22.4%
Mail	20.0%	29.9%
Internet	16.2%	15.9%
E-mail	7.5%	7.9%

All beneficiary groups except for spouses of activated Reservists contribute to the higher preference for mail among nonseekers. And all five beneficiary groups, particularly active duty members and their spouses, contribute to the lower preference among nonseekers for getting answers face to face (see Tables C-4a and C-4b in Appendix C).

Preferences Differ for Various Reasons

The findings on most preferred methods suggest that beneficiary preferences vary by convenience of information source, age, possible experience with civilian plans, and responsibility for children in the household. For example, many active duty members (both male and females) located on bases with MTFs probably find it convenient to meet with TRICARE advisors or providers or to attend briefings on base or in their units. Thus, their relatively high preferences for face-to-face encounters are understandable.

Age-related characteristics also are reflected in preferences. For example, studies on Internet usage (U.S. Department of Commerce, 2002; U.S. Department of Veterans Affairs (2003): *2001 National Survey of Veterans*) indicate that, currently, persons late in their prime workforce years or already retired are less likely to use the Internet than other age groups. That situation is predicted to change as the availability of computers and access to the Internet increase and the current workforce cohort ages. People using the Internet now will likely continue to do so as they age and leave the workforce (U.S. Department of Commerce, 2002). Thus, we could anticipate that appropriate marketing of TRICARE Internet sites would provide a bigger payoff in coming years.

Spouses of activated Reservists, spouses of active duty members, and beneficiaries in the younger retiree group have similar preferences regarding the telephone (33.3%, 29.1%, and 27.5%, respectively, most prefer using it to get answers). It might be useful to investigate if that finding reflects possible experience with civilian health plans and the presence of other family members (e.g., children) in the household. For example, beneficiaries in these groups may have current or recent experience in the private employment sector with civilian health plans. It is possible that they have had relatively long-standing relationships with doctors in the civilian sector and are comfortable calling them or their office staff for information. When they become TRICARE beneficiaries, they may prefer to continue calling providers and TRICARE staff for answers to their questions. Also, beneficiaries in the two groups of spouses of members on active duty may be calling regarding health issues of other family members.

For Most Beneficiaries, Mail and Telephone Are Least Preferred Ways to Get Answers

Findings on the three methods least preferred for getting answers to TRICARE questions reinforce the findings regarding most preferred methods. Except for the older retiree group, beneficiaries least prefer to get answers to their questions by mail. That is most true of active duty members (49.6%), spouses of activated Reservists (44.8%), and spouses of active duty members (40.5%). The older retiree group is less likely (16.2%) than those three groups and the other younger retiree group to least prefer getting TRICARE information by mail.

About 20 to 25 percent of the beneficiaries in each group least prefer getting TRICARE information by telephone. They are thinking mostly about both types of toll-free numbers—those that lead to a TRICARE representative and those that are entirely automated. Beneficiaries in the older retiree group (66.3%) are less likely than active duty members (75.9%) and their spouses (76.3%) to think about calls leading to TRICARE representatives. And beneficiaries in the older retiree group (about 52%) are less likely than beneficiaries in the other four groups (70% to 79%) to be thinking about entirely automated calls.

Beneficiaries in the older retiree group (27.5%) are more likely than active duty members (9.6%) to least prefer using TRICARE Internet sites to get answers to their TRICARE questions.

Table 5-15. Least preferred method to get answers to TRICARE questions, by beneficiary group

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Mail	36.7	49.6	40.5	32.0	16.2	44.8
Telephone	24.9	26.2	22.1	24.9	24.2	21.4
Menu-driven toll-free numbers leading to a TRICARE representative	72.8	75.9	76.3	71.7	66.3	73.8
Entirely automated TRICARE toll-free numbers	69.5	74.7	79.3	70.3	52.3	76.7
Local calls to TRICARE staff	35.8	34.3	35.7	37.7	35.8	45.3
Internet site	16.9	9.6	15.9	19.6	27.5	13.5
E-mail	15.6	11.2	16.6	15.8	22.7	15.2
Face to face	4.5	2.5	3.9	6.7	5.8	3.6

Note: Italicized percentages apply only to beneficiaries indicating telephone as the least preferred way to get answers to their TRICARE questions. Among that subset of beneficiaries, they indicate the percentage thinking about the type of call described in the row.

Least Preferred Methods Do Not Differ by Gender or Paygrade

The overall findings on least preferred methods to get answers to TRICARE questions apply to both men and women overall (least preferred order: mail, telephone, Internet sites, e-mail, and face to face). Also, they do not differ by paygrade.

Seekers of Information and Nonseekers Are Mostly Similar

TRICARE users who looked for information and those who did not look for information in 2003 have the same order of preferences regarding methods they least prefer for getting answers to their TRICARE questions, but seekers are more likely than nonseekers of information to least prefer using mail. All beneficiary groups, but particularly spouses of active duty members, are contributors to that lower percentage among nonseekers.

Least Preferred Method	Seekers of Information	Nonseekers of Information
Mail	39.0%	30.7%
Telephone	24.9%	26.3%
Internet	16.5%	19.6%
E-mail	15.1%	18.3%
Face to face	4.5%	5.1%

Stated preference is one factor in planning communication strategies for delivering health care information. Actual use of sources, or market reach, is another factor. The percentages of the various beneficiary groups that report using a particular information source can be considered the "reach" of that source within the beneficiary group. The next section contains a series of charts that show the general reach of each information source of TRICARE information

This information can contribute to the development of the best "mix" of information sources to reach the greatest number of TRICARE beneficiaries within each beneficiary group. However, other important factors such as relative cost must also be considered.

5.9 Market Reach

In this section we describe an analysis performed to inform market reach on the TRICARE user population. The goal was to provide TMA officials with a prioritized list of the 12 TRICARE sources managed by TMA that could be used to reach an increasing percentage of the TRICARE user population. The analysis was based on TRICARE user responses regarding sources they used in the past year to get information on TRICARE. Figure 1-1 shows findings for the total population of TRICARE users. Figures 1-2 through 1-6 present market reach findings for each of the five beneficiary populations.

The chart presents information for two TRICARE populations—beneficiaries who used the TRICARE military healthcare system within the past 12 months and a subset of those users *who also sought TRICARE information* within the past year. (This second population is the group of users described in Table 5-3.) The two data series displayed as vertical bars represent the percentage of

users of each population who used a specific source within the past year. For example, users who sought TRICARE information from beneficiary advisors constitute 40.8 percent of all TRICARE users and 52.5 percent of TRICARE users who sought any TRICARE information in the past year. (The percentages are based on the same count of users but on different denominators that correspond to the two different populations.)

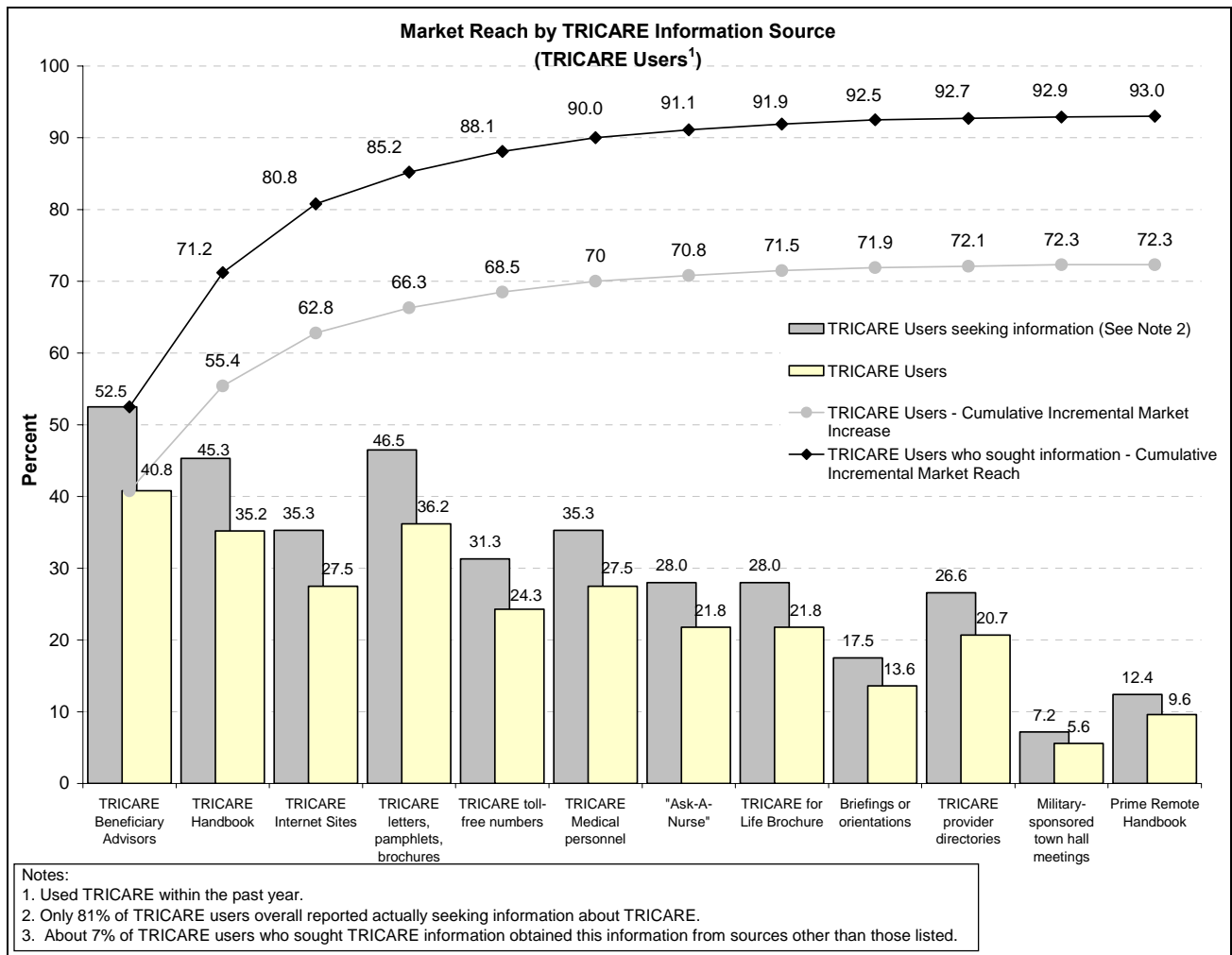


Figure 5-1. Market Reach by TRICARE Information Source, for All Users

As shown in Figure 1-1, the single source used by the largest percentage of TRICARE users was TRICARE beneficiary advisors at service centers, hospitals, or clinics. Over 40 percent (40.8%) of the TRICARE user population can be reached via beneficiary advisors. (The individual source usage is presented in Figure 1-1 by the two series depicted with vertical bars. The cumulative reach for each corresponding population is displayed as a line series.) To determine the possible increase

in reach of the remaining population, we then computed percentages among the remaining users for the remaining sources. The source with the largest percentage of users was selected and used as the source offering the highest incremental increase in reach for an additional portion of the remaining population. The source that provided the highest incremental increase in reach following the beneficiary advisors was the TRICARE Handbook.

Together, the beneficiary advisors and the *TRICARE Handbook* reach about 55 percent (55.4%) of the TRICARE user population. The incremental increase provided by the *Handbook* is 14.6 percent (55.4% - 40.8%). This iterative procedure was used to determine the optimum market reach provided by the 12 TRICARE information sources for both populations and does not consider any other factors such as cost of developing the sources or TMA priorities.

These results tell TRICARE officials that they can reach about 60 percent (62.8%) of the general TRICARE user population with three sources of information: TRICARE beneficiary advisors, the *TRICARE Handbook*, and the TRICARE Internet sites. In addition, this information indicates that these three sources reach approximately 81 percent (80.8%) of the TRICARE user population who sought information about TRICARE in the past year.

The increase in reach in going from the n^{th} source to the $n+1^{\text{st}}$ source is only the incremental increase and does not inform one about the sources used by the highest percentage of users after the first source is selected. For example, the chart shows that 36.2 percent of the overall TRICARE user population said they had used TRICARE letters, pamphlets, and brochures in the past year, while only 27.5 percent used the TRICARE Internet sites. However, of the remaining population of users not reached by beneficiary advisors and the *TRICARE Handbook*, the largest incremental increase in reach is offered by the TRICARE Internet sites, not by TRICARE letter, pamphlets, and brochures. This reveals that a large percentage of the users who used beneficiary advisors and *the TRICARE Handbook* had also used TRICARE letters, pamphlets, and brochures. While it is possible that beneficiaries may obtain a *TRICARE Handbook* as well as letters, pamphlets, or brochures when they visit beneficiary advisors, there are many scenarios that may explain the overlap in TRICARE sources used. Also, events that lead to information seeking do not have to be co-occurring as in the previous example.

These 12 TRICARE sources alone do not reach 100 percent of the population who sought information because users also mentioned other sources besides the 12 sources explicitly inquired about during the TRICARE Marketing Survey.

This market reach analysis shows that TMA can reach more than 50 percent of the TRICARE user population in each of the five beneficiary groups with six information sources:

1. TRICARE beneficiary advisors,
2. *TRICARE Handbook*,
3. TRICARE Internet sites,
4. TRICARE toll-free numbers,
5. *TRICARE for Life* brochure, and
6. TRICARE letters, pamphlets, and brochures.

Conversely, if TMA decides to focus its marketing plans on the TRICARE user population that sought information in the past year, another hierarchy would arise. TMA could reach more than 70 percent of the TRICARE users who sought information in each of the five beneficiary groups with these six information sources:

1. TRICARE beneficiary advisors,
2. *TRICARE Handbook*,
3. TRICARE Internet sites,
4. TRICARE toll-free numbers,
5. *TRICARE for Life* brochure, and the
6. “Ask-A-Nurse” hotline.

Likewise, if TMA sets a marketing goal to reach two thirds of the active duty population, including active duty members (Figure 1-2) and spouses of active duty members (Figure 1-3), findings indicate TMA could achieve this goal with four information sources:

1. TRICARE beneficiary advisors,
2. TRICARE medical personnel,
3. TRICARE Internet sites, and
4. TRICARE toll-free numbers.

This analysis could be used, along with the costs associated with producing and distributing the various TRICARE sources, in a cost-benefit model to determine how resources should be allocated to reach the largest percentage of the TRICARE user population. This analysis could also be used to determine the market reach efficiency afforded by any combination of information sources decided on by TMA. For example, if TMA decides to put all of its resources into three information sources, say X, Y, and Z, it can calculate the reach—for either the user population or the population who sought information in the past year—based on these findings.

