## 2001 NATIONAL SURVEY OF QUALITY AND STABILITY OF INSURANCE

# PRINCETON SURVEY RESEARCH ASSOCIATES FOR THE COMMONWEALTH FUND

## FINAL QUESTIONNAIRE

April 30, 2001

,	0 adults age 19 or older es of interviewing: April 27 – July 25, 2001
are conducting	<b>TION:</b> Hello, my name is and I am calling for Princeton Survey Research. We g an important national opinion survey about health care. To make sure our survey includes it kinds of families, I'm going to start with a few questions about who lives in your
S1. First,	how many adults age 19 or older live in your household?
$\frac{00}{10}$	RECORD EXACT NUMBER 1-9
10	10 01 111010
99	Don't know/Refused

## IF ONLY ONE ADULT AGE 19+ IN HH (S1=1)

- S2. May I please speak to THAT PERSON?
  - 1 Continue with current respondent–**GO TO S5**
  - 2 New respondent being brought to phone–REPEAT INTRO THEN GO TO S5
  - 3 New respondent not available—SCHEDULE CALL BACK
  - 9 Refused-THANK AND TERMINATE

## IF TWO ADULTS AGE 19+ IN HH (S1=2)

- S3. May I please speak to the (**ROTATE:** younger/older) of those two people?
  - 1 Continue with current respondent–**GO TO S5**
  - 2 New respondent being brought to phone–REPEAT INTRO THEN GO TO S5
  - 3 New respondent not available—SCHEDULE CALL BACK
  - 9 Refused—THANK AND TERMINATE

## IF THREE OR MORE PEOPLE AGE 19+ IN HH (S1=3-10 OR 99)

- S4. May I please speak to the person age 19 or older who has had the most recent birthday?
  - 1 Continue with current respondent–**GO TO S5**
  - 2 New respondent being brought to phone–REPEAT INTRO THEN GO TO S5
  - 3 New respondent not available—SCHEDULE CALL BACK
  - 9 Refused-THANK AND TERMINATE

#### ASK O.S7 IF SCREENING INTERVIEW IS BEING DONE IN ENGLISH

- We're giving people a choice of being interviewed in English or in Spanish. Would you like to continue in English, or would you rather be interviewed in Spanish?
  - 1 English-GO TO Q.1 IN ENGLISH
  - 2 Spanish–SWITCH TO SPANISH-LANUAGE QUESTIONNAIRE REPEAT INTRO THEN GO TO Q.1
  - 3 Spanish–SCHEDULE SPANISH LANGUAGE CALL BACK
  - 4 Doesn't matter/No preference-GO TO Q.1 IN ENGLISH
  - 9 Don't know/Refused- **GO TO Q.1 IN ENGLISH**

#### D1. RECORD SEX

- 1 Male
- 2 Female

#### Introduction

- 1. Overall, how satisfied are you with the quality of health care you have received in the last 12 months? Would you say you are very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?
  - 1 Very satisfied
  - 2 Somewhat satisfied
  - 3 Somewhat dissatisfied
  - 4 Very dissatisfied
  - 5 **(VOL)** Haven't received health care in past 12 months
  - 6 (VOL) Neither satisfied nor dissatisfied/Mixed/It depends on type of care
  - 9 Don't know/Refused

- 2. Thinking about your FUTURE medical care needs, how confident are you that you will be able to get high quality care when you need it very confident, somewhat confident, not too confident, or not at all confident?
  - 1 Very confident
  - 2 Somewhat confident
  - 3 Not too confident
  - 4 Not at all confident
  - 5 **(VOL)** Can't think of needs in future/Won't need care
  - 6 (VOL) Mixed/It depends on type of care
  - 9 Don't know/Refused

## GENERAL VIEWS ABOUT QUALITY OF CARE, ACCESS AND COST EXPERIENCES

3. Please tell me which best describes the type of place you USUALLY go when you personally have a health or medical problem. Is it...(**READ CATEGORIES 1-4**)

#### **INTERVIEWER NOTES:**

IF R SAYS "Private doctors' GROUP practice" CODE IN CATEGORY 1; IF R NAMES TYPE OF DOCTOR (e.g. "gynecologist"), PROBE: And which place best describes where you see this person — (READ CATEGORIES 1-4)

- 1 A private doctor's office or private clinic
- 2 A public clinic or community health center
- 3 A hospital clinic, OR
- 4 A hospital emergency room?
- 5 **(DO NOT READ)** Other
- 6 (DO NOT READ) No regular place for care
- 8 (DO NOT READ) Don't know
- 9 (DO NOT READ) Refused

## ASK IF HAVE A REGULAR PLACE (Q3=1-5)

- 4. How long have you been going to this place for your medical care? (READ CATEGORIES ONLY IF NECESSARY)
  - 1 Less than one year
  - 2 One to less than two years
  - 3 Two to less than three years
  - 4 Three to less than five years
  - 5 Five years or more
  - 9 Don't know/Refused

- 5. Do you have a personal or family doctor, or a nurse practitioner, that you usually rely on if you need medical care?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- 6. Overall, how would you rate the quality of care you receive (from this person/IF NO REGULAR DOCTOR (Q5=2,9): when you see a doctor)? Would you say it is...(**READ**)
  - 1 Excellent
  - 2 Very Good
  - 3 Good
  - 4 Only fair, OR
  - 5 Poor?
  - 6 **(DO NOT READ)** Don't have a doctor
  - 9 (DO NOT READ) Don't know/Refused
- 7. If you feel sick and want to see a doctor or a nurse practitioner, how soon can you usually get in to see one? (READ CATEGORIES 1-4)
  - 1 That same day,
  - 2 The following day,
  - 3 Within the week, OR
  - 4 Do you usually have to wait longer than a week?
  - 5 (DO NOT READ) Have to see doctor on call
  - 6 **(DO NOT READ)** Go to emergency room
  - 9 (DO NOT READ) Don't know/Refused
- 8. During the last 12 months, that is since (month, year), about how many times did you go to a doctor or medical clinic for your own personal health care, for ANY reason including check-ups, screenings, lab work or emergencies. (**READ CATEGORIES ONLY IF NECESSARY**)
  - 1 Never
  - 2 1 to 2 times
  - 3 3 to 4 times
  - 4 5 to 7 times
  - 5 8 to 10 times
  - 6 11 to 15 times
  - 7 16 or more times
  - 9 Don't know/Refused

- 9. In the last 12 months, was there any time when you (INSERT ITEMS IN ORDER) because of the COST?
  - a. Did NOT fill a prescription for medicine
  - b. Did NOT see a specialist when you or your doctor thought you needed one
  - c. SKIPPED a medical test, treatment or follow-up recommended by a doctor
  - d. Had a medical problem but DID NOT go to a doctor or clinic
  - e. Had a toothache or other dental problem but did NOT see a dentist

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- 1 Yes
- 2 No
- 9 Don't know/Refused
- 10. In the last 12 months, did YOU personally miss any days at work or school because of a toothache or other problem with your teeth?
  - 1 Yes
  - 2 No
  - 3 **(VOL)** Don't work or go to school/Unemployed/Retired etc.
  - 9 Don't know/Refused
- During the last 12 months, were there times when you had problems paying or were unable to pay for medical bills? **INTERVIEWER NOTE:** This can include bills for another family member.
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- 12. In the last 12 months, were you ever contacted by a collection agency about owing money for medical bills? **INTERVIEWER NOTE:** This can include bills for another family member.
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- Over the last 12 months, have you had to change your way of life significantly in order to pay medical bills?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

