Complete our survey for a chance to win a $50 gift card!

Thank you for being an L.A. Care Covered™ Member. Please complete this survey and mail it back to us with this postage paid form. Completed surveys received or postmarked by August 31, 2018 will be entered for a chance to win one of five $50 gift cards! The survey will be open from July 15 through August 31. You can complete this survey online at www.lacare.org/staywellsurvey.

Name: ___________________________________________ Member ID: ______________________________
Address/City/ZIP code: _______________________________________________________________________

1. Do you find the information in the Stay Well Newsletter useful and/or interesting?
   - Yes    - No

2. What do you like about the Stay Well Newsletter?
   __________________________________________________________________________________________
   __________________________________________________________________________________________

3. Would you like to receive the Stay Well Newsletter by email?
   - Yes. My email address is__________________________________
   - No. I like it in print.

4. What would you like to learn more about? (Please check all that apply)
   - Health and wellness topics (like cancer, allergies, nutrition, heart health)
   - L.A. Care programs (like L.A. Cares About Asthma® and L.A. Cares About Diabetes®)
   - Health benefits and services from L.A. Care (like access to care and medicine)
   - Family Resource Centers (FRCs) and events (like health classes, Zumba®, Cooking)
   - Community Advisory Committees (CACs) and Health Promoters
   - Mental and behavioral health
   - Other __________________________________________________

5. Are you interested in accessing services on your mobile phone or computer?
   - Yes    - No
   If yes, please check all that apply.
   - Communicate with your doctor by email, chat/instant message instead of an office visit
   - Make appointments to see your doctor
   - Refill your prescriptions
   - Get a copy of your medical records
   - Find out your test and lab results
   - Check your eligibility
   - Track your fitness, diet, and well-being
   - Search for answers to your health questions
   - Get health tips
   - Find medical services nearby (such as doctor, clinic, pharmacy, lab)
6. What devices do you use? (Please check all that apply)
   - Mobile phone
   - Laptop/Desktop computer
   - Tablet (for example, iPad)

7. Does L.A. Care Covered™ provide you with what you need to help you be as healthy as possible?
   - Yes
   - No

If no, what other services would you like L.A. Care Covered™ to provide?

8. Would you recommend L.A. Care Covered™ to a friend or family member?
   - Yes
   - No

9. Is there anything you would like to share with us?

Thank you for your feedback!