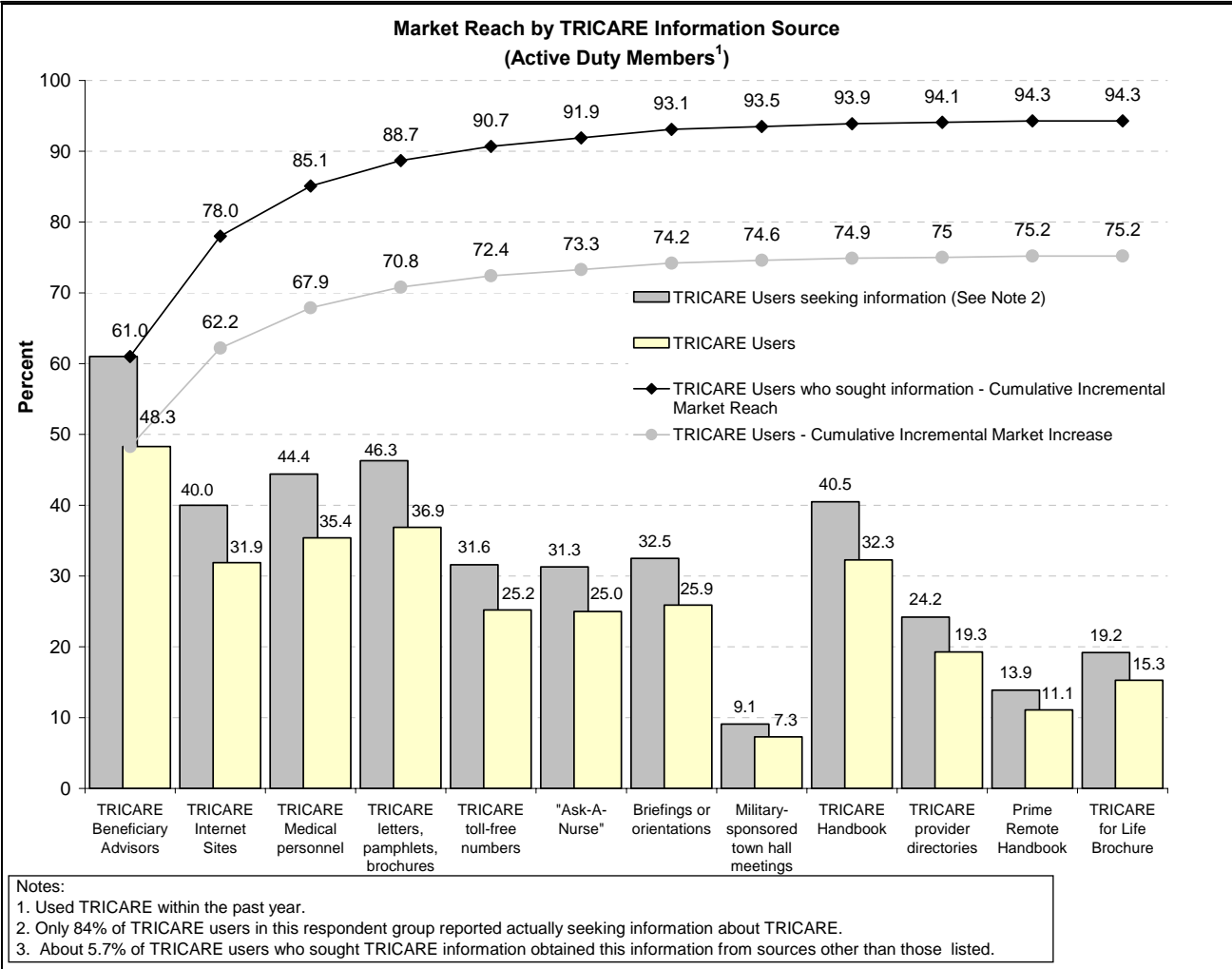


Figure 5-2. Market Reach by TRICARE Information Source, for Active Duty Members

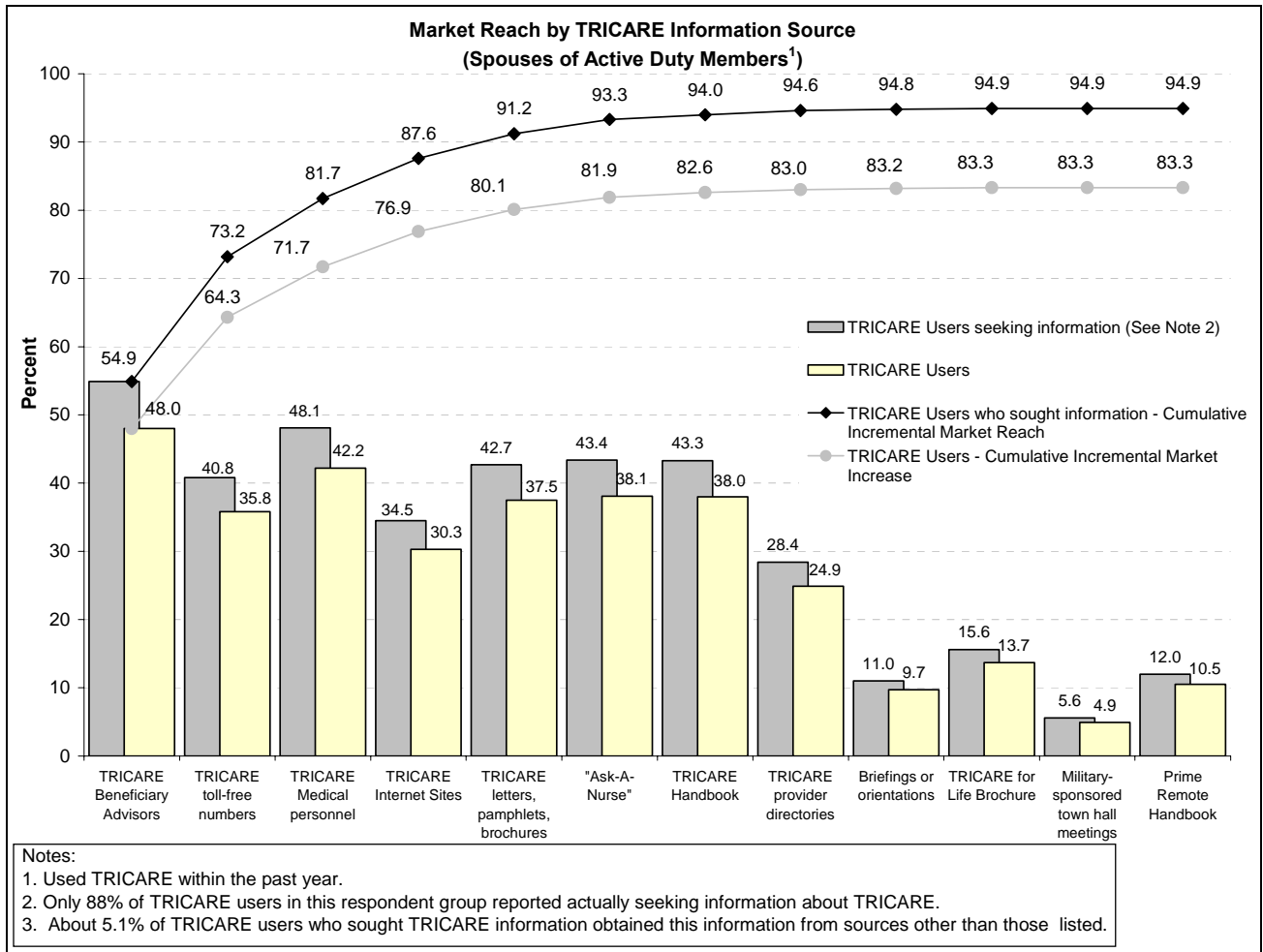


Figure 5-3. Market Reach by TRICARE Information Source, for Spouses of Active Duty Members

There are other findings of interest within the different beneficiary groups. For example, TRICARE reaches more than two thirds of the user population of spouses of activated Reservists with only two sources: beneficiary advisors at service centers, hospitals, or clinics and the “Ask a Nurse” hotline (Figure 1-6).

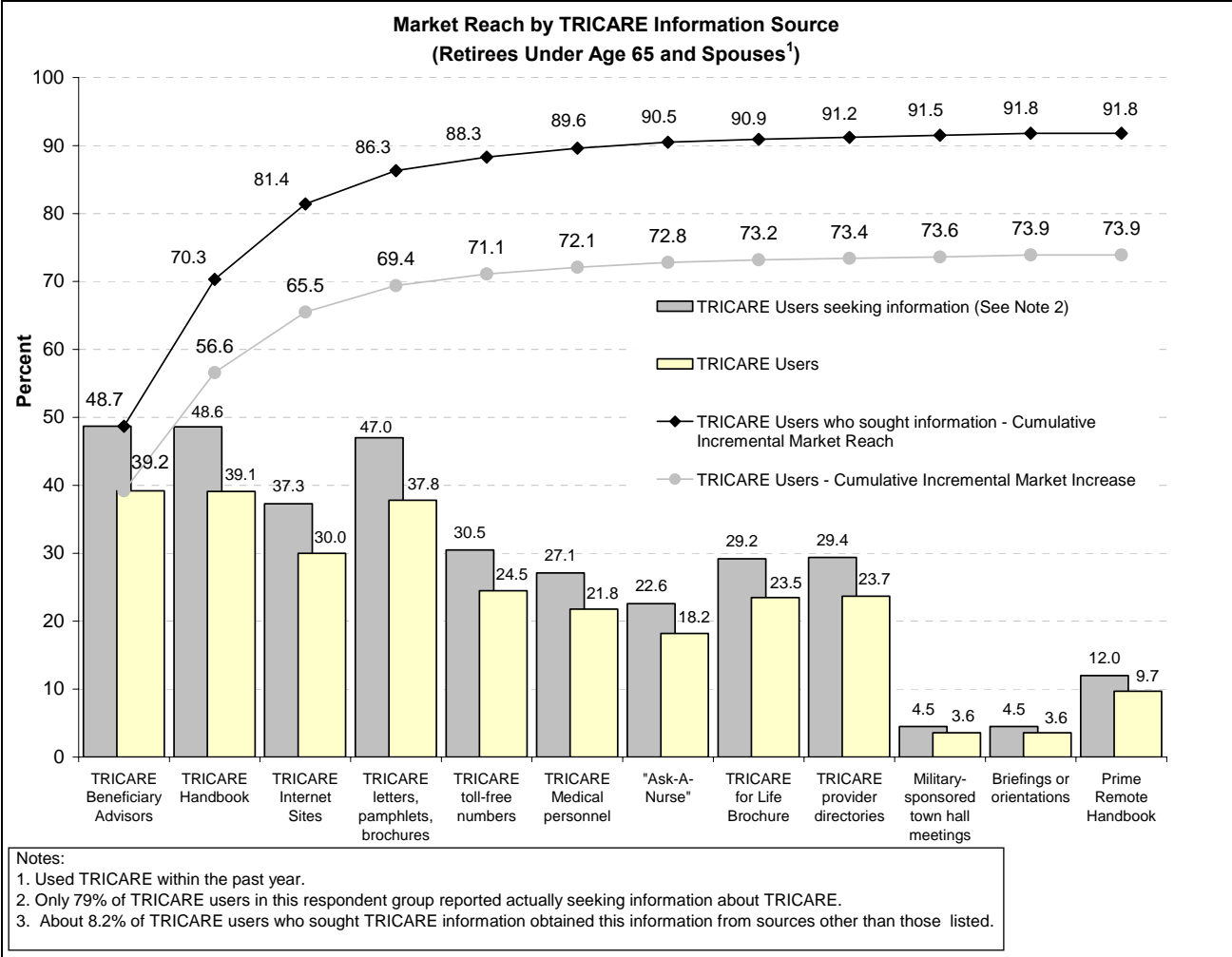


Figure 5-4. Market Reach by TRICARE Information Source, for Retirees Under Age 65 and Spouses

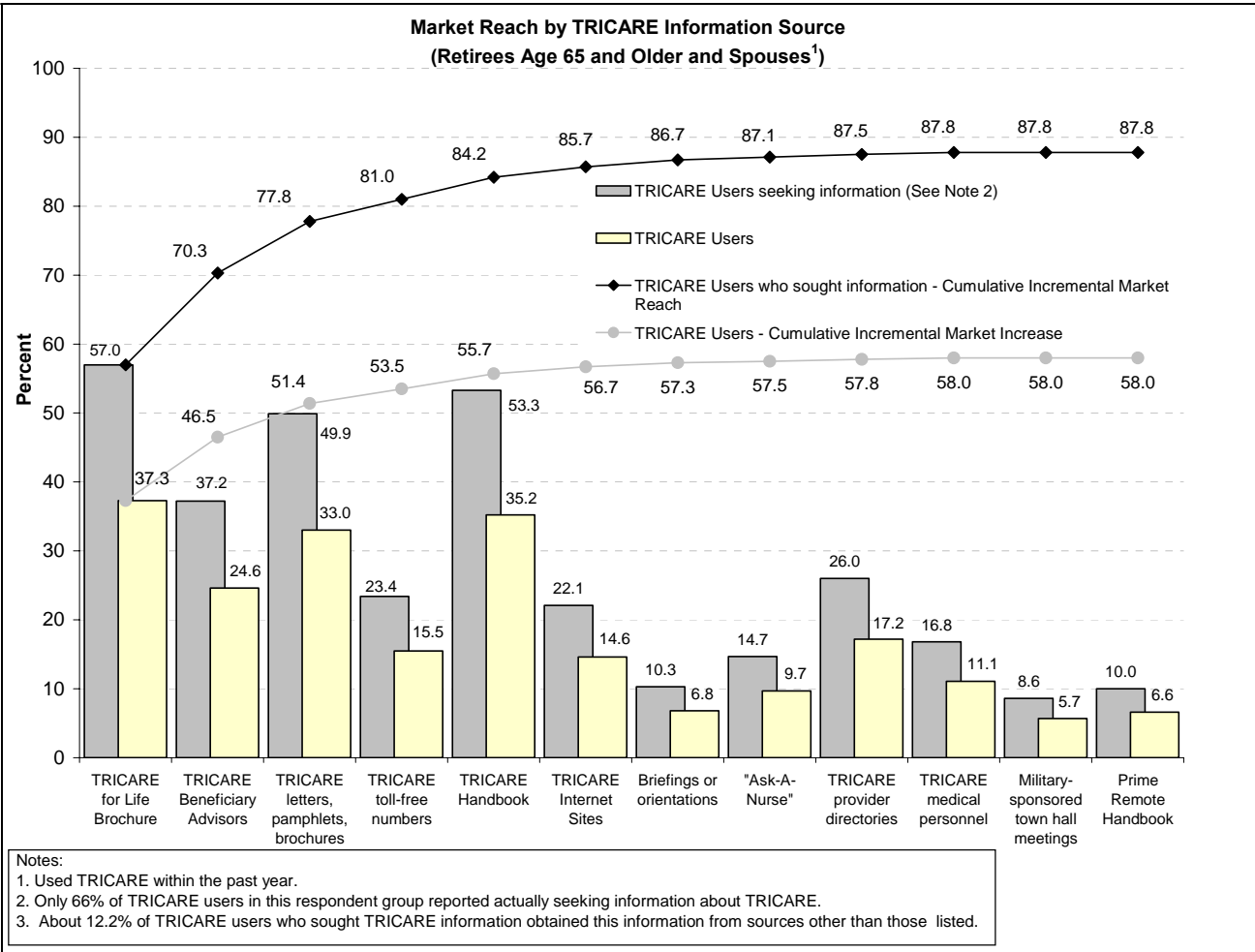


Figure 5-5. Market Reach by TRICARE Information Source, for Retirees Age 65 and Older and Spouses

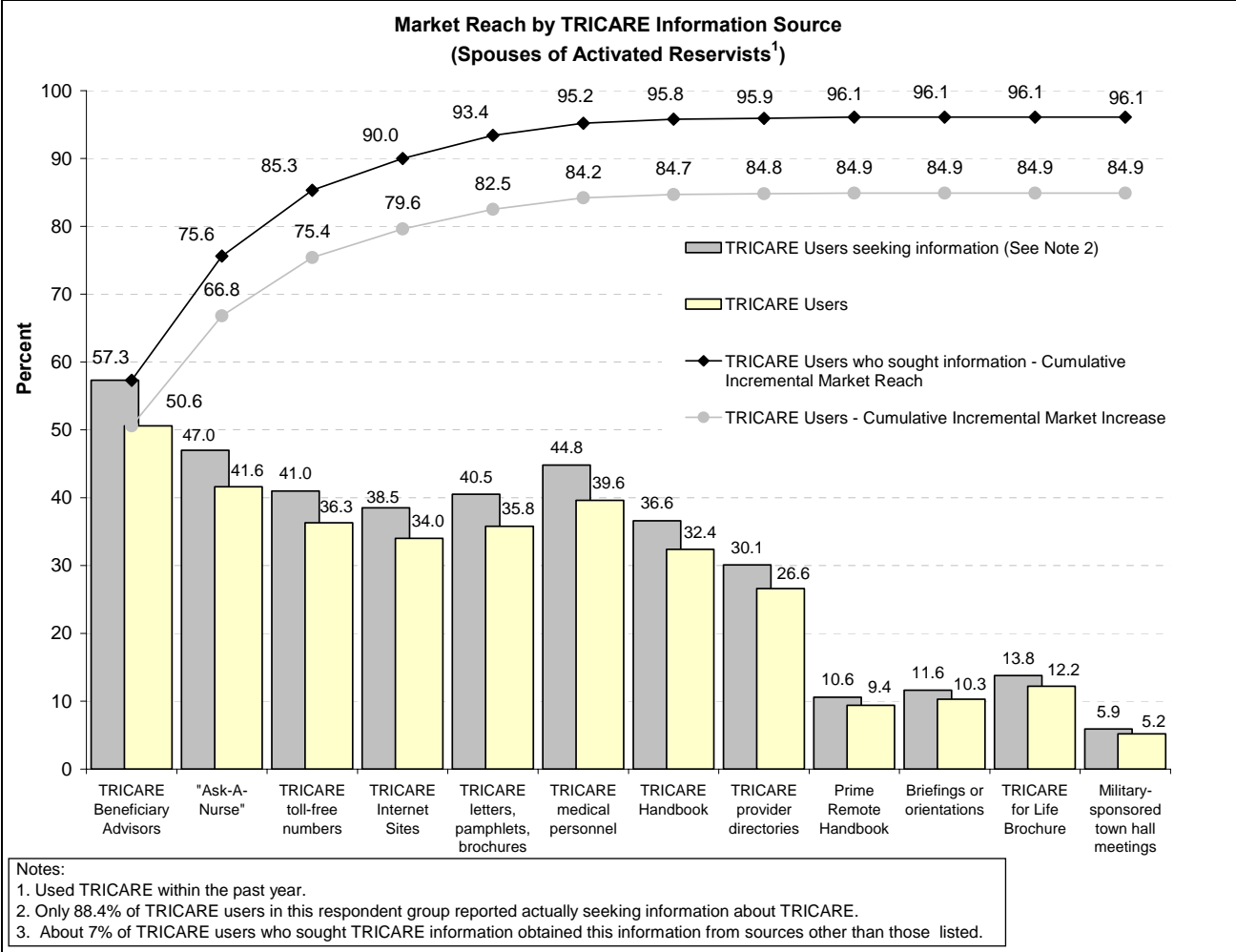


Figure 5-6. Market Reach by TRICARE Information Source, for Spouses of Activated Reservists

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Appendix A

TMA Marketing Survey

INTRODUCTION TO EXTENDED INTERVIEW

Hello, may I speak to [SELECTED RESPONDENT]?

We are conducting a survey on behalf of the Department of Defense TRICARE Program. Your participation is important and will help to improve TRICARE benefit information.

The interview will take about 10 minutes. Any information you provide is protected under the Privacy Act. Your name and answers will be kept completely confidential.

[IF R WANTS COPY OF PRIVACY ACT NOTICE, COMPLETE ADDRESS FORM.]

Participation in the survey is voluntary, and you may ask us to skip any questions you wish.

[If respondent wants to send comments regarding any part of this study to the Department of Defense, provide the following address.]

DISC1. The address is...

Health Program Analysis and Evaluation
Office of the Assistant Secretary of Defense/ Health Affairs
5111 Leesburg Pike, Suite 810
Falls Church, VA 22041-3206

First, I'm going to ask some general questions about TRICARE information sources.

1. TRICARE provides information to health plan beneficiaries in various ways. Are you aware that there are . . . [READ LIST; CIRCLE NUMBER CODES FOR YES RESPONSES]

TRICARE Internet sites?	1
Toll-free numbers that you can call to get TRICARE information?	2
Printed materials from TRICARE, such as handbooks, directories, pamphlets, and brochures?	3
TRICARE staff to assist beneficiaries at military treatment facilities and clinics?	4
REFUSED	-7
DON'T KNOW	-8

Now, I'm going to read a **list of topics** about TRICARE and ask if you have **looked for** these types of information. Just answer yes or no.

2. In the past year, did you **look for information** on . . .

Enrollment or disenrollment in TRICARE?	1
Benefit coverage for new family members?.....	2
Benefit coverage for current beneficiaries ?	3
Billing or claims?.....	4
Military treatment facilities in your area?.....	5
Phone numbers for healthcare providers or military treatment facilities?.....	6
Scheduling an appointment?.....	7
Switching from one military treatment facility to another?.....	8
Finding a primary care provider?.....	9
Referrals to specialists or other doctors?	10
Prescription benefits?.....	11
Local pharmacies participating with TRICARE?.....	12
REFUSED.....	-7
DON'T KNOW.....	-8

3. Did you look for **any other** information about TRICARE in the past year?

YES	1
NO.....	2
REFUSED	-7
DON'T KNOW	-8

[IF ALL Q2 = NO AND Q3 = NO, GO TO INTRO TO Q12]

3a. IF YES, ASK: What other information did you look for?

[RECORD RESPONSE] _____

Now I have some questions about **where** you get information about TRICARE benefits and services.

4. In the past year, did you use any of the following sources to get information about TRICARE? Did you get information about TRICARE from . . .

TRICARE beneficiary advisors at a service center, hospital, or clinic?	1
TRICARE doctors, nurses, or technicians at a military hospital or clinic? ...	2
TRICARE's Internet sites?	3
The "Ask a Nurse" toll-free number?	4
Other TRICARE toll-free numbers?	5
The TRICARE for Life brochure?	6
The TRICARE Handbook?	7
The Prime Remote Handbook?	8
TRICARE provider directories?	9
TRICARE letters, pamphlets, or other brochures?	10
Military-sponsored town hall meetings on base?	11
Briefings or orientations?	12
REFUSED	-7
DON'T KNOW	-8

5. In the past year, did you use any of these **other** sources to get information about TRICARE? Did you get information about TRICARE from . . .