## ASK IF HAD TO CHANGE WAY OF LIFE SIGNIFICANTLY (013=1)

- Which of the following has happened because you had to pay medical bills? **PROMPT:** Have you ...**(READ ITEMS IN ORDER)** (because you had to pay medical bills)?
  - a. Been unable to pay for basic necessities like food, heat or rent
  - b. Had to get some kind of loan or another mortgage on your home
  - c. Used up all or most of your savings
  - d. Borrowed money from a family member or friend

## **CATEGORIES:**

- 1 Yes
- 2 No
- 9 Don't know/Refused
- 15. Have you EVER had to declare bankruptcy as a result of medical and health care bills, or not?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

## ASK IF EVER DECLARED BANKRUPTCY (Q15=1)

- 16. How recently did this happen? **IF NECESSARY READ:** Did this happen within the past year, about two years ago, about three years ago, or four or more years ago?
  - 1 Within the past year
  - 2 About 2 years ago
  - 3 About 3 years ago
  - 4 4 or more years ago
  - 9 Don't know/Refused

#### SHORT FAMILY DESCRIPTION AND FAMILY UNMET NEED

- 17. For the next few questions I will need to know a little bit about some of the members of your family. Are you the parent or step-parent of any child YOUNGER than age 19 who either lives with you in your household or lives somewhere else?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- 18. Are you the parent or step-parent of any child age 19 to 23 who either lives with you in your household or lives somewhere else?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

## ASK IF PARENT OF 19-23 YR OLD (Q18=1)

- 18a. Do all of these children age 19 to 23 live here with you?
  - 1 Yes, ALL live here/in same household
  - 2 **(VOL)** Some live here, some live elsewhere
  - 3 No, NONE live here/in same household
  - 9 Don't know/Refused

## ASK IF ANY 19-23 YR OLDS LIVE ELSEWHERE (Q18a=2,3)

- 18b. Are any of your children age 19 to 23 who LIVE SOMEWHERE ELSE full-time college students, or not?
  - 1 Yes, ALL full-time college students
  - 2 **(VOL)** Some/at least one full-time college students
  - 3 No, NONE are full-time college students
  - 9 Don't know/Refused

## ASK IF HAS DEPENDENT CHILDREN (Q17=1 OR Q18a=1,2 OR Q18b=1,2)

18c. For the rest of this interview, when I refer to YOUR CHILDREN, please think about all of your children under age

IF ONLY KIDS UNDER 19 (Q17=1 AND Q18=2-9) INSERT: 19

IF ANY KIDS 19-23 (Q18=1) INSERT: 24

who still depend on you for support, especially to help them pay for medical expenses. Altogether, how many children is this?

0 None

#### **RECORD EXACT NUMBER 1-97**

- 98 Don't know
- 99 Refused

- D2. Are you currently married, living as married, divorced, separated, widowed, or have you never been married?
  - 1 Married
  - 2 Living as married
  - 3 Divorced
  - 4 Separated
  - 5 Widowed
  - 6 Never married
  - 9 Refused
- D3. What is your age?

## **RECORD EXACT AGE UP TO AGE 96**

- 97 97 or older
- 99 Refused

## ASK IF MARRIED AND/OR HAS DEPENDENT CHILDREN (QD2=1 OR Q18c=1-97)

- 19. In the last 12 months, was there any time that your (husband/wife), (or) (your child/children) (INSERT ITEMS IN ORDER) because of the COST?
  - a. Did NOT fill a prescription for medicine
  - b. Did NOT see a SPECIALIST when needed
  - c. SKIPPED a medical test, treatment or follow-up recommended by a doctor
  - d. Had a medical problem but DID NOT go to a doctor or clinic
  - e. Had a toothache or other dental problem but did NOT see a dentist

## **CATEGORIES:**

- 1 Yes
- 2 No
- 9 Don't know/Refused

## PERSONAL CURRENT INSURANCE COVERAGE AND RECENT TIME UNINSURED

20. Now I would like to ask you about any health insurance you CURRENTLY have that helps pay for the cost of health care. I'm going to read a list of a few types of health insurance, and I'd like you to tell me which of these you have, if any. First, are you now PERSONALLY covered by...(INSERT ITEMS IN ORDER)

#### **INTERVIEWER NOTES:**

IF RESPONDENT NOT SURE WHICH INSURANCE IS INCLUDED, SAY: Please think about insurance plans that cover the costs of doctor and hospital bills IN GENERAL, and NOT those that cover ONLY dental or eye care or the costs of caring for specific diseases. IF RESPONDENTS TRY TO TELL TYPE THEY HAVE INSTEAD OF GOING THROUGH THE LIST, SAY: I'm sorry but I have to ask about each type of insurance for the survey. Just tell me 'no' if you don't have this type.

- a. Private health insurance offered through a job or union? **IF ANSWERS "no" PROBE:** This could be insurance through a current job, a former job, your job or someone else's job.
- b. A private health insurance plan that you bought yourself
- c. (Medicaid/IF STATE CALIFORNIA INSERT: Medi-Cal), or some other type of state medical assistance for low-income people
- d. Medicare, the government program that pays health care bills for people over age 65 and for some disabled people

## ASK ITEM e IF NO TO ALL OTHER TYPES [Q20a-d=2,9]

e. Health insurance through ANY other source, including military or veteran's coverage

#### **CATEGORIES:**

- 1 Yes
- 2 No
- 9 Don't know/Refused

## ASK IF AGE 65+ AND SAY NOT COVERED BY MEDICARE (QD3=65-97 & Q20d=2,9)

- 21. Medicare is health insurance coverage most people receive when they turn 65 and are eligible for Social Security. This includes different kinds of health plans offered THROUGH the Medicare program—like the plans called H-M-Os. Are you now covered by Medicare or by ANY Medicare plan?
  - 1 Yes, covered
  - 2 No, not covered
  - 9 Don't know/Refused

# ASK IF AGE 65+ AND COVERED BY MEDICARE BUT NO OTHER INSURANCE [QD3=65-97 & (Q20d=1 OR Q21=1) & (ALL Q20a-c=2,9)]

- 22. In addition to Medicare, do you have a Medicare supplement, that is private insurance that helps pay for health care costs not covered by Medicare?
  - 1 Yes, have supplement
  - 2 No, do not have supplement
  - 9 Don't know/Refused

#### ASK IF HAVE UNDESIGNATED MEDICARE SUPPLEMENT (Q22=1)

- 23. Is the coverage you have in addition to Medicare: insurance that YOU bought yourself, is it a retiree plan through a current or former EMPLOYER or UNION, or is it some other kind of insurance?
  - 1 Bought own insurance
  - 2 Employer or union plan
  - 3 Other—SPECIFY
  - 9 Don't know/Refused

## ASK IF HAVE EMPLOYER-BASED INSURANCE (Q20a=1 OR Q23=2)

- Is the employer or union health insurance that you have in your name, or in someone else's name?
  - 1 Own name
  - 2 Someone else's name
  - 8 Don't know
  - 9 Refused

