



COLORADO

**Department of Health Care
Policy & Financing**

SOLICITATION #:

2017000265

Appendix G

Health Needs Survey Questions

APPENDIX G

Health Needs Survey Questions

*These questions would be asked of each client at the time of Medicaid enrollment
Some questions would be optional, based on the client's response to previous questions in
their Medicaid application.*

1) Have you ever been told that you have one of the following health conditions?

- Asthma
- Diabetes
- Heart Disease
- High Blood Pressure
- Mental or Behavioral Health Condition
- Other

**2) Do you need help managing your health condition? OR IF NO CONDITIONS ARE
SELECTED, do you need help managing your health?**

- Yes
- No

a. IF YES, What kind of help?

- Information/education
- Finding a provider
- Medication management
- Transportation
- Other

3) Have you given birth in the last 12 months?

**4) In the past 12 months how many times have you been hospitalized or gone to the
emergency department?**

- None
- 1-3
- 4 or more

5) Are you pregnant? (OPTIONAL)

- Yes
- No

**6) Would you like help with family planning (education on number of children and
spacing, birth control, treatment for sexually transmitted diseases)?**

- Yes
- No

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7) Do you need or want help with other resources?

- Housing resources
- Food Assistance
- Other

8) Do you have a child with special health care needs?

- Yes
- No

9) Do you have any concerns about your child?

- Growth/Development
- Learning
- Behavior
- Self-care/Doing things for themselves
- Weight (underweight or overweight)

10) What are your top health goals this year (choose up to 3)?

- Eat better
- Exercise more
- Quit smoking
- Learn how to stay healthy
- Reduce stress or depression
- Avoid alcohol and other drugs

Following 3 questions asked for each goal chosen:

11) How important is [eating better, exercising more, etc.] to you right now?

- Not important
- Important
- Very important

12) How confident are you about [eating better, exercising more, etc.] this year?

- Not confident
- Confident
- Very confident

13) Would you like help meeting this goal?

- Yes
- No