Doctors or staff at civilian hospitals or clinics?	1
Relatives, friends, or co-workers?	2
Military newspapers or newsletters?	3
Other newspapers or newsletters?	4
Veterans' organizations or military associations?	5
Civilian telephone books?	6
Civilian associations?	7
A video or CD-ROM?	8
Television or radio?	9
REFUSED	-7
DON'T KNOW	-8

6. Are there any other sources of information about TRICARE you used in the past year that I haven't asked about?

YES	1
NO	2
REFUSED	-7
DON'T KNOW	-8

- 6a. [IF YES, ASK]: What other information sources did you use? [RECORD RESPONSE]

7. In the past year, what was your **primary** source of information about TRICARE?

PEOPLE

TRICARE BENEFICIARY ADVISORS AT A SERVICE CENTER, HOSPITAL, OR CLINIC..... 1
 TRICARE DOCTORS, NURSES, OR TECHNICIANS AT A MILITARY HOSPITAL OR CLINIC.....2
 DOCTORS OR STAFF AT CIVILIAN HOSPITALS OR CLINICS....3
 WORD OF MOUTH (FRIENDS, RELATIVES, CO-WORKERS).....4
 MILITARY-SPONSORED TOWN HALL MEETINGS ON BASE5
 BRIEFINGS OR ORIENTATIONS6

PRINT MATERIALS

TRICARE FOR LIFE BROCHURE7
 TRICARE HANDBOOK.....8
 TRICARE PRIME REMOTE HANDBOOK.....9
 TRICARE PROVIDER DIRECTORIES10
 TRICARE LETTERS, PAMPHLETS, OR OTHER BROCHURES ...11
 MILITARY NEWSPAPERS OR NEWSLETTERS12
 OTHER NEWSPAPERS OR NEWSLETTERS13
 DIRECT MAIL/EMAIL FROM VETERANS ORGANIZATIONS OR MILITARY ASSOCIATIONS.....14
 DIRECT MAIL/EMAIL FROM CIVILIAN ASSOCIATIONS15
 CIVILIAN TELEPHONE BOOKS16

TELEPHONE / ELECTRONIC SOURCES

“ASK A NURSE”17
 TRICARE TOLL-FREE NUMBERS.....18
 TRICARE INTERNET SITES19
 E-MAIL.....20
 TV OR RADIO21
 VIDEO OR CD-ROM.....22

MISCELLANEOUS

OTHER [RECORD RESPONSE]: _____23
 NONE (GO TO Q9a)24
 REFUSED (GO TO Q9a) -7
 DON'T KNOW (GO TO Q9a) -8

8. Did **this primary source** provide you with...

All the information,..... 1
 Most of the information, or2
 Some of the information you needed about TRICARE?3
 REFUSED..... -7
 DON'T KNOW -8

[FOR EACH SOURCE IN Q4 THAT R SAYS HE/SHE USED, ASK 9a, 9b, and 9c]

9a. You mentioned [NAMED SOURCE] as an information source. How easy was it to **get information** from this source?. Would you say getting it was . . .

- Easy,..... 1
- Fairly easy, or..... 2
- Not easy at all?..... 3
- REFUSED.....-7
- DON'T KNOW.....-8

9b. How easy was it to **understand** the information from [NAMED SOURCE]? Would you say understanding it was . . .

- Easy,..... 1
- Fairly easy, or..... 2
- Not easy at all?..... 3
- REFUSED..... -7
- DON'T KNOW..... -8

9c. How **useful** (was/were) [NAMED SOURCE] in answering your questions? Was this source . . .

- Useful,..... 1
- Fairly useful, or..... 2
- Not useful at all?..... 3
- REFUSED..... -7
- DON'T KNOW -8

10. Of all the TRICARE information sources you have used, which one, if any, was the **most difficult** to use? [ENTER 1 ONLY]

PEOPLE

TRICARE BENEFICIARY ADVISORS AT A SERVICE CENTER, HOSPITAL, OR CLINIC.....1
 TRICARE DOCTORS, NURSES, OR TECHNICIANS AT A MILITARY HOSPITAL OR CLINIC.....2
 DOCTORS OR STAFF AT CIVILIAN HOSPITALS OR CLINICS....3
 WORD OF MOUTH (FRIENDS, RELATIVES, CO-WORKERS).....4
 MILITARY-SPONSORED TOWN HALL MEETINGS ON BASE5
 BRIEFINGS OR ORIENTATIONS6

PRINT MATERIALS

TRICARE FOR LIFE BROCHURE7
 TRICARE HANDBOOK.....8
 TRICARE PRIME REMOTE HANDBOOK.....9
 TRICARE PROVIDER DIRECTORIES10
 TRICARE LETTERS, PAMPHLETS, OR OTHER BROCHURES ...11
 MILITARY NEWSPAPERS OR NEWSLETTERS12
 OTHER NEWSPAPERS OR NEWSLETTERS13
 DIRECT MAIL/EMAIL FROM VETERANS ORGANIZATIONS OR MILITARY ASSOCIATIONS.....14
 DIRECT MAIL/EMAIL FROM CIVILIAN ASSOCIATIONS15
 CIVILIAN TELEPHONE BOOKS16

TELEPHONE / ELECTRONIC SOURCES

“ASK A NURSE”17
 TRICARE TOLL-FREE NUMBERS.....18
 TRICARE INTERNET SITES19
 E-MAIL.....20
 TV OR RADIO21
 VIDEO OR CD-ROM.....22

MISCELLANEOUS

OTHER [RECORD RESPONSE]: _____23
 NONE (GO TO Q9a)24
 REFUSED (GO TO Q9a)-7
 DON'T KNOW (GO TO Q9a)-8

11. Overall, how satisfied or dissatisfied are you with available information about TRICARE? Would you say you are . . .

- Very satisfied, 1
- Satisfied,..... 2
- Neither satisfied nor dissatisfied,..... 3
- Dissatisfied, or 4
- Very dissatisfied?..... 5
- REFUSED..... -7
- DON'T KNOW -8

INTRO. My final questions are about your **preferences** for getting TRICARE information.

12. By what method would you **most prefer** to get answers to your TRICARE questions? Would you **most prefer** to get answers by . . .

- Mail, 1
- Telephone,..... 2 (Go To Q12a)
- E-mail,..... 3
- Face to face, or 4
- Internet site?..... 5
- REFUSED..... -7
- DON'T KNOW..... -8

12a. There are several ways to get TRICARE information by telephone. Were you thinking of . . .

- Local calls to TRICARE staff? 1
- TRICARE toll-free numbers that are entirely automated? 2
- Toll-free numbers with menus leading you to a TRICARE representative? 3
- REFUSED..... -7
- DON'T KNOW -8

13. By what method would you **least prefer** to get answers to your TRICARE questions? Would you **least prefer** to get answers by . . .

- Mail, 1
- Telephone,..... 2 (Go To Q13a)
- E-mail,..... 3
- Face to face, or 4
- Internet site?..... 5
- REFUSED..... -7
- DON'T KNOW -8

13a. There are several ways to get TRICARE information by telephone. Were you thinking of . . .

Toll-free numbers with menus leading you to a TRICARE representative?	1
TRICARE toll-free numbers that are entirely automated?	2
Local calls to TRICARE staff?	3
REFUSED.....	-7
DON'T KNOW.....	-8

Those are all the questions I have. Thank you for participating in this survey. Your responses are appreciated and will help the Department of Defense provide better service.

Appendix B

TMA Marketing Survey Data Tables by Beneficiary Group

Table B-1. Awareness of TRICARE information sources, by beneficiary group

Information Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
TRICARE toll-free numbers	91.3	91.2	95.7	92.0	87.7	93.5
Printed materials from TRICARE	90.8	93.7	93.8	92.0	81.8	94.0
TRICARE staff	86.9	90.2	93.5	87.1	76.2	91.9
TRICARE Internet sites	75.6	78.2	80.2	77.7	64.7	80.0

Table B-2. Types of TRICARE information looked for in the past year, by beneficiary group

Type of Information	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Scheduling an appointment	43.6	54.4	64.9	38.4	16.2	63.0
Phone numbers for healthcare providers or military treatment facilities	41.6	47.2	60.3	39.6	21.3	55.8
Referrals to specialists or other doctors	35.4	39.7	49.0	35.0	18.7	51.2
Benefit coverage for current beneficiaries	34.8	34.4	35.6	41.0	26.7	39.0
Billing or claims	33.9	32.1	33.8	40.3	28.9	34.4
Military treatment facilities in the area	29.9	35.8	38.4	24.9	19.6	39.9
Prescription benefits	29.6	26.2	25.8	34.3	32.6	24.3
Local pharmacies participating with TRICARE	29.2	24.8	26.7	30.7	36.9	25.2
Finding a primary care provider	28.9	34.5	40.2	26.2	14.5	37.8
Enrollment or disenrollment in TRICARE	28.4	35.4	34.3	26.5	14.1	34.7
Benefit coverage for new family members	15.4	22.3	19.4	9.3	8.0	21.2
Switching from one military treatment facility to another	13.8	18.6	26.1	8.1	4.3	23.3
Other ^a	1.2	1.1	1.6	1.3	1.1	1.7

^aOther types of information beneficiaries have searched for in the past year include the Ask a Nurse service, filing a complaint, or changing a name or address.

Table B-3. Sources of information about TRICARE used in the past year, by beneficiary group

Information Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
TRICARE beneficiary advisors at a service center, hospital, or clinic	52.5	61.0	54.9	48.7	37.2	57.3
TRICARE letters, pamphlets, or other brochures	46.5	46.3	42.7	47.0	49.9	40.5
The TRICARE Handbook	45.3	40.5	43.3	48.6	53.3	36.6
Military newspapers or newsletters	36.1	25.7	20.7	43.3	61.5	23.3
TRICARE doctors, nurses, or technicians at a military hospital or clinic	35.3	44.4	48.1	27.1	16.8	44.8
TRICARE Internet sites	35.3	40.0	34.5	37.3	22.1	38.5
Other TRICARE toll-free numbers (other than "Ask a Nurse")	31.3	31.6	40.8	30.5	23.4	41.0
The TRICARE for Life brochure	28.0	19.2	15.6	29.2	57.0	13.8
The "Ask a Nurse" toll-free number	28.0	31.3	43.4	22.6	14.7	47.0
TRICARE provider directories	26.6	24.2	28.4	29.4	26.0	30.1
Relatives, friends, or co-workers	25.3	33.3	25.5	18.0	19.0	25.0
Veterans' organizations or military associations	23.2	14.9	7.9	30.1	44.4	7.5
Briefings or orientations (about TRICARE)	17.5	32.5	11.0	4.5	10.3	11.6
Doctors or staff at civilian hospitals or clinics	16.8	15.0	19.2	20.4	12.7	18.8
The Prime Remote Handbook	12.4	13.9	12.0	12.0	10.0	10.6
Other newspapers or newsletters (other than military)	7.5	5.0	3.4	8.8	14.9	2.7
Military-sponsored town hall meetings on base	7.2	9.1	5.6	4.5	8.6	5.9
Civilian telephone books	4.7	3.8	6.8	5.7	3.2	7.6
Other ^a	2.5	2.4	2.8	2.2	3.1	1.0
Television or radio	2.4	2.2	1.3	1.9	4.8	1.8
A video or CD-ROM	1.9	3.2	0.9	0.7	1.9	2.0
Civilian associations	1.8	1.4	1.6	1.5	3.4	2.4

^aOther sources of information about TRICARE used in the past year include general Internet sites or sites that are not TRICARE-sponsored, pharmacies, and the TRICARE card.

Table B-4. Primary source of information about TRICARE, by beneficiary group

Primary Information Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
TRICARE beneficiary advisors at a service center, hospital, or clinic	21.3	24.0	19.6	20.8	17.2	18.9
TRICARE Internet sites	16.2	19.7	14.0	16.6	8.9	17.9
Other TRICARE toll-free numbers (other than "Ask a Nurse")	12.4	10.1	20.0	13.9	8.1	19.9
TRICARE doctors, nurses, or technicians at a military hospital or clinic	11.5	12.4	16.4	9.9	7.2	15.6
TRICARE letters, pamphlets, or other brochures	10.3	9.7	5.6	11.1	15.1	4.6
TRICARE Handbook	6.9	3.5	7.0	9.6	10.2	8.0
Relatives, friends, or co-workers	5.7	8.5	6.1	3.3	3.0	5.5
Military newspapers or newsletters	3.8	0.6	0.8	4.7	13.0	0.4
Briefings or orientations (about TRICARE)	2.5	5.2	0.7	0.8	0.4	0.7
Doctors or staff at civilian hospitals or clinics	1.9	0.6	1.2	3.3	3.2	1.6
Other ^a	1.9	0.8	2.5	2.0	3.6	2.2
The "Ask a Nurse" toll-free number	1.4	1.9	3.5	0.3	0.0	2.7
Veterans' organizations or military associations	1.2	0.0	0.1	1.3	5.1	0.1
TRICARE for Life brochure	1.1	0.2	0.4	1.3	3.4	0.1
TRICARE provider directories	0.7	1.0	0.8	0.6	0.0	0.3
Prime Remote Handbook	0.5	0.8	0.6	0.2	0.0	0.6
Military-sponsored town hall Meetings on base	0.3	0.4	0.1	0.2	0.4	0.3
E-mail	0.2	0.4	0.2	0.2	0.0	0.1
Other newspapers or newsletters (other than military)	0.2	0.0	0.0	0.0	1.1	0.0
TV or radio	0.1	0.0	0.2	0.0	0.2	0.0
Civilian telephone books	0.0	0.0	0.2	0.0	0.0	0.0
Video or CD-ROM	0.0	0.0	0.1	0.0	0.0	0.1

^aOther primary sources of information include the beneficiary's own knowledge or experience, billing and claims forms and statements, and the TRICARE wallet-size card.

Table B-5. Amount of information provided by primary information source, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
All the information	33.7	31.7	31.7	35.5	37.2	33.2
Most of the information	47.5	51.0	50.2	44.5	41.1	50.6
Some of the information	18.8	17.2	18.1	20.0	21.7	16.2

Table B-5a. Amount of information provided by TRICARE beneficiary advisors at a service center, hospital, or clinic, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	21.3	24.0	19.6	20.8	17.2	18.9
All the information	51.1	49.1	48.9	55.6	51.3	47.6
Most of the information	39.1	44.8	35.1	33.8	34.6	38.1
Some of the information	9.7	6.0	16.1	10.5	14.1	14.3

Table B-5b. Amount of information provided by TRICARE Internet sites, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	16.2	19.7	14.0	16.6	8.9	17.9
All the information	24.0	17.9	22.6	32.1	34.1	22.5
Most of the information	61.3	66.3	63.7	54.7	51.2	65.8
Some of the information	14.6	15.8	13.7	13.2	14.6	11.7

Table B-5c. Amount of information provided by TRICARE toll-free numbers (other than "Ask a Nurse"), by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	12.4	10.1	20.0	13.9	8.1	19.9
All the information	41.2	33.3	35.2	46.6	60.5	43.6
Most of the information	39.3	45.8	46.0	34.1	21.1	40.6
Some of the information	19.5	20.8	18.8	19.3	18.4	15.8

Table B-5d. Amount of information provided by TRICARE doctors, nurses, or technicians at a military hospital or clinic, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	11.5	12.4	16.4	9.9	7.2	15.6
All the information	43.1	51.7	37.7	30.6	48.5	29.1
Most of the information	41.1	36.7	52.1	43.5	30.3	52.4
Some of the information	15.8	11.7	10.3	25.8	21.2	18.4

Table B-5e. Amount of information provided by TRICARE letters, pamphlets, or other brochures, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	10.3	9.7	5.6	11.1	15.1	4.6
All the information	21.2	14.9	16.7	23.2	30.3	25.8
Most of the information	51.9	57.4	56.3	52.2	40.9	58.1
Some of the information	26.9	27.7	27.1	24.6	28.8	16.1

Table B-5f. Amount of information provided by TRICARE Handbook, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	6.9	3.5	7.0	9.6	10.2	8.0
All the information	20.1	N/R	21.0	18.3	29.2	18.5
Most of the information	61.1	N/R	62.9	61.7	56.3	63.0
Some of the information	18.8	N/R	16.1	20.0	14.6	18.5

Note: N/R indicates that data are not reported because of small cell size.

Table B-5g. Amount of information provided by relatives, friends, or co-workers, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	5.7	8.5	6.1	3.3	3.0	5.5
All the information	21.5	19.5	14.8	N/R	N/R	18.9
Most of the information	45.5	51.2	50.0	N/R	N/R	48.6
Some of the information	33.0	29.3	35.2	N/R	N/R	32.4

Note: N/R indicates that data are not reported because of small cell size.

Table B-5h. Amount of information provided by military newspapers or newsletters, by beneficiary group

Information Provided	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	3.8	0.6	0.8	4.7	13.0	0.4
All the information	17.4	N/R	N/R	N/R	20.0	N/R
Most of the information	51.9	N/R	N/R	N/R	48.3	N/R
Some of the information	30.8	N/R	N/R	N/R	31.7	N/R

Note: N/R indicates that data are not reported because of small cell size.