# ASK IF NOT COVERED BY ANY TYPE OF HEALTH INSURANCE OR UNDESIGNATED [(ALL Q20a-e=2,9) AND (Q21=2,9 OR D3=19-64,98,99)]

- 25. Does this mean you personally have NO health insurance now that would cover your doctor or hospital bills?
  - 1 Yes, do NOT have health insurance
  - 2 No, do HAVE some kind of health insurance
  - 9 Don't know/Refused

## ASK IF HAVE SOME KIND OF HEALTH INSURANCE (Q25=2)

- 26. Is this health insurance that you bought on your own, or is it a plan provided by some other source?
  - 1 Bought on your own
  - 2 Provided by some other source
  - 9 Don't know/Refused

## ASK IF NOW INSURED [(ANY Q20a-e=1) OR (Q21=1 OR Q25=2)]

- Now, thinking about all the health insurance coverage you now have, how would you rate it? Would you say it is excellent, very good, good, only fair, or poor?
  - 1 Excellent
  - 2 Very good
  - 3 Good
  - 4 Only fair
  - 5 Poor
  - 9 Don't know/Refused

#### ASK IF DOES NOT RATE HEALTH COVERAGE EXCELLENT/V. GOOD (027=3-9)

- I notice that you did not rate your coverage as excellent or very good. Can you tell me a little about why you don't give it a top rating? **OPEN-END Q. RECORD VERBATIM RESPONSE. ACCEPT, BUT DO NOT PROBE FOR, MULTIPLE RESPONSES.** 
  - 98 No particular reason/Don't know
  - 99 Refused

## ASK IF NOW INSURED [(ANY Q20a-e=1) OR (Q21=1 OR Q25=2)]

- 29. During the last 12 months, since (month, year), did you have health insurance ALL the time, or was there a time during the year when you DID NOT have any health coverage?
  - 1 Health insurance all the time/Always covered
  - 2 Had a time without insurance
  - 9 Don't know/Refused

## ASK IF UNINSURED AT ANY TIME IN THE LAST 12 MONTHS (Q29=2)

- How long did you go without insurance then? **READ CATEGORIES ONLY IF NECESSARY** INTERVIEWER NOTE: IF MORE THAN ONE PERIOD IN THE LAST 12 MONTHS WITHOUT INSURANCE, ASK ABOUT PERIOD THAT LASTED THE LONGEST
  - 1 Less than one month
  - 2 One to three months
  - 3 Four to six months
  - 4 Seven to 11 months
  - 5 One year to less than two years
  - 6 Two to three years
  - 7 More than three years
  - 9 Don't know/Refused

## ASK IF UNINSURED NOW (Q25=1)

- 31. How long have you been without insurance? **RECORD IN APPROPRIATE CATEGORY. READ CATEGORIES ONLY IF NECESSARY** 
  - 1 Less than one month
  - 2 One to three months
  - 3 Four to six months
  - 4 Seven to 11 months
  - 5 One year to less than two years
  - 6 Two to three years
  - 7 More than three years
  - 9 Don't know/Refused

#### ASK IF UNINSURED AT ANY TIME IN THE LAST 12 MONTHS (Q29=2)

- 32. What is the MAIN reason you did not have insurance then? **RECORD IN APPROPRIATE CATEGORY. PROBE FOR SPECIFICITY** 
  - 1 Cost/Too expensive/Can't afford it
  - 2 Unemployed/Lost job/Between jobs
  - 3 Job does not offer coverage/Not eligible for coverage through job
  - 4 In good health, don't need it
  - 5 Other reason—SPECIFY
  - 99 Don't know/Refused

## **ASK IF UNINSURED NOW (Q25=1)**

- What is the MAIN reason you do not have insurance now? **RECORD IN APPROPRIATE**CATEGORY, PROBE FOR SPECIFICITY
  - 1 Cost/Too expensive/Can't afford it
  - 2 Unemployed/Lost job/Between jobs
  - 3 Job does not offer coverage/Not eligible for coverage through job
  - 4 In good health, don't need it
  - 5 Other reason—SPECIFY
  - 99 Don't know/Refused

## ASK IF NOW INSURED [(ANY Q20a-e=1) OR (Q21=1 OR Q25=2)]

34. Thinking again about YOUR PERSONAL health insurance coverage, how long have you had your (MAIN health plan/ Medicare supplement)?

## (IF NECESSARY READ CATEGORIES 1-4)

- 1 Less than one year
- 2 One year to less than two years
- 3 Two years to less than three years
- 4 Three or more years
- 8 (DO NOT READ) Don't know
- 9 (DO NOT READ) Refused

## ASK IF HAD MAIN PLAN FOR LESS THAN 3 YEARS (Q34=1-3)

35. So, you've had had your current insurance for less than three years. Can you explain the MAIN reason you most recently changed your health plan?

## DO NOT READ. RECORD IN APPROPRIATE CATEGORY. PROBE FOR SPECIFICITY. ACCEPT ONLY ONE RESPONSE.

- 1 Someone (R, husband/wife, parent) lost job/changed jobs/retired from a job
- 2 Employer changed plans
- 3 Found a better or less expensive health plan
- 4 Married, divorced or widowed
- 5 Went on Medicare
- 6 Other—SPECIFY
- 98 Have not changed plans/No previous plan
- 99 Don't know/Refused

#### ASK IF HAD MAIN PLAN FOR < 3 YRS AND CHANGED PLANS (034=1-3 & 035 NE 98)

- 36. And when you most recently changed your health plan, did you have to change any of your doctors, or not?
  - 1 Yes
  - 2 No
  - 8 Don't know
  - 9 Refused

## FAMILY INSURANCE COVERAGE

#### **ASK IF MARRIED (OD2=1)**

- Now, a few questions about your family's coverage...Has your (husband/wife) had health insurance coverage continuously for the past 12 months, had insurance only part of the time, or has your (husband/wife) had NO insurance during the past 12 months?
  - 1 Had health insurance continuously
  - 2 Had insurance only part of the time
  - 3 No health insurance in past 12 months
  - 9 Don't know/Refused

## ASK IF SPOUSE INSURANCE NOT CONTINUOUS (Q37=2 OR 9)

- 38. Does your (husband/wife) have health coverage NOW?
  - 1 Yes, has insurance
  - 2 No. does not
  - 9 Don't know/Refused

## ASK IF HAS DEPENDENT CHILDREN (Q18c=1-97)

- 39. (IF CHILDREN ONLY (Q18c=1-97 & D2=2-9) INSERT TRANSITION: Now, a few questions about your family's coverage...) (Has your child/Have your children) had health insurance coverage continuously for the past 12 months, had insurance only part of the time, or (has your child/have your children) had NO insurance during the past 12 months?
  - 1 All had health insurance continuously
  - 2 All had insurance only part of the time
  - 3 All had no health insurance in past 12 months
  - 4 **(VOL)** Different situations for different children
  - 9 Don't know/Refused

## ASK IF ANY DEPENDENT CHILDREN INSURANCE NOT CONTINUOUS (Q39=2,4,9)

- 40. (Does your child/Do all, only some, or none of your children) have health insurance NOW?
  - 1 All
  - 2 Only some
  - 3 None
  - 9 Don't know/Refused

## ASK IF ANY CHILDREN INSURED IN PAST 12 MONTHS/NOW (Q39=1 OR Q40=1,2)

- 41. (Is your child/Are any of your children) now enrolled in (INSERT STATE-SPECIFIC CHIP PROGRAM), Medicaid, or another state medical assistance program?
  - 1 Yes
  - 2 No
  - 8 Don't know
  - 9 Refused

## INDIVIDUAL MARKET EXPERIENCES AND VIEWS

# ASK IF UNINSURED OR DO NOT HAVE INDIVIDUAL INSURANCE [(Q20b=2-9) AND ((Q23=2-9 OR Q26=2-9) OR (Q23 AND Q26 BLANK/NOT ASKED)]

- 42a. Some people buy health insurance on their OWN, that is not through any employer, union, or government program. In the past three years, since (month, year), have you ever thought about buying health insurance on your own, or tried to buy it?
  - 1 Yes, thought about or tried to buy
  - 2 No
  - 9 Don't know/Refused

## ASK IF HAVE INDIVIDUAL INSURANCE NOT BOUGHT IN LAST 3 YRS [((Q20b=1) OR (Q23=1 OR Q26=1)) AND Q34=4-9]

- 42b. You mentioned you have insurance you bought on your own. In the past three years, since (month, year), have you ever thought about changing to a different plan you buy on your own, or tried to buy a different one?
  - 1 Yes, thought about or tried to buy
  - 2 No
  - 9 Don't know/Refused

# ASK IF IN MARKET FOR INSURANCE IN PAST 3 YRS [(Q42a=1 OR 42b=1) OR ((Q20b=1 OR (Q23=1 OR Q26=1) AND Q34=1-3))]

43. IF HAVE INDIV. INSURANCE BOUGHT IN LAST 3 YRS READ ((Q20b=1) OR (Q23=1 OR Q26=1) AND Q34=1-3)): You mentioned you have insurance you bought on your own.

How difficult was it to find (INSERT ITEMS IN ORDER)? Was it very, somewhat, not too, or not at all difficult?

- a. A plan with the type of coverage you need?
- b. A plan you could afford?

## **CATEGORIES:**

- 1 Very difficult
- 2 Somewhat difficult
- 3 Not too difficult
- 4 Not at all difficult
- 5 (VOL) Impossible
- 9 Don't know/Refused

# ASK IF IN MARKET FOR INSURANCE IN PAST 3 YRS [(Q42a=1 OR Q42b=1) OR ((Q20b=1 OR (Q23=1 OR Q26=1)) AND Q34=1-3))]

- 44. Did you end up buying a health insurance plan on your own?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

#### INSURANCE DIFFICULTIES

- 45. Still thinking about the past three years, since (month, year), have you [or your (husband/wife), (or) (your child/children)] been DENIED health insurance coverage or charged a HIGHER price for health insurance because of a specific disease or health problem (IF NO FAMILY (QD2=2-9 AND Q18c=0/blank): you have/IF FAMILY (QD2=1 OR Q18c=1-97): one of you has)?

  IF YES PROBE: Were you denied, charged a higher price, or both?
  - 1 Yes, denied because of health problem
  - 2 Yes, charged higher price
  - 3 Yes, both
  - 4 No
  - 9 Don't know/Refused
- 46. In the past three years, have you [or your (husband/wife), (or) (your child/children)] had to WAIT to become eligible for health insurance coverage?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- 47. In the past 3 years, have you [or your (husband/wife), (or) (your child/children)] had to pay cash in advance before you could receive the medical care you or your doctor thought you needed?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

## ASK IF NOW INSURED [(ANY Q20a-e=1) OR (Q21=1 OR Q25=2)]

48. I'm going to read you a list of problems some people experience with their health insurance plan. Please tell me if you have ever had these problems with YOUR CURRENT health insurance plan. (READ AND ROTATE)...Has this ever happened (while you've had your current plan)? INTERVIEWER NOTE:

IF RESPONDENT SAYS "I'm on Medicaid" OR SAYS "On Medicaid everything is free" etc., SAY: I realize that Medicaid provides most services for free but I have to read each type of problem for the survey. Just tell me 'no' if you haven't had this problem.

- a. You were surprised to find out that your plan would not pay ANYTHING for care you needed, that YOU thought was covered
- b. Your plan only paid for PART of a bill you received from a doctor, hospital, or lab
- c. You reached the limit of what your insurance company would pay for treatment of a specific illness or injury
- d. You had to pay a lot of "out of pocket" money for health, drug or dental expenses that are NOT covered by your plan
- e. You had difficulty getting a referral to see a medical specialist

#### **CATEGORIES:**

- 1 Yes
- 2 No
- 3 **(VOL)** Doesn't apply/Not required to do for my plan
- 9 Don't know/Refused

#### ASK IF HAD ANY PROBLEMS AT LEAST ONCE (ANY Q48a-e=1)

- 49. Did you ever contact your current health insurance plan about any of these problems, or try to get them to change a decision about what they would pay?
  - 1 Yes
  - 2 No
  - 3 **(VOL)** Not these problems but some other problem
  - 9 Don't know/Refused

## **INSURANCE COSTS**

# ASK IF NOW INSURED BY ANY PRIVATE PLAN [(Q20a=1 OR Q20b=1 OR Q20e=1) OR (Q23=1,2 OR Q26=1]

- 50. Do you pay ALL of the premium for your (MAIN health plan/ Medicare supplement), pay SOME of the premium, or do you pay nothing to have this health insurance plan? **IF NECESSARY READ:** This includes money deducted from a paycheck, as well as money you pay directly to the insurance company.
  - 1 Pay premium in full (All)
  - 2 Pay premium in part (Some)
  - 3 Pay nothing
  - 9 Don't know/Refused

## ASK IF PAY ALL OR SOME OF PREMIUM (Q50=1,2)

- 51. Is this premium amount just for YOUR OWN insurance coverage, or is it for a family plan?

  INTERVIEWER NOTE: INCLUDED AS FAMILY PLAN ANY INSURANCE THAT COVERS MORE THAN JUST THE RESPONDENT ALONE.
  - 1 Own coverage only/Individual plan
  - 2 Family plan (includes plans that cover spouse, children and any others)
  - 9 Don't know/Refused

## ASK IF PAY ALL OR SOME OF PREMIUM (Q50=1,2)

- 52. How often are premium payments made on this plan? IF NECESSARY READ: Is it...(READ CATEGORIES 1-6)
  - 1 Once a week
  - 2 Every two weeks
  - 3 Twice a month
  - 4 Once a month
  - 5 Once every three months (**VOL:** Quarterly), OR
  - 6 Once a year?
  - 7 (DO NOT READ) Some other timing
  - 9 (DO NOT READ) Don't know/Refused

## ASK IF PAYS PREMIUM WEEKLY (Q52=1)

About how much do you pay every week in premiums on this plan including any amount deducted from a paycheck? **IF NECESSARY READ:** This amount is the premium you pay for the whole plan, even if it also covers other family members.

Do you pay...(READ CATEGORIES 1-6) PROBE DON'T KNOW: Your best guess is fine.

- 1 Less than \$10
- 2 \$10 to under \$20
- 3 \$20 to under \$30
- 4 \$30 to under \$50
- 5 \$50 to under \$100
- 6 \$100 or more
- 8 **(DO NOT READ)** Don't know
- 9 (DO NOT READ) Refused

## ASK IF PAYS PREMIUM EVERY TWO WEEKS (052=2,3)

About how much do you pay (IF Q52=2: every two weeks/IF Q52=3: twice a month) in premiums on this plan including any amount deducted from a paycheck? IF NECESSARY **READ:** This amount is the premium you pay for the whole plan, even if it also covers other family members. Do you pay...(READ CATEGORIES 1-6) PROBE DON'T KNOW: Your best guess is fine.