Table B-6a. Assessment of TRICARE beneficiary advisors at a service center, hospital or clinic, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		52.5	61.0	54.9	48.7	37.2	57.3
How easy was it to get information?	Easy	60.5	64.9	51.5	55.5	66.7	52.7
	Fairly easy	32.6	30.2	40.8	33.7	28.6	38.8
	Not easy at all	6.8	4.9	7.7	10.7	4.7	8.5
How easy was it to understand the information?	Easy	61.0	60.0	62.0	59.1	67.2	60.1
	Fairly easy	35.7	37.0	32.8	37.2	31.3	34.9
	Not easy at all	3.3	3.0	5.2	3.7	1.6	5.0
How useful was the information?	Useful	74.8	75.7	73.4	70.6	82.4	69.3
	Fairly useful	20.6	19.0	22.2	25.4	14.4	23.5
	Not useful at all	4.6	5.2	4.4	4.0	3.2	7.3

Table B-6b. Assessment of TRICARE doctors, nurses, or technicians at a military hospital or clinic, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		35.3	44.4	48.1	27.1	16.8	44.8
How easy was it to get information?	Easy	64.0	64.1	65.7	62.5	64.4	61.4
	Fairly easy	31.6	32.3	29.0	33.2	28.7	33.9
	Not easy at all	4.4	3.6	5.3	4.3	6.9	4.7
How easy was it to understand the information?	Easy	70.1	70.0	69.2	70.7	72.4	69.1
	Fairly easy	27.4	28.3	27.0	26.6	25.3	27.4
	Not easy at all	2.4	1.8	3.7	2.7	2.3	3.5
How useful was the information?	Useful	75.0	74.9	74.0	73.9	81.4	71.5
	Fairly useful	22.1	22.4	23.1	21.7	17.4	26.3
	Not useful at all	2.9	2.7	2.9	4.3	1.2	2.2

Table B-6c. Assessment of TRICARE Internet sites, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		35.3	40.0	34.5	37.3	22.1	38.5
How easy was it to get information?	Easy	49.3	55.5	46.6	40.7	50.0	50.9
	Fairly easy	43.9	39.5	44.8	50.2	43.9	42.1
	Not easy at all	6.8	5.0	8.5	9.1	6.1	7.0
How easy was it to understand the information?	Easy	55.6	56.5	59.5	53.8	50.9	63.6
	Fairly easy	39.1	39.5	35.7	39.1	42.9	31.6
	Not easy at all	5.3	4.0	4.9	7.1	6.3	4.8
How useful was the information?	Useful	58.9	58.9	58.4	59.0	59.6	56.7
	Fairly useful	34.8	36.6	33.9	32.7	33.3	37.8
	Not useful at all	6.3	4.5	7.6	8.4	7.0	5.6

Table B-6d. Assessment of "Ask a Nurse" toll-free number, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		28.0	31.3	43.4	22.6	14.7	47.0
How easy was it to get information?	Easy	64.3	64.7	67.8	62.8	54.1	72.7
	Fairly easy	28.5	28.8	25.9	27.7	37.8	21.6
	Not easy at all	7.2	6.4	6.3	9.5	8.1	5.7
How easy was it to understand the information?	Easy	73.5	71.4	79.0	73.3	67.6	84.0
	Fairly easy	23.5	26.0	18.8	22.0	29.7	13.9
	Not easy at all	3.0	2.6	2.2	4.7	2.7	2.1
How useful was the information?	Useful	75.4	75.0	78.3	75.3	71.2	74.2
	Fairly useful	18.9	18.6	16.6	18.7	26.0	20.0
	Not useful at all	5.7	6.4	5.1	6.0	2.7	5.8

Table B-6e. Assessment of other TRICARE toll-free numbers, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		31.3	31.6	40.8	30.5	23.4	41.0
How easy was it to get information?	Easy	38.7	33.5	45.3	39.3	43.4	41.4
	Fairly easy	41.5	41.1	38.0	46.6	36.9	40.7
	Not easy at all	19.8	25.3	16.7	14.1	19.7	17.9
How easy was it to understand the information?	Easy	52.3	44.7	56.6	56.4	60.7	56.9
	Fairly easy	36.3	39.0	36.2	34.3	32.8	31.7
	Not easy at all	11.4	16.4	7.2	9.3	6.6	11.4
How useful was the information?	Useful	54.8	49.0	53.5	61.4	60.8	55.9
	Fairly useful	35.7	38.2	39.5	31.7	31.7	33.1
	Not useful at all	9.4	12.7	7.0	6.9	7.5	11.0

Table B-6f. Assessment of TRICARE for Life brochure, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		28.0	19.2	15.6	29.2	57.0	13.8
How easy was it to get information?	Easy	59.4	51.6	63.2	56.8	66.4	63.8
	Fairly easy	38.2	46.3	35.4	39.6	31.5	35.1
	Not easy at all	2.5	2.1	1.4	3.6	2.1	1.1
How easy was it to understand the information?	Easy	54.5	37.9	63.2	55.0	64.4	63.2
	Fairly easy	42.6	61.1	34.0	40.8	32.2	33.7
	Not easy at all	2.9	1.1	2.8	4.2	3.4	3.2
How useful was the information?	Useful	60.6	50.0	62.5	56.3	71.5	64.9
	Fairly useful	35.2	44.7	31.9	39.1	25.8	33.0
	Not useful at all	4.2	5.3	5.6	4.7	2.7	2.1

Table B-6g. Assessment of TRICARE Handbook, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		45.3	40.5	43.3	48.6	53.3	36.6
How easy was it to get information?	Easy	59.0	61.8	62.7	54.2	58.5	65.1
	Fairly easy	38.3	37.3	32.4	42.8	38.2	31.0
	Not easy at all	2.6	1.0	4.9	3.1	3.3	3.9
How easy was it to understand the information?	Easy	56.2	53.9	62.3	52.9	60.1	62.5
	Fairly easy	40.7	43.1	34.7	42.8	37.7	33.6
	Not easy at all	3.2	2.9	2.9	4.3	2.2	3.9
How useful was the information?	Useful	59.4	58.3	60.1	59.9	60.1	57.0
	Fairly useful	37.0	38.7	35.7	35.8	36.6	39.5
	Not useful at all	3.6	2.9	4.2	4.3	3.3	3.5

Table B-6h. Assessment of Prime Remote Handbook, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		12.4	13.9	12.0	12.0	10.0	10.6
How easy was it to get information?	Easy	54.8	53.6	60.2	55.1	51.0	68.5
	Fairly easy	40.8	40.6	37.0	43.6	40.8	28.8
	Not easy at all	4.5	5.8	2.8	1.3	8.2	2.7
How easy was it to understand the information?	Easy	53.4	48.5	65.5	51.9	60.4	51.4
	Fairly easy	42.7	47.1	31.8	45.6	33.3	45.9
	Not easy at all	3.9	4.4	2.7	2.5	6.3	2.7
How useful was the information?	Useful	57.5	54.4	60.9	59.7	59.6	60.8
	Fairly useful	36.0	38.2	32.7	36.4	31.9	32.4
	Not useful at all	6.4	7.4	6.4	3.9	8.5	6.8

Table B-6i. Assessment of TRICARE provider directories, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		26.6	24.2	28.4	29.4	26.0	30.1
How easy was it to get information?	Easy	56.4	52.5	62.6	55.6	60.2	62.7
	Fairly easy	37.1	41.0	31.5	35.7	36.7	33.5
	Not easy at all	6.5	6.6	5.9	8.7	3.1	3.8
How easy was it to understand the information?	Easy	62.3	59.0	67.0	63.6	61.2	71.8
	Fairly easy	34.2	37.7	30.0	31.8	35.7	26.3
	Not easy at all	3.6	3.3	3.0	4.5	3.1	1.9
How useful was the information?	Useful	60.0	57.9	64.8	57.6	64.0	65.3
	Fairly useful	34.0	38.8	30.0	31.8	32.0	29.1
	Not useful at all	6.0	3.3	5.2	10.6	4.0	5.6

Table B-6j. Assessment of TRICARE letter, pamphlets, or other brochures, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		46.5	46.3	42.7	47.0	49.9	40.5
How easy was it to get information?	Easy	58.4	56.9	68.6	56.1	57.1	65.3
	Fairly easy	38.8	40.9	28.7	40.1	40.1	32.3
	Not easy at all	2.8	2.2	2.7	3.8	2.8	2.5
How easy was it to understand the information?	Easy	59.0	56.0	69.4	58.0	58.6	66.3
	Fairly easy	38.6	42.7	27.7	37.8	39.5	32.3
	Not easy at all	2.4	1.3	3.0	4.2	2.0	1.4
How useful was the information?	Useful	54.9	50.0	58.3	53.9	64.5	54.8
	Fairly useful	39.6	44.8	34.6	39.4	32.4	39.6
	Not useful at all	5.5	5.2	7.2	6.8	3.1	5.7

Table B-6k. Assessment of military-sponsored town hall meetings on base, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		7.2	9.1	5.6	4.5	8.6	5.9
How easy was it to get information?	Easy	60.7	56.5	69.8	45.2	79.5	57.1
	Fairly easy	33.4	37.0	28.3	41.9	20.5	33.3
	Not easy at all	5.8	6.5	1.9	12.9	0.0	9.5
How easy was it to understand the information?	Easy	52.8	47.8	65.4	32.3	75.0	61.9
	Fairly easy	39.5	43.5	30.8	51.6	25.0	31.0
	Not easy at all	7.7	8.7	3.8	16.1	0.0	7.1
How useful was the information?	Useful	59.6	50.0	61.5	N/R	75.0	50.0
	Fairly useful	30.2	37.0	34.6	N/R	18.2	45.2
	Not useful at all	10.2	13.0	3.8	N/R	6.8	4.8

Note: N/R indicates that data are not reported because of small cell size.

Table B-6l. Assessment of briefings or orientations about TRICARE, by beneficiary group

Assessment Question		Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent who used source		17.5	32.5	11.0	4.5	10.3	11.6
How easy was it to get information?	Easy	65.8	65.2	70.5	N/R	66.7	69.5
	Fairly easy	31.6	31.7	27.6	N/R	31.5	24.4
	Not easy at all	2.7	3.1	1.9	N/R	1.9	6.1
How easy was it to understand the information?	Easy	59.7	59.0	70.5	N/R	68.5	62.2
	Fairly easy	36.1	36.0	28.6	N/R	29.6	34.1
	Not easy at all	4.2	5.0	1.0	N/R	1.9	3.7
How useful was the information?	Useful	68.3	66.9	67.6	N/R	71.7	64.6
	Fairly useful	25.9	26.3	28.6	N/R	24.5	28.0
	Not useful at all	5.8	6.9	3.8	N/R	3.8	7.3

Note: N/R indicates that data are not reported because of small cell size.

Table B-7. Most difficult source of TRICARE information used, by beneficiary group

Most Difficult Source	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Other TRICARE toll-free numbers (other than "Ask a Nurse")	29.1	30.9	31.8	26.6	22.4	32.2
TRICARE letters, pamphlets, or other brochures	15.2	17.3	10.5	14.3	16.8	11.1
TRICARE Internet sites	12.8	10.4	12.7	17.9	9.3	17.2
TRICARE Handbook	11.8	8.8	12.7	14.3	17.4	11.1
TRICARE beneficiary advisors at a service center, hospital, or clinic	7.0	5.2	9.5	7.6	9.3	7.5
TRICARE doctors, nurses, or technicians at a military hospital or clinic	4.9	6.5	6.4	2.8	1.2	3.4
Briefings or orientations (about TRICARE)	3.8	7.2	1.2	0.6	2.5	2.7
TRICARE provider directories	3.5	3.3	3.9	3.6	3.7	2.7
The "Ask a Nurse" toll-free number	3.0	2.9	5.6	2.2	1.2	4.8
TRICARE for Life brochure	2.3	2.0	1.2	2.5	5.6	0.5
Prime Remote Handbook	1.8	2.3	1.7	1.7	0.0	2.4
Other ^a	1.6	1.0	1.4	2.0	3.7	1.7
Doctors or staff at civilian hospitals or clinics	0.8	0.3	0.3	1.7	1.2	1.0
Military newspapers or newsletters	0.8	0.7	0.2	1.1	1.2	0.2
Military-sponsored town hall meetings on base	0.7	0.7	1.0	0.6	1.2	0.7
Relatives, friends, or co-workers	0.3	0.3	0.0	0.3	0.6	0.2
E-mail	0.2	0.3	0.0	0.0	0.6	0.0
Other newspapers or newsletters (other than military)	0.1	0.0	0.0	0.0	1.2	0.2
Civilian telephone books	0.1	0.0	0.0	0.3	0.0	0.2
Veterans' organizations or military associations	0.1	0.0	0.0	0.0	0.6	0.0
Video or CD-ROM	0.0	0.0	0.2	0.0	0.0	0.0

^aOther sources of information that were difficult to use included the claims department, the office handling referrals, or all of the sources.

Table B-8. Overall satisfaction or dissatisfaction with available information about TRICARE, by beneficiary group

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Very satisfied	25.1	21	21.6	23.1	40.7	19.2
Satisfied	53.6	54.9	57	53.8	47.2	59.1
Neither satisfied nor dissatisfied	14.0	16.0	15.4	14.0	8.5	14.5
Dissatisfied	5.5	5.9	4.5	6.9	2.9	5.2
Very dissatisfied	1.9	2.2	1.6	2.2	0.8	2.0

Table B-9. Most preferred method to get answers to TRICARE questions, by beneficiary group

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Face to face	30.8	41.2	28.3	26.1	19.5	26.3
Telephone	23.2	17.5	29.1	27.5	23.6	33.3
Menu-driven toll-free numbers leading to a TRICARE representative	<i>80.5</i>	<i>80.2</i>	<i>81.4</i>	<i>81.2</i>	<i>79.3</i>	<i>81.6</i>
Local calls to TRICARE staff	<i>70.2</i>	<i>85.6</i>	<i>76.7</i>	<i>67.9</i>	<i>46.8</i>	<i>78.3</i>
Entirely automated TRICARE toll-free numbers	<i>25.8</i>	<i>21.6</i>	<i>21.5</i>	<i>23.5</i>	<i>38.8</i>	<i>16.9</i>
Mail	22.1	10.4	18.7	23.1	44.8	16.2
Internet site	16.1	21.3	17.0	15.6	6.8	15.1
E-mail	7.6	9.5	6.5	7.5	4.6	8.7

Note: Italicized percentages apply only to beneficiaries indicating telephone as the most preferred way to get answers to their TRICARE questions. Among that subset of beneficiaries, they indicate the percentage thinking about the type of call described in the row.

Table B-10. Least preferred method to get answers to TRICARE questions, by beneficiary group

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Mail	36.7	49.6	40.5	32.0	16.2	44.8
Telephone	24.9	26.2	22.1	24.9	24.2	21.4
Menu-driven toll-free numbers leading to a TRICARE representative	<i>72.8</i>	<i>75.9</i>	<i>76.3</i>	<i>71.7</i>	<i>66.3</i>	<i>73.8</i>
Entirely automated TRICARE toll-free numbers	<i>69.5</i>	<i>74.7</i>	<i>79.3</i>	<i>70.3</i>	<i>52.3</i>	<i>76.7</i>
Local calls to TRICARE staff	<i>35.8</i>	<i>34.3</i>	<i>35.7</i>	<i>37.7</i>	<i>35.8</i>	<i>45.3</i>
Internet site	16.9	9.6	15.9	19.6	27.5	13.5
E-mail	15.6	11.2	16.6	15.8	22.7	15.2
Face to face	4.5	2.5	3.9	6.7	5.8	3.6

Note: Italicized percentages apply only to beneficiaries indicating telephone as the least preferred way to get answers to their TRICARE questions. Among that subset of beneficiaries, they indicate the percentage thinking about the type of call described in the row.

Appendix C

Supplementary Survey Data Tables and Figures

Table C-1. Number of information sources users are aware of, by beneficiary group

Number of Information Sources	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
One	2.8	1.9	1.4	3.0	6.6	1.4
Two	8.5	8.7	5.5	8.3	14.0	7.1
Three	21.4	18.1	20.0	22.6	28.1	18.2
Four	67.4	71.3	73.0	66.1	51.3	73.4

Table C-2a. Level of Overall Satisfaction or Dissatisfaction with TRICARE Information, by Beneficiary Group, for Those who Listed TRICARE Beneficiary Advisors as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	45.1	13.0	26.9	13.5	1.5
Very satisfied	31.8	35.3	23.4	25.6	42.5	15.8
Satisfied	55.2	51.7	60.0	60.2	51.3	65.4
Neither satisfied nor dissatisfied	7.8	6.0	12.6	9.8	5.0	11.0
Dissatisfied	4.7	6.9	3.4	3.8	0.0	6.3
Very dissatisfied	0.5	0.0	0.6	0.8	1.3	1.6

Table C-2b. Level of Overall Satisfaction or Dissatisfaction with TRICARE Information, by Beneficiary Group, for Those who Listed TRICARE Internet Sites as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	48.5	12.2	28.2	9.3	1.9
Very satisfied	20.5	14.7	24.0	23.6	35.7	26.7
Satisfied	58.9	57.9	58.4	60.4	59.5	60.0
Neither satisfied nor dissatisfied	14.1	17.9	10.4	12.3	4.8	11.7
Dissatisfied	5.3	7.4	5.6	3.8	0.0	0.8
Very dissatisfied	1.2	2.1	1.6	0.0	0.0	0.8

Table C-2c. Level of Overall Satisfaction or Dissatisfaction With TRICARE Information, by Beneficiary Group, for Those Who Listed Other TRICARE Toll-free Numbers as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	33.0	22.8	31.2	10.2	2.8
Very satisfied	20.5	16.3	19.2	22.5	31.4	17.9
Satisfied	50.2	53.1	51.4	46.1	48.6	59.0
Neither satisfied nor dissatisfied	15.7	14.3	19.8	15.7	11.4	15.7
Dissatisfied	8.9	8.2	7.3	12.4	5.7	4.5
Very dissatisfied	4.6	8.2	2.3	3.4	2.9	3.0

Table C-2d. Level of Overall Satisfaction or Dissatisfaction With TRICARE Information, by Beneficiary Group, for Those Who Listed TRICARE Doctors, Nurses, Technicians as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	43.3	20.1	23.7	10.6	2.3
Very satisfied	27.9	23.3	24.7	27.0	55.9	22.9
Satisfied	55.7	56.7	61.0	58.7	35.3	56.2
Neither satisfied nor dissatisfied	11.5	15.0	11.0	7.9	5.9	13.3
Dissatisfied	1.6	0.0	2.1	3.2	2.9	6.7
Very dissatisfied	3.2	5.0	1.4	3.2	0.0	1.0

Table C2-e. Level of Overall Satisfaction or Dissatisfaction with TRICARE Information, by Beneficiary Group, for Those Who Listed TRICARE Letters, Pamphlets or Other Brochures as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	37.8	7.7	29.7	24.1	0.8
Very satisfied	23.3	14.9	24.0	21.1	39.1	22.6
Satisfied	52.7	57.5	54.0	53.5	43.5	67.7
Neither satisfied nor dissatisfied	17.8	21.3	16.0	16.9	14.5	3.2
Dissatisfied	5.5	6.4	4.0	7.0	2.9	3.2
Very dissatisfied	0.6	0.0	2.0	1.4	0.0	3.2

Table C-2f. Level of Overall Satisfaction or Dissatisfaction with TRICARE Information, by Beneficiary Group, for Those Who Listed TRICARE Handbook as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	20.5	14.0	38.3	25.1	2.0
Very satisfied	22.3	11.8	29.5	18.0	33.3	20.4
Satisfied	60.9	64.7	57.4	59.0	62.5	63.0
Neither satisfied nor dissatisfied	10.6	17.7	13.1	11.5	2.1	11.1
Dissatisfied	6.2	5.9	0.0	11.5	2.1	5.6
Very dissatisfied	0.0	0.0	0.0	0.0	0.0	0.0