- 1 Less than \$20
- 2 \$20 to under \$40
- 3 \$40 to under \$60
- 4 \$60 to under \$100
- 5 \$100 to under \$200
- 6 \$200 or more
- 8 **(DO NOT READ)** Don't know
- 9 (**DO NOT READ**) Refused

## ASK IF PAYS PREMIUM MONTHLY(052=4)

About how much do you pay every month in premiums on this plan including any amount deducted from a paycheck? IF NECESSARY READ: This amount is the premium you pay for the whole plan, even if it also covers other family members.

Do you pay...(READ CATEGORIES 1-6) PROBE DON'T KNOW: Your best guess is fine.

- 1 Less than \$40
- 2 \$40 to under \$85
- 3 \$85 to under \$125
- 4 \$125 to under \$200
- 5 \$200 to under \$400
- 6 \$400 or more
- 8 **(DO NOT READ)** Don't know
- 9 (DO NOT READ) Refused

## ASK IF PAYS PREMIUM QUARTERLY(Q52=5)

- About how much do you pay every three months (or quarterly) in premiums on this plan 56. including any amount deducted from a paycheck? IF NECESSARY READ: This amount is the premium you pay for the whole plan, even if it also covers other family members.
  - Do you pay...(READ CATEGORIES 1-6) PROBE DON'T KNOW: Your best guess is fine.
    - 1 Less than \$125
    - 2 \$125 to under \$250
    - 3 \$250 to under \$375
    - 4 \$375 to under \$600
    - 5 \$600 to under \$1,250
    - 6 \$1,250 or more
    - 8 **(DO NOT READ)** Don't know
    - 9 (DO NOT READ) Refused

## **ASK IF PAYS PREMIUM YEARLY (Q52=6)**

About how much do you pay every year in premiums on this plan including any amount deducted from a paycheck? **IF NECESSARY READ:** This amount is the premium you pay for the whole plan, even if it also covers other family members.

Do you pay...(READ CATEGORIES 1-6) PROBE DON'T KNOW: Your best guess is fine.

- 1 Less than \$500
- 2 \$500 to under \$1.000
- 3 \$1,000 to under \$1,500
- 4 \$1,500 to under \$2,500
- 5 \$2,500 to under \$5,000
- 6 \$5,000 or more
- 8 **(DO NOT READ)** Don't know
- 9 (DO NOT READ) Refused

## ASK IF PAY ALL OR SOME OF PREMIUM (Q50=1,2)

- How difficult is it for you to afford the premium costs for your health insurance? Would you say it is ...(READ)
  - 1 Very difficult
  - 2 Somewhat difficult
  - 3 Not too difficult, OR
  - 4 Not difficult at all?
  - 9 Don't know/Refused

#### ASK IF PAY ALL OR SOME OF PREMIUM (Q50=1,2)

- 59. In the last 12 months, has the amount you personally have to pay for your health insurance increased, decreased, or stayed about the same? **IF INCREASED PROBE:** Has it increased a lot, some, or only a little?
  - 1 Increased, a lot
  - 2 Increased, some
  - 3 Increased, only a little
  - 4 Decreased
  - 5 Stayed about the same
  - 9 Don't know/Refused

## ASK IF INSURED BY EMPLOYER-BASED INSURANCE/MEDICARE SUPPLEMENT (Q20a=1 OR Q23=2)

- Thinking about the health plan you get from an employer or union...have there been any changes in the coverage or benefits in the last 12 months?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

## ASK IF THERE HAVE BEEN CHANGES IN HEALTH PLAN (Q60=1)

- How did your plan's coverage or benefits change? **OPEN-END Q. RECORD VERBATIM RESPONSE. PROBE FOR CLARITY. ACCEPT MULTIPLE RESPONSES.** 
  - 98 Don't know
  - 99 Refused

## ASK IF NOW INSURED [(ANY Q20a-e=1) OR (Q21=1 OR Q25=2)]

- Please tell me whether you have any insurance to cover all or part of the following health care needs. Do you have insurance for YOUR PERSONAL...(READ AND ROTATE)
  - a. Prescription medicines
  - b. Dental care
  - c. Vision care

## **CATEGORIES:**

- 1 Yes
- 2 No
- 8 Not sure/ Don't know
- 9 Refused
- 63. Do you take any prescription drugs on a regular basis?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

64. Over the last 12 months, about how much have you had to pay "out of pocket" for each of the following. Just stop me when I get to the right category. (First/How about for (INSERT ITEMS IN ORDER)...Did you pay (READ CATEGORIES UNTIL RESPONDENT STOPS YOU/OFFERS AN AMOUNT) PROBE DON'T KNOW: Your best guess is fine.

#### **INTERVIEWER NOTES:**

IF RESPONDENT SEEMS UNSURE OF TERM "OUT OF POCKET", READ: "Out of pocket" is the amount of money you have to pay that is NOT covered by any insurance or special assistance you might have.

RESPONDENT CAN INCLUDE ALL "OUT OF POCKET" EXPENSES, REGARDLESS OF WHO ACTUALLY PAYS FOR THEM

- a. Your OWN PERSONAL prescription medicines
- b. Your OWN PERSONAL dental and vision care
- c. All YOUR other PERSONAL medical expenses, including for doctors, hospitals, and tests

## **CATEGORIES:**

- 1 Nothing (\$0)
- 2 Less than \$100
- 3 \$100 to under \$200
- 4 \$200 to under \$500
- 5 \$500 to under \$1,000
- 6 \$1,000 to under \$2,500
- 7 \$2,500 to under \$5,000
- 8 \$5,000 or more
- 98 **(DO NOT READ)** Don't know
- 99 (DO NOT READ) Refused

## ASK IF MARRIED AND/OR HAS DEPENDENT CHILDREN (QD2=1 OR Q18c=1-97)

65. And, over the last 12 months, about how much, in TOTAL, have you had to pay "OUT OF POCKET" for these medical, drug, dental and vision expenses for your [(husband/wife) (and) (child/children)]. Just stop me when I get to the right category. Did you pay (READ CATEGORIES UNTIL R STOPS YOU/OFFERS AN AMOUNT)?

PROBE DON'T KNOW: Your best guess is fine.

#### **INTERVIEWER NOTE:**

RESPONDENT CAN INCLUDE ALL "OUT OF POCKET" EXPENSES, INCLUDING EXPENSES FOR OTHER FAMILY MEMBERS, REGARDLESS OF WHO ACTUALLY PAYS FOR THEM

- 1 Nothing (\$0)
- 2 Less than \$100
- 3 \$100 to under \$200
- 4 \$200 to under \$500
- 5 \$500 to under \$1,000
- 6 \$1,000 to under \$2,500
- 7 \$2.500 to under \$5.000
- 8 \$5,000 or more
- 98 (DO NOT READ) Don't know
- 99 (DO NOT READ) Refused

66.		ightly different topicIn general, how would you describe your own health? Would you sexcellent, very good, good, only fair, or poor?
	1	Excellent
	2	Very good
	3	Good
	4	Only fair
	5	Poor
	9	Don't know/Refused

- 67. Does a disability, handicap or chronic disease keep you from participating fully in daily work, housework, or other daily activities?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- 68. Do you have any of the following health problems or conditions? (**READ ITEMS IN ORDER**)
  - a. Hypertension, high blood pressure or stroke
  - b. Heart disease or related heart problems
  - c. Cancer
  - d. Diabetes
  - e. Arthritis
  - f. Anxiety or depression

## **CATEGORIES:**

- 1 Yes
- 2 No
- 9 Don't know/Refused
- 69. In the last 12 months, have you had medical care (IF CODE 1 TO ANY ITEM IN Q68 INSERT: for ANY of these health concerns or) for any OTHER serious illness or injury?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

#### ASK IF HAD MEDICAL CARE FOR A SERIOUS ILLNESS (069=1)

About how much of the cost of treatment for your illness, injury, or other health problem was covered by insurance? Did it cover almost all, most, some, only a little, or none of the cost (IF UNINSURED (Q25=1,9) OR SOME PERIOD OF UNINSURANCE IN LAST 12 MONTHS (Q29=2) INSERT: or weren't you insured at the time)?

INTERVIEWER NOTE: IF MORE THAN ONE ILLNESS OR INJURY, ASK ABOUT THE MOST SERIOUS ONE.

- 1 Almost all (include all)
- 2 Most
- 3 Some
- 4 Only a little
- 5 None of the cost
- 6 Not insured at time of treatment
- 9 Don't know/Refused

## ASK IF INSURED BUT NO MEDICAL CARE FOR A SERIOUS ILLNESS (Q27=1-9 AND Q69=2,9)

- 71. If you needed medical care for a SERIOUS illness or injury, how confident are you that your health insurance would cover ALMOST ALL of the cost—very, somewhat, not too, or not at all confident?
  - 1 Very confident
  - 2 Somewhat confident
  - 3 Not too confident
  - 4 Not at all confident
  - 5 (VOL) It depends
  - 9 Don't know/ Refused

## ASK IF MARRIED AND/OR HAS DEPENDENT CHILDREN (QD2=1 OR Q18c=1-97)

- 72. In the last 12 months, [(has your husband/wife) (or) (has your child/have your children)] had any SERIOUS illness or injury that required a lot of medical care?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused

#### ASK IF ANYONE HAD SERIOUS HEALTH PROBLEM IN LAST 12 MONTHS (072=1)

73. About how much of the cost of treatment for this illness, injury, or other health problem was covered by insurance? Did it cover almost all, most, some, only a little, or none of the cost?

INTERVIEWER NOTE: IF MORE THAN ONE ILLNESS/INJURY IN THE FAMILY, ASK RESPONDENT TO THINK ABOUT THE MOST SERIOUS ONE.

- 1 Almost all (include all)
- 2 Most
- 3 Some
- 4 Only a little
- 5 None of the cost
- 6 (VOL) Not insured at time of treatment
- 9 Don't know/Refused

## **CONFIDENCE AND FUTURE ISSUES**

## ASK IF HAVE EMPLOYER-BASED INSURANCE (Q20a=1 OR Q23=2)

- 74. Right now, most working people get their health coverage through their employer, that is, the company or organization where they work. In YOUR experience, do employers generally do a good job or a bad job selecting quality health insurance plans to offer their workers?
  - 1 Good job
  - 2 Bad job
  - 3 (VOL) Some good, some bad/Mixed
  - 9 Don't know/ Refused

## ASK IF HAVE EMPLOYER-BASED INSURANCE (Q20a=1 OR Q23=2)

- 75. How confident are you that the employer providing your health plan will continue to offer this health insurance in the future? Would you say you are very, somewhat, not too, or not at all confident?
  - 1 Very confident
  - 2 Somewhat confident
  - 3 Not too confident
  - 4 Not at all confident
  - 9 (DO NOT READ) Don't know/ Refused

## ASK IF HAVE EMPLOYER-BASED INSURANCE (Q20a=1 OR Q23=2)

- 76. If this employer sponsoring your health plan STOPPED offering health insurance, how confident are you that you would be able to find an AFFORDABLE health plan that meets your needs—very, somewhat, not too, or not at all confident?
  - 1 Very confident
  - 2 Somewhat confident
  - 3 Not too confident
  - 4 Not at all confident
  - 9 (DO NOT READ) Don't know/ Refused

#### ASK IF HAVE EMPLOYER-BASED INSURANCE (O20a=1 OR O23=2)

- 77. Some employers are thinking of giving the money they pay for health insurance DIRECTLY to employees so employees can buy insurance on their own. Which would you prefer (READ AND ROTATE OPTIONS)...? INTERVIEWER: RECORD ANSWERS CAREFULLY.

  ANSWER CATEGORIES SHUFFLED.
  - 1 To get the employer contribution directly and find your own plan (OR)
  - 2 To continue to get a plan offered by an employer (OR)
  - 3 **(DO NOT READ)** Neither/Other
  - 8 (DO NOT READ) Don't know
  - 9 (DO NOT READ) Refused

## ASK IF HAVE EMPLOYER-BASED INSURANCE (Q20a=1 OR Q23=2)

- 78. If you had to buy health insurance on your own, which ONE of the following would you trust the most to provide your insurance? (READ AND ROTATE 1-4)? INTERVIEWER: RECORD ANSWERS CAREFULLY. ANSWER CATEGORIES SHUFFLED.
  - 1 The state or local government (OR)
  - 2 A local insurance broker or agent (OR)
  - 3 The federal government (OR)
  - 4 A Chamber of Commerce or small business association (OR)
  - 5 (DO NOT READ) Other—SPECIFY
  - 9 (DO NOT READ) Don't know/Refused

## POLICY OPTIONS

- 79. On another subject...As far as you know, are the children of any of your relatives or close friends enrolled in (INSERT STATE-SPECIFIC CHIP PROGRAM) or another state medical assistance program that provides assistance for children in low-income families?
  - 1 Yes
  - 2 No
  - 8 Not sure/ Don't know
  - 9 Refused
- Americans, especially people without any health insurance. Here are some proposals to provide health insurance coverage to working, uninsured adults. For each one, please tell me whether you favor or oppose it. **PROMPT:** Do you favor or oppose...(**READ AND ROTATE**)
  - a. Letting uninsured adults participate in state government insurance programs that are for people with low income, like Medicaid or the Children's Health Insurance Program
  - b. Letting uninsured adults participate in Medicare, the government program that pays health care bills for people over age 65 and some disabled people
  - c. Offering tax credits or other financial assistance to help people buy health insurance on their own
  - d. Requiring all businesses to contribute to the cost of health insurance for their employees

#### **CATEGORIES:**

- 1 Favor
- 2 Oppose
- 8 Don't know
- 9 Refused

## ASK IF HAVE EMPLOYER-BASED INSURANCE (Q20a=1 OR Q23=2)

- 81. Some people think the government should offer a tax credit for people who buy health insurance on their own, directly from an insurance company. If YOU could get a tax credit of (IF QD2=2-9 & Q18c=0: \$1,000/IF QD2=1 OR Q18c=1-97: \$2,500 for your family), do you think you would DROP the employer plan you have now and get insurance on your own, OR would you KEEP the employer plan and give up the tax credit? **REQUIRED PROBE FOR "Don't know", "It depends" etc.:** Well, which do you THINK you are MORE likely to do, drop or keep the plan?
  - 1 Drop employer plan
  - 2 Keep employer plan
  - 3 (VOL) It depends
  - 9 (VOL) Don't know/ Refused