Table C-2g. Level of Overall Satisfaction or Dissatisfaction with TRICARE Information, by Beneficiary Group, for Those Who Listed Military Newspapers or Newsletters as Their Primary Source

Satisfaction / Dissatisfaction	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Percent indicating source was primary source	100.0	6.5	2.9	33.6	56.9	0.2
Very satisfied	39.6	0.0	14.3	33.3	49.2	0.0
Satisfied	39.4	66.7	85.7	30.0	39.3	66.7
Neither satisfied nor dissatisfied	12.7	33.3	0.0	20.0	6.6	33.3
Dissatisfied	7.3	0.0	0.0	13.3	4.9	0.0
Very dissatisfied	1.1	0.0	0.0	3.3	0.0	0.0

Table C-3. List of Primary Sources Used by Dissatisfied/Very Dissatisfied Beneficiaries

Primary Source	Dissatisfied/Very Dissatisfied (%)
Tricare Toll-Free Numbers	21.4
Tricare Beneficiary Advisors	14.1
Tricare Internet Sites	13.7
Tricare Letters, Pamphlets, or Other Brochures	8.1
Tricare Staff at a Military Hospital	7.2
Word of Mouth	7.1
Doctors or Staff at Civilian Hospitals	6.7
None	6.6
Tricare Handbook	5.5
Military Newspapers or Newsletters	4.2
Direct Mail/E-Mail From Vet or Mil Organ	2.2
Other	1.6
Briefings or Orientations	1.1
Ask A Nurse	0.3
E-Mail	0.2
Tricare For Life Brochure	0.2
Town Hall Meetings on Base	0.0

Table C-4a. Preferred Methods of Seeking Information by Those Who Sought Information in the Past Year

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Face to face	32.8	43.4	29.7	27.7	20.4	26.8
Telephone	23.4	18.2	28.6	27.5	23.7	32.6
Mail	20.0	8.9	17.9	22.4	43.1	16.6
Internet site	16.2	20.2	17.1	16.0	7.3	15.3
E-mail	7.5	9.3	6.7	6.4	5.5	8.8

Table C-4b. Preferred Methods of Seeking Information by Those Who Did Not Seek Information in the Past Year

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Face to face	23.8	32.8	18.8	19.9	18.0	23.7
Telephone	22.4	14.8	33.8	27.7	24.0	39.8
Mail	29.9	16.4	25.6	25.9	49.1	14.0
Internet site	15.9	25.8	16.5	14.5	6.0	14.0
E-mail	7.9	10.2	5.3	12.1	3.0	8.6

Table C-4c. Least Preferred Methods of Seeking Information by Those Who Sought Information in the Past Year

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Face to face	4.5	2.2	4.2	7.1	5.7	3.4
Telephone	24.9	26.0	22.1	24.8	25.3	21.7
Mail	39.0	50.5	41.7	33.5	18.8	45.7
Internet site	16.5	9.3	16.0	19.8	28.0	13.6
E-mail	15.1	11.9	16.1	14.8	22.2	15.6

Table C-4d. Least Preferred Methods of Seeking Information by Those Who Did Not Seek Information in the Past Year

Method	Total (%)	Active Duty Service Members (%)	Spouses of Active Duty Service Members (%)	Retirees Under 65 and Spouses (%)	Retirees 65 and Older and Spouses (%)	Spouses of Activated Reservists (%)
Face to face	5.1	4.0	2.3	5.5	6.6	5.6
Telephone	26.3	28.0	24.2	26.7	24.8	22.2
Mail	30.7	48.0	34.9	27.3	12.8	43.3
Internet site	19.6	11.2	16.7	20.0	29.5	14.4
E-mail	18.3	8.8	22.0	20.6	26.4	14.4

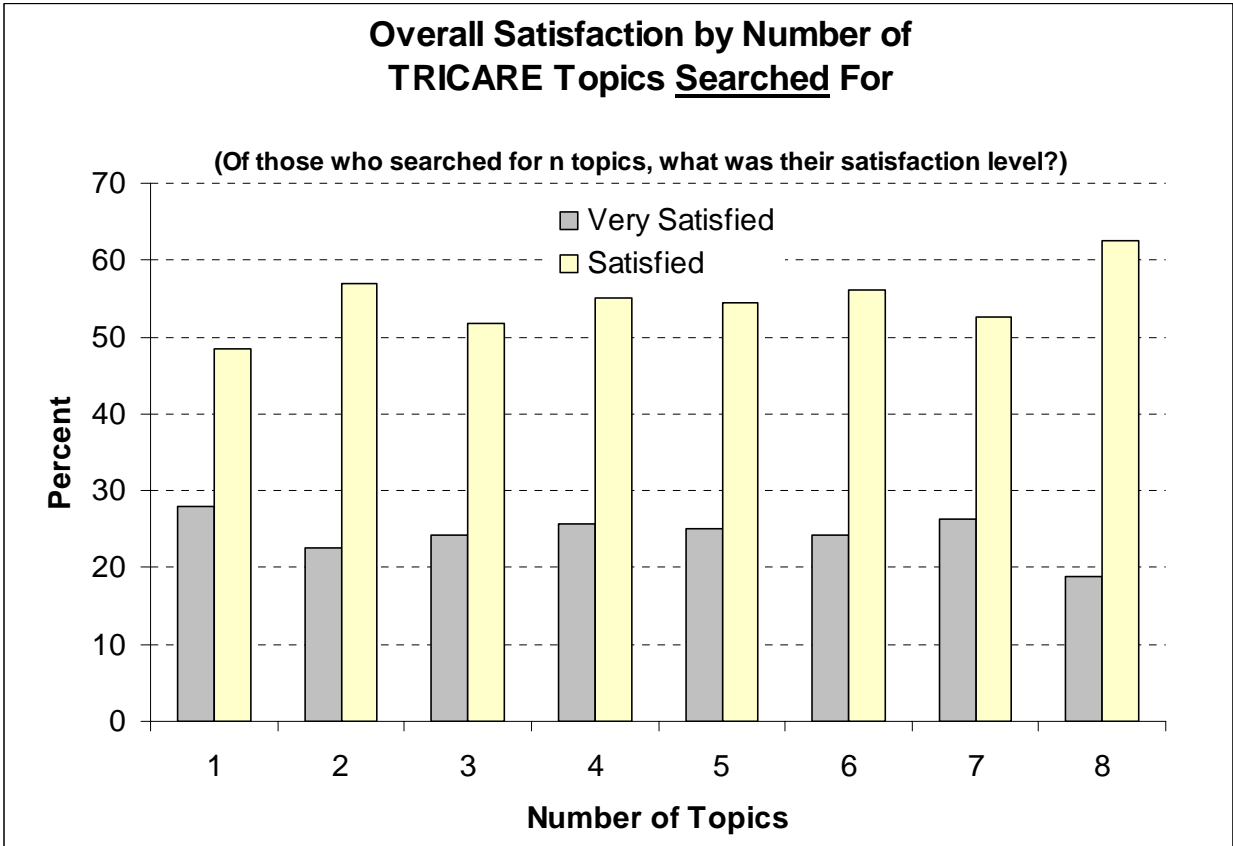


Figure C-5a. Beneficiary Overall Satisfaction by Number of Topics Searched for in the Past Year

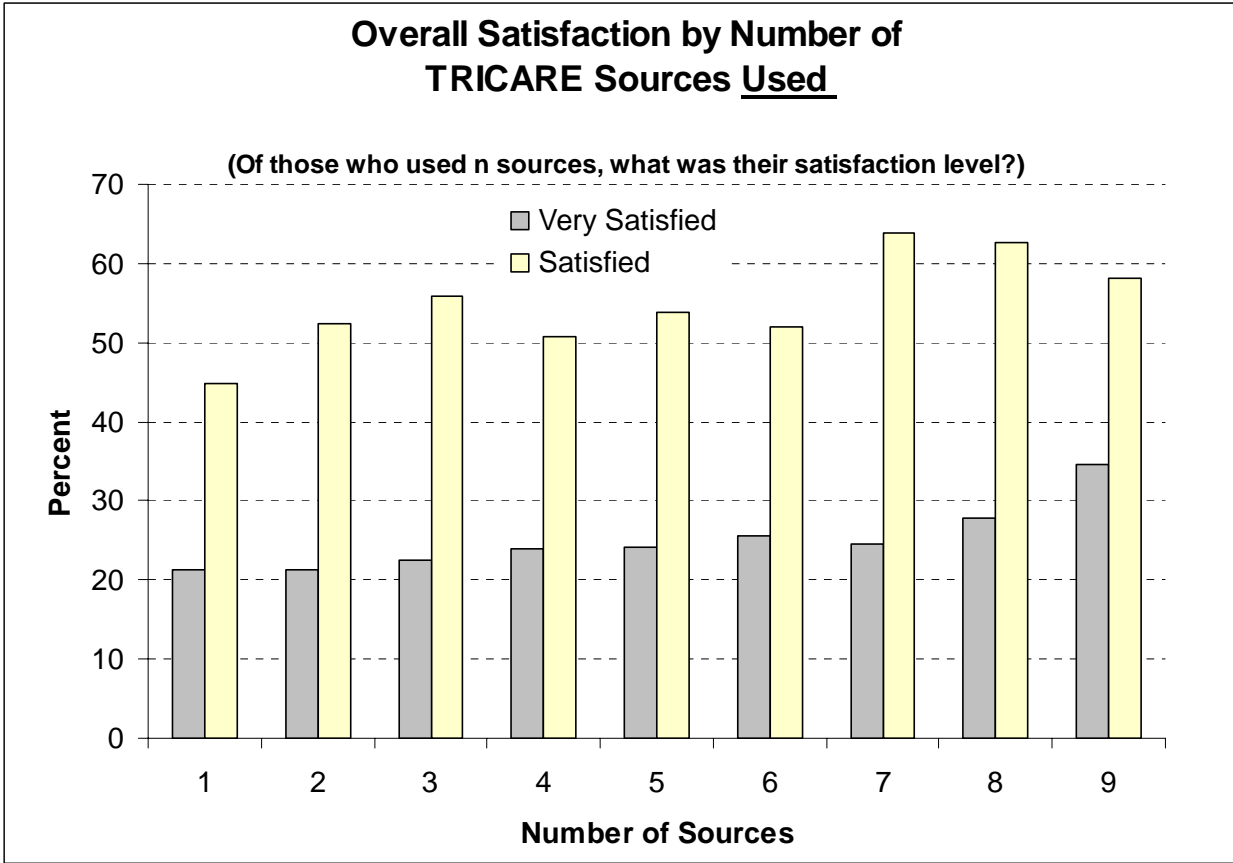


Figure C-5b. Beneficiary Overall Satisfaction by Number of Information Sources Used in the Past Year

Appendix D

TMA Marketing Survey Data Tables by Gender and Paygrade Group

Table 1A - Awareness of TRICARE Information Sources (Question 1)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
TRICARE toll-free numbers	91.3	90.9	91.8	91.1	91.3	.	95.9	91.8	92.2	89.6	83.8	97.1	93.3
Printed materials from TRICARE	90.8	92.0	89.3	94.7	89.9	.	94.0	94.8	89.6	83.5	78.5	97.1	93.9
TRICARE staff	86.9	86.6	87.3	89.5	92.8	.	93.6	87.3	87.0	79.6	69.4	97.1	91.6
TRICARE Internet sites	75.6	77.0	73.7	77.6	80.4	.	80.1	82.7	73.6	70.5	53.1	77.1	80.2

Table 1B - Topics About Which Users Sought Information (Question 2)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Scheduling an appointment	43.6	40.4	47.8	52.0	63.0	.	65.0	39.2	37.7	16.1	16.6	62.9	63.0
Phone numbers for healthcare providers or military treatment facilities	41.6	39.5	44.2	47.5	46.4	.	60.6	40.2	39.2	21.6	20.8	54.3	55.9
Referrals to specialists or other doctors	35.4	32.8	38.7	38.8	42.8	.	49.0	31.4	38.0	20.9	14.3	22.9	52.5
Benefit coverage for current beneficiaries	34.8	35.5	33.9	36.6	26.8	.	35.8	41.1	41.0	28.4	23.4	37.1	39.1
Billing or claims	33.9	33.6	34.3	33.6	26.8	.	33.8	38.0	42.2	29.6	27.4	37.1	34.2
Military treatment facilities in the area	29.9	29.9	29.8	36.6	32.6	.	38.2	24.5	25.2	19.8	19.2	45.7	39.6
Prescription benefits	29.6	30.2	28.9	27.1	23.2	.	25.6	34.6	34.0	33.1	31.7	25.7	24.3
Local pharmacies participating with TRICARE	29.2	29.4	28.8	26.3	19.6	.	26.8	28.1	32.9	37.4	35.8	31.4	24.9
Finding a primary care provider	28.9	28.5	29.5	34.2	35.5	.	40.4	27.6	25.1	16.7	10.2	37.1	37.8
Enrollment or disenrollment in TRICARE	28.4	28.2	28.7	34.3	39.1	.	34.4	27.8	25.3	15.3	11.7	37.1	34.6
Benefit coverage for new family members	15.4	16.6	14.0	21.6	24.6	.	19.7	12.4	6.7	9.6	4.9	28.6	20.9
Switching from one military treatment facility to another	13.8	12.1	16.1	17.4	23.2	.	26.3	7.8	8.4	4.4	4.2	20.0	23.5
Other*	1.2	1.3	1.1	1.2	0.7	.	1.5	1.6	1.1	1.3	0.8	0.0	1.8

Table 2A - Sources of TRICARE Information (Questions 4, 5, 6, And 6A)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
TRICARE beneficiary advisors at a service center, hospital, or clinic	52.5	52.3	52.7	59.6	65.3	.	55.2	46.8	50.3	39.9	31.8	.	57.9
TRICARE letters, pamphlets, or other brochures	46.5	48.6	44.0	47.3	43.2	.	42.8	49.2	45.1	51.6	46.5	.	39.8
The TRICARE Handbook	45.3	46.7	43.6	42.7	33.1	.	43.1	47.3	49.7	56.2	47.7	.	36.6
Military newspapers or newsletters	36.1	39.1	32.5	26.1	24.6	.	20.4	46.3	40.6	64.3	55.8	.	23.0
TRICARE doctors, nurses, or technicians at a military hospital or clinic	35.3	34.0	37.0	43.2	48.3	.	48.2	27.3	27.0	17.6	15.2	.	44.8
TRICARE's Internet sites	35.3	37.2	32.9	39.0	43.2	.	34.9	44.3	31.3	25.9	14.5	.	39.0
Other TRICARE toll-free numbers (other than "Ask a Nurse")	31.3	29.6	33.4	32.6	28.2	.	40.8	26.8	33.8	24.9	20.3	.	41.6
The TRICARE for Life brochure	28.0	31.7	23.5	20.9	13.7	.	15.4	32.6	26.3	58.6	53.8	.	13.9
The "Ask a Nurse" toll-free number	28.0	24.5	32.2	29.7	36.4	.	43.5	18.8	25.8	16.6	10.9	.	46.9
TRICARE provider directories	26.6	26.3	27.0	26.2	17.8	.	28.5	26.0	32.2	27.0	24.0	.	30.1
Relatives, friends, or co-workers	25.3	26.7	23.7	33.6	32.2	.	25.3	14.6	20.9	21.9	13.3	.	24.7
Veterans' organizations or military associations	23.2	25.2	20.7	13.7	18.6	.	7.6	32.7	27.9	46.3	40.5	.	6.8
Briefings or orientations (about TRICARE)	17.5	21.4	12.8	32.6	32.2	.	10.8	4.8	4.4	10.8	9.2	.	11.3
Doctors or staff at civilian hospitals or clinics	16.8	15.1	18.7	15.5	13.6	.	19.3	17.1	23.1	11.9	14.4	.	18.8
The Prime Remote Handbook	12.4	12.3	12.4	13.7	14.4	.	12.2	10.8	13.0	10.6	8.8	.	10.4
Other newspapers or newsletters (other than military)	7.5	8.2	6.6	4.9	5.1	.	3.2	10.2	7.6	14.6	15.6	.	2.6
Military-sponsored town hall meetings on base	7.2	8.7	5.5	10.4	5.1	.	5.4	4.5	4.6	8.9	8.0	.	6.0
Civilian telephone books	4.7	4.1	5.4	3.9	3.4	.	6.5	4.5	6.8	4.0	1.7	.	7.8
Other*	2.5	3.0	1.9	2.9	0.8	.	2.7	2.9	1.6	3.2	2.9	.	0.9
Television or radio	2.4	2.7	2.1	2.8	0.0	.	1.3	1.6	2.2	3.7	6.9	.	1.9
A video or CD-ROM	1.9	2.2	1.6	2.8	4.2	.	1.0	0.6	0.8	2.3	1.1	.	2.1
Civilian associations	1.8	1.7	2.0	1.3	1.7	.	1.6	1.0	1.9	3.4	3.5	.	2.4

Table 2B - Primary Source of Information About TRICARE (Question 7)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
TRICARE beneficiary advisors at a service center, hospital, or clinic	21.3	19.9	23.0	20.6	35.1	.	20.0	20.1	21.5	18.4	.	.	18.6
TRICARE Internet sites	16.2	17.8	14.3	19.0	.	.	14.0	20.5	13.2	11.5	.	.	18.0
Other TRICARE toll-free numbers (other than "Ask a Nurse")	12.4	8.8	16.8	8.7	.	.	20.3	10.4	17.1	.	.	.	20.3
TRICARE doctors, nurses, or technicians at a military hospital or clinic	11.5	12.4	10.3	14.9	.	.	16.0	10.7	9.1	.	.	.	15.7
TRICARE letters, pamphlets, or other brochures	10.3	10.5	10.2	9.8	.	.	5.6	.	12.1	13.1	.	.	4.8
TRICARE Handbook	6.9	6.3	7.6	.	.	.	7.0	.	10.0	9.7	.	.	8.1
Relatives, friends, or co-workers	5.7	6.8	4.4	10.0	.	.	5.9	.	.	.	.	.	5.4
Military newspapers or newsletters	3.8	4.5	3.0	.	.	.	.	.	.	13.4	.	.	.
Briefings or orientations (about TRICARE)	2.5	.	.	.	.	.	.	.	.	.	.	.	.
Doctors or staff at civilian hospitals or clinics	1.9	.	2.0	.	.	.	.	.	.	.	.	.	.
Other	1.9	.	2.0	.	.	.	.	.	.	.	.	.	.
The "Ask a Nurse" toll-free number	1.4	.	1.9	.	.	.	3.5	.	.	.	.	.	.
Veterans' organizations or military associations	1.2	.	.	.	.	.	.	.	.	.	.	.	.
Video or CD-ROM	.	.	.	.	.	.	.	.	.	.	.	.	.
TV or radio	.	.	.	.	.	.	.	.	.	.	.	.	.
TRICARE provider directories	.	.	.	.	.	.	.	.	.	.	.	.	.
TRICARE for Life brochure	.	.	.	.	.	.	.	.	.	.	.	.	.
Prime Remote Handbook	.	.	.	.	.	.	.	.	.	.	.	.	.
Other newspapers or newsletters (other than military)	.	.	.	.	.	.	.	.	.	.	.	.	.
Military-sponsored town hall meetings on base	.	.	.	.	.	.	.	.	.	.	.	.	.
E-mail	.	.	.	.	.	.	.	.	.	.	.	.	.
Civilian telephone books	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 2C - Overall Adequacy of Primary Source (Question 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Did this source provide you with: All the information	33.7	33.6	33.8	31.5	32.5	.	31.9	36.1	34.8	36.5	38.6	.	32.7
Most of the information	47.5	46.4	48.8	48.6	58.8	.	50.2	43.9	45.0	43.3	36.6	.	50.7
Some of the information	18.8	20.0	17.4	19.8	.	.	17.9	19.9	20.1	20.2	24.8	.	16.6

Table 2C_A - Adequacy of TRICARE Beneficiary Advisors at a Service Center, Hospital, or Clinic as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	21.3	19.9	23.0	20.6	35.1	.	20.0	20.1	21.5	18.4	.	.	18.6
Did this source provide you with: All the information	51.1	54.0	48.0	52.6	.	.	48.9	60.0	52.1	.	.	.	48.7
Most of the information	39.1	37.2	41.2	.	.	.	35.1	.	.	.	.	.	37.8
Some of the information	9.7	.	10.8	.	.	.	.	.	.	.	.	.	.

Table 2C_B - Adequacy of TRICARE Internet Sites as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	16.2	17.8	14.3	19.0	.	.	14.0	20.5	13.2	11.5	.	.	18.0
Did this source provide you with: All the information	24.0	21.3	28.3	.	.	.	.	.	.	.	.	.	.
Most of the information	61.3	61.4	61.2	65.7	.	.	63.9	55.7	.	.	.	.	65.5
Some of the information	14.6	.	10.5	.	.	.	.	.	.	.	.	.	.

Table 2C_C - Adequacy of TRICARE Toll-Free Numbers (Other Than "Ask a Nurse") as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	12.4	8.8	16.8	8.7	.	.	20.3	10.4	17.1	.	.	.	20.3
Did this source provide you with: All the information	41.2	46.0	38.1	.	.	.	34.9	.	.	.	.	.	43.8
Most of the information	39.3	.	44.1	.	.	.	46.3	.	.	.	.	.	40.0
Some of the information	19.5	.	17.8	.	.	.	18.9	.	.	.	.	.	.

Table 2C_D - Adequacy of TRICARE Doctors, Nurses, or Technicians at a Military Hospital or Clinic as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	11.5	12.4	10.3	14.9	.	.	16.0	10.7	9.1	.	.	.	15.7
Did this source provide you with: All the information	43.1	46.7	37.6	.	.	.	37.9	.	.	.	.	.	.
Most of the information	41.1	36.7	47.7	.	.	.	52.9	.	.	.	.	.	52.5
Some of the information	15.8	.	14.7	.	.	.	.	.	.	.	.	.	.

Table 2C_E - Adequacy of TRICARE Letters, Pamphlets, or Other Brochures as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	10.3	10.5	10.2	9.8	.	.	5.6	.	12.1	13.1	.	.	4.8
Did this source provide you with:													
All the information	21.2	.	23.4	.	.	.	.	.	.	.	.	.	.
Most of the information	51.9	52.7	50.9	.	.	.	.	.	.	.	.	.	.
Some of the information	26.9	.	25.6	.	.	.	.	.	.	.	.	.	.

Table 2C_F - Adequacy of TRICARE Handbook as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	6.9	6.3	7.6	.	.	.	7.0	.	10.0	9.7	.	.	8.1
Did this source provide you with:													
All the information	20.1	.	19.7	.	.	.	.	.	.	.	.	.	.
Most of the information	61.1	62.8	59.4	.	.	.	62.3	.	.	.	.	.	63.5
Some of the information	18.8	.	20.9	.	.	.	.	.	.	.	.	.	.

Table 2C_G - Adequacy of Relatives, Friends, or Co-Workers as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	5.7	6.8	4.4	10.0	.	.	5.9	.	.	.	.	.	5.4
Did this source provide you with:													
All the information	21.5	.	.	.	.	.	.	.	.	.	.	.	.
Most of the information	45.5	.	47.4	.	.	.	.	.	.	.	.	.	.
Some of the information	33.0	.	28.3	.	.	.	.	.	.	.	.	.	.

Table 2C_H - Adequacy of Military Newspapers or Newsletters as Primary Source (Questions 7 and 8)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent indicating source was primary source	3.8	4.5	3.0	.	.	.	.	.	.	13.4	.	.	.
Did this source provide you with:													
All the information	.	.	.	.	.	.	.	.	.	.	.	.	.
Most of the information	51.9	.	.	.	.	.	.	.	.	.	.	.	.
Some of the information	30.8	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_A - Ease of Getting and Understanding and Usefulness of Information From TRICARE Beneficiary Advisors at a Service Center, Hospital, or Clinic (Questions 4 and 9)

		Total	Male	Female	Male		Female		Male		Female		Male ActRC	Female ActRC
					AD	AD	AD Spouse	AD Spouse	Ret Under	Ret Under	Ret Over	Ret Over		
Percent who used source		52.5	52.3	52.7	59.6	65.3	38.9	55.2	46.8	50.3	39.9	31.8	44.8	57.9
How easy was it to get information?	Easy	60.5	62.3	58.4	63.2	70.1	.	51.7	56.6	54.7	67.2	65.5	.	53.0
	Fairly easy	32.6	30.8	34.8	30.7	.	.	40.6	33.1	34.3	27.7	.	.	38.3
	Not easy at all	6.8	6.8	6.9	.	.	.	7.8	.	.	.	.	.	8.7
How easy was it to understand the information?	Easy	61.0	57.5	65.1	55.3	74.0	.	61.9	56.9	60.8	66.4	69.1	.	59.5
	Fairly easy	35.7	39.1	31.7	41.2	.	.	32.8	38.9	35.9	31.4	.	.	35.3
	Not easy at all	3.3	.	3.2	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	74.8	74.2	75.5	73.7	81.8	.	73.8	69.7	71.4	82.8	81.1	.	69.5
	Fairly useful	20.6	21.0	20.2	21.1	.	.	21.7	25.5	25.3	.	.	.	23.0
	Not useful at all	4.6	.	4.4	.	.	.	.	.	.	.	.	.	.

Table 3A_B - Ease of Getting and Understanding and Usefulness of Information From TRICARE Doctors, Nurses, or Technicians at a Military Hospital or Clinic (Questions 4 and 9)

		Total	Male	Female	Male		Female		Male		Female		Male ActRC	Female ActRC
					AD	AD	AD Spouse	AD Spouse	Ret Under	Ret Under	Ret Over	Ret Over		
Percent who used source		35.3	34.0	37.0	43.2	48.3	38.9	48.2	27.3	27.0	17.6	15.2	44.8	44.8
How easy was it to get information?	Easy	64.0	60.4	68.1	60.2	75.4	.	65.9	57.6	66.7	66.1	.	.	60.4
	Fairly easy	31.6	35.7	27.0	36.1	.	.	28.7	38.8	.	.	.	.	34.7
	Not easy at all	4.4	.	4.9	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	70.1	67.6	72.9	64.5	86.0	.	69.0	74.1	67.7	75.8	.	.	68.7
	Fairly easy	27.4	29.9	24.7	33.1	.	.	27.2	.	.	.	.	.	27.6
	Not easy at all	2.4	.	2.4	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	75.0	74.3	75.7	71.7	84.2	.	74.1	78.8	69.7	83.6	.	.	71.0
	Fairly useful	22.1	22.4	21.7	25.3	.	.	23.2	.	.	.	.	.	26.7
	Not useful at all	2.9	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_C - Ease of Getting and Understanding and Usefulness of Information From TRICARE'S Internet Sites (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		35.3	37.2	32.9	39.0	43.2	11.1	34.9	44.3	31.3	25.9	14.5	27.6	39.0
How easy was it to get information?	Easy	49.3	48.2	50.8	51.0	68.6	.	46.6	41.3	40.0	50.0	.	.	51.0
	Fairly easy	43.9	45.2	42.0	43.0	.	.	45.1	50.0	50.4	45.6	.	.	41.8
	Not easy at all	6.8	.	7.2	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	55.6	51.9	60.7	53.0	66.7	.	59.8	50.4	57.9	51.1	.	.	63.2
	Fairly easy	39.1	43.1	33.6	43.0	.	.	35.6	43.9	33.3	42.2	.	.	31.8
	Not easy at all	5.3	.	5.7	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	58.9	59.1	58.7	58.9	.	.	58.5	58.7	59.3	60.0	.	.	55.3
	Fairly useful	34.8	35.0	34.4	35.1	.	.	34.2	35.5	29.2	34.4	.	.	38.9
	Not useful at all	6.3	.	6.9	.	.	.	.	.	.	.	.	.	.

Table 3A_D - Ease of Getting and Understanding and Usefulness of Information From The "Ask a Nurse" Toll-Free Number (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		28.0	24.5	32.2	29.7	36.4	38.9	43.5	18.8	25.8	16.6	10.9	48.3	46.9
How easy was it to get information?	Easy	64.3	58.9	69.1	60.2	76.7	.	68.0	55.4	67.4	57.1	.	.	72.7
	Fairly easy	28.5	34.2	23.4	33.6	.	.	25.8	.	.	.	.	.	21.6
	Not easy at all	7.2	.	7.5	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	73.5	63.3	82.8	62.5	95.2	.	79.4	59.6	81.7	71.4	.	.	84.0
	Fairly easy	23.5	33.1	14.8	33.9	.	.	18.4	.	.	.	.	.	13.8
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	75.4	70.1	80.3	69.9	88.4	.	78.4	66.7	80.6	74.5	.	.	73.5
	Fairly useful	18.9	23.3	14.9	.	.	.	16.6	.	.	.	.	.	20.5
	Not useful at all	5.7	.	4.8	.	.	.	.	.	.	.	.	.	.

Table 3A_E - Ease of Getting and Understanding and Usefulness of Information From Other TRICARE Toll-Free Numbers (Other Than "Ask a Nurse") (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		31.3	29.6	33.4	32.6	28.2	38.9	40.8	26.8	33.8	24.9	20.3	27.6	41.6
How easy was it to get information?	Easy	38.7	32.1	46.0	29.4	.	.	45.8	.	44.3	41.4	.	.	41.5
	Fairly easy	41.5	42.3	40.6	40.5	.	.	37.3	51.2	43.4	36.8	.	.	40.8
	Not easy at all	19.8	25.7	13.4	30.2	.	.	16.9	.	.	.	.	.	17.7
How easy was it to understand the information?	Easy	52.3	44.4	60.9	38.9	.	.	56.8	50.0	60.7	56.3	.	.	57.1
	Fairly easy	36.3	39.9	32.3	41.3	.	.	35.8	39.0	31.1	35.6	.	.	31.6
	Not easy at all	11.4	15.7	6.7	.	.	.	.	.	.	.	.	.	11.3
How useful was the information?	Useful	54.8	47.8	62.4	45.6	.	.	53.8	48.1	70.2	55.3	.	.	56.4
	Fairly useful	35.7	40.4	30.8	40.0	.	.	39.3	45.7	.	.	.	.	32.6
	Not useful at all	9.4	11.8	6.8	.	.	.	.	.	.	.	.	.	11.0

Table 3A_F - Ease of Getting and Understanding and Usefulness of Information From The TRICARE for Life Brochure (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		28.0	31.7	23.5	20.9	13.7	27.8	15.4	32.6	26.3	58.6	53.8	10.3	13.9
How easy was it to get information?	Easy	59.4	57.2	63.0	49.4	.	.	64.0	52.0	61.7	67.5	64.0	.	64.8
	Fairly easy	38.2	40.4	34.5	48.1	.	.	34.5	44.9	34.0	30.5	.	.	34.1
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	54.5	50.8	60.5	.	.	.	64.7	55.1	54.8	62.5	68.5	.	63.0
	Fairly easy	42.6	46.0	37.1	63.3	.	.	32.4	39.8	41.9	33.5	.	.	33.7
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	60.6	57.8	65.2	50.0	.	.	61.9	46.9	66.0	71.0	72.5	.	64.8
	Fairly useful	35.2	38.2	30.3	44.9	.	.	32.4	50.0	.	25.5	.	.	.
	Not useful at all	4.2	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_G - Ease of Getting and Understanding and Usefulness of Information From The TRICARE Handbook (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		45.3	46.7	43.6	42.7	33.1	55.6	43.1	47.3	49.7	56.2	47.7	37.9	36.6
How easy was it to get information?	Easy	59.0	56.6	62.3	57.6	79.5	.	63.3	52.4	55.6	58.8	58.0	.	65.2
	Fairly easy	38.3	41.3	34.4	41.2	.	.	32.0	44.9	41.0	38.1	38.3	.	30.8
	Not easy at all	2.6	.	3.3	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	56.2	55.0	57.7	53.3	.	.	62.7	53.4	52.5	59.8	61.0	.	62.5
	Fairly easy	40.7	42.1	38.7	44.2	.	.	34.6	42.6	43.0	37.6	37.8	.	33.5
	Not easy at all	3.2	.	3.6	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	59.4	56.4	63.4	56.4	.	.	60.7	54.7	64.2	58.2	64.6	.	57.1
	Fairly useful	37.0	40.5	32.5	40.6	.	.	35.3	41.9	30.7	38.7	.	.	39.3
	Not useful at all	3.6	.	4.1	.	.	.	.	.	.	.	.	.	.

Table 3A_H - Ease of Getting and Understanding and Usefulness of Information From The Prime Remote Handbook (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		12.4	12.3	12.4	13.7	14.4	.	12.2	10.8	13.0	10.6	8.8	13.8	10.4
How easy was it to get information?	Easy	54.8	48.5	62.3	.	.	.	60.2	.	.	.	.	.	68.1
	Fairly easy	40.8	45.2	35.4	.	.	.	37.0	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	53.4	46.8	61.2	.	.	.	65.5	.	.	.	.	.	51.4
	Fairly easy	42.7	48.6	35.8	.	.	.	31.8	.	.	.	.	.	45.7
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	57.5	47.5	69.4	.	.	.	60.9	.	73.3	.	.	.	60.0
	Fairly useful	36.0	44.9	25.5	.	.	.	32.7	.	.	.	.	.	.
	Not useful at all	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_I - Ease of Getting and Understanding and Usefulness of Information From TRICARE Provider Directories (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		26.6	26.3	27.0	26.2	17.8	22.2	28.5	26.0	32.2	27.0	24.0	31.0	30.1
How easy was it to get information?	Easy	56.4	51.6	62.1	48.5	.	.	62.4	51.9	58.1	58.9	.	.	63.1
	Fairly easy	37.1	42.1	31.2	44.6	.	.	31.6	40.5	32.5	37.8	.	.	33.5
	Not easy at all	6.5	.	6.7	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	62.3	58.8	66.3	55.4	.	.	67.3	61.7	65.0	64.4	.	.	72.1
	Fairly easy	34.2	36.8	31.2	40.6	.	.	30.1	.	31.6	.	.	.	26.5
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	60.0	55.0	65.7	53.0	.	.	65.0	52.5	61.0	63.2	.	.	66.2
	Fairly useful	34.0	39.5	27.7	44.0	.	.	29.7	.	29.7	.	.	.	27.9
	Not useful at all	6.0	.	6.5	.	.	.	.	.	.	.	.	.	.

Table 3A_J - Ease of Getting and Understanding and Usefulness of Information From TRICARE Letters, Pamphlets, or Other Brochures (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		46.5	48.6	44.0	47.3	43.2	38.9	42.8	49.2	45.1	51.6	46.5	55.2	39.8
How easy was it to get information?	Easy	58.4	54.5	63.6	53.6	68.6	.	68.8	52.9	59.0	58.2	54.7	.	65.8
	Fairly easy	38.8	42.6	33.8	44.2	.	.	28.7	43.1	37.3	38.4	44.0	.	32.3
	Not easy at all	2.8	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	59.0	56.8	61.8	55.8	.	.	69.3	56.9	59.1	59.0	57.7	.	67.3
	Fairly easy	38.6	41.8	34.3	43.1	.	.	27.9	41.2	34.6	39.9	.	.	31.6
	Not easy at all	2.4	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	54.9	53.3	57.1	49.7	.	.	58.0	50.0	57.5	65.0	63.3	.	56.2
	Fairly useful	39.6	43.0	35.0	45.9	.	.	34.9	47.3	31.9	32.2	.	.	38.2
	Not useful at all	5.5	.	7.9	.	.	.	.	.	.	.	.	.	.