## ASK IF WOULD DROP OR KEEP EMPLOYER PLAN (Q81=1,2)

- 82. Would you be VERY likely to (Q81=1: drop/Q81=2: keep) the employer plan, or only somewhat likely?
  - 1 Very likely
  - 2 Somewhat likely
  - 9 Don't know/ Refused

#### **INTERNET USE**

- 83. My next question is about the Internet . . . Do you ever go online to access the Internet or World Wide Web, or to send and receive e-mail?
  - 1 Yes
  - 2 No
  - 9 Don't know/ Refused

## ASK IF EVER GOES ONLINE (Q83=1)

- Many people now use the Internet to look for advice, information, or services. Please tell me if you have ever gone online to do any of the following. **PROMPT:** Have you ever gone online (INSERT ITEMS IN ORDER)?
  - a. **IF INSURED [(ANY Q20a-e=1) OR (Q21=1 OR Q25=2)]**: To access your health insurance plan's website for information or customer service
  - b. To get information about the availability or cost of different health insurance plans
  - c. To get information about health or medical care
  - d. To find a doctor or other health care provider
  - e. To get information about the quality of a doctor or hospital

#### **CATEGORIES:**

- 1 Yes
- 2 No
- 9 Don't know/Refused

## FACTUALS & DEMOGRAPHICS

Finally, I have a few more questions so we can describe the people who took part in our survey . . . D4. Are you now employed full-time, part-time, are you retired, or are you not employed for pay?

INTERVIEWER NOTE: EMPLOYED FULL-TIME DEFINED AS 35 HOURS OR MORE PER WEEK. IF LESS THAN 35 HOURS, THEN PART-TIME.

- 1 Employed full-time
- 2 Employed part-time
- 3 Retired
- 4 Not employed for pay
- 5 **(VOL)** Disabled
- 6 (VOL) Student
- 7 **(VOL)** Other (homemaker, etc.)
- 8 Don't know
- 9 Refused

## ASK IF EMPLOYED FULL OR PART-TIME (QD4=1,2)

D5. Are you now SELF-employed or are you employed by someone else? **IF HAVE MORE THAN ONE JOB, SAY**: Please think about your MAIN job, where you work the most hours.

- 1 Self-employed
- 2 Employed by someone else
- 9 Don't know/Refused

## ASK IF SELF-EMPLOYED (QD5=1)

D5a. Do you work by yourself or do you employ other people?

- 1 Just self
- 2 Employ other people
- 9 Don't know/Refused

#### ASK IF EMPLOYED BY SOMEONE ELSE OR EMPLOYS OTHER (OD5=2 OR OD5a=2)

- D6. Including all its locations and worksites, not just your own, about how many people are employed by the company or organization you work for in your main job? Just stop me when I get to the right category. Would you say there are...(**READ**)
  - 1 Under 25 employees
  - 2 25 to 99 employees
  - 3 100 to 499 employees
  - 4 500 to 999 employees
  - 5 1,000 or more employees?
  - 8 Don't know
  - 9 Refused

## ASK IF EMPLOYED FULL OR PART-TIME (QD4=1,2)

- D7. How long have you (worked for this company/IF SELF-EMPLOYED (QD5=1: been self-employed)? **(READ CATEGORIES ONLY IF NECESSARY)** 
  - 1 Less than six months
  - 2 Six months to a year
  - 3 One to two years (include up to 2 years, 11 months)
  - 4 Three to five years (include up to 5 years, 11 months)
  - 5 More than five years
  - 8 Don't know
  - 9 Refused

## ASK IF EMPLOYED FULL OR PART-TIME (QD4=1,2)

- D8. About how much do you make an hour (on your MAIN job)? Is it...(**READ**)
  - 1 Less than \$8 per hour
  - 2 \$8 up to \$10 per hour
  - 3 \$10 to \$15 per hour, OR (\$10.01-\$15)
  - 4 More than \$15 per hour
  - 8 Don't know
  - 9 Refused

## ASK IF EMPLOYED FULL OR PART-TIME AND DO NOT HAVE INSURANCE FROM OWN EMPLOYER [(QD4=1,2) AND (Q20a=2,9 OR Q24=2-9)]

- D9. (Does YOUR employer/IF SELF-EMPLOYED (QD5=1): Do you) offer health insurance to ANY employees?
  - 1 Yes
  - 2 No
  - 8 Don't know
  - 9 Refused

#### ASK IF EMPLOYER/SELF OFFERS INSURANCE (OD9=1)

- D10. Are you eligible to participate in (your employer's/IF SELF-EMPLOYED (QD5=1): the) health plan?
  - 1 Yes
  - 2 No
  - 8 Don't know
  - 9 Refused

## ASK IF NOT ELIGIBLE FOR EMPLOYER HEALTH PLAN (QD10=2)

- D11. Why aren't you eligible to participate? **PROBE FOR SPECIFICITY. RECORD IN APPROPRIATE CATEGORY. READ CATEGORIES ONLY IF NECESSARY.** 
  - 1 You don't work enough hours (part-time employee),
  - 2 You are a temporary or other non-covered employee,
  - 3 You are still in a waiting period (just hired),
  - 4 You are a contract worker,
  - 5 You are in poor health, OR
  - 6 Some other reason—SPECIFY
  - 8 **(DO NOT READ)** Don't know
  - 9 (DO NOT READ) Refused

## ASK IF ELIGIBLE FOR EMPLOYER HEALTH PLAN BUT NOT USING IT [(QD10=1) AND (Q20a=2-9 OR Q24=2-9)]

- D12. What is the MAIN reason you are not participating in your employer's health insurance plan now? PROBE FOR SPECIFICITY. RECORD IN APPROPRIATE CATEGORY. READ CATEGORIES ONLY IF NECESSARY.
  - 1 It is too expensive
  - 2 The benefits aren't that good
  - 3 The insurance plan another family member's employer offers is better
  - 4 Public or government health insurance is better
  - 5 You don't need ANY insurance
  - 6 You are not eligible to participate
  - 7 You were refused coverage because of poor health
  - 8 Some other reason—SPECIFY
  - 98 **(DO NOT READ)** Don't know
  - 99 (DO NOT READ) Refused

#### **ASK IF MARRIED (OD2=1)**

- D13. Is your (husband/wife) now employed full-time, part-time, retired, or not employed for pay? **IF SAYS SELF-EMPLOYED, ASK:** Is this full or part-time?
  - 1 Employed full-time
  - 2 Employed part-time
  - 3 Retired
  - 4 Not employed for pay
  - 5 **(VOL)** Disabled
  - 6 **(VOL)** Student
  - 7 **(VOL)** Other (homemaker, etc.)
  - 8 Don't know
  - 9 Refused

## ASK IF SPOUSE EMPLOYED FULL OR PART-TIME (QD13=1,2)

- D14. Is your (husband/wife) SELF-employed or employed by someone else? **IF HAVE MORE THAN ONE JOB, SAY**: Please think about the MAIN job, where your (husband/wife) works the most hours.
  - 1 Self-employed
  - 2 Employed by someone else
  - 9 Don't know/Refused

#### ASK IF SPOUSE SELF-EMPLOYED (QD14=1)

D14a. Does your (husband/wife) work alone or employ other people?