Table 3A_K - Ease of Getting and Understanding and Usefulness of Information From Military-Sponsored Town Hall Meetings On Base (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		7.2	8.7	5.5	10.4	5.1	16.7	5.4	4.5	4.6	8.9	8.0	3.4	6.0
How easy was it to get information?	Easy	60.7	56.2	69.4	.	.	.	68.0	.	.	.	.	.	.
	Fairly easy	33.4	.	26.4	.	.	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	52.8	49.3	59.5	.	.	.	65.3	.	.	.	.	.	.
	Fairly easy	39.5	44.0	30.9	.	.	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	59.6	55.4	67.9	.	.	.	63.3	.	.	.	.	.	.
	Fairly useful	30.2	.	22.8	.	.	.	.	.	.	.	.	.	.
	Not useful at all	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_L - Ease of Getting and Understanding and Usefulness of Information From Briefings or Orientations (About TRICARE) (Questions 4 and 9)

		Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Percent who used source		17.5	21.4	12.8	32.6	32.2	22.2	10.8	4.8	4.4	10.8	9.2	17.2	11.3
How easy was it to get information?	Easy	65.8	63.5	70.2	62.1	.	.	70.3	.	.	.	.	.	71.4
	Fairly easy	31.6	32.8	29.1	33.9	.	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	59.7	55.7	67.9	54.0	.	.	70.3	.	.	.	.	.	63.6
	Fairly easy	36.1	38.9	30.4	39.5	.	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	68.3	67.3	70.5	65.0	.	.	67.3	.	.	.	.	.	66.2
	Fairly useful	25.9	27.0	23.6	28.5	.	.	.	.	.	.	.	.	.
	Not useful at all	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 3B - Most Difficult Source to Use (Question 10)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Other TRICARE toll-free numbers (other than "Ask a Nurse")	29.1	28.4	29.9	31.7	.	.	32.0	22.4	30.5	.	.	.	33.1
TRICARE letters, pamphlets, or other brochures	15.2	16.6	13.4	16.0	.	.	10.4	.	.	.	.	.	10.1
TRICARE Internet sites	12.8	12.4	13.3	.	.	.	13.0	20.6	.	.	.	.	17.2
TRICARE Handbook	11.8	10.9	13.0	.	.	.	12.6	.	.	.	.	.	11.1
TRICARE beneficiary advisors at a service center, hospital, or clinic	7.0	5.8	8.6	.	.	.	9.2	.	.	.	.	.	7.8
TRICARE doctors, nurses, or technicians at a military hospital or clinic	4.9	.	5.0	.	.	.	6.6	.	.	.	.	.	.
Briefings or orientations (about TRICARE)	3.8	.	.	.	.	.	.	.	.	.	.	.	.
TRICARE provider directories	3.5	.	3.7	.	.	.	.	.	.	.	.	.	.
The "Ask a Nurse" toll-free number	3.0	.	3.6	.	.	.	5.7	.	.	.	.	.	.
TRICARE for Life brochure	2.3	.	.	.	.	.	.	.	.	.	.	.	.
Prime Remote Handbook	1.8	.	.	.	.	.	.	.	.	.	.	.	.
Other	1.6	.	.	.	.	.	.	.	.	.	.	.	.
Video or CD-ROM	.	.	.	.	.	.	.	.	.	.	.	.	.
Veterans' organizations or military associations	.	.	.	.	.	.	.	.	.	.	.	.	.
Relatives, friends, or co-workers	.	.	.	.	.	.	.	.	.	.	.	.	.
Other newspapers or newsletters (other than military)	.	.	.	.	.	.	.	.	.	.	.	.	.
Military-sponsored town hall meetings on base	.	.	.	.	.	.	.	.	.	.	.	.	.
Military newspapers or newsletters	.	.	.	.	.	.	.	.	.	.	.	.	.
E-mail	.	.	.	.	.	.	.	.	.	.	.	.	.
Doctors or staff at civilian hospitals or clinics	.	.	.	.	.	.	.	.	.	.	.	.	.
Civilian telephone books	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 4 - Overall Satisfaction With Available Information (Question 11)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Satisfied	53.6	53.0	54.3	55.6	52.5	.	57.1	53.4	54.2	46.3	49.1	.	59.3
Very satisfied	25.1	25.2	24.9	19.9	.	.	21.5	22.4	23.7	42.0	38.0	.	18.8
Neither satisfied nor dissatisfied	14.0	14.0	14.1	16.3	.	.	15.4	14.1	13.9	.	.	.	14.6
Dissatisfied	5.5	5.3	5.6	.	.	.	4.5	.	.	.	.	.	5.4
Very dissatisfied	1.9	.	1.1	.	.	.	.	.	.	.	.	.	.

Table 5A - Most Preferred Method of Getting Information (Questions 12 And 12A)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Face to face	30.8	34.4	26.2	42.2	37.7	.	28.2	29.1	23.6	22.1	14.3	31.4	26.1
Telephone	23.2	19.3	28.1	16.4	21.7	.	29.5	22.4	31.8	23.2	24.4	28.6	33.5
Menu-driven toll-free numbers leading to a TRICARE representative	80.5	81.7	79.5	81.5	.	.	81.3	85.1	78.9	78.9	80.0	.	80.9
Local calls to TRICARE staff	70.2	69.5	70.7	86.4	.	.	76.5	63.2	70.7	48.8	43.1	.	77.8
Entirely automated TRICARE toll-free numbers	25.8	25.2	26.3	17.3	.	.	21.6	24.1	23.1	38.2	40.0	.	16.3
Mail	22.1	20.3	24.5	10.9	8.7	.	18.4	19.6	26.0	40.8	53.0	17.1	16.2
Internet site	16.1	18.0	13.7	21.6	20.3	.	17.0	20.6	11.5	8.1	4.1	11.4	15.3
E-mail	7.6	7.7	7.4	8.9	11.6	.	6.6	8.0	7.1	4.9	4.1	11.4	8.6

Table 5B - Least Preferred Method of Getting Information (Questions 13 And 13A)

	Total	Male	Female	Male AD	Female AD	Male AD Spouse	Female AD Spouse	Male Ret Under	Female RetUnder	Male RetOver	Female RetOver	Male ActRC	Female ActRC
Mail	36.7	37.9	35.2	49.1	51.4	.	40.9	34.5	29.9	17.0	14.7	37.1	45.1
Telephone	24.9	27.2	21.8	27.7	21.0	.	21.6	28.6	21.9	24.7	23.3	25.7	21.3
Menu-driven toll-free numbers leading to a TRICARE representative	72.8	74.1	70.8	77.4	.	.	76.1	73.9	69.3	66.4	66.1	.	74.8
Entirely automated TRICARE toll-free numbers	69.5	69.4	69.6	75.2	.	.	79.1	71.2	69.3	53.4	50.0	.	77.9
Local calls to TRICARE staff	35.8	34.1	38.6	32.8	.	.	35.2	37.8	37.6	32.8	41.9	.	45.4
Internet site	16.9	14.7	19.7	8.5	13.8	.	15.8	16.5	22.3	26.6	29.3	14.3	13.4
E-mail	15.6	14.4	17.1	11.1	11.6	.	16.9	13.9	17.3	22.1	24.1	20.0	15.0
Face to face	4.5	4.3	4.9	3.0	0.7	.	3.9	5.9	7.4	5.5	6.4	0.0	3.8

Table 1A - Awareness of TRICARE Information Sources (Question 1)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
TRICARE toll-free numbers	91.3	87.8	91.9	85.3	93.7	96.3	95.5	.	91.9	.	87.6	91.1	93.9
Printed materials from TRICARE	90.8	89.6	91.0	88.9	95.7	94.0	93.8	.	92.1	.	81.9	92.9	94.2
TRICARE staff	86.9	87.7	86.7	87.4	91.4	94.9	93.1	.	87.7	.	76.2	91.1	92.0
TRICARE Internet sites	75.6	68.7	76.8	65.8	83.5	80.1	80.3	.	77.8	.	64.8	70.5	81.6

Table 1B - Topics About Which Users Sought Information (Question 2)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Scheduling an appointment	43.6	57.2	41.2	56.3	53.6	72.0	63.1	.	38.8	.	16.3	61.6	63.2
Phone numbers for healthcare providers or military treatment facilities	41.6	49.2	40.2	45.8	47.9	66.8	58.7	.	39.4	.	21.3	53.6	56.2
Referrals to specialists or other doctors	35.4	37.3	35.0	36.3	41.1	44.0	50.2	.	35.1	.	18.7	43.7	52.4
Benefit coverage for current beneficiaries	34.8	28.8	35.8	25.8	38.1	33.5	36.1	.	40.5	.	26.8	40.2	38.8
Billing or claims	33.9	26.7	35.1	24.9	35.2	30.7	34.6	.	40.3	.	28.9	33.0	34.6
Military treatment facilities in the area	29.9	42.3	27.7	42.1	33.0	48.2	35.9	.	24.7	.	19.6	41.1	39.7
Prescription benefits	29.6	25.7	30.3	23.7	27.3	28.4	25.1	.	33.9	.	32.7	36.6	22.3
Local pharmacies participating with TRICARE	29.2	23.9	30.1	20.5	26.7	32.7	25.3	.	30.2	.	36.9	27.7	24.8
Finding a primary care provider	28.9	37.5	27.4	33.7	34.8	54.1	36.7	.	25.8	.	14.6	40.2	37.4
Enrollment or disenrollment in TRICARE	28.4	38.6	26.6	35.8	35.2	53.0	29.6	.	26.2	.	14.1	53.6	31.6
Benefit coverage for new family members	15.4	25.0	13.8	23.7	21.7	33.9	15.7	.	9.2	.	8.1	42.9	17.7
Switching from one military treatment facility to another	13.8	18.4	13.1	16.3	19.6	33.5	24.2	.	8.4	.	4.3	19.6	23.9
Other*	1.2	0.5	1.4	0.0	1.6	1.4	1.6	.	1.2	.	1.1	0.9	1.9

Table 2A - Sources of TRICARE Information (Questions 4, 5, 6, And 6A)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
TRICARE beneficiary advisors at a service center, hospital, or clinic	52.5	54.3	52.1	54.2	63.9	57.5	54.3	.	48.8	.	37.2	55.6	57.6
TRICARE letters, pamphlets, or other brochures	46.5	49.4	46.0	48.1	45.6	49.3	41.0	.	46.1	.	49.9	39.4	40.6
The TRICARE Handbook	45.3	39.6	46.4	35.1	42.9	51.5	41.1	.	48.1	.	53.3	41.4	35.9
Military newspapers or newsletters	36.1	24.0	38.4	21.4	27.6	23.6	19.9	.	42.6	.	61.5	17.2	24.3
TRICARE doctors, nurses, or technicians at a military hospital or clinic	35.3	47.7	33.0	49.4	42.2	52.7	46.8	.	27.8	.	16.8	41.4	45.3
TRICARE's Internet sites	35.3	31.6	36.0	26.6	45.9	41.4	32.6	.	36.3	.	22.1	37.4	38.7
Other TRICARE toll-free numbers (other than "Ask a Nurse")	31.3	38.1	30.1	35.3	30.0	43.6	40.0	.	29.8	.	23.4	45.5	40.3
The TRICARE for Life brochure	28.0	20.9	29.3	19.7	19.0	22.1	13.8	.	28.9	.	57.0	15.2	13.6
The "Ask a Nurse" toll-free number	28.0	33.7	26.8	29.9	31.9	46.0	42.7	.	22.1	.	14.7	60.6	44.8
TRICARE provider directories	26.6	21.3	27.7	16.9	27.4	34.8	26.6	.	29.2	.	26.0	24.2	31.1
Relatives, friends, or co-workers	25.3	31.9	24.1	34.4	32.8	28.1	24.8	.	18.2	.	19.0	25.3	25.0
Veterans' organizations or military associations	23.2	15.6	24.6	15.6	14.5	6.4	8.4	.	29.5	.	44.4	10.1	7.0
Briefings or orientations (about TRICARE)	17.5	29.6	15.2	35.7	31.1	12.9	10.5	.	4.4	.	10.3	12.1	11.5
Doctors or staff at civilian hospitals or clinics	16.8	14.1	17.3	12.3	16.2	20.2	19.0	.	20.5	.	12.7	21.2	18.4
The Prime Remote Handbook	12.4	10.9	12.6	9.2	15.9	16.4	10.8	.	11.7	.	10.0	10.2	10.6
Other newspapers or newsletters (other than military)	7.5	4.1	8.1	4.5	5.1	2.0	3.7	.	8.9	.	14.9	3.0	2.6
Military-sponsored town hall meetings on base	7.2	8.2	7.0	8.5	9.4	7.9	5.0	.	4.5	.	8.6	8.1	5.6
Civilian telephone books	4.7	4.0	4.8	2.6	4.3	8.9	6.2	.	5.7	.	3.2	6.1	7.9
Other*	2.5	1.1	2.8	0.7	3.1	3.0	2.8	.	2.3	.	3.1	2.0	0.8
Television or radio	2.4	1.3	2.6	1.3	2.6	1.5	1.2	.	2.0	.	4.8	1.0	2.0
A video or CD-ROM	1.9	2.1	1.9	2.6	3.4	0.5	1.1	.	0.8	.	1.9	3.0	1.8
Civilian associations	1.8	1.4	1.9	1.3	1.4	1.0	1.7	.	1.4	.	3.4	1.0	2.6

Table 2B - Primary Source of Information About TRICARE (Question 7)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
TRICARE beneficiary advisors at a service center, hospital, or clinic	21.3	17.5	22.0	.	26.4	17.3	20.3	.	21.4	.	17.2	.	19.9
TRICARE Internet sites	16.2	14.0	16.6	.	22.6	.	13.6	.	16.5	.	8.9	.	18.1
Other TRICARE toll-free numbers (other than "Ask a Nurse")	12.4	12.7	12.3	.	10.1	17.8	20.5	.	13.6	.	8.1	.	18.8
TRICARE doctors, nurses, or technicians at a military hospital or clinic	11.5	12.2	11.3	.	12.5	.	16.7	.	10.2	.	7.2	.	16.2
TRICARE letters, pamphlets, or other brochures	10.3	13.9	9.7	.	.	.	6.0	.	11.3	.	15.1	.	.
TRICARE Handbook	6.9	.	7.4	.	.	.	6.7	.	9.1	.	10.2	.	8.1
Relatives, friends, or co-workers	5.7	10.1	4.9	.	.	.	5.8	.	.	.	.	.	5.4
Military newspapers or newsletters	3.8	.	4.4	.	.	.	.	.	.	.	13.0	.	.
Briefings or orientations (about TRICARE)	2.5	.	.	.	.	.	.	.	.	.	.	.	.
Doctors or staff at civilian hospitals or clinics	1.9	.	2.1	.	.	.	.	.	.	.	.	.	.
Other	1.9	.	2.0	.	.	.	.	.	.	.	.	.	.
The "Ask a Nurse" toll-free number	1.4	.	1.0	.	.	.	.	.	.	.	.	.	.
Veterans' organizations or military associations	1.2	.	1.4	.	.	.	.	.	.	.	.	.	.
Video or CD-ROM	.	.	.	.	.	.	.	.	.	.	.	.	.
TV or radio	.	.	.	.	.	.	.	.	.	.	.	.	.
TRICARE provider directories	.	.	.	.	.	.	.	.	.	.	.	.	.
TRICARE for Life brochure	.	.	.	.	.	.	.	.	.	.	.	.	.
Prime Remote Handbook	.	.	.	.	.	.	.	.	.	.	.	.	.
Other newspapers or newsletters (other than military)	.	.	.	.	.	.	.	.	.	.	.	.	.
Military-sponsored town hall meetings on base	.	.	.	.	.	.	.	.	.	.	.	.	.
E-mail	.	.	.	.	.	.	.	.	.	.	.	.	.
Civilian telephone books	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 2C - Overall Adequacy of Primary Source (Question 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Did this source provide you with: All the information	33.7	31.4	34.1	32.2	31.5	29.5	32.3	.	35.6	.	37.2	.	33.3
Most of the information	47.5	46.5	47.7	45.9	53.3	49.5	50.4	.	44.7	.	41.1	55.4	49.8
Some of the information	18.8	22.1	18.2	21.9	15.2	21.1	17.3	.	19.7	.	21.7	.	16.9

Table 2C_A - Adequacy of TRICARE Beneficiary Advisors at a Service Center, Hospital, or Clinic as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	21.3	17.5	22.0	.	26.4	17.3	20.3	.	21.4	.	17.2	.	19.9
Did this source provide you with: All the information	51.1	46.0	51.9	.	50.6	.	48.9	.	55.3	.	51.3	.	48.2
Most of the information	39.1	45.3	38.2	.	43.8	.	34.8	.	34.1	.	.	.	36.8
Some of the information	9.7	.	9.9	.	.	.	.	.	.	.	.	.	.

Table 2C_B - Adequacy of TRICARE Internet Sites as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	16.2	14.0	16.6	.	22.6	.	13.6	.	16.5	.	8.9	.	18.1
Did this source provide you with: All the information	24.0	.	23.5	.	.	.	.	.	33.3	.	.	.	.
Most of the information	61.3	50.1	63.2	.	72.4	.	66.0	.	52.9	.	.	.	64.8
Some of the information	14.6	.	13.3	.	.	.	.	.	.	.	.	.	.

Table 2C_C - Adequacy of TRICARE Toll-Free Numbers (Other Than "Ask a Nurse") as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	12.4	12.7	12.3	.	10.1	17.8	20.5	.	13.6	.	8.1	.	18.8
Did this source provide you with: All the information	41.2	43.0	40.8	.	.	.	33.8	.	45.8	.	.	.	39.8
Most of the information	39.3	.	40.2	.	.	.	47.9	.	.	.	.	.	43.5
Some of the information	19.5	.	19.0	.	.	.	.	.	.	.	.	.	.

Table 2C_D - Adequacy of TRICARE Doctors, Nurses, or Technicians at a Military Hospital or Clinic as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	11.5	12.2	11.3	.	12.5	.	16.7	.	10.2	.	7.2	.	16.2
Did this source provide you with: All the information	43.1	.	44.2	.	.	.	38.5	.	.	.	.	.	.
Most of the information	41.1	48.1	39.6	.	.	.	50.4	.	.	.	.	.	50.0
Some of the information	15.8	.	16.2	.	.	.	.	.	.	.	.	.	.

Table 2C_E - Adequacy of TRICARE Letters, Pamphlets, or Other Brochures as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	10.3	13.9	9.7	.	.	.	6.0	.	11.3	.	15.1	.	.
Did this source provide you with:													
All the information	21.2	.	21.8	.	.	.	.	.	.	.	.	.	.
Most of the information	51.9	.	50.6	.	.	.	.	.	51.5	.	.	.	.
Some of the information	26.9	.	27.7	.	.	.	.	.	.	.	.	.	.

Table 2C_F - Adequacy of TRICARE Handbook as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	6.9	.	7.4	.	.	.	6.7	.	9.1	.	10.2	.	8.1
Did this source provide you with:													
All the information	20.1	.	19.1	.	.	.	.	.	.	.	.	.	.
Most of the information	61.1	.	62.7	.	.	.	.	.	65.5	.	.	.	.
Some of the information	18.8	.	18.3	.	.	.	.	.	.	.	.	.	.

Table 2C_G - Adequacy of Relatives, Friends, or Co-Workers as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	5.7	10.1	4.9	.	.	.	5.8	.	.	.	.	.	5.4
Did this source provide you with:													
All the information	21.5	.	.	.	.	.	.	.	.	.	.	.	.
Most of the information	45.5	.	46.8	.	.	.	.	.	.	.	.	.	.
Some of the information	33.0	.	33.7	.	.	.	.	.	.	.	.	.	.

Table 2C_H - Adequacy of Military Newspapers or Newsletters as Primary Source (Questions 7 and 8)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent indicating source was primary source	3.8	.	4.4	.	.	.	.	.	.	.	13.0	.	.
Did this source provide you with:													
All the information	.	.	.	.	.	.	.	.	.	.	.	.	.
Most of the information	51.9	.	50.5	.	.	.	.	.	.	.	.	.	.
Some of the information	30.8	.	31.5	.	.	.	.	.	.	.	.	.	.