- 1 Works alone
- 2 Employs other people
- 9 Don't know/Refused

## ASK IF SPOUSE EMPLOYED BY SOMEONE ELSE (QD14=2)

- D15. Including all its locations and worksites, about how many people are employed by the company or organization your (husband/wife) works for in (his/her) main job? Just stop me when I get to the right category. Would you say there are...(**READ**)
  - 1 Under 25 employees
  - 2 25 to 99 employees
  - 3 100 to 499 employees
  - 4 500 to 999 employees
  - 5 1,000 or more employees?
  - 8 Don't know
  - 9 Refused

#### ASK IF SPOUSE EMPLOYED FULL OR PART-TIME (OD13=1,2)

- D16. How long has your (husband/wife) (worked for this company/IF SELF-EMPLOYED (QD14=1): been self-employed)? (READ CATEGORIES ONLY IF NECESSARY)
  - 1 Less than six months
  - 2 Six months to a year
  - 3 One to two years (include up to 2 years, 11 months)
  - 4 Three to five years (include up to 5 years, 11 months)
  - 5 More than five years
  - 8 Don't know
  - 9 Refused

#### ASK IF SPOUSE EMPLOYED FULL OR PART-TIME (QD13=1,2)

- D17. About how much does your (husband/wife) make an hour on (his/her) MAIN job? Is it...(READ)
  - 1 Less than \$8 per hour
  - 2 \$8 up to \$10 per hour
  - 3 \$10 to \$15 per hour, OR (\$10.01-\$15)
  - 4 More than \$15 per hour
  - 8 Don't know
  - 9 Refused

# ASK IF SPOUSE EMPLOYED FULL OR PART-TIME AND RESPONDENT UNINSURED (QD14=2 AND Q25=1,9)

- D18. Does your (husband's/wife's) employer offer a health insurance plan that would cover you as a part of the family?
  - 1 Yes
  - 2 No
  - 8 Don't know
  - 9 Refused

Now a question about your EDUCATION...

- D19. What is the last grade or class you completed in school? (**DO NOT READ**)
  - 1 None, or grade 1 to 8
  - 2 High school incomplete (Grades 9-11)
  - 3 High school graduate, Grade 12, or GED certificate
  - 4 Business, technical, or vocational school AFTER high school
  - 5 Some college or university work, no four-year degree
  - 6 College or university graduate (BA, BS or other four-year degree received)
  - 7 Post graduate or professional schooling after college (e.g., work toward a master's degree or Ph.D., or law or medical school)
  - 9 Refused

- D20. Are you of Hispanic or Latino background, such as Mexican, Puerto Rican, Cuban or some other Latin American background?
  - 1 Yes
  - 2 No
  - 8 Don't know
  - 9 Refused
- D21. What is your race? Are you white, black, Asian, or some other race?

IF R SAYS HISPANIC OR LATINO, PROBE: Do you consider yourself a WHITE (Hispanic/Latino) or a BLACK (Hispanic/Latino)? IF R DOES NOT SAY WHITE, BLACK OR ONE OF THE RACE CATEGORIES LISTED, RECORD AS "OTHER" (CODE 5)

- 1 White
- 2 Black, African-American (include West Indian or Caribbean heritage and African
- 3 Asian or Pacific Islander
- 4 Mixed-race
- 5 Other—SPECIFY
- 8 Don't know
- 9 Refused
- D22. Last year, that is in 2000, approximately what was [IF NOT MARRIED (QD2=2-9): your personal/IF MARRIED (QD2=1): your (husband's/wife's) and your] total income from all sources, before taxes? Was it under \$35,000 or \$35,000 or more?

**IF NECESSARY:** Your best guess is fine.

- 1 Under \$35,000
- 2 \$35,000 or more
- 8 Don't know
- 9 Refused

#### ASK IF INCOME UNDER \$35,000 (QD22=1)

- D23. Now, just stop me when I get to the right category. Was your income...(**READ**)
  - 1 Less than \$10,000
  - 2 \$10,000 to under \$15,000
  - 3 \$15,000 to under \$20,000
  - 4 \$20,000 to under \$25,000
  - 5 \$25,000 to under \$30,000
  - 6 \$30,000 to under \$35,000
  - 8 (DO NOT READ) Don't know
  - 9 (DO NOT READ) Refused

#### ASK IF INCOME \$35,000 OR MORE (OD22=2)

- D24. Now, just stop me when I get to the right category. Was your income...(**READ**)
  - 1 \$35,000 to under \$40,000
  - 2 \$40,000 to under \$45,000
  - 3 \$45,000 to under \$50,000
  - 4 \$50,000 to under \$60,000
  - 5 \$60,000 to under \$100,000
  - 6 \$100,000 or more
  - 8 Don't know
  - 9 Refused
- D25. At any time in the last 12 months, have you (or your family) had a time when you could not pay for basic living costs such as food, rent, or heating or electric bills?
  - 1 Yes
  - 2 No
  - 9 Don't know/Refused
- D26. Have you (or anyone in your family) received any form of government assistance during the past 12 months, including cash assistance, food stamps, public housing, low-income energy assistance, or any other state or local public assistance program?
  - 1 Yes, received assistance
  - 2 No, have not
  - 8 Don't know
  - 9 Refused
- D27. And since (month, year) was there any time lasting at least TWO WEEKS when your household did NOT have a working telephone, or did not have phone service?
  - 1 Yes, no telephone or service for at least 2 week period (in past 12 months)
  - 2 No, had telephone and service consistently
  - 9 Don't know/Refused

## ASK IF WITHOUT PHONE SERVICE FOR AT LEAST 2 WEEKS (QD27=1)

- D28. How long were you without telephone service? **IF NECESSARY READ:** Less than two months, two to six months, or more than six months?
  - 1 Less than two months
  - 2 Two to six months
  - 3 More than six months
  - 8 **(DO NOT READ)** Not sure/Don't know
  - 9 (DO NOT READ) Refused

D29. All of the information you have given us in this survey is confidential. We will combine the responses of the thousands of people we interview and write a summary report. When we publish this, reporters from *Consumer Reports* magazine may want to talk in more detail with some of the people interviewed.

Would you be willing to talk with a reporter from *Consumer Reports*? (**IF YES**) So that a reporter can reach you more easily, may I have your first name?

- 1 Yes, willing to talk with reporter and gave name—**RECORD NAME**
- 2 Yes, willing to talk with reporter but did not give name
- 3 No, NOT willing to talk with reporter
- 9 Don't know/Refused

**END OF MAIN INTERVIEW:** That is the last question I have. Thank you very much for taking the time to answer the questions on this survey. We really appreciate it. Have a nice day/evening.

## **INTERVIEWER ASSESSMENT:**

#### ASK IF INTERVIEW COMPLETED IN ENGLISH

- R1. As far as you can judge, would this respondent be an interesting person for a reporter to call to discuss these issues? You should consider whether he/she was articulate, seemed to hear well and think clearly, had an interesting insurance story or circumstances etc.
  - 1 GREAT prospect for follow-up interview
  - 2 GOOD prospect
  - 3 OKAY prospect
  - 4 NOT A GOOD prospect
  - 9 Can't make a judgment/Don't know

## PLEASE INCLUDE THE FOLLOWING IN THE DATA SET:

- 1) CENSUS REGION
- 2) USR CODE
- 3) LANGUAGE OF INTERVIEW
- 4) TELEPHONE NUMBER, INCLUDING AREA CODE
- 5) NUMBER OF CALLS TO COMPLETE INTERVIEW