Table 3A_A - Ease of Getting and Understanding and Usefulness of Information From TRICARE Beneficiary Advisors at a Service Center, Hospital, or Clinic (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		52.5	54.3	52.1	54.2	63.9	57.5	54.3	42.1	48.8	.	37.2	55.6	57.6
How easy was it to get information?	Easy	60.5	59.7	60.7	62.7	65.8	53.0	51.1	.	56.0	.	66.7	.	52.4
	Fairly easy	32.6	36.3	31.9	.	28.4	40.9	40.8	.	33.6	.	28.6	.	38.0
	Not easy at all	6.8	.	7.4	.	.	.	8.1	.	10.4	.	.	.	9.5
How easy was it to understand the information?	Easy	61.0	58.5	61.4	56.6	61.3	62.6	61.8	.	58.7	.	67.2	58.2	60.4
	Fairly easy	35.7	40.2	34.8	42.2	35.1	35.7	32.0	.	37.5	.	31.2	.	34.4
	Not easy at all	3.3	.	3.7	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	74.8	70.4	75.7	69.9	77.9	75.7	72.8	.	71.2	.	82.4	76.4	68.1
	Fairly useful	20.6	27.2	19.3	.	15.8	.	22.3	.	24.8	.	.	.	24.1
	Not useful at all	4.6	.	5.0	.	.	.	.	.	.	.	.	.	.

Table 3A_B - Ease of Getting and Understanding and Usefulness of Information From TRICARE Doctors, Nurses, or Technicians at a Military Hospital or Clinic (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		35.3	47.7	33.0	49.4	42.2	52.7	46.8	5.3	27.8	.	16.8	41.4	45.3
How easy was it to get information?	Easy	64.0	65.6	63.6	65.8	63.3	64.5	66.1	.	62.3	.	64.4	.	62.2
	Fairly easy	31.6	31.2	31.7	.	32.7	29.9	28.7	.	33.3	.	.	.	32.7
	Not easy at all	4.4	.	4.7	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	70.1	72.8	69.4	72.4	68.7	73.8	67.8	.	70.5	.	72.4	.	68.5
	Fairly easy	27.4	24.9	28.1	.	29.3	.	29.0	.	26.8	.	.	.	28.3
	Not easy at all	2.4	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	75.0	78.3	74.1	80.3	72.1	72.6	74.4	.	74.3	.	81.4	80.5	70.2
	Fairly useful	22.1	19.2	22.9	.	25.2	.	22.4	.	21.3	.	.	.	28.0
	Not useful at all	2.9	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_C - Ease of Getting and Understanding and Usefulness of Information From TRICARE'S Internet Sites (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		35.3	31.6	36.0	26.6	45.9	41.4	32.6	68.4	36.3	.	22.1	37.4	38.7
How easy was it to get information?	Easy	49.3	55.9	48.2	.	54.7	53.6	44.3	.	40.6	.	50.0	.	50.4
	Fairly easy	43.9	36.2	45.1	.	40.9	36.9	47.5	.	50.2	.	43.9	.	41.9
	Not easy at all	6.8	.	6.7	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	55.6	56.6	55.5	.	56.0	58.3	59.8	.	54.8	.	50.9	.	62.5
	Fairly easy	39.1	38.0	39.2	.	40.3	.	35.7	.	38.1	.	42.9	.	31.9
	Not easy at all	5.3	.	5.3	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	58.9	62.2	58.4	.	59.0	70.2	54.3	.	58.8	.	59.6	.	56.8
	Fairly useful	34.8	31.3	35.3	.	36.6	.	37.9	.	33.2	.	33.3	.	36.8
	Not useful at all	6.3	.	6.3	.	.	.	.	.	.	.	.	.	.

Table 3A_D - Ease of Getting and Understanding and Usefulness of Information From The "Ask a Nurse" Toll-Free Number (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		28.0	33.7	26.8	29.9	31.9	46.0	42.7	36.8	22.1	.	14.7	60.6	44.8
How easy was it to get information?	Easy	64.3	72.1	62.3	76.1	60.0	65.2	68.6	.	63.1	.	54.1	75.0	72.2
	Fairly easy	28.5	23.4	29.8	.	32.7	.	24.8	.	27.0	.	.	.	22.7
	Not easy at all	7.2	.	7.8	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	73.5	74.2	73.5	77.8	68.8	70.3	81.4	.	75.4	.	67.6	85.0	83.8
	Fairly easy	23.5	22.9	23.5	.	28.4	.	17.3	.	.	.	.	.	13.7
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	75.4	80.0	74.5	80.4	72.7	78.0	78.4	.	75.5	.	71.2	81.7	72.6
	Fairly useful	18.9	.	19.6	.	.	.	17.2	.	.	.	.	.	21.5
	Not useful at all	5.7	.	5.9	.	.	.	.	.	.	.	.	.	.

Table 3A_E - Ease of Getting and Understanding and Usefulness of Information From Other TRICARE Toll-Free Numbers (Other Than "Ask a Nurse") (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		31.3	38.1	30.1	35.3	30.0	43.6	40.0	57.9	29.8	.	23.4	45.5	40.3
How easy was it to get information?	Easy	38.7	39.2	38.6	.	31.4	53.4	42.9	.	41.0	.	43.4	.	40.4
	Fairly easy	41.5	40.0	41.8	.	41.9	.	39.5	.	45.6	.	36.9	.	40.0
	Not easy at all	19.8	20.8	19.6	.	.	.	17.6	.	.	.	.	.	19.6
How easy was it to understand the information?	Easy	52.3	54.5	51.8	.	40.0	65.9	53.8	.	58.0	.	60.7	.	56.7
	Fairly easy	36.3	34.7	36.6	.	41.0	.	39.1	.	33.2	.	32.8	.	31.0
	Not easy at all	11.4	.	11.5	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	54.8	53.5	55.2	.	46.6	59.8	51.7	.	63.0	.	60.8	.	55.5
	Fairly useful	35.7	38.0	35.2	.	38.8	.	40.9	.	30.2	.	31.7	.	32.2
	Not useful at all	9.4	.	9.6	.	.	.	.	.	.	.	.	.	.

Table 3A_F - Ease of Getting and Understanding and Usefulness of Information From The TRICARE for Life Brochure (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		28.0	20.9	29.3	19.7	19.0	22.1	13.8	36.8	28.9	.	57.0	15.2	13.6
How easy was it to get information?	Easy	59.4	42.2	61.9	.	56.9	.	62.0	.	59.2	.	66.4	.	59.5
	Fairly easy	38.2	55.0	35.7	.	.	.	37.0	.	37.0	.	31.5	.	39.2
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	54.5	49.5	55.2	.	.	79.5	56.0	.	56.3	.	64.4	.	61.3
	Fairly easy	42.6	50.4	41.4	.	63.1	.	40.0	.	39.3	.	32.2	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	60.6	45.8	62.7	.	53.8	72.7	58.0	.	58.2	.	71.5	.	62.0
	Fairly useful	35.2	53.3	32.6	.	.	.	36.0	.	37.0	.	25.8	.	.
	Not useful at all	4.2	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_G - Ease of Getting and Understanding and Usefulness of Information From The TRICARE Handbook (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		45.3	39.6	46.4	35.1	42.9	51.5	41.1	63.2	48.1	.	53.3	41.4	35.9
How easy was it to get information?	Easy	59.0	68.1	57.6	66.7	60.0	77.7	57.7	.	54.5	.	58.5	.	63.8
	Fairly easy	38.3	30.4	39.5	.	38.7	.	37.8	.	42.3	.	38.2	.	32.1
	Not easy at all	2.6	.	2.8	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	56.2	62.6	55.2	61.1	51.3	73.8	58.5	.	53.5	.	60.1	.	63.3
	Fairly easy	40.7	33.5	41.8	.	46.0	.	38.6	.	42.4	.	37.7	.	32.6
	Not easy at all	3.2	.	3.1	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	59.4	62.4	58.9	61.1	57.3	70.6	56.7	.	60.2	.	60.1	.	58.1
	Fairly useful	37.0	35.0	37.4	.	39.3	.	38.8	.	35.7	.	36.6	.	38.2
	Not useful at all	3.6	.	3.7	.	.	.	.	.	.	.	.	.	.

Table 3A_H - Ease of Getting and Understanding and Usefulness of Information From The Prime Remote Handbook (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		12.4	10.9	12.6	9.2	15.9	16.4	10.8	15.8	11.7	.	10.0	10.2	10.6
How easy was it to get information?	Easy	54.8	52.0	55.2	.	.	.	59.7	.	56.0	.	.	.	69.8
	Fairly easy	40.8	.	40.3	.	.	.	.	.	42.7	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	53.4	54.6	53.2	.	.	.	59.7	.	51.3	.	.	.	54.7
	Fairly easy	42.7	.	43.1	.	.	.	.	.	46.1	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	57.5	53.4	58.2	.	.	.	58.4	.	60.8	.	.	.	64.1
	Fairly useful	36.0	.	35.2	.	.	.	.	.	.	.	.	.	.
	Not useful at all	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_I - Ease of Getting and Understanding and Usefulness of Information From TRICARE Provider Directories (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		26.6	21.3	27.7	16.9	27.4	34.8	26.6	36.8	29.2	.	26.0	24.2	31.1
How easy was it to get information?	Easy	56.4	64.9	55.2	.	47.9	62.9	62.5	.	56.1	.	60.2	.	63.3
	Fairly easy	37.1	29.9	38.2	.	44.8	.	31.5	.	35.4	.	36.7	.	32.4
	Not easy at all	6.5	.	6.7	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	62.3	62.5	62.2	.	58.3	65.7	67.5	.	63.9	.	61.2	.	73.0
	Fairly easy	34.2	32.8	34.4	.	38.5	.	30.0	.	31.9	.	35.7	.	24.9
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	60.0	66.3	59.0	.	54.7	67.1	64.0	.	58.1	.	64.0	.	65.6
	Fairly useful	34.0	30.6	34.6	.	41.1	.	31.0	.	31.4	.	32.0	.	29.1
	Not useful at all	6.0	.	6.4	.	.	.	.	.	.	.	.	.	.

Table 3A_J - Ease of Getting and Understanding and Usefulness of Information From TRICARE Letters, Pamphlets, or Other Brochures (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		46.5	49.4	46.0	48.1	45.6	49.3	41.0	73.7	46.1	.	49.9	39.4	40.6
How easy was it to get information?	Easy	58.4	59.1	58.3	59.5	55.7	65.0	69.7	.	57.0	.	57.1	.	66.3
	Fairly easy	38.8	38.4	38.9	.	42.4	35.0	26.6	.	39.3	.	40.1	.	31.3
	Not easy at all	2.8	.	2.9	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	59.0	56.7	59.5	55.4	56.3	68.0	69.8	.	59.1	.	58.6	.	67.1
	Fairly easy	38.6	41.6	37.9	43.2	42.4	31.0	26.6	.	36.9	.	39.5	.	31.3
	Not easy at all	2.4	.	2.6	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	54.9	51.1	55.8	50.0	50.0	61.0	57.4	.	54.9	.	64.5	.	54.5
	Fairly useful	39.6	40.9	39.2	41.9	46.2	34.0	34.8	.	38.6	.	32.4	.	40.2
	Not useful at all	5.5	.	5.0	.	.	.	.	.	.	.	.	.	.

Table 3A_K - Ease of Getting and Understanding and Usefulness of Information From Military-Sponsored Town Hall Meetings On Base (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		7.2	8.2	7.0	8.5	9.4	7.9	5.0	5.3	4.5	.	8.6	8.1	5.6
How easy was it to get information?	Easy	60.7	.	65.5	.	.	.	.	.	.	.	79.5	.	.
	Fairly easy	33.4	.	30.3	.	.	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	52.8	.	54.0	.	.	.	.	.	.	.	75.0	.	.
	Fairly easy	39.5	.	38.2	.	.	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	59.6	.	61.5	.	.	.	.	.	.	.	75.0	.	.
	Fairly useful	30.2	.	28.7	.	.	.	.	.	.	.	.	.	.
	Not useful at all	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 3A_L - Ease of Getting and Understanding and Usefulness of Information From Briefings or Orientations (About TRICARE) (Questions 4 and 9)

		Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Percent who used source		17.5	29.6	15.2	35.7	31.1	12.9	10.5	5.3	4.4	.	10.3	12.1	11.5
How easy was it to get information?	Easy	65.8	68.6	64.6	68.5	63.6	.	68.4	.	.	.	66.7	.	71.4
	Fairly easy	31.6	.	32.0	.	31.8	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How easy was it to understand the information?	Easy	59.7	63.1	58.7	63.0	57.0	.	69.6	.	.	.	68.5	.	65.7
	Fairly easy	36.1	33.2	37.0	.	37.4	.	.	.	.	.	.	.	.
	Not easy at all	.	.	.	.	.	.	.	.	.	.	.	.	.
How useful was the information?	Useful	68.3	68.2	68.3	68.5	66.0	.	65.8	.	.	.	71.7	.	67.1
	Fairly useful	25.9	.	25.8	.	.	.	.	.	.	.	.	.	.
	Not useful at all	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 3B - Most Difficult Source to Use (Question 10)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Other TRICARE toll-free numbers (other than "Ask a Nurse")	29.1	29.7	29.0	.	31.4	.	34.0	.	25.7	.	22.4	.	33.9
TRICARE letters, pamphlets, or other brochures	15.2	22.1	13.8	.	14.3	.	8.1	.	14.9	.	.	.	11.2
TRICARE Internet sites	12.8	9.5	13.5	.	.	.	12.0	.	18.7	.	.	.	16.2
TRICARE Handbook	11.8	6.6	12.9	.	.	.	12.8	.	14.0	.	.	.	10.1
TRICARE beneficiary advisors at a service center, hospital, or clinic	7.0	.	7.9	.	.	.	10.9	.	.	.	.	.	.
TRICARE doctors, nurses, or technicians at a military hospital or clinic	4.9	.	4.1	.	.	.	.	.	.	.	.	.	.
Briefings or orientations (about TRICARE)	3.8	.	3.5	.	.	.	.	.	.	.	.	.	.
TRICARE provider directories	3.5	.	3.8	.	.	.	.	.	.	.	.	.	.
The "Ask a Nurse" toll-free number	3.0	.	2.8	.	.	.	.	.	.	.	.	.	.
TRICARE for Life brochure	2.3	.	.	.	.	.	.	.	.	.	.	.	.
Prime Remote Handbook	1.8	.	.	.	.	.	.	.	.	.	.	.	.
Other	1.6	.	.	.	.	.	.	.	.	.	.	.	.
Video or CD-ROM	.	.	.	.	.	.	.	.	.	.	.	.	.
Veterans' organizations or military associations	.	.	.	.	.	.	.	.	.	.	.	.	.
Relatives, friends, or co-workers	.	.	.	.	.	.	.	.	.	.	.	.	.
Other newspapers or newsletters (other than military)	.	.	.	.	.	.	.	.	.	.	.	.	.
Military-sponsored town hall meetings on base	.	.	.	.	.	.	.	.	.	.	.	.	.
Military newspapers or newsletters	.	.	.	.	.	.	.	.	.	.	.	.	.
E-mail	.	.	.	.	.	.	.	.	.	.	.	.	.
Doctors or staff at civilian hospitals or clinics	.	.	.	.	.	.	.	.	.	.	.	.	.
Civilian telephone books	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 4 - Overall Satisfaction With Available Information (Question 11)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Satisfied	53.6	52.2	53.8	50.6	56.7	57.7	56.8	.	53.8	.	47.2	60.6	58.9
Very satisfied	25.1	23.9	25.3	24.0	19.7	25.9	20.4	.	23.3	.	40.7	.	19.0
Neither satisfied nor dissatisfied	14.0	18.3	13.2	20.1	14.2	.	16.3	.	13.9	.	8.5	.	14.3
Dissatisfied	5.5	.	5.6	.	.	.	4.9	.	6.7	.	.	.	5.6
Very dissatisfied	1.9	.	2.1	.	.	.	.	.	.	.	.	.	.

Table 5A - Most Preferred Method of Getting Information (Questions 12 And 12A)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Face to face	30.8	38.2	29.5	41.6	41.1	30.3	27.8	.	26.3	.	19.5	22.3	27.0
Telephone	23.2	18.8	24.0	16.3	18.1	28.9	29.2	.	27.8	.	23.6	31.2	33.6
Menu-driven toll-free numbers leading to a TRICARE representative	80.5	91.3	79.0	90.3	76.2	92.1	78.7	.	80.8	.	79.3	88.6	80.6
Local calls to TRICARE staff	70.2	80.9	68.7	87.1	85.0	77.8	76.4	.	69.0	.	46.8	85.7	77.2
Entirely automated TRICARE toll-free numbers	25.8	34.6	24.5	38.7	15.0	31.7	18.9	.	24.0	.	38.8	31.4	14.7
Mail	22.1	16.9	23.1	15.3	8.4	22.0	17.9	.	23.2	.	44.8	20.5	15.5
Internet site	16.1	17.4	15.9	17.4	23.0	14.7	17.6	.	15.2	.	6.8	14.3	15.2
E-mail	7.6	8.7	7.4	9.5	9.5	4.1	7.1	.	7.4	.	4.7	11.6	8.3

Table 5B - Least Preferred Method of Getting Information (Questions 13 And 13A)

	Total	Low Grade	Hi Grade	LowPG_ AD	HiPG_ AD	LowPG_ ADSpouse	HiPG_ ADSpouse	LowPG_ RetUnder	HiPG_ RetUnder	LowPG_ RetOver	HiPG_ RetOver	LowPG_ ActRC	HiPG_ ActRC
Mail	36.7	38.1	36.4	39.5	54.0	35.8	41.7	.	32.2	.	16.2	45.5	44.6
Telephone	24.9	28.7	24.2	30.5	24.4	20.6	22.5	.	24.8	.	24.3	18.7	21.9
Menu-driven toll-free numbers leading to a TRICARE representative	72.8	70.3	73.4	69.0	79.6	71.1	77.6	.	71.1	.	66.3	.	74.8
Entirely automated TRICARE toll-free numbers	69.5	69.6	69.5	69.0	77.8	71.1	81.1	.	70.1	.	52.3	.	78.1
Local calls to TRICARE staff	35.8	36.0	35.8	37.9	32.4	33.3	36.2	.	38.7	.	35.8	.	45.0
Internet site	16.9	11.5	17.8	10.0	9.5	18.8	15.2	.	20.0	.	27.4	11.6	13.8
E-mail	15.6	17.7	15.2	15.8	9.3	22.0	15.3	.	15.3	.	22.8	19.6	14.5
Face to face	4.5	2.7	4.9	2.6	2.5	2.3	4.4	.	6.8	.	5.8	3.6	3.6